



General Certificate of Education

Sociology 5191

SCY1 Families and Households; Health; Mass Media

Mark Scheme

2006 examination – January 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.

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

1

Total for this section: 60 marks

(a) Explain what is meant by ‘serial monogamy’ (Item 1A , line 7).	<i>(2 marks)</i>
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Two marks for an appropriate explanation or definition, such as marrying one spouse, divorcing them and marrying another; having one spouse/partner after another etc.

(b) Suggest two ways in which marriage and cohabitation are becoming increasingly similar (Item 1A , lines 9-10).	<i>(4 marks)</i>
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Two marks for each of two appropriate reasons suggested, such as:

- trend towards permanence in cohabitations (traditionally a feature of marriage);
- higher divorce rates/trend towards instability in marriage (traditionally a feature of cohabitation);
- increased legal rights of those cohabiting;
- marriage-like public ceremonies for cohabitants (e.g. civil registers);
- loss of stigma formerly attached to cohabitation;
- trend towards having children within cohabitations rather than marriage;
- married couples now more likely than before to remain childless;
- cohabiting couples increasingly taking on obligations associated with marriage.

(c) Suggest three reasons why lone-parent families are usually headed by women (Item 1A , lines 5 – 6).	<i>(6 marks)</i>
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Two marks for each of three appropriate reasons suggested, such as:

- courts tend to give custody/residence of children to mothers in divorce cases;
- fathers may be less likely to give up work to become full-time carers;
- it is a cultural norm that women are expected to remain with their children;
- some lone-parent families never had a father present;
- higher death rate among males than females/more parents are widows than widowers.

(d) Identify and briefly explain two reasons for the increase in the divorce rate apart from changes in divorce law (Item 1A , lines 1 – 4).	<i>(8 marks)</i>
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Two marks for each of two appropriate reasons identified, such as:

- availability of legal aid;
- secularisation;
- women’s greater financial independence today;
- women’s greater dissatisfaction with marriage today;
- lower birth rate/more childless couples;
- increased social acceptability of divorce.

NB: **not** changes in divorce law.

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

- Women’s greater financial independence today: more women working/availability of state welfare benefits means women are not trapped in marriage by financial dependence on husbands.

- Women's greater dissatisfaction with marriage today: the influence of feminist ideas on women's consciousness (*or* the growing tension between patriarchy at home and equality at work) means women are more aware of/dissatisfied with the patriarchal nature of marriage.
- Lower birth rate/more childless couples: as a result, 'staying together for the sake of the children' has become less significant as an obstacle to divorce.

(e) Examine the ways in which feminist sociologists have contributed to our understanding of family roles and relationships. (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 about the family, 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 gender roles. 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 Oakley on the division of labour. Interpretation may not be linked explicitly to the demands of the question.

Higher in the band, knowledge will be broader and/or deeper, and will begin to identify a wider range of feminist contributions. 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 feminism from a New Right perspective or vice versa. 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 feminist contributions. 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 feminist contributions on different aspects of family roles and relationships, including areas other than just the division of domestic labour. Concepts and issues such as the following may appear: patriarchy, age patriarchy, capitalism, equality legislation and policy, domestic labour, symmetry, instrumental/expressive roles, dual/triple burden, domestic violence, decision-making, resource allocation, gender role socialisation, reserve army of labour/reproduction etc. Analysis and evaluation may include debates between different feminist approaches and/or critiques from other perspectives. Sources may include Boulton, Dobash & Dobash, Dunne, Edgell, Firestone, McWilliams, Mount, Murray, Oakley, Parsons, Young & Willmott etc.

Lower in the band, answers may examine a more limited range of material. Towards the top of 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 view that ‘the extended family remains as important now as it was in the past’ (**Item 1B**, lines 10 – 11). (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 extended 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 pre-industrial 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 the rise of 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 extended family today and may make limited use of the Item (e.g. to discuss the ‘loss of functions’ view). 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 ‘functional fit’ thesis.

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 the extended family, drawn from Item 1B and elsewhere. This will be accurately and sensitively interpreted to meet the demands of the question.

Candidates will consider the extended family both today and in the past. Concepts and issues such as the following may appear: the functional fit/needs of industrialism thesis, geographical and social mobility, ascribed/achieved status, exchange theory, migration, the early industrial family, the welfare state, household size, classic and modified extended structures, reciprocity, the divorce-extended family, fictive kin, chosen families, friendship as kinship, choice versus obligation, cross-cultural variations etc. Evaluation may be developed for example through debates about both the past and present significance of the extended family, whether it has changed its character etc. Sources may include Allan, Anderson, Ballard, Chamberlain, Goode, Hareven, Harris, Laslett, Litwak, Parsons, Westwood, Willmott, Young & Willmott 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

2

Total for this section: 60 marks

(a) Explain what is meant by ‘legitimate access’ to the sick role (**Item 2A**, line 2). (2 marks)

Two marks for an appropriate explanation or definition, such as: being recognised or defined officially/by a doctor as being ill, being certified as sick, or similar.

(b) Suggest **two** reasons for ‘ethnic differences in access to professional health care’ (**Item 2A**, line 10). (4 marks)

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

- language barriers;
- existence of alternative remedies within minority communities;
- cultural factors e.g. purdah means requirement to see female doctor;
- inadequacy of NHS provision for conditions likely to affect specific groups, e.g. sickle cell;
- restrictions on access to NHS for those who are not British citizens;
- different ethnic groups are likely to be of different classes/have different income levels and so have different access to private care.

(c) Suggest **three** reasons why ‘women are more likely than men to visit the doctor’ (**Item 2A**, line 9). (6 marks)

Two marks for each of three appropriate reasons, such as:

- more contact with GPs through their responsibility for taking children/caring for other family members;
- more acceptable for women to talk about feelings;
- more acceptable for women to admit to being ill;
- more illnesses, eg reproductive or psychological;
- more time available during surgery hours.

(d) Identify and briefly explain **two** criticisms made of Parsons’ view of the medical profession and the sick role, **apart from** those referred to in **Item 2A**. (8 marks)

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

- it assumes doctors know best/are experts;
- it ignores class differences in access;
- it assumes doctors are altruistic;
- it doesn’t account for chronic/incurable illness;
- it doesn’t account for some forms of mental illness;
- the medical profession is now bureaucratised.

NB: **no** marks for the following: it ignores the importance of gender differences in health care; it neglects ethnic differences in access to professional health care.

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

- it assumes doctors know best/are experts: however, in some cases, doctors have little or no objective knowledge, or have less knowledge than their patients.
- it ignores class differences in access: e.g. class, income, cultural capital etc may affect patients' ability to access the sick role.
- it assumes doctors are altruistic: however, conflict theorists argue that they serve their own self-interest.
- it doesn't account for chronic/incurable illness: the model is based on the idea that the patient cooperates in their treatment in order to get well, but recovery is not possible with some conditions.
- it doesn't account for some forms of mental illness: for example, where the patient doesn't recognise that they are ill.
- the medical profession is now bureaucratised: doctors no longer have professional autonomy to determine treatment.

(e) Examine the ways in which health and illness are socially defined and constructed.

(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 about health and illness, 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 problems of defining illness. Interpretation of material may be simplistic or at a tangent to the question, for example drifting into a weak account of class and health. 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 a study of labelling and mental illness, or different models of health. Interpretation may not be linked explicitly to the demands of the question; for instance, answers may indiscriminately list material on social causes of ill health.

Higher in the band, knowledge will be broader and/or deeper, and will begin to identify a wider range of ways in which health and/or illness are constructed. Material will be interpreted accurately, but its relevance may not always be made explicit. There may be some limited analysis and/or evaluation of social construction, for instance from a biological perspective. 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 the social construction of health and illness. 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 ways and will deal with both health and illness, though not necessarily equally. Concepts and issues such as social construction, labelling, social and medical models, lay theories of health, mental illness, physical illness, disability/impairment, cross-cultural and historical comparisons, medicalisation, patriarchy, doctor-patient interactions, professional power etc may appear.

Lower in the band, answers may examine a more limited range of ways. Towards the top of 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 sociological explanations of why 'health-damaging behaviour is more common among some social groups than others' (**Item 2B**, lines 9-10). (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-commonsensual points e.g. about smoking and health, 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 social causes of illness. 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 an explanation of inequalities in health, 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 may begin to deal explicitly with behavioural factors and to make limited use of the Item (e.g. to discuss why health warnings go unheeded). 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 behavioural model from a materialist 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 behavioural differences related to health, drawn from Item 2B and elsewhere. This will be accurately and sensitively interpreted to meet the demands of the question.

Candidates will consider two or more different types of group (e.g. class, gender, ethnic, age). Concepts and issues such as materialist/structural and behavioural/cultural explanations, material and cultural deprivation, structural constraints, actor's perspective, rationality, risk-taking, self-concept, socialisation, gender roles/identities, ethnocentrism etc may appear. Evaluation may raise issues for example about the determinants of risk-taking, and how far behavioural differences account for health differences.

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

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

(a) Explain what is meant by ‘agenda-setting’ (Item 3A , line 4).	<i>(2 marks)</i>
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Two marks for an appropriate explanation or definition, such as:

- deciding in advance what issues the media will discuss;
- the media deciding/influencing what issues the public will discuss by giving prominence to those issues;
- fixing the terms of reference for debate (e.g. in the interests of the powerful).

(b) Identify two sociological models that see the mass media as having ‘only a limited or indirect effect’ on their audiences (Item 3A , line 3).	<i>(4 marks)</i>
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Two marks for each of two appropriate models, such as:

- two-step flow;
- uses and gratifications;
- reinforcement theory;
- reception analysis;
- cultivation analysis.

NB: the ‘active audience’ model or pluralism are allowable on their own but not in conjunction with each other or any of the above.

(c) Identify three concepts, apart from those mentioned in Item 3A , that sociologists might use to understand the process by which ‘the mass media amplify deviance’ (Item 3A , line 11).	<i>(6 marks)</i>
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Two marks for each of three appropriate concepts, such as:

- sensitisation;
- social construction;
- societal reaction;
- stereotyping/labelling;
- self-fulfilling prophecy;
- folk devils;
- moral entrepreneurs;
- crisis of legitimacy/of capitalism;
- social control/crackdown;
- moral panics*.

* Concepts describing specific features of moral panics (e.g. consensus, volatility, disproportionality) are acceptable, but do not credit moral panics in addition to these features.

NB: **not** imitation, sensationalisation or exaggeration (all are in Item 3A).

- (d) Identify and briefly explain **two** reasons why using experiments may be an unsatisfactory way of studying media effects on their audiences (**Item 3A**, lines 8 – 9). (8 marks)

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

- cannot study long-term effects;
- ethical issues;
- cannot control all variables;
- human behaviour is not ‘caused’.

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

- Cannot study long-term effects: experiments are likely to be of limited time-span.
- Ethical issues: they may expose participants to “disturbing” material: exposure may lead to long-term harm.
- Cannot control all variables: experimental subjects bring with them many extraneous, potentially confounding, variables and it may be these not the experimental variables that determine their responses.
- Human behaviour is not ‘caused’: it is misguided to look for causes of behaviour. We should look at what people choose to do *with* the media or the meanings they give to it, not what it does *to* them.

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| (e) Examine the ways in which the mass media portray any two of the following: ethnicity; sexuality; disability. (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 e.g. about a particular media portrayal, 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, e.g. on gender representations. 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 of aspects of a study of representations of ethnicity, sexuality or disability. Interpretation may not be linked explicitly to the demands of the question; for instance, answers may also indiscriminately list material on gender instead of sexuality. 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 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 the way groups are represented. 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 such as the following may appear: stereotyping, the white gaze, institutional racism, able-bodyism, homophobia, gender divisions within groups (e.g. gay men and lesbians), images of the Third World/asylum seekers etc, typologies of representations, under-representation/symbolic annihilation, media professionals, advertisers, representations in different genres, media etc, changes in representations, positive representations, minority media. Sources may include (on disability) Darke, Cumberbatch and Negrine, (on sexuality) Dyer, Connell, Gross, (on ethnicity) Hall, Jhally and Lewis, Hartmann and Husband, Van Dijk 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 3B** and elsewhere, assess the hegemonic view of the mass media.
(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 media, 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 bias in media output. 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 relevant theory of the media, 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 hegemonic approach and to make limited use of the Item (e.g. to discuss the role of media personnel). 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 pluralist viewpoint.

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 theories of the media 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, media professionals, agenda-setting, gatekeeping, news values, hierarchies of credibility, engineering a consensus, discourse analysis, connotative codes, audience choice, organisational and practical factors etc. Analysis and evaluation may be developed for example by contrasting the hegemonic and other models, e.g. pluralist, instrumentalist Marxist, postmodernist, feminist, or by discussion of the dominant ideology thesis. Sources may include Gramsci, Marcuse, Miliband, Althusser, Hall, Fairclough, Galtung and Ruge, Grossberg et al, the Glasgow Media Group, Whale, N. Jones, Abercrombie 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.

ASSESSMENT GRIDS FOR AS SOCIOLOGY (5191) 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