

Mark Scheme (Results)

January 2012

GCE Health and Social Care (6949) Paper 1
Human Behaviour

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Question Number	Answer	Mark
1(a)	e.g. <ul style="list-style-type: none"> • His mum died (two years ago); • Idea that grandmother lets him do what he wants, (but father doesn't); • Being told off regularly by his father; 	2 marks

Question Number	Answer	Mark
1(b)	Two from: <ul style="list-style-type: none"> • Focus on observable behaviour; • Our behaviour is learned; • Behaviour can be rewarded / reinforced (leading to it being repeated); 	2 marks

Question Number	Answer	Mark
1(c)	<p>Partial explanation (1-2 marks) Candidates may define assessment but not make it clear why one needs to be carried out. Conversely they make some reference to what needs to be done, but not show they understand what an assessment is.</p> <p>Full explanation (3-4 marks) Candidates will make it clear that they understand the concept of assessment. They will also show they understand why one needs to be carried out.</p> <p>Assessment:</p> <ul style="list-style-type: none"> • Idea of measuring/checking (current) behaviour; • To know methods to improve behaviour; <p>Reasons:</p> <ul style="list-style-type: none"> • Idea of changes cannot be known; • unless there is a baseline against which they can be measured; 	4 marks

Question Number	Answer	Mark
1(d)(i)	<p>Partial explanation (1-2 marks)</p> <p>Full explanation (3-4 marks)</p> <ul style="list-style-type: none"> • Idea of reward; • For good behaviour; • Behaviour is likely to be repeated; • Suitable example e.g. trips out; 	4 marks

Question Number	Answer	Mark
1(d)(ii)	<p>Level one response (1– 3marks) Candidates identify some advantages or disadvantages of the approach but these are not linked to children, such as Billy. SPG may be limited.</p> <p>Level two response (4 – 6 marks) Candidates identify advantages and disadvantages of the approach. There may be some mistakes with SPG.</p> <p>Candidates at the higher end of the mark band make some links to children, such as Billy. Credit should be given to candidates who make good links but who may not fully consider the advantages or disadvantages of the approach.</p> <p>Level three response (7–8 marks) Candidates give relevant advantages and disadvantages of the approach and these are linked to the circumstances of children, such as Billy. There should be few mistakes with SPG.</p> <p>Possible points:</p> <ul style="list-style-type: none"> • Time out means removing someone from all sources of social reinforcement; • Often used to extinguish unwanted behaviour; • Having Billy sit on his own away from the other children; • Idea of calming down/reflection on inappropriate behaviour; • Usually used with young children; • May be felt to be degrading or upsetting; 	8 marks

Question Number	Answer	Mark
1(e)	<p>Level 1 (1 – 3 marks) Candidate identifies some advantages or disadvantages of Family Therapy but these are not linked to a family, such as Billy's. SPG may be limited.</p> <ul style="list-style-type: none"> • Family Therapy allows the whole family to be involved • Family Therapy takes a lot of time to be effective. <p>Level 2 (4- 7 marks) Candidate can identify some advantages and disadvantages of Family Therapy. At the higher end of the mark band candidate makes some links to the case study example. 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.</p> <p>Level 3 (8 – 10 marks) Advantages and disadvantages of approach discussed in some detail and these are clearly linked to the case study. At the top end candidates need to come to a conclusion, weighing up the arguments presented. There should be very few mistakes with SPG</p> <p>For example:</p> <p>Advantages</p> <ul style="list-style-type: none"> • Family Therapy could address any problems Billy has in his relationship with other family members • Everyone in the family could be involved • It could lead to a new and supportive relationship between Billy and the rest of the family • Would help other family members have a greater understanding of Billy's problems • The family may be able to help Billy <p>Disadvantages</p> <ul style="list-style-type: none"> • Family Therapy may take control away from Billy • Billy will need an 'expert' to help him • There may be difficulties in accessing appointments – waiting lists, travel problems, work commitments • May be labelled as a 'problem' family 	10 marks

Question Number	Answer	Mark
2(a)(i)	<p>Four from :</p> <ul style="list-style-type: none"> • Women (at each fifth) have a higher risk of mental illness; • The poorer people are the more likely they are at risk of mental illness; • Difference between men and women is greatest at in the 'middle' richest; • Further (quantitative) detail;; 	4 marks

Question Number	Answer	Mark
2(a) (ii)	<p>Level one response (1– 3marks) Candidates should give an appropriate factor, e.g. physical illness/accident/bereavement; and may give a limited explanation. e.g. cannot do what they used to do/lonely/no-one to talk to; There is unlikely to be any discussion. SPG may be limited.</p> <p>Level two response (4 – 6 marks) Candidates are likely to give more than one example with some explanation. They may just give one example, but the explanation should be detailed. e.g. physical illness may be debilitating; cannot get out of the house/play sport, etc; feels left out/lonely; cannot see things getting better in the future, etc;</p> <p>Candidates at the higher end of the mark band should give a full explanation of two factors. There may be some mistakes with SPG.</p> <p>Level three response (7–8 marks) Candidates should show clear in depth evidence of discussion of two appropriate factors. There should be few mistakes with SPG.</p>	8 marks

Question Number	Answer	Mark
2(b)(i)	<p>Partial explanation (1-2 marks) Candidates may define 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.</p> <p>Full explanation (3-4 marks) Candidates will make it clear that they understand the concept of dysfunctional beliefs. They will also relate to the case study.</p> <p>Dysfunctional beliefs:</p> <ul style="list-style-type: none"> • Idea of distorted or irrational thinking; • Based on limited evidence or no evidence at all; <p>Example from case study;</p> <ul style="list-style-type: none"> • Andrea believes people do not like her; • She is deaf and may not always hear people talking to her; 	4 marks

Question Number	Answer	Mark
2(b) (ii)	<p>Four from:</p> <ul style="list-style-type: none"> • Approach is to do with how people think; • A counsellor would be involved; • Try to change the way people feel; • From negative thinking to positive thinking; • Try to convince them that their beliefs are not logical/valid; • 'Homework' may be involved between visits; 	4 marks

Question Number	Answer	Mark
2(b) (iii)	<p>Level one response (1– 3marks) Candidates identify some advantages or disadvantages of the approach but these are not linked to people with dysfunctional beliefs, e.g. People need to want to help themselves. SPG may be limited.</p> <p>Level two response (4-7 marks) Candidates identify advantages and/or disadvantages of the approach. They may have some idea of the principles behind a cognitive approach, but they may not be clear. There may be some mistakes with SPG.</p> <p>Level three response (8-10 marks) Candidates give relevant advantages and disadvantages of the approach and these are linked to the circumstances of people mentioned in the case study. It should be very clear that the principles of the approach are understood. There should be very few mistakes with SPG.</p> <p>Principles of a cognitive approach:</p> <ul style="list-style-type: none"> • How we feel and how we behave are determined by what we think and what we believe; • Emotional problems are the result of negative and distorted thinking – arising out of dysfunctional beliefs; • If we can change this negative and distorted thinking, we will help people to overcome their emotional and behavioural problems; <p>Advantages of cognitive approach:</p> <ul style="list-style-type: none"> • Structured/clear goals/measurable outcomes; • Non-threatening; • Basic ideas are simple to understand; • Gives strategies for self-help themselves; • Works well with stress/anxiety; <p>Disadvantages of cognitive approach:</p> <ul style="list-style-type: none"> • A “quick fix” which deals with symptoms and not underlying causes • Requires the client to be able to understand and think through causes and effects, to problem solve and have insight; • Would not be suitable where clients cannot express feelings. • May not work with people with mental health problems; • Clients may not want to talk about problems; 	10 marks

Question Number	Answer	Mark
3(a)	<p>Partial explanation (1-2 marks) Candidates may define effective communication but not relate it clearly to a residential care home. Conversely, they may talk about the residential care home, but not make it clear they understand about effective communication clearly.</p> <p>Full explanation (3-4 marks) Candidates will make it clear that they understand why effective communication is important. They will also relate their answer clearly to a residential care home.</p> <p>Effective communication:</p> <ul style="list-style-type: none"> • Idea of communication being two-way; • Understood by both parties; • People in a residential care home may not be able to do much for themselves; • They need to be able to explain what they need/want; • Care workers need to be able to understand what the residents require; • Care workers needs to understand what the residents may feel is wrong; • Makes residents feel more empowered; • Building up of trust; • Part of care value base; 	4 marks

Question Number	Answer	Mark
3(b)	<p>Level one response (1 - 3 marks) Candidates are likely to refer to confidentiality and make only basic comments about the advantages and/or disadvantages of confidentiality. The answer may not be directly related to the case study. SPG may be limited.</p> <p>Level two response (4 - 6 marks) Candidates should give some advantages and disadvantages of the issue of confidentiality. The answer should be directly related to the case study, but may not be so. There may be some mistakes with SPG.</p> <p>Level three response (7-8 marks) Candidates should give clear advantages and disadvantages of the issue of confidentiality. The answer should be clearly related to the case study. There should be very few mistakes with SPG.</p> <p>Possible answers: e.g.</p> <ul style="list-style-type: none"> • Reference to confidentiality; • Means not discussing what service user says/does with others; <p>Advantages of Mita talking to Maria's doctor:</p> <ul style="list-style-type: none"> • Maria's behaviour is becoming bizarre; • She may start harming herself; • She may start harming others; • Allows the doctor to make a diagnosis; • Allows treatment to be given; • Means that the underlying problem about the behaviour may be solved; • enables the service user to speak freely; • Idea of trust is built up between Mita and Maria; • Helps the best treatment to be determined; • Idea that rehabilitation may be quicker; <p>Disadvantages:</p> <ul style="list-style-type: none"> • Maria may feel betrayed; • She may feel disempowered; • She may not talk to Mita in the future; • She may not trust Mita in the future; • Confidentiality may have been breached; 	8 marks

Question Number	Answer	Mark
3(c)	<p>Two from:</p> <ul style="list-style-type: none"> • we are influenced by things we are not aware of/unconscious thoughts/past experiences; • we have three states of mind (id, ego and superego) • uses techniques to reach repressed/unconscious thoughts • bring repressed thoughts into consciousness so they can be discussed 	2 marks

Question Number	Answer	Mark
3(d)	<p>Unconditional positive regard</p> <ul style="list-style-type: none"> • Accepting the person for what they are; • Showing warmth towards the person; • Without reservation; <p>Genuineness</p> <ul style="list-style-type: none"> • Counsellor being 'themselves'; • Showing they have thoughts and feeling; • Which they can express towards the person; <p>Empathy</p> <ul style="list-style-type: none"> • Trying to 'step into the client's shoes'; • To see and experience the world as they do; • Expressing this experience to the client; <p>Importance</p> <ul style="list-style-type: none"> • All these are important in getting the client comfortable; • Means that they will be able to 'talk' more easily; • Helps to speed up recovery time; 	6 marks

Level	Mark	Descriptor
0	0	No rewardable material
Level 1	1 – 3	Candidates will make a few statements about one of the techniques, giving some idea of importance. Or, they may mention two techniques, but not mention any importance.
Level 2	4 – 6	At the bottom end of the range, candidates are likely to make reference to two of the techniques and briefly mention their importance. At the top end of the range, candidates should make it clear that they understand the meaning of two of the techniques and also their importance.

Question Number	Answer	Mark
3(e)	<p>Level one response (1– 3marks) Candidate identifies some advantages of the psychodynamic approach or advantages of the humanistic approach, but these may not linked to the case study/compulsive behaviour. SPG may be limited.</p> <p>Level two response (4-7 marks) Candidate can identify some advantages of the psychodynamic approach and advantages of the humanistic approach. At the higher end of the mark band candidate makes some links to the case study/compulsive behaviour example and make some comparisons. Credit should be given to candidates who make good links but who my not fully consider the advantages of both therapies. There may be some mistakes with SPG.</p> <p>Level three response (8-10 marks) Advantages of both approaches are discussed in some detail and these are clearly linked to the case study/compulsive behaviour. Clear comparisons between the approaches are made. At the top end candidates need to come to a conclusion, weighing up the arguments presented. There should be very few mistakes with SPG.</p> <p>Advantages of a psychodynamic approach:</p> <ul style="list-style-type: none"> • Approach relevant to the problem, e.g. client may not know what is causing the problem • May uncover unconscious reasons for Maria’s depression • Reasons for the depression may lie in the past • Deals with underlying causes, not surface behaviour • Other methods don’t seem to have worked for Marilyn <p>Advantages of a humanistic approach:</p> <ul style="list-style-type: none"> • Counsellor is not intrusive – non-directive • Thus client is given the opportunity to talk • Client may enjoy talking to someone who is not family or friend • Easier to talk to someone sympathetic who is not close • Counsellor meets client as an equal • Counsellor does not ‘show’ expertise • Counsellor is not judgemental • Thus client does not feel threatened • Promotes care value base (or descriptions given) 	10 marks

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