



General Certificate of Education

Health and Social Care 8621/8623

HC03 Health, Illness and Disease

Report on the Examination

June 2009

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HC03: Health, Illness and Disease

As in previous series, moderators were grateful where the work was treasury tagged rather than in plastic wallets which makes access more difficult. There were relatively few instances of candidates submitting incomplete work on this unit and that generally candidates' performance in all three sections continues to improve. It is important for centres to note that AQA sampling procedures should be followed in terms of deadline date for submission and in terms of submission of marks and/or portfolios as appropriate. Candidate record forms should be signed by the candidate and the assessor(s) and the centre declaration sheet included with the work. Moderators were also grateful where centre comments and annotations were provided as they significantly assist in the moderation process. In the vast majority of centres the rank order of candidates as determined by the centres' assessment was upheld.

The Questionnaire

Most candidates included concepts of health and ill-health and the six factors in the items used. The concepts of health however tended to be more explicitly explored compared to the understanding of illness, disease and disorder as concepts of ill-health. A number of centres included completed copies of the questionnaires with the work. Candidates are required only to submit one blank version of the questionnaire on this unit. Completed copies simply add to the bulk of the portfolio and increase postage costs with no credit gained.

The recommended number of respondents for the questionnaire is six to ten and candidates can cover the necessary ground using 30-40 items. Candidates who dealt with considerably more respondents and/or items had that much more data to handle which increases the demand not adding anything to the quality of the work. Most candidates produced a suitable range of questionnaire items but weaker candidates tended to employ predominately closed items.

Collation of data was generally well done, but analyses often lacked depth with candidates often restating the collated data on an item by item or respondent by respondent basis. It was however pleasing to see that more candidates this time explored the interrelationships between the factors by linking together responses from the different factor items in their questionnaires. The display of data in bar and pie charts was appropriate but some candidates inappropriately included line graphs. Weaker candidates often chose to display histograms in a variety of styles which is unnecessary. Where respondents all gave the same response, there is no need or benefit in displaying this in a bar or pie chart.

Evaluations of the questionnaires were strong generally with most candidates showing a sound understanding of the positive and negative features of their questionnaires and how these could be improved.

Report 1 – Immunisation against disease

An ongoing concern in this section and the screening section is the "cut and paste" downloading of information from referenced and unreferenced websites. This plagiarism from secondary sources is inappropriate and does not demonstrate understanding by the candidates concerned. Applying a "cosmetic" editing to the information to produce a part verbatim downloaded account is little better. As a result the focus of the assessment was often lost and candidates used technical terminology beyond their understanding. All candidates are expected to use their own words for their reports. Moderators have been instructed to be vigilant on this issue and to use internet searches to identify sources of such plagiarised material. .

Candidates' understanding of active and passive immunity was again generally sound, but, the explanations by some candidates tended to be at a very basic level only. For more detailed understanding candidates are advised to consider the role of B-lymphocytes, plasma and memory cells in active immunity.

The majority of candidates gave appropriate details on the diseases listed in the specification, but there were instances however of candidates including information on other diseases not named in the specification and therefore not required by the assessment e.g. hepatitis B, polio, yellow fever etc. No credit can be gained by including this information.

The focus of the evaluation of immunisation versus non-immunisation should be maintained and not re-translated into the advantages and disadvantages of immunisation which is a little different.

Report 2 – Value of Screening

Many candidates presented too much information in this section, much of which tended to not match the assessment requirements i.e. how the test is performed, what is looked for re the named conditions and any underlying "science" explained. This unnecessary information suggested an overreliance on website sources of information.

Candidates are not required to cover both Amniocentesis and Chorionic Villus Sampling in the ante-natal section. Candidates are however required to cover the use of one of these two tests for the disorders named in the specification, i.e. muscular dystrophy, haemophilia and sickle cell disorders. These were often confused with biochemical and/or blood tests for these disorders. Information on tests and disorders not named in the specification are not required and can gain no credit e.g. AGPAR, Ultrasound, Nuchal fold testing, Down's Syndrome, Tay Sachs and Edwards syndrome.

The more able candidates tended to produce clear yet detailed reports of how the screening tests are performed and the results interpreted for the named disorders. The work of weaker candidates was sometimes vague and/or incomplete often providing little relevant information about the tests. These candidates frequently drifted into discussion of the disorders rather than the tests. Irrelevant information included statistical evidence on the incidence of the disorder and/or treatments. This again suggested that the candidates were relying on downloaded information rather than demonstrating their understanding of the test techniques to meet the assessment requirements.

Grade boundaries

Grade boundaries and cumulative percentage grades are available on the AQA website at www.aqa.org.uk/over/stat.html