
A-LEVEL

HEALTH AND SOCIAL CARE

HSC05 Learning and Development
Mark scheme

2820

June 2014

Version/Stage: 1.0 Final

Mark schemes are prepared by the Lead Assessment Writer and considered, together with the relevant questions, by a panel of subject teachers. This mark scheme includes any amendments made at the standardisation events which all associates participate in and is the scheme which was used by them in this examination. The standardisation process ensures that the mark scheme covers the students' responses to questions and that every associate understands and applies it in the same correct way. As preparation for standardisation each associate analyses a number of students' scripts: alternative answers not already covered by the mark scheme are discussed and legislated for. If, after the standardisation process, associates encounter unusual answers which have not been raised they are required to refer these to the Lead Assessment Writer.

It must be stressed that a mark scheme is a working document, in many cases further developed and expanded on the basis of students' reactions to a particular paper. Assumptions about future mark schemes on the basis of one year's document should be avoided; whilst the guiding principles of assessment remain constant, details will change, depending on the content of a particular examination paper.

Further copies of this Mark Scheme are available from aqa.org.uk

1	a	<p>Any one from:</p> <ul style="list-style-type: none"> • Bereavement/death (1) • Moving home/going into care (1) 	1
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1	b	<p>3 marks for each of the two impacts described.</p> <p>Physical</p> <ul style="list-style-type: none"> • disturbed eating pattern (1) • disturbed sleeping patterns (1) • lack of exercise (1) <p>Intellectual</p> <ul style="list-style-type: none"> • less access to education (1) • skills acquisition (1) • difficulty in concentrating (1) • lack of stimulation (1) <p>Emotional</p> <ul style="list-style-type: none"> • anxiety(1) • stress(1) • depression (1) • unhappiness at situation (1) • angry at herself (1) • low self- esteem/self- worth (1) <p>Social</p> <ul style="list-style-type: none"> • loss of social opportunities (1) • restricted interactions(1) • isolation due to lack of contact with friends/family (1) • increased or decreased social support (1) • opportunity for new friends/social contact (1) 	6	<p>Accept the first two impacts described.</p> <p>Candidates should describe an example for each of the two PIESF. Full marks cannot be gained for describing one example for one impact.</p> <p>Do not allow mark for naming PIESF.</p>
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		<p>Financial</p> <ul style="list-style-type: none"> • reduced income as may only have prison job (1) • positively gaining a qualification or work based skill while in prison may improve job prospects (1) • difficult to find employment due to criminal record (1) • loss of benefits (1) <p style="text-align: right;">3+3 = max 6</p>		
1	c	<p>Likely answers:</p> <ul style="list-style-type: none"> • Daily hangover/headache • Binge drinking and/or drinking more than the recommended intake on a regular basis can also cause long-term damage to the body's internal organs • Liver damage/cirrhosis of liver which is irreversible scarring of the liver • Kidney damage • Stomach ulcers and gastrointestinal complications • Fertility problems • Weight gain/loss • Disturbed/disrupted sleep patterns • Depletion of certain vitamins and minerals • Increased blood pressure • Risk of cardiovascular disease/CHD • Depression/Anxiety/Stress • Risk of heart attack • Increased risk of promiscuity • Increased risk of accident or victim of crime • Risk of becoming deviant • Increased risk of putting herself at risk of injury/harm • Increased aggression which could lead to antisocial behaviour • Increased risk of committing a crime • Affect relationships with others • May struggle to maintain a job 	5	

			<p>Mark Bands</p> <p>0 Marks Nothing worthy of credit.</p> <p>1-2 Marks Discussion of risks is limited showing some basic relevant knowledge which is very brief and fails to tackle the question/ or has irrelevant details/inaccuracies.</p> <p>3-4 Marks Discussion of risks is in some detail and will contain some relevant information. There may be simple risks such as hangover, liver damage.</p> <p>5 Marks Discussion will be detailed and accurate covering at least 5 of the risks and showing an understanding of the question.</p>		
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1	d	<p>Any three from the following:</p> <ul style="list-style-type: none"> • School – truancy/attendance/dropping out (1) • Work – not engaging with employment /'NEETS'/ unable to get a job due to prison sentences (1) • Antisocial behaviour – theft (1) • Death of mother (1) • Going into care (1) <p style="text-align: right;">max 3</p>	3	
1	e	<p>Ref to:</p> <ul style="list-style-type: none"> • Kelly's drinking may impact her health and well-being with long-term damage to the liver (1) • Kelly's drinking could lead to weight gain/obesity (1) • The death of her mother may result in Kelly suffering from depression and this could affect her health and well-being (1) • Kelly may feel isolated/lonely (1) • Not engaging with employment /'NEETS'(1) • Prison may be a positive opportunity to develop/gain new skills (1) • She may also find it difficult to get a job due to lack of qualifications as a result of not attending school (1) • Her criminal record may affect job opportunities (1) • Kelly's repeated prison sentences may affect her opportunities to develop skills (1) • Kelly may struggle to find a home due to her circumstances (1) • Going in to care might have affected Kelly emotionally (1) • Kelly may struggle to build relationships due to her prison stays and having no permanent home (1) <p style="text-align: right;">max 5</p>	5	

2	a	Childhood (1)	1	Accept early childhood
2	b	<p>Answers should include:</p> <ul style="list-style-type: none"> • initial discussions on the work of the chosen theorist • actual examples of how staff could apply the theory in the school. <p>Pavlov: Learning by association</p> <ul style="list-style-type: none"> • Candidates will discuss classical conditioning and its role in behaviour. • Pairing a natural response with an artificial one so that the two become associated with one another. <p>Skinner: Learning by rewards and punishment</p> <ul style="list-style-type: none"> • Behaviour is shaped by punishment and rewards • Candidates will discuss operant conditioning – rewarding good/positive behaviour. • Poor behaviour will not be rewarded e.g. with attention • Consequences of actions. • Rewards must be immediate if the behaviour is to change over time • We are born with a blank slate <p>Candidates must be able to evaluate the theory in terms of teaching a child with special needs.</p> <ul style="list-style-type: none"> • Staff need to ignore poor behaviour to extinguish it. • Louis might have learnt his behaviour by being rewarded with/getting attention from his peers/parents. • The staff will need to break down tasks into small steps in order to help Louis' learning. • Reward each step – this could be a marble and if he collects a certain amount 	10	Only award marks for the work of one theorist

			<p>he will be able extra play time etc. Accept similar examples, e.g. token economy.</p> <ul style="list-style-type: none"> • Use star charts to reward Louis for keeping to the rules. • Withdraw privileges if he does not keep to rules. • Staff must reinforce ‘desirable behaviour’ with Louis so if he does something that could be perceived as disruptive in the class, rather than reacting they need to reinforce alternative behaviour. He may get bored and staff need to be observant to step in. • Disruptive behaviour is not ‘rewarded’ with attention. This is something which staff must be especially vigilant about. <p>Mark Bands</p> <p>0 Marks No response worthy of credit</p> <p>1-3 Marks Positive and/or negative applications of the theory have been provided but these are either not specific or minimal. Candidate may, for example, evaluate the role of the teacher/teaching assistant and their role in the classroom in terms of behaviour generally. The candidate does not address how staff will work with Louis in the classroom.</p> <p>4-6 Marks Positive and/or negative applications of the theory to the reception classroom and teacher have been provided. At this level, most material will be relevant and answers provided will give relevant ways in which the staff could work with Louis.</p> <p>7-10 Marks Evaluations and applications are detailed and very relevant to Louis. Answers show a thorough understanding of their chosen theorist when discussing the ways the staff could work with Louis. Several strategies are given.</p>		
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2	c	<p>Ref to:</p> <ul style="list-style-type: none"> • May find it difficult to access the curriculum so intellectual development may be impaired so will face academic failure • Social skill problems so may feel isolated/upset/frustrated • Strained parent/child relationships as parent gets stressed with Louis behaviour • Low self-esteem – rejection by peers/difficulty making friends • Poor concentration on any task/short attention span • Easily distracted in class • High levels of activity with excessive motor restlessness – other children struggle to interact • Reliance on medication/side effects • May be aggressive/unaware of own strength/disruptive • Tired/fatigued due to lack of sleep/difficulty sleeping • May receive extra support in class for a teaching assistant/AW <p style="text-align: right;">max 5</p>	5	
2	d	<p>Accept any four of the following:</p> <ul style="list-style-type: none"> • Eric Lenneberg's (1967) theory suggests that there is a critical period in a child's life during which they are able to acquire language (1) • Lenneberg's theory claims that language acquisition is linked to maturation (1) • Lenneberg proposes that the human brain is designed to acquire language at a certain time (1) • Lenneberg suggested that there is a cut-off age of around 12 or 13 years and that once this period has passed language learning slowed down or in effect was no longer possible (1) • The immense language learning ability, which accompanies us through our early years, does seem to be shut down by some kind of genetic programming around the time of puberty (1) <p style="text-align: right;">Max 4</p>	4	

3	a	<p>Suitable theorists are either Latane or Bandura Candidates may include reference to:</p> <p>Bandura (candidates may <i>illustrate</i> points with reference to a study)</p> <ul style="list-style-type: none"> • Observational learning • Deterministic view of behaviour • The child pays attention to what the 'model' is doing • High self-efficacy • Some models are more influential than others, parents, siblings, teachers • The child encodes AW /forms a memory of the behaviour • The child/observer later retrieves that information/memory • And imitates it • Retrieval/memory ideas contribute to this theory sometimes being referred to as cognitive attribution • Whether the child copies the behaviour can be due to motivation • This motivation can be due to factors such as reinforcement AW • Reinforcement makes imitation more likely • Especially if the observer/child values the reinforcer the model achieves • Punishment – imitation is less likely • Vicarious reinforcement and punishment • Direct/indirect reinforcement • Believed in the 'nurture' side of behaviour – all born with a blank slate and therefore we can control our own destiny/freedom • Low self-esteem can lead to greater imitation • Bandura used Bobo dolls to apply these ideas to the study of anti-social behaviour <p>Latane</p> <ul style="list-style-type: none"> • The presence of others affects behaviour – more likely to wait for guidance, to follow others • Deterministic view of behaviour 	8	
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			<ul style="list-style-type: none"> • deferred/shared responsibility – ‘diffusion of responsibility’ effect • ‘bystander effect’ – the more people present the fewer will come forward to help • Social impact – leading to conformity and obedience • Individuals put in less effort when in a group • Feeling less responsible • May reference Kitty Genovese case <p>Mark Bands</p> <p>0 Marks No response worthy of credit.</p> <p>1-3 Marks Candidates present a limited description of one relevant theorist Latane or Bandura. For example the candidate identifies learning through observation and the importance of role models or that when an individual is in a group; they are less likely to feel responsibility. The student may indiscriminately include irrelevant information on, for example, the Bobo doll study or the Kitty Genovese case.</p> <p>4-6 Marks Candidates in this band provide a reasonable description of a relevant theory. For example in describing Bandura’s theory, candidates may engage more with the notion of role models and the significance of this to the theory. They may also consider that in social learning theory; not all learning can be explained through direct reinforcement. With Latane, they may explain in some detail the notion of the diffusion of responsibility and what forms this might take.</p> <p>7-8 Marks Candidates will present a clear and accurate description of the chosen theory. The description is detailed and makes use of the key components of vicarious reinforcement, attention and imitation (Bandura) and bystander effects, determinism, deferred responsibility etc. (Latane).</p>		
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3	b	<p>Likely answers will be the application of the following to the home, staff and clients:</p> <p>Bandura:</p> <ul style="list-style-type: none"> • Social learning theory – the staff and clients could unfortunately learn antisocial behaviour by observing and copying antisocial behaviour in others. • Refer to ‘inappropriate workplace norms. • Examples of recent care home workers and their behaviour may be included here. • Staff need to work closely with any clients who are behaving in an antisocial way and create techniques to deal with such behaviour in keeping with Bandura’s approach. • Staff may have training in appropriate role modelling. • For example, considering who the influential models are, recognising appropriate reward systems. • Role models/modelling – people learn from what they see and hear and people often imitate or copy others. The residents may copy each other and the staff need to work on ensuring the clients behave/act in the correct manner. • Staff must deal with each other and also clients in an appropriate manner. • Staff will need to observe behaviour of the clients. • Staff will identify those that may need support. • Staff need to all be aware of how they work and interact with the clients. <p>Latane:</p> <ul style="list-style-type: none"> • Examples of inappropriate behaviour in the setting – examples include inappropriate behaviours between clients, between practitioners, and between practitioners and clients (and vice versa) • Why it might be difficult for clients concerned about this to ‘speak up’ – diffusion of responsibility • Clients and staff (particularly less experienced) will wait for the guidance of others (e.g. residents, senior staff) before deciding on what behaviours to exhibit • Conformity due to social impact – imitation of behaviours 	12	Do not award marks for simply restating the theory from 3a without application to the staff and residents
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			<ul style="list-style-type: none"> • Modelling good behaviour – what this would look like in the setting • Responsibility of staff, especially if working in a large group <p>Students who deploy appropriate knowledge and understanding and display Higher QWC skills should be rewarded at the top end of this mark band. Conversely, those who display some confusion and weakness in QWC supporting knowledge and understanding should be placed at the bottom end of this mark band.</p> <p>Mark Bands</p> <p>0 Marks No response worthy of credit.</p> <p>1-4 Marks Positive and/or negative applications of the theory have been provided but these are either not specific or minimal. The candidates may focus on the care staff being role models instead of linking this to the behaviour of the residents.</p> <p>5-8 Marks Positive and /or negative applications of the theory to the residential home have been provided. There will be relevant examples of how the care staff can ensure behaviour of the residents is appropriate for all concerned.</p> <p>9-12 Marks Evaluations and applications are detailed and very relevant to the residents at the home. Answers make good use of all the key components of the theory giving clear steps as how the staff could use them in supporting the residents of the home. They should show how strategies may be needed for the different residents.</p>		
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4	a	1 mark for each of the three strategies named plus up to 2 marks for a brief explanation of how each named strategy is used by practitioners to support clients.		9	Accept other examples if appropriate
		Strategy – 1 mark for each of the three named	How used by practitioners – max 2 marks for appropriate explanation		
		Drugs (1)	Doctors may prescribe anti-anxiety drugs to treat anxiety and stress or to relieve pain (2)		
		Meditation (1)	May be used in settings to help people relax/focus on something else (2)		
		Relaxation (1)	Breathing exercises to reduce stress for students taking exams (2)		
		Sensory rooms (1)	Personalised sessions for people with specific learning disabilities (2)		
		Person centred therapy (1)	Individuals may benefit from undergoing therapy for a range of problems such as bereavement without being judged. The clients take full responsibility for making any changes (2)		
		Encounter Groups (1)	A group of people who meet in order to develop self-awareness and mutual understanding by openly expressing their feelings, by confrontation, physical contact. (2)		
		Behaviour therapy (1)	A child may receive behaviour therapy as a result of intervention from school (2)		
		Behaviour modification (1)	Therapy to work on changing behaviour to match situations often used with ADHD children. Positive reinforcement (2)		

			Token Economy (1)	Rewarding a child in class with marbles/team points/stars (2)			
			Modelling (1)	Teacher shows a child how to write some letters and the child copies underneath/ models behaviour (2)			
			Social Skills training (1)	Schools often have social skills sessions when children are in small groups working with each other (2)			
			Family therapy (1)	Families may be offered family therapy to deal with a crisis that has occurred in the family or as a result of an individual having issues (2)			
			Simple and/or complex sensory motor, verbal and imaginative play with peers and adults (1)	Play therapy sessions will encourage children to develop language and other skills (2)			
			Cognitive behavioural therapy (1)	Therapy sessions where the therapist will work with the clients to try to get them to change the way they think about things – reverse what they have learnt – used with OCD/phobias (2)			
			3+3+3 = max 9				

4	b	<p>Answers may include reference to: Children must be supported in working through their emotional or psychological crises in order to develop a sense of emotional wellbeing and mental health.</p> <p>Freud:</p> <ul style="list-style-type: none"> • Emphasised the importance of early experience. • He saw development in stages but the focus of his theory was the role of the unconscious • Freud focussed on development occurring as we struggle to balance the demands of the id (the instinctive, pleasure-seeking part of our personality) with those of the superego (the structure within our personality which carries our conscience, derived from the values of our parents and the wider society within which we live). The third part of the personality, the ego, attempts to maintain the balance by, for example, preventing us from acting anti-socially and helping us to find socially acceptable ways to satisfy the id. • Freud proposed five stages of development – oral, anal, phallic, latent and genital stages. • Use of defence mechanisms • Fixation • Freud’s theory drew attention to the importance of early experience and the unconscious in relation to the development of personality. • Freud viewed the development of girls and women from a male perspective. • Freud’s theory is considered sexist • Theory is old fashioned/not scientific • Theory cannot be tested • His theories are based on methods such as dream analysis and free association. 	11	
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		<p>Erikson:</p> <ul style="list-style-type: none"> • Proposed three systems which made up the development of the individual – somatic, eg and societal systems • Erikson felt there were eight stages of psychosocial development through which all humans pass, each of which has a central dilemma or crisis. • Adolescents will pass through the identity vs identity diffusion stage where adolescents who fail to explore their own identity because of the demands of parents or others may remain confused. • Erikson stimulated interest in self-identity and adolescence. <p>Mark Bands</p> <p>0 Marks No response worthy of credit.</p> <p>1-4 Marks Candidates will provide a limited attempt to discuss some aspects of the theory. The answer may be a list of the main points demonstrating little understanding of the focus of the question, human behaviour in adolescence.</p> <p>5-8 Marks Candidates will start to develop their discussions of some aspects of the theory demonstrating how the work of the theory is applied to human behaviour in adolescence. They will provide some relevant points.</p> <p>9-11 Marks A detailed discussion including the five stages of development will take place with the positive and/or negatives of the theory in explaining human behaviour as an adolescent. The answer will be logically sequenced and correct terminology will be used. Good relevant examples will be evident.</p>		
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