

# **General Certificate of Education**

# Health and Social Care 8621/8623

# **HC04**

# **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.

Further copies of this Mark Scheme are available to download from the AQA Website: www.aqa.org.uk

Copyright © 2007 AQA and its licensors. All rights reserved.

#### COPYRIGHT

AQA retains the copyright on all its publications. However, registered centres for AQA are permitted to copy material from this booklet for their own internal use, with the following important exception: AQA cannot give permission to centres to photocopy any material that is acknowledged to a third party even for internal use within the centre.

Set and published by the Assessment and Qualifications Alliance.

# HC04

## Question 1

(a) (i) 1 mark each for up to 6 of the following points.

Rahul is attached (1) to his parent(s) (1)

(He is upset because) he is separated from his parents/aware of parents' absence (1). This is separation anxiety (1) which explains his protest (1) which is a kind of proximity-maintaining behaviour (1)

(The babysitter cannot comfort him because) he does not know the babysitter/he is with an unfamiliar person (1). This is stranger anxiety (1) **6 marks** 

(a) (ii) 1 mark each for up to 3 of the following points.

Rita is old enough to tolerate (brief) separations/understands that the separation is temporary (1) as attachment is less strong in 4 year olds/she is more detached (1)

Rita has more experience of strangers/e.g. attends nursery school (1) Rita probably met the babysitter before her parents left (1). This might have reduced any stranger anxiety (1). **3 marks** 

(b) (i) 1 mark each (up to 2) for identifying effects, plus 1 each for elaboration. Likely answers:

Protest (1) crying (1)

Despair (1) crying less/becoming apathetic (1).

Detachment (1) resisting contact/ show much less strong attachment when parents return (1) **4 marks** 

(b) (ii) 1 mark each for any 2 from:

Delinquency; retardation of development; affectionless psychopathy; depression. Accept other linked/similar answers. **2 marks** 

## Question 2

(a) (i) Television/media (1) Other children/peers (1)

- (ii) 1 mark each for any 2 from: helping the lost boy; lending the glove puppet; asking politely.
- (iii) Spitting/refusing to return the puppet (1)

(b) (i) 1 mark for definition such as: Activities which are only possible when 2 or more children join in/play in which children occupy roles/accept other wording.
 Plus 1 mark for: making the glove puppets have a conversation (1).
 2 marks

5 marks

- (b) (ii) Playing alongside without interacting (1) sitting in silence watching television (1) **2 marks**
- (c) 1 mark each (up to 2) for identifying ways, plus up to 2 marks for elaboration/explanation.

Elaboration can include explaining what the identified way means; how it works; link with a named pro- or anti- social behaviour; as well as a counter-argument.

Likely answers.

W1 Parents can act as models (1) Children tend to observe and imitate parental behaviour (1) for example if a parent shows aggressive behaviour, child is more likely to do the same (1)

W2 Parents can encourage/reinforce/discourage children's behaviours (1) for example praising the child for required behaviour (1) such as helping (1)

Accept other valid ways, e.g. parents can explain reasons for and against behaviours. **6 marks** 

### **Question 3**

(a) Nerys is in the prelinguistic stage (1) because she does not say any words (1). She will probably be aged from 0 to 12 months (accept any age within this range) (1)

Anwar is in the holophrase speech stage (1) because he mainly uses one-word statements (1) He will probably be aged from 12 to 18 months (accept any age from 12 to 21 months) (1)

Wanda is in the telegraphic speech stage (1) because she mainly uses two-word statements (1). She will probably be aged from 18 to 24 months (accept any age from 16 to 27 months)(1) **9 marks** 

(b) Credit definitions or other statements clearly implying an understanding of maturation and social factors (1 each).

Likely statements are: Social factors means learning opportunities from agents of socialisation/parents/peers etc.; Maturation is genetically-programmed development.

Up to 2 marks for each discussion point, depending on detail elaboration. Discussion points are likely to include:

Evidence of the influence of social factors including

- children acquire accent/vocabulary/language of those around them
- children reproduce utterances they hear

Evidence of the influence of maturation including

- speed/ease of acquisition
- invariant sequence of stages

- universal pattern across cultures
- infant speech is not a direct copy of adult speech, so learning not the only explanation
  6 marks

#### Question 4

- (a) Grasping is fine motor behaviour (1) Plus 1 (dependent) mark for: It involves small/precise movements/muscle groups/not whole body movements. **2 marks**
- (b) 1 mark each for any 5 of the following points;

The grasping reflex (1) is present at birth (1).

Whole hand grasping (1) the palmar grasp (1) is present at around 6 months (accept 4 to 8)(1).

Grasping between finger(s) and thumb (1) the pincer/precision grip (1) is present at around 12 months (accept 9 to 12)(1). **5 marks** 

- (c) Growth is not proportional/uniform/different parts of the body grow at different rates (1).
  Plus 1 (dependent) mark for e.g. the babies legs grow a lot more in a year than the head (1).
  Accept various different versions of this.
  2 marks
- (d) 1 mark each for naming biological factors (up to 2) plus up to 2 marks each for description.

Well-focussed answers are likely to (a) state a factor (b) state its effect on growth (c) give specific detail/explanation/example.

Likely answers:

Genotype/genetics (1). Some children have the genetic potential to grow larger/taller (1) at a different rate (1) to others. E.g. boys tend to grow taller/heavier than girls (1).

Maturation (1) growth rates change during childhood (1) and are genetically programmed (1)

Disease (1) can slow development (1) e.g. by interfering with processing of nutrients/cell division (1)

Nutrition (1). Deficiency of e.g. protein, vitamins (1) can reduce growth (1). Alternatively excess of e.g. carbohydrates/fats (1) can accelerate increase in body mass (1) 6 marks