

***Health & Social Care BTEC Level 3 National Extended Certificate***

**Past Paper Mark Schemes Booklet**

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***Mark Schemes***

***A1 Physical development mark scheme***

***1. Example answer:***

* *At this age, Shona will be able to manipulate small objects with her fingers and have good hand-eye co-ordination. This means she will be able to do up and undo her buttons to dress and undress without help. This will be useful when she does PE at school.*
* *Shona will be able to feed herself because she will be skilful with a spoon and fork. She will also be starting to use a knife.*
* *Shona will be able to take part in play activities with other children because she can hold a pencil and paintbrush using a tripod grasp. She will be able to take part in craft activities because she can cut out with scissors and thread small beads.*
* *Shona can manipulate objects, so she will be able to build towers with construction blocks and play games such as jigsaws.*

***2. Example answer:***

* *Balance your answer by including primary and secondary sexual characteristics.*
* *Kai’s voice will change and begin to deepen (break) as his larynx grows due to hormonal changes*
* *He will notice he is growing more quickly – growth spurt.*
* *He will grow pubic and underarm hair*
* *He will notice changes in his primary sexual organs, which were present at birth, but will mature during puberty due to the release of hormones, such as testosterone.*
* *His prostate gland will begin to produce secretions.*
* *His penis and testes will both enlarge, and he will begin to produce sperm.*

*3. Remember to discuss both positives and negatives. She is in the middle-adulthood life stage.*

* *Children are now independent*
* *Sofia may have personal independence, leading to increased social life*
* *She may be financially secure, giving her more choice and be affected positively and negatively by economic factors*

*Sofia may notice some physical changes:*

* *Greying hair*
* *Loss of muscle tone, strength and stamina*
* *Her body shape may change with loss of weight or increase in weight*
* *She may experience loss of hearing and deterioration in her eyesight*
* *She may have noticed a slight loss in height compared to her early 20s*

*Sofia may also feel depressed as her fertility declines due to the stopping of her periods. Symptoms of the menopause including:*

* *Hot flushes*
* *Night sweats*
* *Vaginal dryness*
* *Mood swings*
* *Reduced libido*
* *Dry hair and skin*

*4. Use PIES to discuss development holistically. Example valid points:*

***Physically:***

* *He is able to run, hop, jump, skip and climb stairs. These gross motor skill skills have been acquired in stages and not all children develop them at the same time. Encouraging physical play will help to develop these skills.*
* *He will have a good daytime and night time routine and should be dry day and night*
* *His fine motor skills will have become more sophisticated. He will be able to dress himself and manage buttons and zips. He may be able to tie his own shoelaces and manage some personal hygiene on his own. He will be able to hold a knife and fork and feed himself without help. He will also be able to use a pen and be able to colour in with a degree of accuracy. These skills will enable him to be less dependent on his parents and be ready for school.*

***Emotionally:***

* *He will be able to have some control over his emotions and show some empathy for others. This will enable him to share and take turns, making alliances and friends.*
* *He will know the difference between real life and make believe and understand lying and telling the truth. He will make demands for independence and have developed a sense of identity. He will be able to say what he likes and doesn’t like. He will know what it means to be a boy and the differences between himself and other people. He will be able to describe himself in concrete terms.*

***Socially:***

* *He will be able to make friends and play, understanding what is fair and what is not. He will engage in some role play.*
* *He will understand manners and be able to eat at the table with the family outside and inside the home. He will be able to sit still for short periods of time.*

***Intellectually:***

* *He will be able to recognise numbers and letters and should be able to identify his name and may have already started to read.*
* *He will be able to do simple adding of numbers and may be able to tell the time.*
* *He will be able to use grammar correctly and his vocabulary will have increased to about 6,000 words.*
* *Most of what he says will be understandable and he will be able to retell a story in the correct sequence.*

*Other valid points accepted.*

*5. Fine motor skill.*

*6. Possible answers include:*

* *Gradual decline ion progesterone causes similar problems to pre-menstrual tension:*
  + *Bloating, irritability, tender breasts*
* *As oestrogen levels decline:*
  + *Hot flushes, night sweats, memory malfunction, heart palpitations, vaginal dryness, loss of libido*
  + *Night sweats can lead to poor sleep*

*7. Acceptable points:*

* *Growth is an increase in weight not related to obesity which varies between individuals*
* *Growth is an increase in height and length and is biological*
* *Growth is a predictable increase in body mass*
* *Growth is variable across different parts of the body.*
* *It is a measurement of weight, height and dimensions such as head circumference.*
* *Development involves cognitive, social and emotional improvements and skills*
* *Both growth and development can affect each other but they can exist separately*
* *Development is the acquisition of skills which follow a predicted pathway or sequence*
* *Development is the learned or acquired ability to perform tasks such as walking, sitting, holding a pen or talking*

*8. Gross motor skills use several large groups of muscles which work together to perform a task*

* *Such as running and walking*
* *These use and require energy*
* *Fine motor skills use smaller muscle groups*
* *And require precise movements*
* *These often require hand-eye co-ordination*
* *Both fine and gross motor skills follow a predicted pattern of development called milestones*
* *Gross motor skills develop first, followed by fine motor skills*
* *Pattern of development is head to toe or inside to outside*

***A2 Intellectual development mark scheme***

***1. Example answer:***

*According to Piaget’s stages of development, at 8 years old Oscar is in the concrete operations stage. He will still need concrete apparatus such as counters to help him to work out problems. Oscar will now be able to conserve. This means he can think logically and realise that amounts stay the same when they are moved or put into different shaped containers. Piaget believed that, until the age of 7 children are egocentric. This means that until recently Oscar will have believed that others see and feel things in the same way as he does.*

*Now that Oscar is 8, he will be able to understand things from the perspective of other people.*

***Additional content:***

*Discuss the other stages Oscar will have moved through – Sensorimotor and its key features. Also, the stages he will move onto as he ages.*

*Could also discuss the criticisms of Piaget’s theory.*

***2. Example answers may include:***

* *Children are in the pre-operational stage from 2-7 years old.*
* *Children need to play an active role in their own learning*
* *Free play enables children to explore and investigate*
* *Children need to build their experiences of the world by exploring materials*
* *Children use their senses to learn about their environment*
* *Children need to explore the world to construct new schemas*
* *Children assimilate new information as they explore their environment*
* *Active learning helps children to construct new schemas*
* *Children need to use symbols in their imaginative and pretend play*

*Criticism:*

* *If adults lead the children’s play they can support children to move into the next stage of learning.*

*3. 1 mark for identifying a stage of cognitive development and 2 marks for extension up to a maximum of 6.*

* *A child enters the Formal Operational stage around the ages of 11 upwards.*
* *This means they begin the think more hypothetically and abstractly.*
* *They can carry-out calculations and logic operations without concrete models and can study advanced mathematics*
* *Thinking continues to develop during adolescence and in early adulthood, thinking becomes more realistic.*
* *They are also more pragmatic*
* *More expert in managing the practical aspects of life*
* *Thinking becomes more complex as they further develop their reasoning skills*
* *They can make better judgements about important matters*
* *Their thinking is influenced by emotive subjects*
* *Thinking is also influenced by culture and social norms*
* *Thinking can be subjective*

*Include other valid responses*

*4. Sample answers:*

* *Memory loss is not a normal part of the ageing process*
* *The brain is still able to grow new cells but must be stimulated*
* *Reduced blood flow to the hippocampus slows the retrieval of information*
* *Episodic memory slows – temporarily misplacing possessions such as keys and phones*
* *Hormones and proteins that protects and repair brain cells and stimulate new nerve cell growth decline with age*
* *Reduced blood flow to the brain can impair memory*
* *Semantic memory (includes things that are common knowledge, such as the names of colours, the sounds of letters, the capitals of countries and other basic facts acquired over a lifetime) can continue to improve with age*
* *Procedural memory (stores information on how to perform certain procedures, such as walking, talking and riding a bike) stays the same*

*5. Arguments supporting Chomsky:*

* *Noam Chomsky proposes that children have innate ability for language acquisition which is activated when they first hear speech or are spoken to*
* *Words, grammar, verbs and nouns are learnt and used in the right order*
* *Children of every culture in every country learn the process of language in exactly the same way at the same stages of development*
* *If a child misses out a stage of the learning they soon catch up*
* *While learning speech children never make grammatical errors such as confusing subject, verbs and objects. They may clip their sentences, which can be said to be ungrammatical, such as saying “Susie want cake”. If an adult made a mistake confusing the subject and noun with the verb the child would notice. This implies the acquisition of language is inherent and not passive.*

*Arguments that conflict with Chomsky:*

* *There is no actual proof*
* *Clashes directly with behaviourist B. F. Skinner, who proposed that language is a direct result of behavioural conditioning, and with psychologist Jean Piaget, who viewed language acquisition as a part of overall cognitive development in children.*

*6. Suggested answer:*

* *A schema is a category of knowledge as well as the process of acquiring knowledge.*
* *A child develops concepts about the world around them and reaches a state of equilibrium.*
* *When they get new information, their schemas are disturbed and they reach a state of disequilibrium.*
* *As the new information is accommodated, a new schema is created or an existing schema is changed*
* *This then leads back to a state of equilibrium again.*
* *If Freya knows what a cow is she might see a horse and assume it is a cow, as it is a large 4-legged animal on a farm. When she is corrected by an older child or adult, the new information is accommodated and her schema is adjusted.*

*7. Freya is at the Pre-operational stage according to Piaget.*

* *This means she will be able to use symbols such as word, drawings and pretend play.*
* *She will not yet be able to think logically*
* *She will not be able to complete the Conservation tasks.*
* *For example, if 2 sets of 10 coins are spread out over different lengths, she would not be able to see there is still 10 coins in each row.*
* *She will also still be egocentric, this means she assumes everyone sees the world and feels the same way she does.*

*Peter is either at the top end of the* *Concrete Operational stage or has progressed into the Formal Operational stage.*

* *In the Concrete Operational stage, a child can conserve and understand that amounts do not change in the conservation tasks.*
* *Although, they will still need concrete models and counters to work it out.*
* *They can classify, categorise and use logic to understand the world around them.*

*At the Formal Operational stage,*

* *He will be able to use full abstract and hypothetic thinking*
* *He will be able to work out logic operations in his head without counters or a model in front of him*
* *He will think more rationally and be able to problem solve*

***A3 Emotional development mark scheme***

*1. Example answers:*

* *Truancy*
* *Smoking*
* *Dropping litter*
* *Skipping form*
* *Playing pranks on teachers*
* *Being disrespectful*
* *Swearing*
* *Not completing homework*

*2. Example answer:*

* *Emotionally, Arlene may experience anxiety and stress from the break-up*
* *She might feel lonely and isolated*
* *This can significantly affect her self-image and lead to negative self-esteem*
* *She may feel less secure and upset for the children because their father is no longer there for them.*
* *Alternatively, if the partnership was difficult, Arlene could feel relieved and enjoy her independence.*
* *Coping as a single Mum might boost her self-esteem.*
* *Arlene may find her social circle changes as she is no longer part of a couple.*
* *She might find it more difficult to get out and see friends as she has less childcare.*

*3. 1 mark for definition of attachment and 2 marks for extension, up to a maximum of 4 marks.*

* *Emotional attachment is innate to all animals including humans*
* *It enables us to express our needs to the caregiver, providing these neds are attended to consistently*
* *When children are nurtured with consistent care and attention they are able to form healthy relationships throughout their life*
* *They will be able to show empathy and respond appropriately to the successes and failures of others*
* *They will become better parents and pass on nurturing skills to their own offspring*
* *They will have fewer mental health issues in later adulthood and will be able to manage their stress and adjust to the death of loved ones.*

*4. Example responses:*

* *There was no communication before the marriage, so they did not form a bond, absence of trust*
* *Difference in age is a barrier to forming a compatible relationship*
* *He degrades her and this has led to low self-image and low self-esteem.*
* *She is likely to become seriously depressed and may begin to self-harm or become suicidal*
* *She is isolated and has no family nearby and very little social contact*
* *Recent multiple pregnancies with little time for her body to recover will have drained her energy reserves and may mean she is malnourished*
* *His will impact her low mood*
* *She is at greater risk of post-natal depression*
* *She is likely to take these feelings out on her children*
* *She is probably constantly tired and may feel she is worthless*

*5. According to Bowlby:*

* *Ruby is genetically pre-programmed to form an attachment with her mother*
* *This bond with her primary caregiver is essential for future emotional well-being*
* *Infancy is a critical period for forming attachments*
* *Attachment to the primary caregiver is a model for future attachments in later life*
* *A disruption to attachment has a negative impact on development*

*According to Schaffer and Emerson:*

* *At 1 month old, Ruby will be in the process of attaching to her mother as her main caregiver but will also accept care from others.*
* *By 4 months old Ruby will have formed a closer bond with her mother. She will appear more content with her mother but will still accept care form others.*
* *By 7 months old, Ruby will show signs of separation anxiety when parted from her mother and will become anxious when cared for by others.*
* *Around 9 months old Ruby will start to firm attachments with others who care for her and will be more content when her mother is not there.*

*6. During adolescence, a sense of self and identity continues to develop.*

*7. Self-esteem is how you feel about yourself and your value compared with others.*

* *Sarah might show signs of being very passive and withdrawn.*
* *She might be very self-critical and negative about herself*
* *She might have difficulty dealing with problems.*
* *She might argue with friends and family and be very pessimistic about life*
* *She might be frustrated with aspects of her life.*
* *She might feel worthless and be less likely to try new things*
* *She might become depressed*
* *She may neglect herself and self-care*
* *She may develop and eating disorder or begin to self-harm*

*8. Self-image is the personal view someone has of themselves. The way they see themselves.*

* *Self-image is determined by parents at an early age, so her parents must focus on building Sarah to think positively about herself.*
* *Everyone has strengths and weaknesses, but if they concentrate on her strengths, she will build her confidence.*
* *They must praise her when she does something well and support her in her activities such as drama shows or sports events*
* *Always pick out what she has done well and not focus on what she did badly*
* *Notice little occasions when she has done something kind or funny*
* *Remind her of time people have said she is attractive, clever, kind, fun*
* *Discourage her from aiming for 100% perfect and accept “good enough”*
* *Encourage her to look after herself- dress well, eat a good diet, sleep well and take regular exercise all boost self-esteem*

*9. Self-concept is a combination of self-esteem and self-image.*

* *Self esteem is how individuals value and feel about themselves*
* *Self-image is how individuals view themselves, influenced by how they are perceived by others.*

*10. Getting onto the apprenticeship will be a boost to Joe’s self-concept:*

* *He will have faced the challenge of the interview and application process and this will build his confidence*
* *He will also have been accepted onto the course in favour of other applicants. This success will boost his self-image*
* *He will be learning new skills and this can enable him to build confidence*
* *He will be earning a wage and be able to spend money on leisure activities which will boost his mood*
* *He will have a “role” in society – he is going to be an Engineer*
* *He will make new friends of different ages during the apprenticeship – this can be a great source of support*
* *He is entering a career with a big earning potential and the option of working abroad – he will feel optimistic about the future*

***A4 Social development mark scheme***

*1. Answer needs links between ideas and an evaluation. Possible answers include:*

* *Socialising with friends is important for Sophia’s wider learning and being able to fit in*
* *Socialising and friendship-forming in adolescence will enable Sophia’s ego to develop healthily, leading to personal insight and higher emotional intelligence*
* *In order to be a rounded individual and comfortable in social settings it is usual for adolescents of Sophia’s age to spend more time with friends than with family*
* *For Sophia to form better relationships in later life it is important that she bonds with friendship groups to learn about commitment in relationships*
* *Being involved in a friendship group will give Sophia a sense of belonging and a gain in self-confidence*
* *Having friends and belonging to a friendship group will enable Sophia to learn appropriate responses ad how to mediate and problem solve, which are essential skills for forming pair-bonds in early adulthood.*
* *Her friends’ experiences are similar to her own, which enables her to share her feelings and get support*
* *It is a normal part of growing up and a basic need*
* *Sophia will be able to talk about her understanding of the social environment and increase her understanding of general vocabulary and urban terminology*
* *It is an important life skill to be able to experience and empathise with another person’s point of view.*
* *She will learn that it is OK to fall out and make up and friendship groups can change and evolve, and different allegiances can be formed. Sophia will learn coping mechanisms and strategies to avoid or resolve conflict. This is not something that can be experienced through reading books.*
* *Sophia will be learning to share criticisms and praise and self-belief.*
* *Sophia will learn to respond to positive and not negative peer pressure, which can influence impulsive behaviour.*
* *She will learn how the deepening of casual friendships leads to more committed ones which she is prepared to invest into.*
* *Without experiment and learning from experience it will be more difficult for Sophia to reach emotional maturity.*
* *Socialising and forming friendships is important for a healthy self-concept. It will enable Sophia to develop a sense of fitting in and belonging.*

*2. 1 mark for identification of the stage and 1 mark for extension*

***Solitary or Solo Play:***

* *Babies ages 0-2 play on their own as they explore and investigate their surroundings*
* *Through their senses and repetitive actions with a toy*

***Parallel play:***

* *Young children aged 2-3 enjoy the company of other children but do not yet have the social or language skills to be able to share or take turns*
* *They play side by side doing similar activities without contributing to each other’s play.*

***Cooperative play:***

* *Children aged 3 enjoy playing with other children*
* *They have more control over their body and are usually potty trained, giving them greater freedom and independence*
* *They have the language and social skills to be able to work together towards a common goal*
* *They can share and take turns*
* *They can role-play together*
* *They can solve simple problems together*
* *This progresses to playing a game with rules and roles such as tag or a sport*

*3. Having a boyfriend can have positive and negative effects on Sally’s social development.*

* *Having a close or intimate relationship can encourage a person to get out and be sociable, joining a club or just going to the cinema. These activities enable us to form other friendships and get support*
* *Some friends can be very encouraging in getting active and involved in new activities.*
* *Sally may also get to know Joe’s family and gain a lot of support form her relationships with them, especially as she is trying to find her own identity.*
* *Experiencing an intimate relationship can enable Sally to gain the skills she needs to manage a relationship longer term, for example marriage*
* *She can explore her feelings in terms of what traits in a partner she likes and dislikes*
* *She can develop communication skills, compromise and how to work as a partnership*
* *However, some boyfriends can get jealous and try to limit a girls’ contact with others, leading to isolation and loneliness.*
* *She may also not feel ready for intimacy and this can cause problems in the relationship which may affect her self-esteem*
* *Some relationships are abusive and have a negative impact om all aspects of development.*
* *Socially, these relationships can lead to isolation, loneliness and not interacting with others. This will severely damage her social development.*

*4. Josie may feel:*

* *Pressure to conform. This is the acceptable norm among her friends and peer pressure as well as pressure from her boyfriend may encourage her to take this next step before she is ready*
* *She may fear ridicule and being labelled*
* *She may feel anxiety and stress and isolated due to her different feelings to her friends*
* *She may feel she needs to seek reassurance from her friends and gain ideas on how to cope with this new situation*
* *She may want to seek advice form her Mum if she is close to her*
* *She may use the internet to research about how others deal with this situation if she does not feel able to discuss it openly with her friends and family*
* *Alternatively, she may feel ready to oblige and be happy to take this next natural step*
* *This will boost her self-esteem*

*5. Independence is being able, and having the confidence to have total control over one’s own life, ranging from having choices, to making decisions based on wants and desires, using free will.*

*6. Josie may be experiencing:*

* *Questioning her sense of identity – who is she and what does she want? What does her Mum want her to do? Her friends? Her boyfriend? Herself?*
* *She may see herself as separate from her family and may feel alone if not in a close, supportive peer group or if she feels less close to her friends due to their own boyfriends*
* *She may question her family’s values and views and how she herself feels*
* *She may feel a lot of peer pressure and may question other decisions she made based on her friends’ views*
* *May clash with parents about choices which do not meet their expectations e.g. choice of friends etc.*
* *May clash with friends due to own feelings*
* *May have bog decisions to make regarding leaving college and going to university, which courses / careers to pursue, leaving home, managing money, managing work and college etc.*
* *A stage of real confusion and possible loneliness and depression*

*7. Friendships can help with:*

* *Coping with a traumatic event or a sudden change such as parent’s divorce, failing exams, relationship breakdown, social media bullying etc.*
* *They are a sounding board and can be supportive*
* *They can positively encourage Josie to eat well and exercise, not smoke or binge drink, try hard at college.*
* *They will help her to avoid loneliness and isolation and improve her self-esteem and confidence and give her a sense of belonging*

*8. In residential living such as prison, hospitalisation or residential care, decisions are made by the institution for an individual; such as what and when to eat, when to get up and when to go to bed, as well as possibly what to wear.*

*The person then no longer attempts to make independent decisions for themselves and become dependent on authorities to give commands, which they passively conform to and obey, eventually without question.*

*This is how people adapt to living in these environments. Suggested answers:*

* *A child in hospital long-term will not experience social development in the same way as child living at home*
* *They will be the centre of adults attention; doctors, parents and visitors and this may lead to egocentric behaviour or even attention-seeking, selfish behaviours when released.*
* *They will not have had the opportunity to move through the stages of play at the suggested ages due to restrictions in their health*
* *They may act younger than their years when with others*
* *They will probably be behind in their education and feel a distance from their peers*
* *They may find it difficult to problem solve independently and give-up easily, with a defeatist attitude*
* *They may lack confidence and seek constant reassurance from friends and family*
* *They may feel unable to carry-out small tasks without someone present to confirm they are doing it correctly*
* *They may struggle with forming long-term friendships and move through a series of friends*
* *They may struggle in adulthood with finding lasting partnerships and may still be a “Mummy’s boy” or a “Daddy’s girl”*
* *They may find it hard to empathise with others due to their self-centred outlook and may demand to be the centre of attention at social occasions.*

***Learning Aim B: Factors affecting growth and development mark scheme***

***1. Example answer:***

* *The death of a partner is an unpredictable event that can cause a high level of stress. Stress is likely to have affected all aspects of Jan’s development.*
* *Emotionally, Jan will be grieving and feeling upset. This can result in trauma that impacts on how he feels about himself, lowering his self -image and self-esteem and affecting his confidence to make decisions.*
* *Socially, Jan might feel uncomfortable meeting other people without Lena and so may avoid social events.*
* *His health might suffer because of the high levels of stress he is experiencing. For example, he may have difficulty sleeping, be unable to eat or have a poor diet and generally not take care of himself.*
* *Stress increases the risk of cardiovascular disease, such as heart disease and cancers.*
* *If Jan is not eating properly this lack of nutrients will lead to malnourishment and ill health.*
* *According to the Stress-Diathesis model, this stress could activate or trigger a predisposition to disease e.g. heart disease or cancers, but also mental health issues.*
* *Research by Holmes and Rahe shows a correlation between stress and ill health.*

***2.*** *In “Justify” questions you need to give valid reasons for your answers and/or prove that something is right or reasonable. You need to give a supported reason for each point you make.*

***Example content might include:***

***Emotional:***

* *Improved self-image and higher self-esteem*
* *Improved sleep patterns*
* *Increased confidence*
* *Reduced stress and anxiety*
* *More independence*

***Social:***

* *Meeting new people at work*
* *More money to go out and socialise*
* *Improved family relationships*

***Intellectual:***

* *Stimulated because of new challenge and making decisions and judgements in his new job*

***Physical:***

* *More active because he is going out to work*
* *More money for leisure activities e.g. join a gym*
* *Improvements to mental and physical health*

***Effects on children:***

* *Will feel more secure if Jan is not showing anxiety*
* *Improved diet if finances improve*
* *On flip side, they might feel more anxious and less secure as Jan is not around as much and they may need to go to new childcare*

***3. Example answer:***

*Outline how the quarry will impact the environment around the home.*

* *A large number of lorries would substantially increase the air pollution near the family home. Pollution can have a serious impact on the respiratory system, causing breathing difficulties, particularly in young children such as Oscar and Anna. These could result in days off school and nursery, which would impact on Jan’s ability to go into work and could result in lost wages.*
* *Nitrogen oxides and soot particles in diesel fuels can also cause heart disease and lung damage or affect the functions of the brain.*
* *Pollution can worsen or complicate existing conditions such as asthma or cause the onset of diseases such as cancer if Jan or either of the children has a predisposition. Rates of asthma increase in areas of high air pollution.*
* *The lorries will also cause a great deal of noise pollution. The family may be less likely to go and play outside or go for walks because of the noise.*
* *This will affect their mental well-being and quality of life.*

***4.***

* *If Khadija is smoking in the house near the children, then she is subjecting them to passive smoking I second-hand smoke. {1)*
* *Children exposed to second-hand smoke are more at risk of suffering from lower respiratory tract infections, asthma and wheezing. (1)*
* *They are more likely to get frequent episodes of tonsillitis and middle ear infections. (1}*
* *There is an indication that babies exposed to second-hand smoke are more at risk from 'sudden infant death syndrome'.* ***(1}***
* *Having a cough will interrupt the child’s sleeping pattern and they will be more irritable during the day and unable to concentrate.* ***(1)*** *This will reduce their capacity to learn new things. (1)*
* *Repeated chest infections and wheezing will slow down their ability to run and play, which will affect their gross motor skills. (1)*
* *If they are frequently ill they will miss school and fall behind their peers, which will affect their self-esteem. (1}*
* *Children who are brought up in a household with an adult who smokes are more likely to experiment with smoking as they get older. This*
* *could seriously damage their health.* ***(1}***
* *Accept any other suitable answers.*

***5.*** *(a)*

* *The arrival of another baby will impact on the space in the house as it will become more cramped.* ***(1}***
* *Being cramped will create more tension in the house.* ***(1}*** *The children are likely to pick up on this and it will affect their emotional development.* ***(1}***
* *The stress may cause Sundus to become depressed and be unable to meet the basic needs of her children's welfare. (1}*
* *This could lead to neglect and stunt their physical and emotional health. (1}*
* *The family can only just meet all their needs on the money Hassan is making and Sundus has just returned to work.* ***(1}***
* *Having another baby will reduce their earning capacity, forcing them below the poverty line. {1}*
* *If the family are financially stressed the children may lose the opportunity to participate in paid activities outside the home (such as learning*
* *to swim, visiting museums and attending parties).* ***(1)*** *This could affect their physical and intellectual development.* ***(1)***
* *The younger children will probably not mind wearing hand-me-down clothes, but it could affect the social development of the eldest children if they feel inferior to their peers and do not fit in. (1}*
* *Their diet could affect their health and development if the family cannot afford to buy fruit and vegetables and other high-quality protein and dairy products. (1} They may not grow or be as strong as their peers and may become deficient in essential minerals and nutriments. (1}*
* *A new baby may interrupt their sleep, so it will be hard for them to concentrate during the day;****(1)*** *they are more likely to be clingy, grumpy and fractious. {1}*
* *This could also affect how the mother responds to them, which may be negative to their emotional health.* ***(1}***

*(b)* ***Answers need to demonstrate the candidate's knowledge and understanding of the***

***material. Marks should be awarded according to the mark scheme given after the answer.***

***It should be noted that using the 'best fit' mark is appropriate rather than being prescriptive***

***about the content; other suitable points should be credited.***

***Emotional Health***

*• No communication before marriage; did not form a bond, absence of trust.*

*• Difference in age is a barrier to forming a compatible relationship.*

*• No emotional common ground.*

*• Emotionally unprepared for the wedding night.*

*• Does not like intimacy with her husband.*

*• Her husband does not respect her right to say ' no'. He degrades her and this has led to low self-esteem.*

*• Lives in constant fear of sexual violence.*

*• Likely to become seriously depressed.*

*• She is isolating herself behind the niqab.*

*• Mother-in-law undermines her in front of the children, leading to feelings of worthlessness and inadequacy.*

*• No emotional support from mother-in law or friends and family.*

*• Inability to be proactive over contraception.*

***Physical Health***

*• He is violent and forces himself on her.*

*• State of heightened alert, constant stress.*

*• Increase in circulating adrenalin so will find it difficult to relax.*

*• She has no control over her body.*

*• Multitude of pregnancies without time for her body to recover.*

*• She is bulimic which will affect her baby and upset her sugar levels.*

*• She is diabetic and needs regular meals.*

*• Constantly tired, needs practical support.*

***Intellectual Development***

*• Sundus was forced to cut short her education.*

*• Educationally unfilled and unable to meet her self-esteem needs.*

*• Husband controls what she does and what she can read or view.*

*• She may find the lack of intellectual stimulation is dulling her mind.*

*• Not able to handle finances or make decisions.*

***Social Development:***

*• She is socially isolated.*

*• Rarely goes out alone.*

*• Has no friends.*

*• No real opportunity to learn the language.*

*• Depersonalised.*

*• Will lose confidence and the skills necessary to communicate.*

***Conclusion:***

*Her marriage has had a negative effect on her intellectual and physical, social and emotional development.*

* *It is abusive, and she has little say over what happens to her or her body. (disempowered)*
* *She is at risk of becoming clinically depressed as she is socially isolated. Her self-harming is likely to be seriously harming her health and will probably escalate.*
* *Her husband's violence towards her is likely to escalate.*
* *She is likely to become seriously ill with complications of diabetes leading to long-term damage.*
* *Her children may turn against her or treat her as badly as her husband since he is their role model, and this will lead to further isolation.*
* *Looking after the children will be draining. She will continually feel tired and exhausted. This can weaken her immune system, making her more likely to pick up viruses, and she will be unable to care for the home. This could lead to an escalation in abuse towards her.*
* *If she carries the baby to term she is likely to suffer from post-natal depression.*
* *Likely to snap and take it out on her children.*
* *Feelings of low self-worth and unable to voice her ideas or opinions mean a high risk of self-loathing and suicide.*
* *She ha s lost the ability to help herself and is caught in a cycle of self-neglect and abuse which is likely to end in tragedy.*

***(c) With reference to the scenario, explain, giving two examples, how the Diathesis-Stress Model can be applied to Sundus. (6 marks)***

* *The Diatheses-Stress model is a theory which hypothesises the likelihood of an individual developing an illness based on their genetic make-up* ***{1)*** *and the exposure to stress in the environment.* ***(1)***
* *Her husband is abusive, and she is under considerable stress.* ***(1)*** *She is likely suffering from post-traumatic stress* ***(1)*** *which will increase her chances of developing serious mental health problems.* ***(1)*** *This is not genetic but environmental.* ***{1)***
* *She is predisposed to breast cancer.* ***(1)*** *Circulating cortisol due to stress* ***{1)*** *is likely to increase the chances of her developing the disease.*
* ***{1)*** *This is an example of genetic and environmental conditions.* ***(1)***
* *Didn’t fulfil her education aspirations, so likely to feel inadequate* ***(1)*** *and suffer from poor self-esteem.* ***(1)*** *She has an eating disorder which could be genetic* ***(1)*** *and could be exacerbated by environmental issues.* ***{1)***
* *Suffers from fatigue;* ***(1)*** *this likely to make her moody and increase anxiety,* ***(1)*** *leading to a deterioration in her mental health.* ***(1)*** *This is likely to be caused by environmental issues rather than being genetically predisposed.*
* *Has type 1diabetes;* ***(1)*** *circulating cortisol can interfere with her sugar levels* ***(1)*** *so she is at risk of becoming hypoglycaemic.* ***(1)*** *There could be a genetic link.* ***(1)***
* *Multiple pregnancies without recovery time* ***(1)*** *so more at risk of developing post-partum depression,* ***(1)*** *leading to a high risk of suicide.* ***(1)*** *There is a genetic link to postpartum depression.* ***(1)*** *It could also be caused by her environment.* ***(1)***

***Award up to three marks for correctly identifying a genetic or environmental risk leading to a decline in mental health, or other illness. Up to three extra marks are to be awarded for appropriate expansion and assessment of these features.***

***Q6****.* ***(a)Answers need to demonstrate the candidate's knowledge and understanding of the***

***material. Marks should be awarded according to the mark scheme given after the answer.***

***It should be noted that using the 'best fit' mark is appropriate rather than being***

***prescriptive about the content; other suitable points should be credited. A conclusion is***

***needed.***

* *Stress is a condition where the individual perceives life as spiralling out of control.*
* *A little bit of stress is often a good thing as it motivates the individual.*
* *Stress is known to cause autoimmune disease.*
* *Levels of stress add up and combinations can overwhelm the individual.*
* *The ability to cope with life and its demands determines how stress will affect the individual.*
* *Having a baby is stressful, having a baby and moving house is even more stressful, the death of a child is a ma jor stress crisis.*
* *Not all demands create the same amount of stress.*
* *The Holmes-Rahe social readjustment rating gives numbers to stressful situations and these can be added up to determine the demands on the individual.*
* *A Holmes-Rahe rating adds up all the stress the individual experiences and measures the likelihood of illness occurring.*
* *11-150 indicates a low risk of illness occurring in the future*
* *150-200 indicates a moderate risk of illness occurring in the future*
* *300-600 indicates a very high risk of illness occurring in the future*
* *Cathy will have scored fairly on the stress scale, if all the events were added up and occurred at the same time*

*(b)****Positive:***

* + *Being able to buy healthy food.* ***(1)***
  + *Able to experience eating out and different types of food, making it easier fit into social engagements.* ***(1)***
  + *Able to afford leisure activities to promote physical, intellectual and social development.* ***(1)***
  + *Promoting intellectual development will lead to better performance in education,* ***(1)*** *better job opportunities* ***(1)*** *and a higher standard of living in later life.* ***(1)***
  + *Having nice clothes will increase self-esteem and promote socialising,* ***(1)*** *increasing communication skills.* ***(1)***

***Negative:***

* + *Only being able to afford cheap - high fat processed food,* ***(1)*** *leading to long-term health conditions such as obesity and type 2 diabetes.*
  + *Not being able to participate in extracurricular activities* ***(1)*** *affects education and socialisation* ***(1)*** *and vocabulary.* ***(1)***
  + *Accept any other suitable answers.*

*(c)*

* + *Feeling of shame and inadequacy*
  + *Not working through choice (even though it is beneficial to the children)*
  + *Taking on a different role could lead to him feeling emasculated*
  + *Stigma attached to living off benefits*
  + *Feeling out of fashion as he has no money for clothes*
  + *Not being able to keep up with new gadgets; not able to relate to others in conversation and discussion*
  + *Not being able to take part in social gatherings that cost money*
  + *Not being able to take the children on holiday may make him feel a failure to his children*
  + *Not being able to go out and meet new friends*
  + *Not getting positive appraisal from friends and colleagues*

***7. Award 1mark for definition and 2 marks for an extension, up to a maximum of 3 marks for each condition.***

* *Hereditary illness is cause by a mutation in the gene.* ***(1}*** *It can be carried by one parent, e.g. haemophilia,* ***(1)*** *or by both, e.g. cystic fibrosis.* ***(1)***
* *A congenital disease is caused by an event that happens in the womb.* ***{1}*** *Foetal alcohol syndrome is a congenital disease caused when alcohol passes through the placenta from the mother's blood stream.* ***{1}***
* *Congenital syphilis is caused when the syphilis bacteria pass through the placenta.* ***(1}***
* *Congenital diseases can also occur during the birthing process, such as cerebral palsy due to oxygen starvation.* ***{1}*** *Some sexually transmitted diseases can also occur during a vaginal birth.* ***{1)***

***8.*** *Answers need to demonstrate the candidate's knowledge and understanding of the material. Marks should be awarded according to the mark scheme given after the answer. It should be noted that using the 'best fit' mark is appropriate rather than being prescriptive about the content; other suitable points should be credited.*

***Nature:***

* + *The nature vs nurture debate argues that we are as much a product of our genes as we are of our environment.*
  + *Johnny will have inherited his intelligence.*
  + *Language is innate.*
  + *Personality traits are inherited, which can contribute to how he will tolerate and relate to others.*
  + *His natural aptitude for reading is inherited and it would be difficult to accomplish if he had dyslexia, which is also inherited.*
  + *Facial features are inherited, and confidence is gained by being able to fit in.*
  + *Problem-solving skills are mostly inherited and enable him to develop ICT skills faster.*
  + *Hand-eye coordination will develop faster as he will be more inquisitive if he has inherited high intelligence.*

***Nurture:***

* *Although his intelligence is inherited it can't develop unless he has outside stimuli, or challenges to overcome. This has been made possible by the one-on­ one interaction he has with his grandad.*
  + *Language needs to be practised; he is getting a lot of input from his grandad and also from the nursery environment.*
  + *He will learn vocabulary from his grandad and from other children he meets in the nursery and practise using it.*
  + *His natural aptitude for reading is nurtured when he is read and listened to.*
  + *The individual attention he is receiving from his grandad will increase the rate he develops skills and confidence.*
  + *Being able to use his grandad's iPad is enabling him to develop complex skills, and as a result hand-eye coordination will develop faster as he practises.*
  + *He will be learning the social norms from his peers and he will be learning new skills and socialising with different people, enabling him to develop emotional intelligence.*

***Conclusion:***

* *Natural intelligence and aptitudes are inherited. They cannot develop in isolation and need nurturing.*

***9. (a)*** *2 marks max. for correct response, 1 mark for partial response, may be two for 2 marks*

* + *Between childhood and (early) adulthood (1)*
  + *Age range 9-18 years (1)*
  + *Turn into man/woman/ go through puberty/child into adult (1)*
  + *Time period when the body prepares for (sexual) reproduction/ menstruation/produce ova/sperm*

*(b) 2 marks for each full response, 1 for a partial response. For example:*

* *Physical –Growth of sexual organs/growth spurt/widening of shoulders or hips/onset of menstruation/growth of breasts/ development of body hair/voice breaking*
* *Social – friends more important than family/socially independent/intimate friendships/interests as peers Emotional-rebellious/moody/independence/idealistic/fanaticisms*

*Please note: Physical - puberty ALONE = 1 marks*

* *Social - not meeting new people alone/ bigger social group = 0 marks*

***10.*** *(a)*

* *Absolute poverty - Not able to buy basic necessities – like food, shelter*
* *Relative poverty - Idea of not as well off as most other people. Not able to afford things that most people have, such as TV, telephone, etc.*

***Level 1****: 1 – 2 marks - Candidates are likely to make a basic statement about each type of poverty or say that absolute poverty is worse than relative poverty.*

***Level 2****: 3 – 4 - Candidates will have a clear view of both absolute and relative poverty supported by examples.*

*(b) Responses likely to include:*

* *Low income/living on benefits*
* *Poor diet – supermarket economy brands and ready meals, which are high in fat, sugar and salt.*
* *Underweight/overweight*
* *Malnourished*
* *Weak immune system*
* *Inability to concentrate for normal lengths of time*
* *Tiredness*
* *Poor sleep pattern*
* *Prone to disease, e.g. respiratory difficulties, skin complaints*
* *Abnormal development – rickets*

***11. Long-term*** *effects such as forms of cancer, addiction, hypertension and cirrhosis are* ***not acceptable****. Identification only required.*

* *Personal and child neglect*
* *Poor hygiene*
* *Slurred speech/incoherence*
* *Headache/hangover*
* *Stumbling gait/clumsy/accident prone*
* *Argumentative/quarrelsome*
* *Reduced inhibitions/overconfidence*
* *Mood change/happy/ sad/depressed*
* *Forgetfulness/loss of concentration/confusion*
* *Slow reaction times*
* *Nausea /vomiting/passing out*
* *Blurred vision*
  + *Increased heart rate/palpitations*

***12.*** *1 mark for identification, 2 marks for each point fully and accurately 1 mark for a partial explanation.*

* + *Genetic factors/nature*
  + *Environmental factors/nurture*
  + *Modern theories regarding interaction*
  + *Level of control over health and well-being*

***Level 1: 1-3***

*Basic knowledge only and there will be omissions. Students likely to use everyday language at a superficial level such as passed on from parents. There will be no additional explanations and possibly only one or two points made. Student does not appreciate the level of control and that modern medicine now has techniques to offset genetic factors for many inherited faults. No evaluation. There is little specialist language and the response lacks clarity and organisation. Spelling, punctuation and the rules of grammar are used with limited accuracy.*

***Level 2: 4-6***

*Fewer omissions and knowledge although still basic will be explained in more detail. At least three points will be covered for the top end of level with some explanations. Some explanations are vague. There is some evaluation. The response shows some focus and organisation. Spelling, punctuation and rules of grammar are used with some accuracy.*

***Level 3: 7-10***

*Uses specialist language in explaining at least three points showing depth of knowledge and qualifying information. Likely to use good examples meaningfully. Evaluation leads to conclusions and the response is well-structured and coherent with good focus and organisation. Spelling, punctuation and rules of grammar are used with considerable accuracy.*

***13.*** *(a) Michael - Early adulthood Liam-Adolescence (Do not accept any variations except adolescence).*

*(b)* ***Positive:***

*• Close relationship with family /holidays/activities/work place*

*• Intimate relationship with wife*

*• Business contacts*

*• Internet contacts*

***Negative:***

*• Works long hours*

*• Works alone / no colleagues*

*• Doesn’t meet many real people*

*(No credit for wealth as such with social development, only for social activities that can result from wealth and involve meeting other people or having a close relationship with family)*

***14.*** *(a)*

*• Passed on from parents / inherited • Inherited units/genes / characteristics • May contain faults in DNA / genes May provide examples of diseases or characteristics – credit where accurate*

*(b)*

*• Diet*

*• Substance abuse such as passive smoking*

*• Pollution- can accept more than one type e.g. noise, air, water*

*• Water quality*

*• Stress*

*• Income*

*• Education*

*• Housing*

*Beware of confusing lifestyle factors with environmental must be different identification*

***15.***

*How low income affects dietary choice. For example:*

*• More processed food consumed/cheaper than fresh*

*• Fruit and vegetables are expensive and not very filling so few low-income groups consume 5-a-day.*

*• Consume cheap foods rich in energy so tendency to become overweight*

*• Cheap foods tend to be high in fat and sugars and salt producing problems in later life.*

*• Unable to buy organic foods containing fewer chemicals.*

*• Social factor – use of local shops as cannot afford transport to supermarkets / difficulty carrying*

***16.***

*How being a widower has contributed to Bill’s ill health. For example:*

***Diet:***

*Bill did not think it was worth cooking a balanced diet or may have been unable to do so. Bill ate mainly ready/convenience meals which are high in fat, sugar and salt these may raise his BP –stroke risk*

*• Make him put on weight- increased risk of diabetes*

*• Provide an unbalanced diet which is not a healthy diet and increases the risk of developing diabetes*

*• Increase atheroma/fatty deposits in his blood vessels causing a blockage to blood flow and resulting in a stroke*

***Exercise****:*

*Bill was less likely to exercise by going out by himself, so fats and sugars were not being used to provide energy, this may-*

*• Maintain a high BP –stroke risk*

*• Result in being overweight and therefore even less likely to exercise*

*• Become a couch potato, blood flow not stimulated*

*• Increase fatty deposits in blood vessels*

***Emotional State:***

*Bill may have been depressed and lonely and may have resorted to drinking more than the recommended units of alcohol which-*

*• Made him overweight*

*• Increased the likelihood of a stroke*

*• Increased the likelihood of developing diabetes*

***17.***

*(a) Early childhood*

*(b) Explain primary socialisation. 1 mark for a partial explanation and 2 marks maximum for a full explanation. For example:*

*• The process of a child learning to understand the roles and norms (1) of society through the influence of the family (1)*

*• Learning how to behave (1) and learning the norms and values of the family (1)*

*• Socialisation within the family (1) Learning attitudes, beliefs and behaviour from family members (1)*

*(c) One difference between nature and nurture. 1 mark each for meaning of nature and nurture and 1 mark for a clear difference. For example:*

*• The characteristics transferred by genes are called nature (1) whereas the factors due to the environment surrounding us are nurture (1).*

*• Nurture is how we are brought up (1) whereas nature consists of inherited factors (1) or genes.*

*• An individual can control nurture to a large extent (1) but cannot control nature (1).*

*• Nurture can be changed (1) whereas nature cannot (1).*

*(d) Discussion of how Ros is affected by stress. For example:*

*• Lack of sleep leads to tiredness*

*• Weight change digestion problems as doesn’t take time to eat properly/ misses meals/snacks/no appetite*

*• Likely to get repeated infections due to lowered immunity*

*• Stress will affect relationships*

*• Stress will affect her self-concept/self-esteem/self-image*

*• May resort to substance abuse to help her cope*

*• May be moody/irritable/depressed because of pressure*

*• May develop raised BP or heart problems*

*• May suffer from palpitations*

*• Sweating*

*• Pallor*

*• Lack of concentration*

***18.*** *Any lifestyle factor including:*

* *Exercise*
* *Diet*
* *Drugs*
* *Alcohol misuse*

***19.***

*• Physical health may deteriorate*

*• Increased stress/anxiety*

*• Increased personal unhappiness*

*• Relationships negatively affected*

*• Family breakdown*

*• Greater susceptibility to illness*

*• Increased risk of suicide*

*• Depression*

*• Social isolation*

*• Marginalisation/social exclusion*

*This question will focus on candidate knowledge and understanding on the effect of poverty and its impact on health and well-being.*

***20.***

*(a) Three infants/babies/children born to the same mother/parent (1) at the same time/one after the other (1)*

*(b) Two features from table that are controlled by genetics. (2x1)*

*• Gender • Eye colour • Hair colour • Accept length/height*

*(c) Feature: • weight (1) • length (1) • physical disorder, e.g. deafness, blindness (1) • head circumference (1)*

*Explanation: • diet of the mother (1) • mother’s exercise (1) • dependent on the other siblings (1) • mother substance abuse, e.g. smoking/drugs/alcohol (1) • disease during pregnancy, e.g. prematurity/Rubella (1) • Environmental factor (1) • placental function (1) • lifestyle factor/personal choice*

***Learning Aim C: Effects of Ageing***

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| --- | --- | --- |
| **Question**  **Number** | **Answer** | **Mark** |
| 1 | Award **one** mark for the identification and **one** additional mark for the appropriate expansion, up to a maximum of **four** marks.   * George could have a reduced self-image (1) now that he no longer holds an important position/job role * George could feel that he has lost his sense of purpose (1) as he no longer has specific tasks to complete (1) * George could lose confidence in his ability to make decisions (1) because he no longer has to manage his team (1) * George no longer feels frustrated by having to work full time (1) so he has more control over his own life (1)   Accept any other valid response. | 4 |

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| **Question number** | | **Indicative content** | | **Mark** |
| 2 | | Answers will be credited according to the learner’s demonstration of knowledge and understanding of the material using the indicative content and levels descriptors below. The indicative content that follows is not prescriptive. Answers may cover some/all of the content listed below.   * Development and importance of self- image. She may now see herself as having the opportunity for a fulfilling career * Definitions and factors involved in the development of a positive or negative self- image * Holmes-Rahe social readjustment rating scale and the effects of life events on a person’s stress levels and health   Increased opportunities as George can share more of the caring responsibilities. This may have a positive effect on his self-image | | 10 |
| **Mark scheme (award up to 10 marks)** refer to the guidance on the cover of this document for how to apply levels-based mark schemes\*. | | | | |
| **Level** | **Mark** | | **Descriptor** | |
| Level 0 | 0 | | No rewardable material. | |
| Level 1 | 1–3 | | * Demonstrates isolated knowledge and understanding of relevant information; there may be major gaps or omissions * Provides little evidence of application and links between relevant information. Evaluation likely to consist of basic description of information * Conclusions may be presented; are likely to be generic assertions rather than supported by evidence * Meaning may be conveyed but in a non-specialist way * Response lacks clarity and fails to provide an adequate answer to the question. | |
| Level 2 | 4-6 | | * Demonstrates accurate knowledge and understanding of relevant information with a few omissions * Evidence of application demonstrating some linkages and interrelationships between factors leading to a judgement/judgements being made * Evaluation is presented leading to conclusions but some may be lacking support * Demonstrates the use of logical reasoning, clarity, and appropriate specialist technical language. | |
| Level 3 | 7-10 | | * Demonstrates accurate knowledge and understanding of * relevant information with a few minor omissions * Evidence of application demonstrating linkages and interrelationships between factors leading to a supported judgement/judgements being made * Displays a balanced evaluation, demonstrating an awareness of competing arguments, leading to conclusions * Demonstrates the use of logical reasoning, clarity and appropriate specialist technical language | |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Question number** | | | | **Indicative content** | | | **Mark** |
| 3 | | | | Answers will be credited according to the learner’s demonstration of knowledge and understanding of the material using the indicative content and levels descriptors below. The indicative content that follows is not prescriptive. Answers may cover some/all ofthe content listed below.  **Indicative content**  **George**   * Effects of family dysfunction/loss of partner * Role changes * Effects on confidence and self-esteem/ability to cope without Polly * Polly has been the main care giver for Nita whilst George has been at work/George may lack the understanding of how to support Nita * Physical effects of ageing - Nita may require support with physical care * Positive aspects such as George’s wealth of experience, knowledge and increased time to support Nita and access suitable support services * George may become frustrated because of Nita’s poor memory, meaning she keeps asking for Polly. | | | 10 |
| **Mark scheme (award up to 10 marks)** refer to the guidance on the cover of this document for how to apply levels-based mark schemes\*. | | | | | | | |
| **Level** | | **Mark** | | | **Descriptor** | | |
| Level 0 | | 0 | | | No rewardable material. | | |
| Level 1 | | 1–3 | | | * Demonstrates isolated knowledge and understanding of relevant information; there may be major gaps or omissions * Provides little evidence of application and links between relevant information. Evaluation likely to consist of basic description of information * Conclusions may be presented; are likely to be generic assertions rather than supported by evidence * Meaning may be conveyed but in a non-specialist way * Response lacks clarity and fails to provide an adequate answer to the question. | | |
| **Level** | | **Mark** | | | **Descriptor** | | |
| Level 2 | | 4-6 | | | * Demonstrates accurate knowledge and understanding of relevant information showing basic understanding of theories with limited application * Evidence of application demonstrating some linkages and interrelationships between factors leading to a judgement/judgements being made * Evaluation is presented leading to conclusions but some may be lacking support * Demonstrates the use of logical reasoning, clarity, and appropriate specialist technical language. | | |
| Level 3 | | 7-10 | | | * Demonstrates accurate knowledge and understanding of relevant information and theories applied accurately * Evidence of application demonstrating linkages and interrelationships between factors leading to a supported judgement/judgements being made * Displays a balanced evaluation, demonstrating an awareness of competing arguments, leading to conclusions * Demonstrates the use of logical reasoning, clarity and appropriate specialist technical language. | | |

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| **Question**  **Number** | **Answer** | **Mark** |
| 4 | Award **one** mark for an identification up to **one** mark and **two** additional mark for the appropriate expansion, up to a maximum of **six** marks.   * Iqbal spends his time caring for Yasmina, which is physically demanding (1) he is then too tired to exercise/prepare healthy food (1) leading to potential weight gain and raised blood pressure (1) * He feels obliged to eat the cakes and biscuits that Nusrat brings round (1) this leads to an increase in his blood sugar levels (1) this will exacerbate the complications of type 2 diabetes (1)   Accept any other valid response. | 6 |

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| **Question**  **Number** | **Answer** | **Mark** |
| 5 | Award one mark for an identification up to  one mark and one additional mark for the appropriate expansion, up to a maximum of  four marks.   * Inviting Iqbal to go for a walk/to the park with her (1) allowing him space to talk freely (1) * Nusrat could care for her mother-in- law (1) allowing Iqbal to develop other relationships/social activities to boost his self-esteem (1) * Encouraging Iqbal to interact with his grandchildren (1) would distract him from thinking about the council plans and help to reduce his anxiety (1)   Accept any other valid response. | 4 |

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| **Question number** | | **Indicative content** | | **Mark** |
| 6 | | Answers will be credited according to the learner’s demonstration of knowledge and understanding of the material using the indicative content and levels descriptors below. The indicative content that follows is not prescriptive. Answers may cover some/all of the content listed below.  **Indicative content**  **Theories**   * Social disengagement theory * Activity theory   **Other factors**   * Effects of culture and beliefs * Physical effects of ageing on the brain * Effects of Iqbal’s current health – he finds it difficult to engage in stimulating activities * Effects of Yasmina’s dementia – feels responsible to care for her, limiting other activities * Lack of intellectual stimulus, as Yasmina cannot engage in meaningful conversation * Geographical location/house is situated on a busy main road, so he may feel scared to take Yasmina with him * Effects of concerns about a potential house move | | 10 |
| **Mark scheme (award up to 10 marks)** refer to the guidance on the cover of this document for how to apply levels-based mark schemes\*. | | | | |
| **Level** | **Mark** | | **Descriptor** | |
| Level 0 | 0 | | No rewardable material. | |
| Level 1 | 1–3 | | Demonstrates isolated knowledge and understanding of relevant information; there may be major gaps or omissions   * Provides little evidence of application and links between relevant information. Evaluation likely to consist of basic description of information * Conclusions may be presented; are likely to be generic assertions rather than supported by evidence * Meaning may be conveyed but in a non-specialist way * Response lacks clarity and fails to provide an adequate answer to the question. | |
| Level 2 | 4-6 | | * Demonstrates accurate knowledge and understanding of relevant information showing basic understanding of theories with limited application * Evidence of application demonstrating some linkages and interrelationships between factors leading to a judgement/judgements being made * Evaluation is presented leading to conclusions but some may be lacking support * Demonstrates the use of logical reasoning, clarity, and appropriate specialist technical language. | |
| Level 3 | 7-10 | | * Demonstrates accurate knowledge and understanding of relevant information and theories applied accurately * Evidence of application demonstrating linkages and interrelationships between factors leading to a supported judgement/judgements being made * Displays a balanced evaluation, demonstrating an awareness of competing arguments, leading to conclusions * Demonstrates the use of logical reasoning, clarity and appropriate specialist technical language. | |

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| **Question number** | | **Indicative content** | | **Mark** |
| 7 | | **Indicative content**  **Effects on Yasmina**   * Inability to absorb and retain new information due to the dementia means that she would be unaware of new dangers * Yasmina may be scared during the construction of the road due to new people and situations * Yasmina may get fewer visitors as the road is too busy/daughter-in-law may be worried about bringing the grandchildren round   **Effects on Iqbal**   * He may meet neighbours to discuss the changes in the area/may be involved in campaign to prevent the building of the road * Anxiety of coping with the effects on Yasmina may raise his blood pressure * Links with theories of ageing, e.g. increased social disengagement due to social isolation   **Effects on both**   * Increased air pollution due to increased traffic * Broken sleep patterns due to noise pollution * Reduced access to local services (e.g. luncheon club) due to travel difficulties * May be motivated to visit people more often to escape noise and disruption | | 10 |
| **Mark scheme (award up to 10 marks)** refer to the guidance on the cover of this document for how to apply levels-based mark schemes\*. | | | | |
| **Level** | **Mark** | | **Descriptor** | |
| Level 0 | 0 | | No rewardable material. | |
| Level 1 | 1–3 | | Demonstrates isolated knowledge and understanding of relevant information; there may be major gaps or omissions   * Provides little evidence of application and links between relevant information. Evaluation likely to consist of basic description of information | |

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|  |  | * Conclusions may be presented; are likely to be generic assertions rather than supported by evidence * Meaning may be conveyed but in a non-specialist way * Response lacks clarity and fails to provide an adequate answer to the question. |
| Level 2 | 4-6 | * Demonstrates accurate knowledge and understanding of relevant information showing basic understanding of theories with limited application * Evidence of application demonstrating some linkages and interrelationships between factors leading to a judgement/judgements being made * Evaluation is presented leading to conclusions but some may be lacking support * Demonstrates the use of logical reasoning, clarity, and appropriate specialist technical language. |
| Level 3 | 7-10 | * Demonstrates accurate knowledge and understanding of relevant information and theories applied accurately * Evidence of application demonstrating linkages and interrelationships between factors leading to a supported judgement/judgements being made * Displays a balanced evaluation, demonstrating an awareness of competing arguments, leading to conclusions * Demonstrates the use of logical reasoning, clarity and appropriate specialist technical language. |

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| **Question** | | **Indicative Content** | |
| 8 | | Answers need to demonstrate the candidate's knowledge and understanding of the material. Marks should be awarded according to the mark scheme given after the answer. It should be noted that using the 'best fit' mark is appropriate rather than being prescriptive about the content; other suitable points should be credited. A conclusion is needed.  The activity theory is also known as the implicit theory of ageing.  When people retire they can feel rejected by society and feel devalued.  They miss out on mental and social stimulation and may not be able to create a daily routine for themselves.  It suggests that the secret to happiness for older adults is to have good mental health and happiness, remain physically and mentally active and socially active, and pursue purposeful roles.  (Example one, the home environment)   * Khadija is an active member of the extended family and participates with the care of the young children. * She remains emotionally active and has a sense of purpose. * She will be bending down and lifting and generally moving around as she cares for the children. * Continual exercise in this way will prevent the calcium from leaking in her bones, causing muscle wastage and joint pain. * Her mind will remain active as she will constantly be stimulated by the children as she reads to them and engages with their learning. * She will be more inclined to pursue her own hobbies and interests as her mind is more active. This will increase her self-esteem and personal satisfaction. * Cooking for the family is another form of physical and mental activity. * She will need to lift pans and chopping boards and manipulate ingredients. Her mind will remain active as she plans for and uses the skills she has acquired over a lifetime. * She will get satisfaction by being able to pass these skills on to her grandchildren.   (Example two, socialising outside the family home)   * Taking the children to the park every day is another form of physical exercise, and pushing the swing is a load-bearing exercise which will promote her bone strength. * In the park she will be meeting other people and can engage in conversation and will feel accepted. * As she takes the children to school or playgroups she will continually be meeting other people. * She will have the opportunity to make friends and socialise with them, leaving the children at home. * She will have a reason to leave the home and actively socialise. * Making tea and coffee at the mother and toddler group means she is continually on her feet, stretching, reaching and interacting with people. * She will also remain mentally active as she handles the money. * Being able to do this will delay the onset of short-term memory loss and maintain her level of happiness. * While volunteering at the mother and toddler group she is actively engaging and socialising with other people. She will have a reason to pursue other activities and keep up with current affairs. * Remaining active and maintaining social activities in a meaningful way have increased Khadija's happiness within herself and satisfaction with her life. * She has maintained a purposeful role within the family. * This has prevented her from withdrawing from social activities which could lead to loneliness and depression. * She is maintaining her physical health and mental capacity which will increase her independence. * By doing this she has remained active, and mentally and socially engaged. * As her income has declined she is also being supported financially by her family, reducing her stress. * She is supporting her family and they in return are supporting her. | |
| Level | Descriptor | | Mark |
| 1 | * The information has been identified but there may be large sections missing. * The information lacks depth and there is little or no association between the relevant pieces of information. * They have described rather than evaluated the information. * The conclusion is a general statement rather than an assessment of accumulated information. * There is no evidence of specialist terminology and the response may lack clarity. * The conclusion doesn't answer the question. | | 1 - 3 |
| 2 | The information shows accurate knowledge and understanding with very few omissions.  The information shows some depth and there is some association between the relevant pieces of information, leading to supported judgements  Some conclusions have been made but may be unsupported.  Specialist terminology has been used, demonstrating logical reasoning with clarity | | 4 - 6 |
| 3 | * The information shows accurate knowledge and understanding, omissions will be minor. * The information shows depth and there is association between the relevant pieces of information, leading to supported judgements. * The evaluation is balanced, demonstrating knowledge of competing agreements * Specialist terminology has been used, demonstrating logical reasoning with clarity | | 7 -10 |

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| **Question** | | **Indicative Content** | | |
| 9 | | Answers need to demonstrate the candidate's knowledge and understanding of the material. Marks should be awarded according to the mark scheme given after the answer. It should be noted that using the 'best fit' mark is appropriate rather than being prescriptive about the content; other suitable points should be credited. A conclusion is needed.  Explanation of the disengagement theory:  Cumming and Henry explained the process through nine expostulates.   1. Everyone accepts they are going to die one day and that they will lose their abilities to function. This means they are likely to socially withdraw and lose ties. 2. As we socialise we follow societal norms. The less we socialise, the less likely we will stick to the norms, and people won't want to socialise with us. It then becomes a vicious cycle. 3. Men and women have different roles in society; therefore, disengagement will differ. 4. The elderly pass on their workforce skills before they retire and before the skills are lost. This type of disengagement is generally initiated by the individual. 5. Complete disengagement can only occur if the individual and society are ready for it. When one is ready and the other not there is said to be a disjunction between the expectations of the individual and the members of society. If the individual is ready but society isn't, then engagement continues. If society is ready but the individual isn't, then disengagement usually occurs. 6. Men usually go out to work; women stay at home and look after the home and family. Once these individual roles are made redundant they have less social contact. Unless they pursue other interests they can easily become demoralised, and disengagement occurs. 7. Disengagement occurs if the person is aware of the following: their mortality, retirement, decrease in income, loss of bodily function, loss of self-esteem. We no longer live in extended families, preferring the nuclear structure, and this can isolate the elderly people. 8. With fewer interactions and disengagement from their previous roles, they mix with people similar to themselves rather than mixing with a diverse community of people. 9. Disengagement occurs across cultures, although there may be some cultural differences.   Frank is working through the grieving process. This is why he has disengaged- he is depressed.  Although the disengagement theory follows a logical pathway there have never been any empirical studies to back it up. | | |
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| 1 | * The information has been identified but there may be large sections missing. * The information lacks depth and there is little or no association between the relevant pieces of information. * They have described rather than evaluated the information * The conclusion is a general statement rather than an assessment of accumulated information. * There is no evidence of specialist terminology and the response may lack clarity. * The conclusion doesn't answer the question. | | 1 - 3 |
| 2 | * The information shows accurate knowledge and understanding with very few omissions. * The information shows some depth and there is some association between the relevant pieces of information, leading to supported judgements. * Some conclusions have been made but may be unsupported. * Specialist terminology has been used, demonstrating logical reasoning with clarity. | | 4 - 6 |
| 3 | * The information shows accurate knowledge and understanding, omissions will be minor. * The information shows depth and there is association between the relevant pieces of information, leading to supported judgements. * The evaluation is balanced, demonstrating knowledge of competing agreements * Specialist terminology has been used, demonstrating logical reasoning with clarity | | 7 -10 |

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| **Question** | | **Indicative Content** | |
| 10 | | **Answers need to demonstrate the candidate's knowledge and understanding of the material. Marks should be awarded according to the mark scheme given after the answer. It should be noted that using the 'best fit' mark is appropriate rather than being prescriptive about the content; other suitable points should be credited.**   * More people will be receiving pensions compared to those earning wages. {dependency ratio) * Strain on the health service due to older adults needing more medical interventions, hip replacements, opticians and dental care * Higher tax rate to compensate could cause some workers to lack the incentive to work, resulting in a loss of production and profit. * Shortage of people of working age could push wages up, leading to inflation in wage rates. * There may be a reduction in capital investment; if more money is going into pension funds to support our retirement, this will lead to lower rates of economic growth. * People and companies will need to offer more flexible working practices to ensure as many people as possible who can work will work. * More accommodation for the elderly will need to be built; more commodities produced for their care, specialist equipment, etc. * The retirement age will need to be raised.   Conclusion   * Less money will need to be spent on schools and children's services. * Older people contribute more to the community. * Older people will be able to help out with childcare. * Not all old people have poor health. * Elderly people are less likely to commit crimes. * Contribute to the arts by visiting museums, galleries and theatres. * Elderly people on average are more content with their life. | |
| Level | Descriptor | | Mark |
| 1 | * The information has been identified but there may be large sections missing. * The information lacks depth and there is little or no association between the relevant pieces of information. * They have described rather than evaluated the information * The conclusion is a general statement rather than an assessment of accumulated information. * There is no evidence of specialist terminology and the response may lack clarity. * The conclusion doesn't answer the question. | | 1 - 3 |
| 2 | * The information shows accurate knowledge and understanding with very few omissions. * The information shows some depth and there is some association between the relevant pieces of information, leading to supported judgements. * Some conclusions have been made but may be unsupported. * Specialist terminology has been used, demonstrating logical reasoning with clarity. | | 4 - 6 |
| 3 | * The information shows accurate knowledge and understanding, omissions will be minor. * The information shows depth and there is association between the relevant pieces of information, leading to supported judgements. * The evaluation is balanced, demonstrating knowledge of competing agreements * Specialist terminology has been used, demonstrating logical reasoning with clarity | | 7 -9 |
| 4 | * The information is accurate and thorough. Evidence used is relevant and demonstrates a clear understanding and in-depth knowledge; any gaps or omissions are minor. * The response to associations and interrelationships shows depth and understanding and is evidenced with clear, supported judgements. * The discussed evidence is balanced and coherent, and the argument is well developed with a thorough grasp of competing viewpoints, leading to supported conclusions. * The conclusion shows logical reasoning evidenced throughout. Specialist terminology and technical language used consistently and fluent | | 10-12 |

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| **Question** | **Indicative Content** |
| 11 | **Award 1mark for the identification, and 1mark for an extension up to maximum of 3 marks for each one**   * He has good intellectual health (1) and takes an active part in the running of the church finances (1) and has a fantastic memory. (1) * He goes for an early morning swim every day (1) and swims at least three miles a week. (1) His fitness level is good, he has good stamina. (1) * He is able to manage and organise his time, (1) can control a small child (1) and cook lunch for the whole family. (1) * Frank eats a healthy balanced diet,(1) does his own cooking (1) and can multitask. (1) * Regularly meets up with friends (1) and keeps up to date with current affairs (1}. Peer counselling. (1) * Busy active life,(1) a positive mental outlook,(1) and good relations with his family and grandchildren. (1) * He feels that he has achieved all of his life goals (1) and is happy and fulfilled. (1) |