



General Certificate of Education

Sociology 5191

**SCY1 Families and Households; Health;
Mass Media**

Mark Scheme

2007 examination - June series

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

It must be stressed that a mark scheme is a working document, in many cases further developed and expanded on the basis of candidates' 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.

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QUALITY OF WRITTEN COMMUNICATION

Where candidates are required to produce extended written material in English, the scheme of assessment must make specific reference to the assessment of the quality of written communication. Candidates must be required to:

- select and use a form and style of writing appropriate to purpose and complex subject matter;
- organise relevant information clearly and coherently, using specialist vocabulary when appropriate;
- ensure text is legible, and spelling, grammar and punctuation are accurate, so that meaning is clear.

The assessment criteria for quality of written communication apply only to the assessment of parts (e) and (f) of the questions. The following criteria should be applied in conjunction with the mark scheme.

The quality of written communication bands must be regarded as integral to the appropriate mark scheme band even though they are listed separately in the mark scheme. Examiners should note that, in the assessment of candidates' sociological knowledge and skills, the assessment of the Quality of Written Communication will be judged through the assessment of the clarity and appropriateness of the sociological material presented.

In the 1 – 7 band, candidates' answers are likely to be characterised by the poor logical expression of ideas and the use of a limited range of conceptual terms, perhaps often used imprecisely and/or inaccurately. Spelling, punctuation and grammar may show serious deficiencies and frequent errors, perhaps impairing the intelligibility of significant parts of the answer.

In the 8 – 15 band, candidates' answers are likely to be characterised by the fair to good logical expression of ideas and the competent use of a reasonable range of conceptual terms. Spelling, punctuation and grammar will be of a reasonable standard. Commonly used words and sociological terms will generally be spelt correctly. There may be minor errors of punctuation and grammar, but these will not seriously impair the intelligibility of the answer.

In the 16 – 20 band, candidates' answers are likely to be characterised by the very good to excellent logical expression of ideas and the precise use of a broad range of conceptual terms. Spelling, punctuation and grammar will be of a very good to excellent standard. Commonly and less commonly used words and sociological terms will almost always be spelt correctly. Punctuation and grammar will be used correctly throughout to facilitate the intelligibility of the answer.

Choose **one** Section and answer **all** parts of the question from that Section.

SECTION A: FAMILIES AND HOUSEHOLDS

Total for this section: 60 marks

1

(a) Explain what is meant by 'ascribed status' (Item 1A , line 2).	<i>(2 marks)</i>
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Two marks for an appropriate explanation or definition, such as: a social position fixed by birth, a position that cannot be changed by one's own efforts or similar, or an appropriate explanation or definition of 'ascribed', plus an appropriate example of an ascribed status.

One mark for an explanation or definition of 'ascribed' only.

Note: no marks for a definition of achieved status and no marks for an example only of ascribed status.

(b) Suggest two reasons why the working-class extended family might have flourished during the early industrial period (Item 1A , lines 10 – 11).	<i>(4 marks)</i>
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Two marks for each of two appropriate reasons suggested, such as:

- to share accommodation costs;
- low wages/poverty;
- high adult death rates produced many orphans;
- to help find jobs;
- to provide childcare so parents could work;
- lack of health care;
- lack of welfare benefits.

Note: 'security' also scores, but **not** in conjunction with any of the above.

(c) Identify three features of the symmetrical family (Item 1A , line 12).	<i>(6 marks)</i>
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Two marks for each of three appropriate features identified, such as:

- it is nuclear/relatively separate from extended kin;
- home-centredness;
- women in paid work;
- greater equality in decision-making, eg on financial matters;
- couples share leisure time;
- men helping with housework;
- couples sharing childcare/child-centredness.

Note: joint conjugal roles also scores, but **not** in conjunction with any of the last **four** above.

(d) Identify and briefly explain **two** reasons for changes in the position of children since industrialisation, **apart from** that referred to in **Item 1A**. *(8 marks)*

Two marks for each of two appropriate reasons identified, such as:

- compulsory schooling;
- higher standards of living;
- the impact of the mass media;
- children as consumers;
- the ideology of children's rights;
- fall in the infant mortality/birth rate.

Note: **not** 'excluded by law from many occupations'.

A further two marks for each of these satisfactorily explained, such as:

- compulsory schooling: has made children economically dependent on adults for longer;
- higher standards of living: have enabled parents to support children through a prolonged period of economic dependence;
- the impact of the mass media: television has made childhood and adulthood more similar by making available to children knowledge previously restricted to adults.

(e) Examine the reasons for the increase in family and household diversity in the last 40 years. (20 marks)
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0 No relevant points.

1 – 7 Answers in this band will show only a limited knowledge and understanding.

Lower in the band, this may be one or two quasi-commonsensical points, eg about family types, with little understanding of relevant issues.

Higher in the band, answers will show a limited, undeveloped sociological knowledge, for example two or three insubstantial points about lone parent families. Interpretation of material may be simplistic or at a tangent to the question. Analysis will be very limited or non-existent.

8 – 15 Answers in this band will show a reasonable knowledge and understanding.

Lower in the band, this may be confined to a competent, if basic, account, for example of some reasons for one or two family or household types. Interpretation may not be linked explicitly to the demands of the question; for instance, answers may indiscriminately list material on industrialisation and the family.

Higher in the band, knowledge will be broader and/or deeper, and will begin to identify a wider range of reasons and/or family/household types. Material will be interpreted accurately, but its relevance may not always be made explicit. There may be some limited analysis and/or evaluation, for instance of the New Right view of the family. However, this is **not** a requirement, even to reach the top of the band.

16 – 20 Answers in this band will show a sound, conceptually detailed knowledge and understanding of sociological material on family diversity. This will be accurately and sensitively interpreted to meet the demands of the question. The answer will show the ability to organise material and to analyse and/or evaluate it explicitly so as to produce a coherent and relevant answer.

Answers will consider a range of different family/household types (eg lone parents, reconstituted families, same sex relationships, nuclear families, one person households etc) and reasons for them. Concepts and issues may include the following: trends in cohabitation, marriage, divorce, re-marriage, births outside marriage; the falling birth rate; the ageing population; the neo-conventional family; the cereal packet norm; secularisation; the impact of the women's and gay movements; changes in women's position; individualism; rising expectations of marriage; confluent love; the divorce extended family etc. Evaluation/analysis may be developed eg through discussion of different perspectives eg New Right, feminist, functionalist, post-modernist etc.

Lower in the band, answers may examine a more limited range of material.

Higher in the band, answers may be more detailed and complete, and/or may show a clear rationale in the organisation of material leading to a distinct conclusion.

(f) Using material from Item 1B and elsewhere, assess the functionalist contribution to our understanding of the family. (20 marks)

0 No relevant points.

1 – 7 In this band, analysis/evaluation will be very limited or non-existent, and answers will show only a limited knowledge and understanding.

Lower in the band, this may be one or two quasi-commonsensical points about the family or material ineffectually recycled from Item 1B with little understanding of relevant issues.

Higher in the band, answers will show a limited, undeveloped sociological knowledge, for example two or three insubstantial points about the functions of the family. Interpretation of material may be simplistic or at a tangent to the question.

8 – 15 In this band there will be some limited analysis and/or evaluation (though lower in the band this will be implicit), and answers will show a reasonable knowledge and understanding.

Lower in the band, some suitable material will be correctly identified and a broadly accurate if basic account offered, for example of Parsons on the nuclear family, though interpretation to meet the demands of the question may remain implicit.

Higher in the band, knowledge and understanding of material will be broader and/or deeper, and the answer will begin to deal explicitly with the functionalist contribution and may make limited use of Item 1B (eg to discuss conflict and exploitation). Material will be accurately interpreted but its relevance may not always be made explicit. There will be some limited analysis and/or evaluation, for instance from a feminist perspective.

16 – 20 In this band, analysis and evaluation will be explicit and relevant, and answers will show a sound, conceptually detailed knowledge and understanding of sociological material on functionalism and the family, drawn from Item 1B and elsewhere. This will be accurately and sensitively interpreted to meet the demands of the question.

Concepts and issues such as the following may appear: primary socialisation; the stabilisation of adult personalities; the family as a unit of production/consumption; the universality of the family; social and geographical mobility; the functional fit thesis and industrialisation; universalism and particularism; social placement, identity and status; role bargaining; domestic violence; child abuse; patriarchy; capitalism; the dual burden; reserve army of labour etc. Evaluation may be developed, eg through discussion of who benefits from the family's functions (eg all members, men, society, capitalism etc), how functions/family structures vary between societies, or by locating the discussion within a debate between perspectives (eg feminism, post-modernism). Sources may include Parsons; Goode; Murdock; Coser; Bell & Vogler; Engels; Ansley; Bernard; Zaretsky; Cheal etc.

Lower in the band, interpretation may be less selective or evaluation less developed and more list-like.

Higher in the band, interpretation will be more focused and evaluation more thorough, and answers may show a clear rationale in the organisation of material leading to a distinct conclusion.

SECTION B - HEALTH

Total for this section: 60 marks

2

(a) Explain what is meant by the ‘medicalisation of society’ (Item 2A , line 11). <i>(2 marks)</i>

Two marks for an appropriate explanation or definition, such as:

- the dominance of the medical profession or medical knowledge over society;
- medical dominance over areas of life previously controlled by other institutions (eg religion, law, family);
- the process of individual or social problems becoming re-defined as medical problems.

One mark for an example only, eg sadness is now called depression.

(b) Suggest two cultural and/or behavioural differences between social classes that may cause differences in health and illness (Item 2A , lines 9 – 10). <i>(4 marks)</i>
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Two marks for each of two appropriate differences suggested, such as that the working class:

- smoke more;
- eat a worse diet;
- take less exercise;
- consume more alcohol;
- have a more fatalistic attitude towards health and illness;
- have less knowledge of health matters;
- are less likely to use preventative medicine.

or middle class vice versa.

(c) Identify three changes since industrialisation that may have improved the health of the population, apart from improved medical knowledge and practice (Item 2A , lines 1 – 2). <i>(6 marks)</i>

Two marks for each of three appropriate changes identified, such as:

- improved housing;
- better diet;
- better hygiene;
- clean drinking water;
- efficient sewerage;
- safer work environments;
- fewer births;
- restrictions on child labour.

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Note: no marks for improved medical knowledge/practice.

(d) Identify and briefly explain **two** functions that medicine and the medical profession may perform for capitalism (**Item 2A**, line 12). *(8 marks)*

Two marks for each of two appropriate functions identified, such as:

- a source of profits;
- social control of the proletariat;
- disguises the true cause of illness;
- gives capitalism a caring face.

A further two marks for each of these satisfactorily explained, such as:

- a source of profits: medicine provides capitalists in the pharmaceuticals, medical technology etc industries with opportunities to make profit at the expense of patients/the NHS;
- social control of the proletariat: by policing the sick role, the medical profession can ensure alienated workers cannot avoid working;
- disguises the true cause of illness: the bio-medical model espoused by modern medicine locates the cause of illness within the individual rather than in social conditions produced by capitalism;
- gives capitalism a caring face: by providing health care, the medical profession humanises capitalism and makes revolution less likely.

(e) Examine the reasons for differences in access to health care by different social groups.
(20 marks)

0 No relevant points.

1 – 7 Answers in this band will show only a limited knowledge and understanding.

Lower in the band, this may be one or two quasi-commonsensical points, eg about health or care, with little understanding of relevant issues.

Higher in the band, answers will show a limited, undeveloped sociological knowledge, for example two or three insubstantial points about the health care of ethnic minorities. Interpretation of material may be simplistic or at a tangent to the question. Analysis will be very limited or non-existent.

8 – 15 Answers in this band will show a reasonable knowledge and understanding.

Lower in the band, this may be confined to a competent, if basic, account, for example of aspects of gender differences in care. Interpretation may not be linked explicitly to the demands of the question; for instance, answers may indiscriminately list material on health chances.

Higher in the band, knowledge will be broader and/or deeper, and will begin to identify a wider range of social groups and/or reasons. Material will be interpreted accurately, but its relevance may not always be made explicit. There may be some limited analysis and/or evaluation, for instance of an explanation of class differences in access to care. However, this is **not** a requirement, even to reach the top of the band.

16 – 20 Answers in this band will show a sound, conceptually detailed knowledge and understanding of sociological material on differences in access to health care. This will be accurately and sensitively interpreted to meet the demands of the question. The answer will show the ability to organise material and to analyse and/or evaluate it explicitly so as to produce a coherent and relevant answer.

Candidates will consider a range of reasons and two or more groups (eg class, ethnic, gender, regional, national, age). Concepts and issues such as the following may appear: discrimination, stereotyping, institutional racism, patriarchy, rationing/postcode lottery; language barriers; speech codes; cultural capital; material factors (ability to pay, availability of transport, paid time off work etc); the inverse care law; costs and benefits of access; funding differences within the NHS (between regions, providers, services); different types of service (preventative, curative, palliative, mental health etc); differences in health beliefs; differences in treatment received etc.

Evaluation/analysis may be developed eg through discussion of the relative importance of material versus cultural factors, or methodological issues (eg quantitative versus qualitative measures of access). Sources may include Black; Blackburn; Blaxter; Cartwright & O'Brien; Doyal; Doyal & Pennell; the Health Divide; Howlett & Ashley; Mares et al; Oakley; Thorood; Townsend; Tudor Hart; Wiles & Higgins; Wilkinson etc.

Lower in the band, answers may examine a more limited range of material.

Higher in the band, answers may be more detailed and complete, and/or may show a clear rationale in the organisation of material leading to a distinct conclusion.

(f) Using material from Item 2B and elsewhere, assess the usefulness of the labelling approach to our understanding of mental illness. <i>(20 marks)</i>
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0 No relevant points.

1 – 7 In this band, analysis/evaluation will be very limited or non-existent, and answers will show only a limited knowledge and understanding.

Lower in the band, this may be one or two quasi-commonsensical points about mental illness, or material ineffectually recycled from Item 2B with little understanding of relevant issues.

Higher in the band, answers will show a limited, undeveloped sociological knowledge, for example two or three insubstantial points about labelling. Interpretation of material may be simplistic or at a tangent to the question.

8 – 15 In this band, there will be some limited analysis and/or evaluation (though lower in the band this will be implicit), and answers will show a reasonable knowledge and understanding.

Lower in the band, some suitable material will be correctly identified and a broadly accurate if basic account offered, for example of a study of mental illness, though interpretation to meet the demands of the question may remain implicit.

Higher in the band, knowledge and understanding of material will be broader and/or deeper, and the answer will begin to deal explicitly with the labelling approach, and may make limited use of Item 2B (eg to discuss patients' resistance to labelling). Material will be accurately interpreted but its relevance may not always be made explicit. There will be some limited analysis and/or evaluation, for instance of determinism in the labelling approach.

16 – 20 In this band, analysis and evaluation will be explicit and relevant, and answers will show a sound, conceptually detailed knowledge and understanding of sociological material on mental illness, drawn from Item 2B and elsewhere. This will be accurately and sensitively interpreted to meet the demands of the question.

Concepts and issues such as the following may appear: stereotyping, self-fulfilling prophecy, primary and secondary deviation, identity, institutionalisation/typologies of patient responses, ethnocentrism, patriarchy, determinism, doctor-patient interactions, manipulation of symptoms, the role of material deprivation, racism, ecological, structural and cultural causes etc. Evaluation may be developed through discussion of the relative importance of labelling versus structural or cultural factors, the source of medical power to label, determinism etc. Sources may include Becker; Braginski and Braginski; Dunham & Faris; Foucault; Goffman; Laing; Lemert; Littlewood and Lipsedge; Rosenhan; Szasz; Sedgwick etc.

Lower in the band, interpretation may be less selective or evaluation less developed and more list-like.

Higher in the band, interpretation will be more focused and evaluation more thorough, and answers may show a clear rationale in the organisation of material leading to a distinct conclusion.

SECTION C: MASS MEDIA

Total for this section: 60 marks**3**

(a) Explain what is meant by a 'hierarchy of credibility' (Item 3A , line 5). <i>(2 marks)</i>

Two marks for an appropriate explanation or definition, such as the media give official, elite or 'establishment' sources more credence/legitimacy than other sources, the media accept uncritically what powerful/important people say, or similar.

One mark for an example only.

(b) Suggest two factors that might influence news output apart from those referred to in Item 3A . <i>(4 marks)</i>

Two marks for each of two appropriate factors suggested, such as:

- cost;
- frequency of publication;
- physical accessibility of stories;
- role of news agencies;
- owners;
- availability of specialist staff;
- nature of technology available;
- journalists' wider ideologies/political loyalties.

Note: no marks for any of the following (all are referred to in **Item 3A**): gatekeepers, news sources, hierarchy of credibility, news values, victims, offenders, police, lawyers, or courts.

(c) Identify three news values apart from those referred to in Item 3A . <i>(6 marks)</i>

Two marks for each of three appropriate news values suggested, such as:

- immediacy/frequency;
- composition;
- reference to elite nations;
- reference to elite persons;
- negativity;
- personalisation;
- meaningfulness (cultural proximity/relevance to audience);
- threshold/size of event;
- threat.

Note: no marks for any of the following (all are in **Item 3A**): expectedness (*or* consonance with journalists' predictions), unexpectedness, importance, or clarity of events.

(d) Identify and briefly explain two criticisms that other sociologists might make of Marxist views of the mass media (Item 3A , line 1). <i>(8 marks)</i>
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Two marks for each of two appropriate criticisms identified, such as:

- owners cannot directly control output;
- consumer sovereignty;
- state/legal regulation of media output;
- existence of anti-capitalist media/journalists;
- determinism/audiences are not victims of ideological manipulation.

A further two marks for each of these satisfactorily explained, such as:

- owners cannot directly control output: given the scale of many media empires, and the specialist skills required in media production, it would be physically impossible for owners to have such detailed control over output;
- consumer sovereignty: audiences, not owners, dictate output. If output were merely owners' propaganda, audiences would have no interest in buying it and media businesses would fail;
- determinism/audiences are not victims of ideological manipulation: they are not 'dupes', but rather are capable of detecting and disregarding rather than swallowing bias/ideology.

- (e) Examine the ways in which the mass media portray any **two** of the following: age; disability; ethnicity; social class. (20 marks)

0 No relevant points.

1 – 7 Answers in this band will show only a limited knowledge and understanding.

Lower in the band, this may be one or two quasi-commonsensical points, eg about a specific media representation, with little understanding of relevant issues.

Higher in the band, answers will show a limited, undeveloped sociological knowledge, for example two or three insubstantial points about stereotyping. Interpretation of material may be simplistic or at a tangent to the question. Analysis will be very limited or non-existent.

8 – 15 Answers in this band will show a reasonable knowledge and understanding.

Lower in the band, this may be confined to a competent, if basic, account, for example of aspects of a study of representations of ethnicity. Interpretation may not be linked explicitly to the demands of the question; for instance, answers may indiscriminately list material on effects of representations etc. Some may give at best scant attention to a second area.

Higher in the band, knowledge will be broader and/or deeper, and will begin to deal with two of the specified areas, if unequally. Material will be interpreted accurately, but its relevance may not always be made explicit. There may be some limited analysis and/or evaluation, for instance of reasons for changes in representations of the groups chosen. However, this is **not** a requirement, even to reach the top of the band.

16 – 20 Answers in this band will show a sound, conceptually detailed knowledge and understanding of sociological material on representations in two of the specified areas. This will be accurately and sensitively interpreted to meet the demands of the question. The answer will show the ability to organise material and to analyse and/or evaluate it explicitly so as to produce a coherent and relevant answer.

Concepts and issues may include the following: stereotyping/misrepresentation; under-representation/symbolic annihilation; the ‘white eye’; news values; deviance amplification; moral panics; folk devils; hegemony; typologies of representations; images of the Third World, refugees or asylum seekers; racism; able-bodyism; ‘scroungermania’. Analysis/evaluation may be developed eg through consideration of changes/variations in representations; positive representations; different media/genres; minority media etc.

Sources may include:

- S Cohen; Young; Pearson; Signorelli; Lambert et al; Dail; Biggs; Featherstone & Wernick; Sontag (on age);
- Cumberbatch & Negrine; Darke; Longmore; Philo et al (on disability);
- Cottle; Hall; Hartmann & Husband; Malik; Troyna; Van Dijk (on ethnicity);
- Jhally & Lewis; Glennon & Butsch; GMG; Golding & Middleton (on social class).

Lower in the band, answers may examine a more limited range of material.

Higher in the band, answers may be more detailed and complete, and/or may show a clear rationale in the organisation of material leading to a distinct conclusion.

(f) Using material from Item 3B and elsewhere, assess the view that audiences' interpretations of media messages are shaped by the social groups that they belong to. (20 marks)

0 No relevant points.

1 – 7 In this band, analysis/evaluation will be very limited or non-existent, and answers will show only a limited knowledge and understanding.

Lower in the band, this may be one or two quasi-commonsensical points about audiences, or material ineffectually recycled from Item 3B with little understanding of relevant issues.

Higher in the band, answers will show a limited, undeveloped sociological knowledge, for example two or three insubstantial points about media effects. Interpretation of material may be simplistic or at a tangent to the question.

8 – 15 In this band, there will be some limited analysis and/or evaluation (though lower in the band this will be implicit), and answers will show a reasonable knowledge and understanding.

Lower in the band, some suitable material will be correctly identified and a broadly accurate, if basic, account offered, for example of a theory or study of audience effects, though interpretation to meet the demands of the question may remain implicit.

Higher in the band, knowledge and understanding of material will be broader and/or deeper, and the answer will begin to deal explicitly with audience interpretations and may make limited use of Item 3B (eg to discuss different social groups). Material will be accurately interpreted but its relevance may not always be made explicit. There will be some limited analysis and/or evaluation, for instance of the hypodermic syringe model.

16 – 20 In this band, analysis and evaluation will be explicit and relevant, and answers will show a sound, conceptually detailed knowledge and understanding of sociological material on audiences and media messages, drawn from Item 3B and elsewhere. This will be accurately and sensitively interpreted to meet the demands of the question.

Concepts and issues such as the following may appear: ideology; hegemony; resistance; class, age, gender, ethnic etc groups; opinion leaders; peer groups; individual choice/needs and media consumption; media literacy levels; polysemic messages; identity as fixed or in flux; media-saturated society; hyper-reality; structural and material factors affecting access to messages (eg income, patriarchy); methodological issues etc. Evaluation may be developed, eg by locating the discussion within a debate between perspectives or models of audience/media relationships (eg hypodermic syringe, uses and gratifications, two-step flow, interpretative model, post-modernism etc). Sources may include Katz & Lazarsfeld; Blumler & Katz; Fiske; Livingstone & Bovill; Buckingham; Halloran; Morley; Ang; Baudrillard; Marcuse.

Lower in the band, interpretation may be less selective or evaluation less developed and more list-like.

Higher in the band, interpretation will be more focused and evaluation more thorough, and answers may show a clear rationale in the organisation of material leading to a distinct conclusion.

ASSESSMENT GRIDS FOR UNIT 1 (SCY1)**Families and Households**

ASSESSMENT OBJECTIVES			
Questions	AO1	AO2	Total
1 a	2	0	2
1 b	2	2	4
1 c	2	4	6
1 d	4	4	8
1 e	14	6	20
1 f	6	14	20
Total	30	30	60

Health

ASSESSMENT OBJECTIVES			
Questions	AO1	AO2	Total
2 a	2	0	2
2 b	2	2	4
2 c	2	4	6
2 d	4	4	8
2 e	14	6	20
2 f	6	14	20
Total	30	30	60

Mass Media

ASSESSMENT OBJECTIVES			
Questions	AO1	AO2	Total
3 a	2	0	2
3 b	2	2	4
3 c	2	4	6
3 d	4	4	8
3 e	14	6	20
3 f	6	14	20
Total	30	30	60