

Mark Scheme (Results)

Summer 2017

Pearson Edexcel GCSE in Health and Social Care (5HS01)

Unit 1: Understanding Personal Development and Relationships



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General Marking Guidance

- All candidates must receive the same treatment.
 Examiners must mark the first candidate in exactly the same way as they mark the last.
- Mark schemes should be applied positively. Candidates must be rewarded for what they have shown they can do rather than penalised for omissions.
- Examiners should mark according to the mark scheme not according to their perception of where the grade boundaries may lie.
- There is no ceiling on achievement. All marks on the mark scheme should be used appropriately.
- All the marks on the mark scheme are designed to be awarded. Examiners should always award full marks if deserved, i.e. if the answer matches the mark scheme. Examiners should also be prepared to award zero marks if the candidate's response is not worthy of credit according to the mark scheme.
- Where some judgement is required, mark schemes will provide the principles by which marks will be awarded and exemplification may be limited.
- When examiners are in doubt regarding the application of the mark scheme to a candidate's response, the team leader must be consulted.
- Crossed out work should be marked UNLESS the candidate has replaced it with an alternative response.
- Mark schemes will indicate within the table where, and which strands of QWC, are being assessed. The strands are as follows:
 - (i) ensure that text is legible and that spelling, punctuation and grammar are accurate so that meaning is clear

- (ii) select and use a form and style of writing appropriate to purpose and to complex subject matter
- (iii) organise information clearly and coherently, using specialist vocabulary when appropriate.

Question Number	Answer	Mark
1	A&C (blinking & pointing)	(1)
Question	Answer	Mark
Number	Answei	IVIALK
2	C (noise)	(1)
Question	Anguar	Mark
Number	Answer	IVIALK
3	B (an individual values themselves)	(1)
Question	Answer	Mark
Number	Allawei	Wark
4	A&D (getting married & getting a job)	(1)
Question	Answer	Mark
Number	Allswei	IVIAIK
5	B (social class)	(1)
Question	Answer	Mark
Number	Allswei	IVIAIK
6	D (an intellectual development)	(1)
Question	Answer	Mark
Number	Allswei	IVIAIK
7	C&D (depression & stress)	(1)
Question	Angwor	Mark
Number	Answer	IVIAI K
8	A (family)	(1)
Question	Anguar	Mort
Number	Answer	Mark
9	C (intellectual development)	(1)
Ougstien	Amouros	Mont
Question Number	Answer	Mark
10	B (adulthood)	(1)
0		N 4!
Question	Answer	Mark

Number		
11	B&C (growth spurt & menstruation)	(1)

Question	Answer	Mark
Number		
12	C (puberty)	(1)

Question Number	Answer	Mark
13	D (socialisation)	(1)

Question Number	Answer	Mark
14	A (make friends)	(1)

Question Number	Answer	Mark
15	A&B (religion & ethnicity)	(1)

Question	Answer	Mark
Number		
Question Number 16(a)	Indicative Content Happy / excited Feel good factor Maintain a healthy lifestyle Boosts immune system Less likely to be ill or suffer from ill health Less stressed Less anxious Less prone to depression Impact on self-esteem, Impact on self-image Impact on self- concept Feeling fulfilled Confident and Socially more communicative Emotionally content More optimistic Can plan for future Will develop new skills Can face challenges positively Motivated	Mark (4)
	Example: Positive life events will make a person happy (1) this will impact positively on their self-esteem (1). A person may also feel fulfilled (1) and content (1).	

Accept other appropriate alternatives.

Questio Number		Indicative Content
16(b)		 It may not change because as a nurse she will have the skill set to deal with it Change both positively or negatively Confidence or anxiety Excited Greater sense of responsibility or worry May be happy or apprehensive May see herself as getting fat / proud of self and shape Self-esteem and self-worth may be affected Be able to use her skills as a nurse/ doubts her own ability Proud of herself / can't visualise herself as a mother Self-image / identity change
Level	Mark	Descriptor
	0	No rewardable material
1	1-2	Brief, limited response, points identified accurately but level of explanation poor.
2	3-4	Points have been accurately identified and links relevantly made. At 3-4 marks the response will lack sufficient points.
3	5-6	For 5 marks limited explanation will be present, at 6 marks explanation will take place and a conclusion should also be present.

Question	Indicative Content
Number	
16(c)	Positively – will bond, happier, fulfilledPositively will be closer

Question	Answer	Mark
Number		

16(d)	Indicative content • More prone to illness • Increase in heart beat • Increased level of tiredness • Prone to headaches/migraine • Prone to sweating • Premature death • Develop poor dietary habits • Loose or gain weight • Insomnia • Physically frustrated and quicker to anger/irritability • Raise blood pressure	
	Example: Ian may feel tired (1) and irritable. (1) He may also have difficulty sleeping (1) and he may develop poor eating habits (1). Accept other appropriate alternatives.	(4)

Question	Indicative Content
Number	
*16(e)	Can afford luxuries
	happier
	Less worry
	No budgeting to do

		Can save their money
		Less stress
		Can afford to do things together more often
		Feel more connected
		But things to support education of children
		 Safe and secure home/good housing
		More relaxed
		Afford more treats
		Could get into debt more easily if they live above their means
		Money isn't everything
		Many families survival happily with a limited income
		Happiness is not always based on income
		Income is relative
Level	Mark	Descriptor
	0	No rewardable material
1	1-2	Brief, limited response, points identified accurately but level of
		explanation poor.
2	3-5	Points have been accurately identified and links relevantly made.
		At 4-5 marks the response will lack assessment and may be a
		one sided response, lacks balance.
3	6-8	•
3	0-0	At 6-7 marks limited assessment will be present, at 8 marks
		assessment will take place and a conclusion should also be
		present.

Question	Answer	Mark
Number		
17(a)	3 x 1	
	Skin loses its elasticity	
	Decline in senses – eyesight / hearing	
	Respiratory system slows down	
	Metabolic rate is slower	
	Reduction in taste buds	
	Cardiovascular systems slows down	
	Reduced bone density	
	Muscle wastage	(3)

Mobility is slower / stiffer joints	
Reaction time is slower	
Compression of discs leading height reduction	
Hair loses its pigmentation, texture of hair changes	
•	
Accept other appropriate alternatives.	
DO NOT ACCEPT - hair turns grey, gets shorter	

Question Number	Answer	Mark
17(b)	How a person sees themselves (1) the looking glass self (1) or Part of the overall self-concept (1) how they see themselves from their own perspective (1) Developed as a result of our socialisation process (1)	(0)
	Accept other appropriate alternatives.	(2)

Question Number	Answer	
17(c)	 Growth – will feel stronger Aids recovery Aids the convalescence periods and speeds recovery On hand to provide practical help Someone to talk to Someone who can provide advice Individual will not feel as isolated Eva will be less vulnerable and more secure Build trust / confidence Less likely to get depressed Stimulated with Kaitlyn/Alf coming and going Feels happier and more content 	
	Example: The benefits will include having someone there to provide practical support (1) and therefore she will feel happier (1). Eva may feel more confident in herself (1) as she has someone to talk to (1). Accept other appropriate alternatives. Some candidates will provide the reverse argument e.g. if she didn't have support she would feel stressed, depressed etc	(4)

Questio	n	Indicative Content
Number 17(d)		 Difficulty being understood Difficulty communicating Difficulty in making friends Difficulty in forming new intimate relationships Can't understand others Could be perceived as aloof Can't engage and becomes marginalised/isolated/discriminated Getting a job may be problematic Will not make an effort and become excluded May affect her ability to undertake a programme of study Eva may not perceive poor English as a problem She may use social media to be understood May not want to integrate into society
Level	Mark	Descriptor
	0	No rewardable material
1	1-2	Brief, limited response, points identified accurately but level of discussion is poor.
2	3-4	Points have been accurately identified and links relevantly made. At 3-4 marks the response will lack discussion and may be a one sided response, lacks balance.
3	5-6	For 5 marks limited discussion will be present, at 6 marks discussion will take place and a conclusion should also be present.

Question Number	Answer	Mark
17(e)	Indicative content Award 1 mark for identification. GP Counsellor CPN/mental health worker Social worker Care assistant Description They can talk through problems Devise coping strategies Help individual recognise the triggers Offer advice Amend the care plan Referral Medication	
	Example:	

GP (1) who will talk through her problems (1). Will identify coping strategies (1) and offer advice (1).	(4)
Accept other appropriate alternatives. No marks for responses where identification of formal support is NOT clear.	

Question		Indicative Content
Number		
*17(f)		 Presents new opportunities New culture to learn about May miss homeland or may adopt the UK as her home Citizenship / Identity Opportunity to learn new language Opportunity to learn new history and traditions Share their traditions and culture with others New foods to taste Intellectually a challenge for many people, which may be good or bad May withdraw from society May be socially excluded / isolated/ discriminated May miss friends/family May be scary Anxiety and stress High Risk
Level	Mark	Descriptor
	0	No rewardable material
1	1-3	Brief, limited response, points identified accurately but level of assessment is poor.
2	4-6	Points have been accurately identified and links relevantly made. At 4-5 marks the response will lack of assessment but at 6 marks limited assessment to the importance of his development will take place.
3	7-8	At 7 marks assessment clearly evident, at 8 marks a conclusion should also be present.

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