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Examiners' Report

Principal Examiner Feedback

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Pearson Edexcel GCSE

In History (1HIA 11)

Paper 1: Thematic study and historic environment (1HIA 11)

Option 11: Medicine in Britain, c1250–present and

The British sector of the Western Front, 1914–18: injuries, treatment and the trenches

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# PE Report Paper 11, Nov 2021

## **Introduction**

The small number of entries for this paper means that it is difficult to draw conclusions about candidates' overall performance, although the answers seen suggest that this paper was taken by students of the full range of ability. There were some blank answers but this seems to have been as a result of lack of knowledge rather than problems in completing the paper within the time allowed.

The Historic Environment has a focus on the process of history, considering the value of sources as evidence and the way an historian follows up an enquiry, but it is nested within the context of the Thematic Study and therefore knowledge of the specific context is expected.

The Thematic Study focuses on change and continuity over time and, therefore, a good sense of chronology is vital. Candidates should be familiar with the names given to the different periods in the specification and recognise the dates and key events involved in these chronological divisions. They also need a clear understanding of the key themes and the factors involved in the Thematic Study, as identified in the specification.

In the extended answers, the stimulus points are usually intended to remind candidates to cover different aspects of content and the full timescale of the question. Candidates do not need to include these stimulus points in their answer, but they do need to cover three aspects of content in order to show breadth in their answer and to access the higher marks. They should also realise that stimulus points given in one question are unlikely to be relevant to another question and any attempt to use them in this way usually means that those sections of the answer are irrelevant and the answer lacks coherence.

## **Question 1**

This question always asks candidates to provide details about something named in the specification. It was, therefore, disappointing to see that many candidates did not know the role of dressing stations, although dressing stations and other stages in the evacuation route are named in the specification. A few answers demonstrated good knowledge by providing specific details but some answers appeared to be based on the sources used in question 2, asserting that dressing stations performed amputations and blood transfusions. Other answers made generalised comments and claimed that doctors at this time did not know about infection and the importance of hygiene.

## **Question 2a**

It was pleasing to see that some candidates offered good comments based on the content of the sources or their provenance. However, a number failed to include any

comments based on own knowledge, meaning that the answer could not go beyond Level 2.

There were also some answers which tended to dismiss a source as not being useful because of information it did not contain. Since the question asks candidates to evaluate the usefulness of a source, it can be valid to note the limitations of a source but these points need to be used in an overall evaluation of the usefulness of the source; an answer which focuses on 'missing' information without looking at positive aspects of the source, is unlikely to score highly.

A small minority of answers failed to address the question and did not comment on the usefulness of the sources, instead stating what the source showed or writing an answer about blood transfusions based entirely on their own knowledge.

### **Question 2b**

Marks are often lost in this question when the answer does not follow the format in the question paper. A detail from the source needs to be identified and a question proposed that is linked to that detail. If a detail is not selected in the first part of the answer, no mark can be given for the first or second part.

It is also important that candidates recognise the focus of the enquiry in the question. Too many answers did not score a mark because they wanted to follow up a detail from Source A about gangrene or amputation whereas the focus of the question was 'the use of blood transfusions on the Western Front'.

Candidates should be as precise as possible when suggesting a source to help them carry out their enquiry and they should remember that this must be a contemporary source – suggestions of textbooks or the internet will not be rewarded. The explanation of how the suggested source would help to answer the proposed question should again be specific about the type of information the source could provide. Statements such as 'It would tell me what I want to know' or 'It would have the information to answer my question' will also not gain any marks.

When multiple suggestions had been given to a sub-question, it was usually counterproductive. Offering more than one detail or question meant that the follow-up sections were not clearly linked, while offering multiple sources meant that the explanation in the final section was usually invalid.

### **Question 3**

This question asked candidates to identify a difference in surgery between two periods and this then needed to be supported by details from each period. Many answers failed to score full marks because they either identified a general difference in surgery without

providing details from each period or they juxtaposed details from each period, but the difference was left implicit. In some cases, the detail offered did not support the difference that had been identified, for example the use of anaesthetics in the later period was identified as a difference but then the supporting details were about the use of antiseptics.

Some answers did not focus on both time periods in the question, instead just describing surgery within one of the specified time periods. Other answers did not recognise the dates in the question and provided irrelevant details.

#### **Question 4**

Most students knew about Jenner's discovery of a vaccination against smallpox and some could also explain the importance of the Public Health Act of 1875 in preventing disease. Another key reason offered was an explanation of the work of John Snow.

Some answers were not able to provide examples other than those provided in the stimulus points and some lacked a clear understanding that the question was focused on changes in the prevention of illness. Answers which discussed the germ theory and the work of Florence Nightingale were not well focused; too often they were about improvements in surgery and hospitals rather than about preventing illness. There was also a number of answers which discussed treatment of illness instead of prevention or which claimed that vaccination was a cure for illness.

#### **Question 5**

Most answers confidently explained that there was little change in treatment because the Church taught that disease came from God, although relatively few answers developed this by providing supporting detail such as religious reactions to disease, for example pilgrimage, penance and flagellation. Some answers explained that the Church preserved Galen's teachings but this was not always accompanied by an explanation of why the Church had this attitude or the significance of this attitude in view of Church's role in medical training.

Some candidates tended to see the Church as deliberately hindering progress, blaming the Church's control over education and training for the prevention of new ideas, and did not recognise that other factors were also involved, such as a lack of technology. However, other answers qualified their judgement by explaining the reason the Church's influence was significant was that there was little input from the authorities or any other body and the Church was the only organisation offering care. Answers also noted that many people could not afford to visit a trained physician and continued to use herbal remedies.

Answers were often phrased generally, using the term 'medicine' or 'treatment' and did not address the question focus on care and treatment. Consequently, there was little discussion of hospitals or care in the home. Some answers lacked a secure sense of

chronology. Candidates are reminded that questions will span at least 200 years and strong answers will demonstrate a range of examples covering the period in question.

### **Question 6**

This was the less popular choice and candidates tended to offer generalised comments about the printing press spreading knowledge, together with a description of the work of Vesalius. It was often assumed that printed medical books were read by the general population and therefore medical knowledge improved among society as a whole. Few answers included specific details about the significance of the books by Vesalius, Harvey and Sydenham or their impact on medical training and candidates also tended to assume that improved knowledge of anatomy automatically led to improved treatment.

### **Conclusion**

There were some impressive answers where candidates demonstrated excellent knowledge in well-structured responses. However, many answers lacked detailed knowledge or did not focus on the specific question.

The following points should be noted:

- Candidates need a secure understanding of the chronological periods and terms used in the specification as well as the term 'century'
- Candidates need to understand the themes within the specification and the specialist terminology
- In questions involving extended writing, it is not necessary to use the question's stimulus points and candidates should not attempt to do so if they do not recognise them; however, candidates should aim to cover three aspects of content in their answer.
- While there was good knowledge of some topics, candidates cannot rely on knowing just a few key topics and hoping to use that information whatever question is asked.