



**General Certificate of Education (A-level) Applied
January 2011**

**Health and Social Care HC13
(Specification
8621/8623/8626/8627/8629)**

**Unit 13: The Role of Exercise in Maintaining
Health and Well-Being**

Report on the Examination

Further copies of this Report on the Examination are available from: aqa.org.uk

Copyright © 2011 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.

General comments

The more able candidates produced accurate and well-reasoned responses to this paper while less able candidates tended to produce answers which were vague and/or repetitive and lacking in accuracy and technical detail.

Comments on specific questions

Question 1

- 01 Candidates generally understood the aerobic fitness measure and gained high marks. Where errors were made, these tended to be with the units of measure, e.g. litres rather than millilitres.
02 A majority of candidates successfully concluded that Leroy had a higher fitness level than Tom.
03 There were some detailed responses which gained high marks for a sound understanding of the long-term physiological effects of regular training.
04 Some weaker candidates confused dynamic strength with maximum strength.
05 Stamina was a common error, but the majority of candidates understood flexibility and were able to gain at least two of the three marks available.

Question 2

- 06 There were many sound responses with candidates gaining high marks for both emotional and social aspects of health and well-being which benefit from regular exercise.
07 The benefits of warm-down programmes also produced some good technical answers from the more able candidates. Weaker responses tended to be limited to consideration of gradual recovery and lactic acid removal.
08 The better responses gave detailed and well-reasoned answers which covered the slowing of the rate of deterioration of body systems. Weaker answers tended to be statements of the effects of regular exercise combating ageing, rather than discussions of how these effects are brought about.

Question 3

- 09 A common error was the conclusion that female X's resting pulse indicates a higher fitness level than female Z, when in fact both are within the normal range and are very close to each other. Most candidates were able to gain a mark by identifying female Y as less fit/being above the normal range.
10 Many candidates compared the three females in terms of their pulse rate scores after five minutes, without considering the different starting points, i.e. using the figures given in the table without calculating the actual rise in pulse rate.
Most however gained marks by concluding that female Z was the fittest based on her quicker recovery to resting rate.
11 Some candidates failed to gain the mark for female Y in 11 by suggesting that she is overweight rather than obese. Similarly suggesting females X and Z are average is incorrect, as they are in the normal range.
12 Less able candidates produced vague descriptions when attempting to detail how resting and recovery pulse can be measured. There were, however, many detailed descriptions gaining high marks on this question.
13 Relatively few candidates gave the standardised nature of pulse rate as strength and being affected by other factors as a weakness.

Question 4

- 14, 15 The vast majority of candidates gained high marks by successfully suggesting ways to overcome the barrier and giving different types of common barriers to regular exercise.
16 Some weaker candidates seemed to focus their answers on a single exercise session rather than a suitable exercise programme involving a number of exercise sessions.
17 The answers of a significant number of candidates were limited by the inappropriate choices made of major diseases or disorders, i.e. they chose diseases which could only be regulated rather than prevented by regular exercise. Where appropriate choices of major diseases or disorders had been made, the technical explanations of the physiological processes involved were often lacking, i.e. statements of effects were made, but these were not explained in terms of how they are brought about by regular exercise.

Mark Ranges and Award of Grades

Grade boundaries and cumulative percentage grades are available on the [Results statistics](#) page of the AQA Website.