

Mark Scheme (Results)

January 2013

GCE Health and Social Care (6949)  
Paper 01 Understanding Human  
Behaviour

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## General Marking Guidance

- All candidates must receive the same treatment. Examiners must mark the first candidate in exactly the same way as they mark the last.
- Mark schemes should be applied positively. Candidates must be rewarded for what they have shown they can do rather than penalised for omissions.
- Examiners should mark according to the mark scheme not according to their perception of where the grade boundaries may lie.
- There is no ceiling on achievement. All marks on the mark scheme should be used appropriately.
- All the marks on the mark scheme are designed to be awarded. Examiners should always award full marks if deserved, i.e. if the answer matches the mark scheme. Examiners should also be prepared to award zero marks if the candidate's response is not worthy of credit according to the mark scheme.
- Where some judgement is required, mark schemes will provide the principles by which marks will be awarded and exemplification may be limited.
- When examiners are in doubt regarding the application of the mark scheme to a candidate's response, the team leader must be consulted.
- Crossed out work should be marked UNLESS the candidate has replaced it with an alternative response.
- Mark schemes will indicate within the table where, and which strands of QWC, are being assessed. The strands are as follows:
  - i) ensure that text is legible and that spelling, punctuation and grammar are accurate so that meaning is clear*
  - ii) select and use a form and style of writing appropriate to purpose and to complex subject matter*
  - iii) organise information clearly and coherently, using specialist vocabulary when appropriate.*

Question Number	Answer	Mark
<b>1(a)</b>	<b>Two</b> from: <ul style="list-style-type: none"> <li>• He doesn't get up early any more;</li> <li>• He appears to have no energy (to play sport as often as he did);</li> <li>• He spends much time alone in his bedroom;</li> <li>• He stays out late with older boys;</li> </ul>	<b>(2)</b>

Question Number	Indicative content	
<b>1(b)(i)</b>	<ul style="list-style-type: none"> <li>• Idea of learning from others/copying;</li> <li>• role models;</li> <li>• Clear reference to case study, i.e. taking drugs;</li> <li>• Idea of peer pressure;</li> <li>• wanting to 'fit in'/feel accepted/feel rewarded;</li> </ul>	
Level	Mark	Descriptor
	<b>0</b>	No rewardable material
1	<b>1–2</b>	Candidate has a basic understanding of social learning. Answer is not linked to case study.
2	<b>3–4</b>	Candidate is able to demonstrate understanding of social learning. At the top end the answer is illustrated with examples from the case study.

Question Number	Indicative content	
<b>1(b)(ii)</b>	<b>Positive reinforcement:</b> <ul style="list-style-type: none"> <li>• Idea of reward;</li> <li>• For good behaviour;</li> <li>• Behaviour is likely to be repeated;</li> </ul> <b>Negative reinforcement:</b> <ul style="list-style-type: none"> <li>• Idea of reward;</li> <li>• After something unpleasant stops happening;</li> <li>• Behaviour is likely to be repeated;</li> </ul>	
Level	Mark	Descriptor
	<b>0</b>	No rewardable material
1	<b>1-3</b>	Candidates will make a few statements about either positive or negative reinforcement. There may not be any clear link to the case study. Or, candidates may make a link to the case study, but only referring to negative reinforcement.
2	<b>4-6</b>	At the bottom end of the range, candidates are likely to make reference to both positive and negative reinforcement, but not make clear links to the case study. At the top end of the range, there should be a clear understanding of both positive and negative reinforcement, with a clear explanation as to why the case study is an example of negative, rather than positive reinforcement.

Question Number		Indicative content
1(c)	QWC	<p><b>Advantages of a behavioural approach with someone who takes drugs:</b></p> <ul style="list-style-type: none"> <li>• easy to put into practice</li> <li>• simple idea to understand</li> <li>• relatively quick results</li> <li>• used to shape behaviour</li> <li>• based on principle that reinforced behaviour will be repeated/non-reinforced behaviour will not</li> <li>• the idea that it is objective – can be measured.</li> </ul> <p><b>Disadvantages of a behavioural approach with someone who takes drugs</b></p> <ul style="list-style-type: none"> <li>• not always easy to get people who take drugs to change their mind;</li> <li>• drug users may rebel against authority/being told what to do;</li> <li>• does not consider what people think/feel</li> <li>• may be seen as punishment</li> <li>• could be seen as de-humanising – reducing behaviour to simply responses to things that give/reduce pleasure.</li> </ul>
Level	Mark	Descriptor
	<b>0</b>	No rewardable material
1	<b>1-3</b>	Candidates will make a few statements about advantages or disadvantages of a behavioural approach, but they may not relate specifically to people who take drugs. Explanations will be missing. SPG is likely to be limited.
2	<b>4-6</b>	At the bottom end of the range, candidates should give advantages and disadvantages with some explanation, but these may be unclear. At the top end of the range, there should be some good consideration of advantages and disadvantages, and some evidence of basic discussion. There may be some mistakes with SPG.
3	<b>7-8</b>	Level 3 response Candidates should give clear advantages and disadvantages accompanied by explanations. The material should all be relevant to people who take drugs. There will be clear evidence of discussion skills. There should be few mistakes with SPG.

Question Number		Indicative content
1(d)  QWC		<p><b>Advantages of a person-centred approach to manage behaviour:</b></p> <ul style="list-style-type: none"> <li>• counsellor is not intrusive – non-directive</li> <li>• thus client is given the opportunity to talk</li> <li>• easier to talk to someone who is not close</li> <li>• counsellor meets client as an equal</li> <li>• counsellor does not ‘show’ expertise</li> <li>• counsellor is not judgemental</li> <li>• thus client does not feel threatened</li> <li>• promotes care value base (or descriptions given)</li> <li>• ensures that clients feel they are considered.</li> </ul> <p><b>Disadvantages of a person-centred approach to manage behaviour:</b></p> <ul style="list-style-type: none"> <li>• requires client to be motivated</li> <li>• may not be motivated as they are depressed</li> <li>• may not believe that they have a problem</li> <li>• requires the client to be able to communicate</li> <li>• client may expect advice</li> <li>• they may not feel they are being helped</li> <li>• approaches key terms are difficult to understand.</li> </ul>
Level	Mark	Descriptor
	<b>0</b>	No rewardable material
1	<b>1-3</b>	Candidates identify some advantages <b>or</b> disadvantages of a humanistic/person centred approach but these are not linked to the circumstances of the people in the case study/someone who takes drugs. Conversely, there may just be a description of the theory and a link to the behaviour, but no advantages/disadvantages. SPG may be limited.
2	<b>4-7</b>	Candidates identify advantages <b>and</b> disadvantages of the approach. They may have some idea of the principles behind a humanistic/person centred approach, but they may not be clear. Credit should be given to candidates who make good links to someone who takes drugs but who may not fully consider the advantages or disadvantages of the approach. Candidates at the higher end of the mark band make links to the case study and consider advantages and disadvantages of the approach. There may be some mistakes with SPG.
3	<b>8-10</b>	Candidates give relevant advantages and disadvantages of the approach and these are linked to the behaviour of someone who takes drugs. It should be very clear that the principles of the approach are understood. There should be a conclusion present, with candidates weighing up arguments for and against. There should be few mistakes with SPG.

Question Number	Answer	Mark
2(a)(i)	<p><b>Partial explanation (1-2 marks)</b> Candidates may give a reason, such as being frightened is likely to be often as it is the parents/carers the child is frightened of. They are unlikely to explain why this should result in mental health problems developing.</p> <p><b>Full explanation (3-4 marks)</b> In addition to giving a reason, candidates should explain why this should result in the development of mental health problems. To gain full marks, the links should be clear. e.g. constantly being frightened because of the fear of a family member means that a person may feel that they can trust no one and that they have a distorted view that everyone is out to harm them</p>	(4)

Question Number	Answer	Mark
2(a)(ii)	<p><b>Partial explanation (1-2 marks)</b> Candidates may give a reason, such as missing someone close or feeling empty or lonely. They are unlikely to explain why this should result in mental health problems developing.</p> <p><b>Full explanation (3-4 marks)</b> In addition to giving a reason, candidates should explain why this should result in the development of mental health problems. To gain full marks, the links should be clear. e.g. the idea of losing someone very close may mean that a person becomes withdrawn as they feel that no one may take their place. They may not be able to form close relationships with anyone else and feel that their life is not worth living, showing signs of distorted thinking</p>	(4)

Question Number		Indicative content
<b>2(b)</b>		<p><b>Self -concept</b></p> <ul style="list-style-type: none"> <li>• how a person sees themselves</li> <li>• positive self-concept associated with being outgoing/feeling good</li> <li>• negative self-concept associated with looking inward/being self critical/feeling worthless</li> </ul> <p><b>Mental health problems</b></p> <ul style="list-style-type: none"> <li>• Lack of coping (with everyday life)</li> <li>• Withdrawal owtte</li> <li>• Anxious (a lot of the time)</li> </ul> <p><b>Links to self-concept</b></p> <ul style="list-style-type: none"> <li>• negative self-concept may lead to mental health problems/</li> <li>• Reasons why e.g. not want to socialise and become withdrawn</li> <li>• Mental health problems may lead to negative self concept</li> </ul>
Level	Mark	Descriptor
	<b>0</b>	No rewardable material
1	<b>1-3</b>	Candidates likely to make links of negative concept to mental health problems. They may also talk about the converse.
2	<b>4-6</b>	In addition to bark band 1, at the lower end candidates should explain what is meant by self-concept <b>or</b> mental health issues. At the upper end of the mark band, they should show a good understanding of both self-concept <b>and</b> mental health issues.



Question Number		Indicative content
<b>2(c)</b>		e.g. <ul style="list-style-type: none"> <li>• consultant psychiatrist barely changes so does not support the statement well;</li> <li>• community psychiatric nurse rises from 3.4 to 6.7 so does support the statement;</li> <li>• psychologist rises slightly, so supports the statement to some extent;</li> <li>• psychotherapist rises from 0.1 to 0.3/steadily so support the statement;</li> <li>• social worker rises a lot from 0.4 to 1.4 so supports the statement;</li> <li>• overall, the statement is supported by more professional than others/ statement is supported well by community psychiatric nurses and social workers best;</li> </ul>
Level	Mark	Descriptor
	<b>0</b>	No rewardable material
1	<b>1-3</b>	Candidates are likely to make reference to between 1 and 3 pieces of evidence. Answers are unlikely to be backed up with quantitative data.
2	<b>4-6</b>	Candidates should make reference to quantitative material and also to at least 4 pieces of evidence, saying whether each supports the statement or not. For full marks, there should be an overall conclusion as to whether the statement is true or not.

Question Number		Indicative content
2(d)  QWC		<p><b>For example:</b></p> <p><b>Advantages</b></p> <ul style="list-style-type: none"> <li>• Family Therapy could address any problems the person with mental health problems has in their relationship with other family members;</li> <li>• Everyone in the family could be involved;</li> <li>• It could lead to a new and supportive relationship between the person with mental health problems and the rest of the family;</li> <li>• Would help other family members have a greater understanding of the person with mental health problems;</li> <li>• The family may be able to help the person with mental health problems</li> </ul> <p><b>Disadvantages</b></p> <ul style="list-style-type: none"> <li>• Family Therapy may take control away from the person with mental health problems;</li> <li>• The person with mental health problems will need an 'expert' to help him;</li> <li>• There may be difficulties in accessing appointments – waiting lists, travel problems, work commitments;</li> <li>• May be labelled as a 'problem' family.</li> </ul>
Level	Mark	Descriptor
	<b>0</b>	No rewardable material
1	<b>1-3</b>	Candidate identifies some advantages <b>or</b> disadvantages of Family Therapy but these are not linked to the case study/depression. eg <ul style="list-style-type: none"> <li>• Family Therapy allows the whole family to be involved</li> <li>• Family Therapy takes a lot of time to be effective.</li> </ul> SPG may be limited.
2	<b>4-7</b>	Candidate can identify some advantages <b>and</b> disadvantages of Family Therapy. At the higher end of the mark band candidate makes some links to someone with mental health problems. Credit should be given to candidates who make good links but who may not fully consider the advantages and disadvantages. There may be some mistakes with SPG.
3	<b>8-10</b>	Advantages and disadvantages of approach discussed in some detail and these are clearly linked to someone with mental health problems. At the top end candidates need to come to a conclusion, weighing up the arguments presented. There should be few mistakes with SPG.

Question Number		Indicative content
<b>3(a)(i)</b>		<ul style="list-style-type: none"> <li>• Respect allows people dignity;</li> <li>• Makes them feel wanted or valued;</li> <li>• Improves their self-esteem;</li> <li>• example includes referring to them appropriately, such as My or Mrs;</li> <li>• or by their first name only if they agree;</li> </ul>
Level	Mark	Descriptor
	<b>0</b>	No rewardable material
1	<b>1-2</b>	Candidate has a basic understanding of how respect may improve the quality of life for service users, but they may not give an example.
2	<b>3-4</b>	Candidate is able to demonstrate a good understanding of how respect may improve the quality of life for service users. The answer should be illustrated with at least one good example.

Question Number		Indicative content
<b>3(a)(ii)</b>		<p>e.g.</p> <ul style="list-style-type: none"> <li>• Empowerment is giving power to the service user;</li> <li>• Allowing them to make choices;</li> <li>• Makes them feel in charge of their lives;</li> <li>• Improves their sense of worth, etc.;</li> <li>• example includes allowing them to choose which clothes they will wear;</li> <li>• or giving them choices about what activity they do or where they will sit, etc.;</li> </ul>
Level	Mark	Descriptor
	<b>0</b>	No rewardable material
1	<b>1-2</b>	Candidate has a basic understanding of how empowerment may improve the quality of life for service users, but they may not give an example.
2	<b>3-4</b>	Candidate is able to demonstrate a good understanding of how empowerment may improve the quality of life for service users. The answer should be illustrated with at least one good example.

Question Number		Indicative content
<b>3(b)(i)</b>		<ul style="list-style-type: none"> <li>• Zanaib has irrational beliefs;</li> <li>• Not based on firm evidence;</li> <li>• Zanaib believes that the service users do not like her because they do not speak to her;</li> <li>• Despite the fact they have dementia/do not know who or where they are;</li> </ul>
Level	Mark	Descriptor
	<b>0</b>	No rewardable material
1	<b>1-2</b>	Candidates may describe dysfunctional beliefs but not give a relevant clear example. Conversely, they relate to the case study, but not make it clear they understand the concept of dysfunctional beliefs clearly.
2	<b>3-4</b>	Candidates will make it clear that they understand the concept of dysfunctional beliefs. They will also relate to the case study.

Question Number		Indicative content
3(b)(ii)		<p><b>Principles of a cognitive approach:</b></p> <ul style="list-style-type: none"> <li>• How we feel and how we behave are determined by what we think and what we believe;</li> <li>• Emotional problems are the result of negative and distorted thinking – arising out of dysfunctional beliefs;</li> <li>• If we can change this negative and distorted thinking, we will help people to overcome their emotional and behavioural problems;</li> </ul> <p><b>Using approach with Zainab:</b></p> <ul style="list-style-type: none"> <li>• Zainab potentially has the ability to understand;</li> <li>• She should be able to help herself when she understands;</li> <li>• She should be able to express her feelings;</li> <li>• She is likely to want to make a success for her new job;</li> </ul> <p><b>Using approach with people who have dementia:</b></p> <ul style="list-style-type: none"> <li>• It is a simple approach, should they have any ability to understand;</li> <li>• It is non-threatening;</li> <li>• It is structured;</li> <li>• They are unlikely to understand;</li> <li>• They are unlikely to remember what was said to them;</li> <li>• They are likely to be unaware that there is a problem;</li> </ul>
Level	Mark	Descriptor
	<b>0</b>	No rewardable material
1	<b>1-3</b>	Candidates will make a few basic statements about cognitive (cognitive-behavioural therapy) but will not distinguish clearly between Zanaib and people who have dementia. Advantages/disadvantages are likely to be missing. SPG may be limited.
2	<b>4-6</b>	At the bottom end of the range, candidates should begin to give some idea of either advantages of the approach for Zanaib or disadvantages for people with dementia. At the top end, the details of at least the approach used with one should be comprehensive. There may be some mistakes with SPG.
3	<b>7-8</b>	Candidates should give clear advantages for Zainab <b>and</b> clear disadvantages for people who have dementia. The material should all be relevant. There will be clear evidence of comparison. There should be few mistakes with SPG.

Question Number		Indicative content
Q3(b) (iii)	QWC	<p><b>Principles of a psychodynamic approach:</b></p> <ul style="list-style-type: none"> <li>• People may not understand why they have dysfunctional beliefs;</li> <li>• Could be something to do with Zanaib’s early childhood;</li> <li>• Psychotherapist uses interpretation / analysis of dreams / free association to understand his unconscious thoughts;</li> <li>• Provides people like Zanaib with insight to allow them to change their behaviour.</li> </ul> <p><b>Advantages of psychodynamic approach:</b></p> <ul style="list-style-type: none"> <li>• Approach relevant to the problem e.g. something to do with early childhood;</li> <li>• May uncover unconscious reasons for not being able to settle in a new job/have dysfunctional beliefs;</li> <li>• Deals with underlying causes, not surface behaviour;</li> </ul> <p><b>Disadvantages of psychodynamic approach:</b></p> <ul style="list-style-type: none"> <li>• Highly specialised approach/needs qualified psychotherapist;</li> <li>• People like Zanaib must want to change their behaviour;</li> <li>• They must be able to discuss their feelings &amp; behaviour;</li> <li>• May be long and expensive;</li> <li>• Underlying ideas are complex and difficult for others to understand;</li> <li>• Method has no scientific basis</li> </ul>
Level	Mark	Descriptor
	<b>0</b>	No rewardable material
1	<b>1-3</b>	Candidates identify some advantages or disadvantages of the approach but these are not linked to someone giving up smoking. SPG may be limited.
2	<b>4-7</b>	Candidates identify advantages and disadvantages of the approach. They may have some idea of the principles behind a psychodynamic approach, but they may not be clear. Candidates at the higher end of the mark band make some links to someone who smokes. Credit should be given to candidates who make good links but who may not fully consider the advantages or disadvantages of the approach. There may be some mistakes with SPG.
3	<b>8-10</b>	Candidates give relevant advantages and disadvantages of the approach and these are linked to mental health. It should be very clear that the principles of the approach are understood. There should be an overall conclusion. There should be few mistakes with SPG.

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