

Mark Scheme (Results)

January 2020

Pearson BTEC Level 3 Health and Social Care

Unit 1: Human Lifespan Development (31490H)

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#### Unit 1: BTEC Level 3 - Health and Social Care

### General marking guidance

- All learners must receive the same treatment. Examiners must mark the first learner in exactly the same way as they mark the last.
- Marking grids should be applied positively. Learners must be rewarded for what they have shown they can do, rather than be penalised for omissions.
- Examiners should mark according to the marking grid, not according to their perception of where the grade boundaries may lie.
- All marks on the marking grid should be used appropriately.
- All the marks on the marking grid are designed to be awarded. Examiners should always award full marks if deserved. Examiners should also be prepared to award zero marks, if the learner's response is not rewardable according to the marking grid.
- Where judgement is required, a marking grid will provide the principles by which marks will be awarded.
- When examiners are in doubt regarding the application of the marking grid to a learner's response, a senior examiner should be consulted.

#### Specific marking guidance

The marking grids have been designed to assess learner work holistically. Rows in the grids identify the assessment focus/outcome being targeted. When using a marking grid, the 'best fit' approach should be used.

- Examiners should first make a holistic judgement on which band most closely
  matches the learner's response and place it within that band. Learners will be placed
  in the band that best describes their answer.
- The mark awarded within the band will be decided based on the quality of the answer, in response to the assessment focus/outcome and will be modified according to how securely all bullet points are displayed at that band.
- Marks will be awarded towards the top or bottom of that band, depending on how they have evidenced each of the descriptor bullet points.

# **BTEC Next Generation Mark Scheme**

# **Health and Social Care Unit 1 January 2020**

Question Number	Answer	Mark
1 (a)(i)	28.8	1
	Accept appropriate wording.	

Question Number	Answer	Mark
1 (a)(ii)	1	1
	Accept appropriate wording e.g. one year.	

Question Number	Answer	Mark
1 (b)	One mark for each aspect correctly identified, in the correct order, up to four marks.	4
	<ul> <li>Adolescence</li> <li>Early adulthood</li> <li>Middle adulthood</li> <li>Later adulthood.</li> </ul>	
	<b>All</b> four life stages must be mentioned in the correct sequential order.	

Question Number	Answer	Mark
1 (c)	<ul> <li>Award one mark for each descriptive point up to four marks.</li> <li>Growth is variable across different parts of the body (1) and is measured using height, weight and dimensions (1).</li> <li>Development follows an orderly sequence (1) and is the acquisition of skills and abilities (1).</li> </ul>	4
	Accept any appropriate alternatives.	

Question Number	Answer	Mark
1 (d)	Award <b>one</b> mark for identification and <b>one</b> additional mark for appropriate expansion up to <b>four</b> marks.	4
	Expansion must be relevant to early childhood.	
	<b>Gross motor skills</b> manoeuvre large muscle groups (1) e.g. coordinating functions for running/skipping/ riding a bike (1).	
	<b>Fine motor skills</b> coordinate precise, small movements involving the hands/wrists/toes/lips/tongue (1) writing /using scissors/controlling a computer mouse (1).	
	Accept any appropriate alternatives.	
	No more than two marks can be awarded for either gross or fine motor skills.	

Question Number	Answer	Mark
1 (e)	Award <b>two</b> marks for correctly identifying schemas and up to <b>two</b> marks for each point/example stated, up to a maximum of <b>six</b> marks	6
	<ul> <li>Piaget viewed schemas as the basic unit or building block of intelligent behaviour (1)</li> </ul>	
	<ul> <li>A schema is a mental concept that informs a person about what to expect from a variety of experiences and situations (1)</li> </ul>	
	<ul> <li>A schema describes a pattern of thought or behavior that organizes categories of information and the relationships among them (1). E.g. Understanding that all blue cars are not 'daddy's car' just because daddy's car is blue, but belongs to the category 'cars' (1)</li> </ul>	
	It can be described as a mental structure of preconceived ideas, a framework representing some aspect of the world (1) e.g. a horse is large, has hair, four legs, and a tail (1) When encountering a cow for the first time, they might initially call it a horse (1)	
	• If parents explain that the animal is actually a very small type of horse, they must at this time modify their existing schema for horses (1). They now realise that while some horses are very large animals, others can be very small (1). Through new experiences, existing schemas are modified and new information is learned (1).	
	The stages of schema formation may be referenced: In assimilation, new information is incorporated into preexisting schemas.	
	In accommodation, existing schemas might be altered or new schemas might be formed as a person learns new information and has new experiences.	
	Accept any appropriate alternatives.	

Question	Indicative content	Mark
Number		
1 (f)	This is not an exhaustive list and any other plausible content should be considered.  Marks should be awarded following the specific marking guidance on page 3.	10
	Credit correct and relevant references to the four types of attachment e.g. Secure; avoidant; Ambivalent; Disorientated	
	At the lower end of the mark bands references to the appropriate theories may be implied rather than explicit.	
	At the higher end of the mark bands references to and knowledge and understanding of the appropriate theories e.g. Bowlby/Ainsworth should be clear and relevant.	
	<ul> <li>Early relationships: e.g.</li> <li>Early bonding with mother and/or father is vital for secure attachment</li> <li>Examples of what this bonding may entail</li> <li>If mother or father absent or not able to bond, there should be bonding with a key carer</li> <li>Reference to Bowlby/Ainsworth's or other relevant theories of attachment</li> </ul>	
	<ul> <li>Adult relationships: e.g. insecure attachment may impact on:         <ul> <li>Ability to form close relationships e.g. with a husband/wife/partner/friends</li> <li>Ability to understand another person's point of view or wishes</li> <li>Individuals may find it difficult to trust others</li> <li>Ability to form professional relationships</li> </ul> </li> </ul>	
	<ul> <li>Excessive use of illegal drugs/alcohol – criminal behaviour</li> <li>Adult behaviour: Secure attachment e.g.</li> </ul>	
	<ul> <li>Should behave in a polite and civil way towards others</li> <li>Should respect other people's differences</li> <li>Ability to be compassionate</li> <li>Ability to forgive</li> </ul>	
	<ul> <li>Critique of attachment theory</li> <li>Czech twins discovered at the age of 7, having been cut off from the outside world, and abused by their stepmother. At the age of 14 they had formed meaningful attachments and showed normal social functioning. This undermines (not disproves) Bowlby's theory.</li> <li>Not found genes, that control attachment, which can suggest that attachment isn't innate.</li> <li>Schaffer and Emmerson/Rutter's studies showed 1/3 that formed multiple attachments with no preferred attachment figure.</li> <li>Credit responses that use alternative theories to evaluate</li> </ul>	

	this approach. Credit any other acceptable responses.	
	eme (award up to 10 marks) refer to the guidance on the ent for how to apply levels-based mark schemes*.	cover of
Level	Descriptor	Marks
Level 0	No rewardable material	0
Level 1	<ul> <li>Demonstrates isolated elements of knowledge and understanding, there will be major gaps or omissions</li> <li>Few of the points made will be relevant to the context in the question</li> <li>Limited discussion which contains generic assertions rather than considering different aspects and the relationship between them</li> </ul>	1-3
Level 2	<ul> <li>Demonstrates some accurate knowledge and understanding, with only minor gaps or omissions</li> <li>Some of the points made will be relevant to the context in the question, but the link will not always be clear</li> <li>Displays a partially developed discussion which considers some different aspects and some consideration of how they interrelate, but not always in a sustained way</li> </ul>	4 - 6
Level 3	<ul> <li>Demonstrates mostly accurate and detailed knowledge and understanding</li> <li>Most of the points made will be relevant to the context in the question, and there will be clear links</li> <li>Displays a well-developed and logical discussion which clearly considers a range of different aspects and considers how they interrelate, in a sustained way</li> </ul>	7 - 10

Question Number	Answer	Marks
2 (a)	Award <b>one</b> mark for the following up to a maximum of <b>two</b> marks:	2
	<ul> <li>Marriage/long term romantic partnership/civil partnership (1)</li> <li>Starting a family/Planned pregnancy (1)</li> <li>Promotion at work (1)</li> <li>Buy/rent first home independently (1).</li> </ul>	
	Do not accept "pregnancy" as it is in the stem. Answers must be relevant to early adulthood. Accept any appropriate alternatives.	

Question Number	Answer	Marks
2 (b)	A maximum of <b>two</b> marks for each point fully and accurately expanded. Award <b>one</b> mark only for identification without expansion/accurate expansion.  Oestrogen levels decrease (1) stop producing eggs (1)  Progesterone levels decrease (1) menstruation stops (1)  Vaginal dryness (1) loss of libido (1)  Night sweats (1) disrupted sleep patterns (1)  Fluctuation in hormone levels (1) leading to mood swings (1)  Accept any appropriate alternatives.	4
	recept any appropriate arternatives.	

Question Number	Answer	Marks
2 (c)	A maximum of <b>two</b> marks for each point fully and accurately identified and expanded with a link to its impact on the individual to a maximum of <b>four</b> marks.  Award <b>one</b> mark only for identification without expansion/accurate expansion.  • Muscular dystrophy (1) causes the muscles to weaken over time/leads to an increasing level of disability (1)  • Down's syndrome (1) affects a child's normal physical development/linked to learning difficulties (1).  • Cystic fibrosis (1) causes the lungs and digestive system to become clogged with mucus (1)  • Lynch syndrome (1) causes an increase in the risk of certain cancers/bowel cancer/womb cancer (1).  Do not accept Huntington's disease as it is in the stem.  Accept appropriate alternatives e.g. brittle bone disease, phenylketonuria (PKU), Klinefelter's syndrome etc.	4

Question Number	Indicative content	Mark
2 (d)	This is not an exhaustive list and any other plausible content should be considered.  Marks should be awarded following the specific marking guidance on page 3.	10
	<ul> <li>Indicative content may include:</li> <li>Financial resources</li> <li>Friendship groups/family contact</li> <li>Physical/mental health and well being</li> </ul>	
	<ul><li>Theories</li><li>Social disengagement theory</li><li>Activity theory</li></ul>	
	<b>Activity theory</b> - takes the view that the ageing process is delayed and the quality of life is enhanced when old people remain socially active, but overlooks inequalities in health and economics that hinders the ability for older people to engage in such activities.	
	The <b>disengagement theory</b> of ageing states that "ageing is an inevitable, mutual withdrawal or disengagement, resulting in decreased interaction between the ageing person and others in the social system he belongs to". The theory claims that it is natural and acceptable for older adults to withdraw from society.	
	Accept any other appropriate theories	
	<ul> <li>Methods of support in sheltered housing</li> <li>Inclusion</li> <li>Provision of activities in sheltered housing</li> <li>Involvement of external support, e.g. related to religious practice/hobbies/education.</li> </ul> Reward any appropriate illustrative examples from	
	source material or learners' own knowledge	
	eme (award up to 10 marks) refer to the guidance on the ent for how to apply levels-based mark schemes*.	cover of
Level	Descriptor	Marks
Level 0	No rewardable material	0
Level 1	<ul> <li>Demonstrates isolated elements of knowledge and understanding, there will be major gaps or omissions</li> <li>Few of the points made will be relevant to the context in the question</li> <li>Limited evaluation which contains generic assertions leading to a conclusion that is</li> </ul>	1 - 3

	superficial or unsupported	
Level 2	<ul> <li>Demonstrates some accurate knowledge and understanding, with only minor gaps or omissions</li> <li>Some of the points made will be relevant to the context in the question, but the link will not always be clear</li> <li>Displays a partially developed evaluation which considers some different competing points, although not always in detail, leading to a conclusion which is partially supported</li> </ul>	4 - 6
Level 3	<ul> <li>Demonstrates mostly accurate and thorough/detailed knowledge and understanding</li> <li>Most of the points made will be relevant to the context in the question, and there will be clear links</li> <li>Displays a well-developed and logical evaluation which clearly considers different aspects and competing points in detail, leading to a conclusion that is fully supported</li> </ul>	7 - 10

Question Number	Indicative content	Mark
2 (e)	This is not an exhaustive list and any other plausible content should be considered.  Marks should be awarded following the specific marking guidance on page 3.	10
	Theories: Thomas Holmes and Richard Rahe decided to study whether or not stress contributes to illness. They surveyed more than 5,000 medical patients and asked them to say whether they had experience any of a series of 43 life events in the previous two years. Each event, called a Life Change Unit (LCU), had a different "weight" for stress. The more events the patient added up, the higher the score. The higher the score, and the larger the weight of each event, the more likely the patient was to become ill.	
	Accept any appropriate alternative theories.	
	<ul> <li>Negative effects</li> <li>Depression and anxiety</li> <li>Pain of any kind</li> <li>Sleep problems</li> <li>Autoimmune diseases</li> <li>Digestive problems</li> <li>Skin conditions, such as eczema</li> <li>Heart disease</li> <li>Weight problems</li> <li>Reproductive issues</li> <li>Thinking and memory problems</li> <li>Positive effects</li> <li>Some stress can be positive if short lived</li> <li>A moderate level of stress makes us perform better in situations such as job interviews or public speaking – can motivate us to work at our highest level and achieve our potential.</li> <li>Stressful situations can also be exhilarating and some people actually thrive on the excitement that comes with dangerous sports or other high-risk activities.</li> </ul>	cover of
Level	ent for how to apply levels-based mark schemes*.  Descriptor	Marks
Level 0	No rewardable material	0
Level 1	<ul> <li>Demonstrates isolated elements of knowledge and understanding, there will be major gaps or omissions</li> <li>Few of the points made will be relevant to the context in the question</li> <li>Limited evaluation which contains generic</li> </ul>	1 - 3

	assertions leading to a conclusion that is superficial or unsupported	
Level 2	<ul> <li>Demonstrates some accurate knowledge and understanding, with only minor gaps or omissions</li> <li>Some of the points made will be relevant to the context in the question, but the link will not always be clear</li> <li>Displays a partially developed evaluation which considers some different competing points, although not always in detail, leading to a conclusion which is partially supported</li> </ul>	4 - 6
Level 3	<ul> <li>Demonstrates mostly accurate and thorough/detailed knowledge and understanding</li> <li>Most of the points made will be relevant to the context in the question, and there will be clear links</li> <li>Displays a well-developed and logical evaluation which clearly considers different aspects and competing points in detail, leading to a conclusion that is fully supported</li> </ul>	7 - 10

Question Number	Answer	Marks
3 (a)	A maximum of <b>two</b> marks can be awarded for each point fully and accurately identified and expanded with a link to its impact on the individual to a maximum of <b>four</b> marks  Skin loses elasticity (1) leads to an wrinkles (1)  Muscles lose flexibility/strength (1) mobility diminishes (1)  Hearing or vision declines (1) leading to difficulties reading/communicating (1)  Immune system weakens (1) increased risk of contracting infections (1).	4
	Accept any appropriate alternatives.	

Question Number	Answer	Marks
3 (b)	A maximum of <b>three</b> marks can be awarded for each point fully and accurately identified and expanded with a link to its impact on the individual to a maximum of <b>six</b> marks.  Answers can also be 3 x 2 if awarding <b>two</b> marks for each point accurately expanded without the depth to justify <b>three</b> marks. <b>Award one mark only for identification without expansion. Self-concept</b> • Self-image may decline (1) due to being <b>seen/see self</b> as unable to look after themselves/lack independence (1) old and frail (1). • Self-esteem will decrease (1) may <b>feel</b> that they are no longer a valued member of society (1) may feel that they are not wanted by her family (1). • Self-image may increase (1) see self as confident/strong by rising to the challenge of new circumstances (1). • May make new friends and participate in new activities in sheltered housing (1) may feel included/loved by new friends/boost self-esteem (1).  Reward any appropriate illustrative examples.	6

Question Number	Indicative content	Mark
3 (c)	This is not an exhaustive list and any other plausible content should be considered.  Marks should be awarded following the specific marking guidance on page 3.	10
	Responses may include:	
	Stress-diathesis model: The theory contends that mental and physical disorders develop from a genetic or biological predisposition for that illness (diathesis) combined with stressful conditions that play a precipitating or facilitating role.	
	The diathesis-stress model is a psychological theory that attempts to explain a disorder as the result of an interaction between a pre-disposition/vulnerability and a stress caused by life experiences	
	The diathesis-stress model assumes that mental illnesses occur due to stressful conditions in the environment interacting with the biological and psychological characteristics of the individual. The model assumes that mental disorders can require a predisposition towards the disease, and it provides a general explanation for why individuals with a predisposition for a disorder, but who live in a healthy environment, may not develop the disorder, and why people who live in a stressful environment without a predisposition may not develop certain disorders.	
	Responses may focus on genetic factors/nature/genotype or environmental/social factors/phenotype – primacy/interaction of these factors	
	The following may be a combination of pre-existing predisposition and life events/life style:	
	<ul> <li>Some evidence that heart disease can be caused by genetic pre-disposition</li> <li>Insomnia</li> <li>Depression</li> <li>Mental illness</li> <li>Cancer - Diathesis-stress is an example of nature AND nurture, as it can be interpreted as a gene or genes switched on by environmental factors.         Research has shown being lonely and stressed could affect the expression of cancer-linked genes, triggering their action.     </li> <li>Reward any appropriate illustrative examples</li> </ul>	

Mark scheme (award up to 10 marks) refer to the guidance on the cover of this document for how to apply levels-based mark schemes*.		
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Level 0	No rewardable material	0
Level 1	<ul> <li>Demonstrates isolated elements of knowledge and understanding, there will be major gaps or omissions</li> <li>Few of the points made will be relevant to the context in the question</li> <li>Limited evaluation which contains generic assertions leading to a conclusion that is superficial or unsupported</li> </ul>	1 - 3
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Level 3	<ul> <li>Demonstrates mostly accurate and thorough/detailed knowledge and understanding</li> <li>Most of the points made will be relevant to the context in the question, and there will be clear links</li> <li>Displays a well-developed and logical evaluation which clearly considers different aspects and competing points in detail, leading to a conclusion that is fully supported</li> </ul>	7 - 10

Question Number	Indicative content	Mark
3 (d)	This is not an exhaustive list and any other plausible content should be considered.  Marks should be awarded following the specific marking guidance on page 3.  Responses likely to include:  Theories of attachment (these may be inferred rather than explicit).  Mary Ainsworth - types of attachment.  Bowlby/Rutter - effects of separation on emotional bonds.  Robertson - study of distress syndrome.  Dys/Functional family life  Participating in joint activities leading to a sense of acceptance developing confidence.  Receiving affection and encouragement develops a sense of self-worth can lead to an individual achieving their potential.  Parental response to behaviour leading to positive/negative view of own value this could become a self-fulfilling prophecy.  Lack of respect from family members leading to lack of respect for self could lead to self-destructive behaviour e.g. Diet/lifestyle impacted.  Joshua's behaviour may deteriorate at school due to a perceived lack of attention from parents leading to not achieving full academic potential.  Joshua may become unhappy due to having less contact with an attachment figure.  May become more independent leading to boosted self-esteem/emotional resilience.  Reward any appropriate illustrative examples.	10
Level	Descriptor	Marks
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Level 2	<ul> <li>Demonstrates some accurate knowledge and understanding, with only minor gaps or omissions</li> <li>Some of the points made will be relevant to the context in the question, but the link will not always be clear</li> <li>Displays a partially developed evaluation which considers some different competing points, although not always in detail, leading to a conclusion which is partially supported</li> </ul>	4 - 6
Level 3	<ul> <li>Demonstrates mostly accurate and thorough/detailed knowledge and understanding</li> <li>Most of the points made will be relevant to the context in the question, and there will be clear links</li> <li>Displays a well-developed and logical evaluation which clearly considers different aspects and competing points in detail, leading to a conclusion that is fully supported</li> </ul>	7 - 10







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