

Examiners' Report  
June 2016

GCSE History 5HB01 1A

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## Introduction

It was clear that teachers and candidates had taken notes of comments made in the 2015 report regarding the strengthened specification and the revised format of the paper. In both Question (Q)1 and Q3 there was good use of additional contextual knowledge, which is required at the higher levels of the mark scheme.

In many cases, there was also good knowledge of the topics in the questions. Candidates seemed to understand that presenting information is characteristic of a Level 2 answer and that to move to Level 3, answers must show why that information is relevant to this specific question. It might also help more candidates to achieve this if they identify the target concept and check whether the question is about causation, change, continuity, consequences etc. Each of these requires a different approach, and relevant material needs to be deployed in a different way. Nevertheless, it was pleasing to see how many students attempted to do this, even if sometimes it was simply through an assertion that 'this shows why...'

In Q4 and Q5, candidates were expected to analyse and it was enough to explain a range of cause/effects/aspects of change etc; however, the 16-mark questions always ask for evaluation. Here again, many candidates had clearly been well prepared and adopted a structure of: evidence supporting the statement in the question, evidence challenging it, conclusion. This was a valid approach for Level 3 but for Level 4 there must be more than simply a summary of the two sides of the issue and the decision that the statement was 'somewhat' true. At Level 4, there should be a sense of evaluation, showing which evidence carries most weight. Ideally, this will create a sense of argument running throughout the answer and the best answers usually have plans, which show that the argument was thought through before writing began.

Most candidates also understood the need for depth and breadth in the extended answers. While it was not essential to use the two stimulus points that were given, it was expected that a good answer would cover three aspects or more, in order to show breadth of coverage. It was also helpful to have these three aspects clearly delineated and where candidates did not structure their answer in paragraphs, examiners may have found it difficult to confirm that three aspects had been covered.

Chronology remains a central issue on this paper. Since it is a study in development, questions will often cover a specific timescale and candidates must be able to recognise the relevant periods. The most frequent difficulty was failing to differentiate between the nineteenth century and dates in the 1900s, but candidates also needed to know the period covered by terms such as the Middle Ages/medieval period, the Renaissance /sixteenth and seventeenth centuries etc. Candidates needed to be able to place key people, events and developments into the correct context and avoid anachronisms. Knowing the approximate dates of a period was also important when analysing change and continuity: the gap between the Roman period and the Renaissance is over 1,000 years, and there are 400 years from the end of the Middle Ages to the nineteenth century.

Linked to this was the issue that candidates noticed key terms indicating the topic, but did not analyse the question properly. Terms such as 'during the years', 'since 1900', or 'in the nineteenth century', gave a clear timescale for their answer and material outside these dates was unlikely to be rewarded highly.

As noted last year, candidates using additional paper for Q1 rarely benefitted from doing so. Usually, taking extra paper on Q1 was counter-productive: the additional material simply consisted of detail about the individual sources or repeated points already made. Indeed, some of the best answers were concise, while in some lengthy answers, the focus was lost or the analytical point being made lost impact because it was overwhelmed by detail. The corollary to this was that candidates often found it difficult to finish the final question, which carried one-third of the total marks available.

Handwriting is becoming an issue of major concern. While examiners work hard to decipher poor handwriting, it destroys the flow of an extended answer and can also affect the marks awarded for spelling, punctuation and grammar (SPaG).

## Question 1

There was a marked increase in the use of own knowledge to explain the changes illustrated by Sources A and B. This meant that far more answers reached Level 3 or could be awarded higher marks in Level 2, instead of being restricted to 4 marks. However, some candidates treated this as an open-ended question on change between the dates of the two sources. The question said 'What do Sources A and B show about changes ...?' and therefore comments about change and the use of own knowledge must be linked to details in the sources. Some very good answers, which explained change between the dates of the two sources yet with no reference to details in the sources, remained at Level 1.

Alternatively, answers that treated the sources separately could not achieve marks beyond Level 1, even if they included a lot of additional detail, because the focus of the question was 'change'. Another problem was that when the focus on change was left implicit – with Source A discussed and then Source B – the use of words such as 'more' or 'different' were the only indication that there was a change between the two sources. Other answers focussed on one aspect of Source A and a different aspect of Source B, making it difficult to identify what change had occurred.

It should also be noted that identifying a difference between the two sources is not the same as inferring and explaining a change: this is not a question about whether or not change did occur and therefore answers about continuity received no marks.

Good practice is to identify in the first sentence the change that has occurred, and then to develop the explanation based on the sources and the use of additional knowledge. This would avoid the problem where the answer had a lengthy description of each source and only addressed the focus on change at the end. For Level 3, the explanation should focus on the nature or extent of change. Additional detail might be provided to show how or why the change occurred, or to illustrate the change in nature, or the extent of the change. It should be noted that it is not enough to state 'a huge change occurred' to access Level 3 – details from the sources and own knowledge must be provided to show that the change was huge.

A key point in this question was that it asked about changes in the medicines that people could buy. Although Source A was a recipe for an herbal remedy, the caption stated that it was a recipe for a medicine that was sold during the sixteenth century, and the question also specifically referred to medicine that people could buy. A number of answers ignored this focus and wrote about the change from herbal remedies made by the woman in the family, to mass-produced chemical remedies.

Candidates seemed more confident providing additional detail linked to Source A rather than Source B. Interestingly, many answers assumed that modern medicine does not contain any natural ingredients or dangerous elements. Valid additional details that could be linked to change included the:

- role of the apothecary and modern pharmaceutical companies
- natural basis of sixteenth century medicines (including dangerous ingredients) and the clinical trials and measured dosage of modern medicines
- changes in medical understanding and the significance of Pasteur's germ theory in identifying the cause of disease and stimulating the production of a range of targeted medicines.

While it was impressive to see excellent own knowledge, for example comments about the work of Brockeden and the mass-production of tablets, it was not necessary to include large amounts of detail in this question. However, where detail was given, it did need to be linked to the change that was being discussed.

1 What do Sources A and B show about changes in the medicines that people could buy?

Explain your answer, using Sources A and B and your own knowledge.

(8)

In source A it shows a list of herbal ingredients used in a recipe for medicine, during the 16<sup>th</sup> century they used herbs as treatment as they ~~still~~ weren't yet aware of germs and therefore the church and wisewomen would make the medicine.

However due to Flemings discovery in 1928 of penicillin and Florey and Chains research in 1939, medicine began to be produced that was scientifically proven due to Louis Pasteur's germ theory in 1861. From then on more medicine began to be produced such as the first "magic bullet" called salvarsan 606. Therefore ~~x~~ due to the scientific discovery of the germ theory and ~~the~~ individual brilliance, medicine became effective. Therefore source A compared to source B which shows a pharmacy filled with modern day tablets, shows a change in the medicine available from herbal remedies to proven medical and scientific tablets.



## ResultsPlus

**Examiner Comments**

The answer identifies the change in the sources from herbal remedies to scientific medicine and uses additional own knowledge to support the comments made. It gained full marks.

8 marks



## ResultsPlus

**Examiner Tip**

A good way to start your answer to Q1 is to identify the change in the first sentence and then use the sources and your own knowledge to explain it more fully.

Source A shows

(8)

In the sixteenth century the ingredients used to make an ointment were very simple as there were few items needed for it. Then it was a home remedy style of making medicine as it consisted of using mostly plants. There were downsides to making this ointment because it could not cure everything as there are a wide range of diseases people could of had that this old ointment could not heal. This special medicine would of most likely been made by a witch doctor at the time and would have been expensive.

Source B shows that nowadays, medicine can be mass produced, probably without the need of human work. The ingredients used would have also been different as there are more complex diseases that need ~~the~~ advanced recipes. Also, they are now a over-the-counter medicine which you can get any time for a reasonably cheap price.



### ResultsPlus

Examiner Comments

This answer identifies a change between the two sources but it does not use any additional own knowledge and therefore it cannot go above 4 marks.

4 marks



### ResultsPlus

Examiner Tip

Read the question carefully – highlight any instruction to use own knowledge.

## Question 2

The topics named in Q2 are taken directly from the specification, so candidates should be confident in writing about them and should be able to identify at least two key features or aspects and provide supporting details. The question asked about key features (plural) and therefore candidates should be aware that one key point, however well developed, could achieve only a maximum of five marks.

Answers seemed to be fairly evenly divided between Hippocrates and Florence Nightingale. When writing about Hippocrates, answers usually explained his emphasis on a rational cause of illness, the idea of the Four Humours and Clinical Observation, and sometimes included the Hippocratic Collection or the Hippocratic Oath. However, a number of candidates confused Hippocrates and Galen. Hippocrates did not develop the Theory of Opposites and while it was valid to say that Hippocrates' ideas were developed later by Galen, an answer that was mainly about the Theory of Opposites could not achieve high marks. Some candidates mistakenly thought that Galen developed the idea of the Four Humours and Hippocrates then developed the Theory of Opposites. There was also a number of candidates who appeared to feel that Hippocrates was a group and spoke about 'the Hippocrates'.

When writing about Florence Nightingale, most students described her:

- work in the Crimea
- belief in miasma and therefore the importance of hygiene
- training for nurses
- books.

Some students also knew about her:

- work on hospital design
- use of statistics, including her
- development of the pie chart.

However, a number of answers lacked precise details.

- The war in which Nightingale worked was often confused, with the First World War named most commonly
- She was described as the first nurse
- It was stated that she trained doctors
- She was linked to the germ theory

Alternatively, details about her background were well known but not relevant because the question was about the key features of the individual's ideas.

Examiners felt that answers on Hippocrates were more likely to be divided into paragraphs, identifying different features and therefore reaching full marks, than answers on Nightingale, which often adopted a narrative structure and blurred the identification of separate key features. Answers on Nightingale also seemed to include a higher number of weak generalisations, such as 'She made hospitals cleaner' or 'She improved the care for patients' and lacked precise details.



2 The boxes below show two people who had an influence on medicine.

Choose **one** and explain the key features of their ideas.

(6)

Hippocrates

Florence Nightingale

Hippocrates was a ~~great~~ <sup>Greek</sup> philosopher, alive from 460BC - 370BC. He had a great impact on medicine.

Hippocrates theory of the Four Humours theorised that everyone had their own balance of humours - blood, phlegm, black bile and yellow bile - which were linked to the ~~s~~ four seasons. When they were out of balance, you became ill. This theory stayed in place and was the main theory behind what caused disease until the 1600s.

Hippocrates also contributed clinical observation and the Hippocratic Oath. Clinical observation - still used today - meant watching a patients symptoms until ~~you~~ a doctor could confidently diagnose the patient. ~~Clinical~~ <sup>The Hippocratic</sup> oath means doctors can't purposefully harm their patient.



## ResultsPlus Examiner Comments

This answer on Hippocrates covers three key aspects of his ideas:

- the Four Humours
- clinical observation
- the Hippocratic Oath

It gained full marks.

6 marks



## ResultsPlus Examiner Tip

Starting a separate paragraph for each new idea makes it clear to the examiner that you have covered more than one key idea.

2 The boxes below show two people who had an **influence on medicine**.

Choose **one** and explain the **key features** of their ideas.

(6)

Hippocrates

Florence Nightingale

Florence Nightingale simply had a vision, and that was to help out men on the battlefield and all-in-all be a nurse. Florence was brought up in a wealthy family and was almost drowned and neglected by her parents when they were told she wanted to be a nurse. Her parents had said that it is not a job for the rich. During this time women were going through a bad stage; they were not allowed to study in Universities and their only jobs were a nurse, a nun or a wise woman. Florence almost stood up for every woman and as a rich lady it was very rare you saw that. All she wanted to do was help out and so she did; she went and treated many soldiers on the battlefield. Most importantly, the death rate of the soldiers actually started to decrease and many soldiers survived; she made a huge impact on medicine.



**ResultsPlus**  
**Examiner Comments**

This answer is very generalised. It has some valid detail therefore it was given the top mark in Level 1 but it relates more to Florence Nightingale's background than to her ideas, therefore it cannot be placed in Level 2.



**ResultsPlus**  
**Examiner Tip**

This answer needs to develop the comments about what Florence Nightingale did, so that the answer explains Nightingale's key ideas.

### Question 3

In 2015, most candidates could make valid comments about the value of a source based on its content but they rarely took into consideration whether or not the value of this information was affected by considerations of reliability. It was disappointing to see that this trend has continued in 2016, meaning that relatively few candidates achieved Level 3. However, this year, more candidates were able to access the upper marks in Level 2 because they brought in the use of additional contextual knowledge.

Level 1 answers, where candidates assumed that a source's usefulness (or reliability) depended simply on its nature, date or the amount/clarity of detail, were few. Comments at this level were generalised and could have applied to any similar source: it is a drawing, so it could be exaggerated; it is from the time, so it is reliable; we do not know who drew it, so it is unreliable; it was drawn to inform people, so it is reliable.

The majority of answers were in Level 2. At the lower end of Level 2, the source content was described, with the implicit assumption that it was useful to have this information because it was relevant. Such answers said that it was helpful to know that plague searchers were used, cats and dogs were killed, and bodies were buried in large pits. More thoughtful answers developed the explanation of why this information was helpful and they showed that inferences could be drawn from the content about the scale of the epidemic, the effectiveness of the measures taken or the role of the Lord Mayor.

Many of these comments were further developed by the use of own knowledge, for example an explanation of the practice of quarantining inhabitants of a plague house, the closure of theatres, the role of plague doctors, orders about prayer and fasting (although flagellants were not a feature of the 1665 plague). However, describing the content and then stating 'I know this is true' did not count as the use of own knowledge.

It should also be noted that a general list of what is not mentioned in the source is unlikely to be rewarded, unless there is an explanation of how that information would help the historian to answer the specific enquiry in the question. In this case, the enquiry was about ways of preventing the spread of disease and therefore general information about the symptoms of the plague or ideas about its cause, was only relevant when linked to ideas about prevention. Similarly, a discussion of medical knowledge, and why various treatments and preventions were ineffective, was not relevant here, when the focus was on the value of the source as evidence, not the problem of infectious diseases.

Fewer candidates focussed on reliability and these were more likely to make assertions without providing supporting evidence or showing how it affected the source's usefulness. The automatic claim that the source was biased was made frequently, with an implicit assumption that this is a negative point but with:

- no explanation of the bias (towards/against ...?)
- no details offered to demonstrate this bias
- no explanation of how this affects the source's utility.

Similarly, it was noted frequently that the source was primary and it was assumed that coming from the period in question, it was automatically reliable and valuable. Alternatively, the fact that the artist's name was not given was seen as a limitation, without any explanation of how reliability would have been increased if the name had been given. A number of candidates also used a checklist approach here, writing a comment about the nature, origin, and purpose of the source, but presenting these as statements that were undeveloped and not applied to show how they affected the source's utility.

Higher quality answers focussed on:

- the nature and purpose/intended audience of the source
- considering whether it was a private or public source

- if it was intended to influence other people, or
- whether or not the circumstances distorted the source content in any way.

Some candidates suggested this illustration was propaganda, without explaining the purpose or audience of that propaganda. However, some perceptive comments included the suggestion that it was created in order to reassure the people of London that the Mayor was taking action.

Additional knowledge was used here, to discuss whether or not the source showed a typical or unusual situation and whether the author's knowledge was sufficient to allow this to be treated as an authoritative source. Relatively few responses considered that the question was about preventing the spread of infectious diseases, and the source related only to the plague epidemic in London in 1665, but they were usually high-achieving answers. Meanwhile, some answers became confused about chronology – comments about the Black Death did not apply here, and cholera did not reach Britain until 1831.

It is understandable that schools will try to help candidates to structure their answer and many acronyms were visible but these were not always appropriate or candidates could not apply them properly. Too many comments consisted of statements such as 'The source is from the time so it is reliable but it is not reliable because we don't know who produced it'. Consideration of a source's provenance and reliability does not have to be negative. While the source content may not be complete, an objective presentation or the purpose to inform people about a situation may provide added weight to that content.

The best answers considered the usefulness of the content but modified the judgement about usefulness through a consideration of reliability or whether the source could be treated as representative of the period. However, this nuanced evaluation had to be based on an exploration of the strengths and limitations of different aspects of the source's reliability and utility. For example, answers consisting of a paragraph asserting the source's usefulness or reliability, then a paragraph asserting it was not useful or it was unreliable, followed by the conclusion that it was 'partially useful', or 'useful to a certain extent', was not an evaluation.

In some cases, excellent answers were limited to four marks because they did not include additional own knowledge.

**Source C:** Scenes from an illustration, 1665. It shows some of the actions ordered by the Lord Mayor of London: plague searchers, the killing of cats and dogs and the burying of bodies in the plague pits.



3 How useful is this illustration to a historian who is investigating ways of preventing the spread of disease in the seventeenth century?

*it doesn't tell you how effective*

Use Source C and your own knowledge to explain your answer.

(8)

In some ways the illustration is very useful to a historian as in 1665 when the great plague arrived, in 9 dogs and cats were ordered to be killed and bodies were buried however it also doesn't tell the whole picture as many of the other ways that people tried to prevent getting the plague are not shown in the illustration. These include boarding the house of a plague victims, praying and fasting, as well as burning victims clothes and bedding. These are all not shown but the illustration is effective as it shows some aspects of prevention but it also

leaves out a lot of the other, possibly more important methods of prevention, which shows the source's limitations.

Secondly the source doesn't express how effective each method of prevention was and therefore isn't extremely effective for a historian. In hindsight we can see that methods of prevention such as praying and fasting not only were probably very ineffective but they were used the most. Other methods such as boarding up an infected household and burning the clothes were more effective and stopped the plague spreading. If the illustration expressed this it would be more effective.

Finally the illustration was made in 1665 and therefore it didn't cover the years after the ~~year~~ <sup>year</sup>. This means that the historian can only review the methods during one year and therefore shows that due to the origin of the source illustration it is limited because it only covers a year and therefore the historian cannot see other methods of dealing with the plague.

(Total for Question 3 = 8 marks)



**ResultsPlus**

**Examiner Comments**

This answer receives full marks because not only does it use additional own knowledge to discuss the usefulness of the source content, it also considers how that is affected by its origin because the source only covers one year.

8 marks



**ResultsPlus**

**Examiner Tip**

Make sure you always include own knowledge if the question tells you to do so.



**Source C:** Scenes from an illustration, 1665. It shows some of the actions ordered by the Lord Mayor of London: plague searchers, the killing of cats and dogs and the burying of bodies in the plague pits.



3 How useful is this illustration to a historian who is investigating ways of preventing the spread of disease in the seventeenth century?

Use Source C and your own knowledge to explain your answer.

(8)

Source C is ~~uses~~ useful as it shows that the most important way of preventing spread of disease wasn't religious, due to source C not showing people praying.

This scene taken from an illustration shows authoritative figure such as the mayor taking a more practical and less supernatural approach to preventing spread of disease. This is done through the burning of bodies, who presumably were ~~infected~~ infected. To a historian this could translate as people in the 1600 17th century believing the infected person carried the disease and therefore the only way to get rid of the disease would be to get rid of the body.

This source is very useful due to the <sup>incorporation</sup> of the actions taken, for example the killing of cats and dogs. ~~the~~ Cats and dogs were dirty during this period and the mayor orders were death. It shows basic knowledge the dirt or poor hygiene causes disease, meaning the only way to prevent its spread would be to ~~improve~~ improve hygiene.

In conclusion this illustration could help historians due to the incorporation of actions, such as killing cats and dogs, burning ~~both~~ bodies and plague searchers. This shows that people in the 17th century do know the only way to prevent disease is to ignore the laissez-faire attitude.



### ResultsPlus

#### Examiner Comments

This answer discusses what can be learned from the source but it does not consider how the provenance and reliability of the source affects the usefulness of that information. It also includes very little additional own knowledge, therefore it cannot receive the top mark in Level 2 and was given a mark of 5.

5 marks



### ResultsPlus

#### Examiner Tip

Remember that the usefulness of the source content is affected by its reliability and whether or not it is representative of the wider situation.

## Question 4

The question asked why religion played 'such an important role in medicine' but candidates tended to see that role solely in negative terms. Often, they dismissed religious belief as superstition and almost implying that without the Church, there would have been better medical knowledge and a higher standard of treatment. There was little appreciation of the context of medieval society and that the Church was often the only organisation providing any medical care.

Candidates generally showed good knowledge about religious aspects of medicine and there were, therefore, very few Level 1 answers. Most candidates could use the stimulus material confidently, and show that religion was a key factor in the provision of care of the sick. Answers included a description of the work of monks and nuns in hospitals and sometimes the role of the church in running lazar houses. The phrase 'care not cure' was commonly used, with an explanation that religious hospitals provided rest, a good diet and herbal remedies, but usually lacked medical personnel and even turned away the seriously ill.

Discussions of medical training, again, tended to focus on the negative impact of religion. Galen was usually mentioned when medical training was discussed, with many candidates producing a general description of his ideas and work. They did not explain the link to religion and simply made generalised links between Galen and medical knowledge and training. It was disappointing to see that a number of candidates seemed to assume he was alive during the medieval period or that he was a Christian and that he worked with the Catholic Church.

Religion was blamed for the failure to develop medical knowledge, including the reluctance to search for the cause of disease, because:

- it was viewed as supernatural
- there was an unwillingness to accept Muslim research
- the Church discouraged challenges to Galen's ideas or dissections.

While these points are all valid, it was good to see some answers that recognised the importance of the Church in preserving knowledge in libraries during the early Middle Ages and transmitting it in universities during the later Middle Ages. The example of Roger Bacon was cited by a number of candidates but it seemed to be assumed that allowing dissection and challenges to Galen's authority would automatically have led to an improved standard of medicine.

Other links between religion and medicine included the belief that illness was sent by God and therefore stress was laid on prayer, fasting, pilgrimage, flagellation etc. as a means of prevention and treatment. Here again, the tone of the answers was negative and it would have been nice to see an understanding that in a time of uncertainty, religion did have an important role to play in offering reassurance and that, even if religion had little practical impact, there were few alternatives available. There was also some lack of understanding, with a number of students referring to 'gods'.

Some candidates anticipated Q6 and wrote about the situation after the Roman withdrawal, offering a general description of the situation in the Middle Ages, with little focus on religion. Others went beyond the medieval period and included details about the work of Vesalius and Harvey.

This question was slightly more popular than Q5 but examiners felt that more of these answers remained in Level 2. This was because candidates often described the actions or role of the Church and religious beliefs linked to aspects of medicine, but did not explain the impact or significance, beyond comments that religion hindered progress. For Level 3, greater explanation was needed to show the extent or nature of religion's influence on specific aspects of medicine.

In this essay I will be writing about why religion played an important part in medicine in the middle ages.

Hospitals were overcrowded in the middle ages people would get ill and the hospitals would take a lot of time. Religion had a big impact because of superstition they believed that they were ill for a reason that God had given the illness because they may have said something sinful or have said something so they would go to the church and seek forgiveness in God to take their illness away.

Medical training was ~~it~~ important because people needed to learn how to take care of patients in the hospitals however the church did not ~~let~~<sup>let</sup> women do medical training they ~~thought~~ thought that

Woman should take care of ~~her~~<sup>their</sup> husbands Cook and clean for them ~~know~~ they also did not have any right to speak. even though men were trained they were still short on doctors because their were alot of ill people.

Another factor that contributed to Religion was ~~Andreas~~ Andreas Vesalius ~~per~~ while William Harvey who dissected animals and saw how the body worked Vesalius dissected ~~ed~~<sup>ed</sup> human bodies to see how the body worked that's when the Church got scared so the church told people to pay him and lured people in saying that illness are caused by god and you must ask for forgiveness.

To conclude i do believe that Religion had a big impact because that stop people from being treated properly and stopped research from expanding.



## ResultsPlus

### Examiner Comments

This answer is confused and lacks precise, relevant detail. It recognises that people thought illness had a supernatural origin and it makes comments linking religion to hospitals and to medical training but none of these comments is developed.

The detail about Vesalius is out-of-period. The answer as a whole makes some basic points about the influence of religion on medicine but it lacks relevant detail so it was given a mark low in Level 2.

6 marks



## ResultsPlus

### Examiner Tip

Use 'signpost' starter sentences for each paragraph to make sure you stay focussed on the question. Look at the start of the second and third paragraphs here: 'Hospitals were overcrowded in the Middle Ages ...' and 'Medical training was important because ..'. Then, look back at the question – which is about the influence of religion.

Religion played an important role in ~~the~~ medicine in the middle ages, I would say it played the biggest as it ~~met~~ <sup>proved</sup> much opposition yet encouragement for improvement.

Religion played a important role in medicine for the middle ages because it had all the answers for the people, it gave explanations that others could not explain, such as the cause of disease, being a punishment from god. Its power also meant it controlled the training of doctors, This meant the controlled the whole process of surgery and treatment of the sick. This was important as almost all new ideas were discarded as it did not fit with the belief of the church and Galens theory of opposites. This prevented advancement in medicine meaning for a long time there was little improvement of knowledge. For example monk Roger Bacon wanted there to be a reform in the treatment and training of doctors so they could make there own decisions allowing there to be some improvement, though

imprisoned for heresy he still smuggled  
some of his research out from illegal  
discussions.

Religion also played a vital role as  
it set up the first hospitals.  
Derived from the word hospitality these  
were often ~~old~~ monasteries where nuns  
and monks would treat the sick and feed  
them, nursing most back to health as many  
poor could not have nice balanced diets.  
They only treated 10% of patients  
the rest were only rested and prayed  
for. These became rest homes for travellers  
also. This links to the regain of knowledge  
as most monasteries had a sewer/plumbing  
system to rid of waste, herb gardens for  
medical treatment and nuns were eventually  
trained into midwives, increasing birth  
survival rate.

So I conclude that Religion played  
a vital role in the middle ages  
because of its influence and power  
it meant much progress was  
limited and few major advances



were made resulting in the works of Galen to still be used and believed.

This would continue till the Renaissance were the church would slowly begin to lose its control over medicine.



**ResultsPlus**

**Examiner Comments**

This answer has good analysis of the role of religion in controlling ideas about medicine and in hospitals but it cannot receive more than 10 marks because it does not discuss a third aspect of religion's influence.

10 marks



**ResultsPlus**

**Examiner Tip**

Make sure you always cover three aspects in the 12- and 16-mark questions – and write about each of them in a separate paragraph.

## Question 5

Candidates tend to find questions with a causation focus relatively straightforward and here, they recognised the development of vaccination, improvements in public health and greater understanding of the cause of infectious diseases as key factors in improved prevention.

The main difficulty was often that knowledge of vaccinations appeared to be limited to Jenner's work on smallpox. Many answers gave detailed accounts of Jenner's work in 1796 yet omitted to discuss the work of the Royal Jennerian Society, the role of the government in making smallpox vaccination compulsory during the nineteenth century, or to mention the work of Pasteur and Koch in developing other vaccinations.

The work of John Snow in the cholera epidemic of 1854 was usually well known. Many candidates appreciated the fact that although Snow showed that cholera was waterborne, he still did not know the cause of cholera, therefore his work acquired greater significance after Pasteur published his (Pasteur's) germ theory. Other answers referred to the work of Chadwick or Bazalgette, the Great Stink and the role of the government in passing the Public Health Acts. The difference between Level 2 and Level 3 was whether or not the significance of these details could be explained. For example, the details of the Public Health Acts in 1848 and 1878 were well known. Many candidates who wrote about them explained that the first act was permissive, whereas the second act was mandatory, yet these comments would remain at Level 2 until the impact of the acts on hygiene and the spread of disease, was explained.

Examiners commented that those candidates who structured their answer around factors (the role of government, science, technology) seemed to find it easier to show the importance of these factors in improving prevention of infectious diseases, than candidates who structured their answer around the work of key individuals. The latter type of answer often became narrative and simply asserted the importance of the individual's work, without showing how it impacted on the prevention of infectious disease.

Difficulties included confusion over who discovered the smallpox vaccination (often Snow received the credit), confused chronology, asserting that Jenner's work came after Pasteur's germ theory, or offering material that was irrelevant to the focus or outside the timeframe of the question. A surprising number of answers included details about penicillin, which was not relevant to a question on preventing infectious diseases and was also outside the timeframe. Nevertheless, a number of examiners commented on candidates' confident use of historical terminology and specific dates in this question.

Slightly fewer candidates answered Q5 than Q4, but a greater spread of marks was seen. There were more answers at Level 1, often consisting simply of a description of Jenner's work, but also more answers at the top of Levels 2 and 3, where answers identified three or more aspects to discuss.

There were important improvements in the prevention of infectious diseases in the nineteenth century partly because of the work of individuals such as Pasteur. His discovery of the Germ Theory in 1861 meant that advances could be made in order to identify the cause of disease.

Koch developed Pasteur's ideas in order to ~~at~~ identify microbes which caused specific diseases such as anthrax, which meant that Pasteur could later find vaccinations in order to prevent disease spreading. Pasteur's

Germ Theory also helped to support the earlier work of Jenner who discovered a vaccination for smallpox and helped to rid of opposition.

This shows individuals such as Pasteur to be an important reason for improvements in the prevention of infectious diseases in the nineteenth century because his work helped to inspire the findings

of many important vaccinations.

Another reason for improvements in the prevention of infectious diseases in the nineteenth century was government involvement. The government initially helped to prevent the spread of disease ~~of~~ with the introduction of the first Public Health Act in 1848. This meant that there would be a supply of fresh water so disease could be avoided. Their involvement also helped when they made Jenner's smallpox vaccination compulsory in 1852 which meant that the spread of smallpox could be prevented - this was then enforced in 1871 after Pasteur's Germ Theory which provided evidence as to why it worked. This shows the role of the government to be <sup>an</sup> important reason for improvements in the prevention of infectious diseases during the ~~the~~ nineteenth century as it showed abandonment of their previous ~~laissez-faire~~ laissez-faire attitude and decision to help prevent disease.

A final reason for improvements in the prevention of infectious diseases during the nineteenth century was outbreak of disease. The arrival of cholera in 1831, as well as the further outbreaks, meant that people were encouraged to find the cause. This led to John Snow's investigation in 1854 where he studied the water supply on Broad Street after mapping out cases of cholera. Eventually he was able to find out that cholera is a waterborne disease, so people were able to prevent the spread of cholera by ensuring they had fresh water. This outbreak of disease was a large reason for the improvements in the prevention of infectious disease in the nineteenth century as it led to people becoming more concerned with the cause of disease, which helped to find a prevention.



**ResultsPlus**  
Examiner Comments

This is a detailed answer, covering three different aspects to show why there were advances in the prevention of disease during the nineteenth century.

11 marks



**ResultsPlus**  
Examiner Tip

Show the examiner that you are covering three different aspects, by starting a new paragraph for each one.

The nineteenth century was a brilliant year for the improvements in preventing infectious diseases. Three major factors are why, these are Pasteur and Koch finding and developing the germ theory, Edward Jenner discovering the Smallpox vaccination and John Snow discovering the cause of cholera in London.

John Snow's determination to make the ~~gov~~ Government and the public acknowledge his findings and idea were what saved London from the second epidemic of Cholera, a horrible untreatable infectious disease caught from contaminated water and food. John Snow observed the men at the local pub on Broad Street in Soho, weren't catching Cholera, he decided that this was because they were drinking beer and not the water from the pump outside the pub. He also plotted the deaths and noticed that the higher numbers were located around the water supplies. On the 8<sup>th</sup> September 1854, he took the handle off the pub and with time the <sup>second</sup> outbreak of cholera was significantly decreasing. People thanked him so much that the pub next to the old ~~p~~ water pump is now called 'John Snow'.

Secondly, the discovery of the vaccination was equally as important because it saved many lives from the Small-

pox epidemic, also a deadly incurable infectious disease. Jenner, a country man observed that the milkmaids whom  
often caught cowpox weren't being affected by the  
horrible Smallpox. He decided to experiment on  
a young boy who had never been infected by either  
two of the diseases. He ~~got~~ rubbed some puss from  
a patient of his who had cowpox into a cut on  
the eight year olds arm and he developed Cowpox.  
Once he'd recovered Snow riskily applied the puss  
from a dying Smallpox infected patient onto another  
cut on the young healthy boy and luckily ~~for~~  
~~Snow~~ the boy remained healthy as he was  
now immune to Smallpox. Snow however,  
could not explain why this was and so people didn't  
take him seriously at first until the Government  
made it a rule that every body had to have the  
Vaccination.



### ResultsPlus Examiner Comments

This is a descriptive answer, which talks about the work of Jenner and Snow but it does not explain how that work led to improvements in the prevention of disease.

7 marks



### ResultsPlus Examiner Tip

Do not describe only what someone did: make sure that you explain how it led to improvements.

## Question 6

This question was far more popular than Q7, possibly because candidates seem so enthusiastic about the Romans.

Many answers adopted a chronological approach to this question but this also tended to lead to description. Roman medicine and public health were well known and described in good detail, but candidates appeared to have less secure knowledge of the medieval period. Furthermore, the question asked whether or not Roman ideas were important throughout the medieval period, until c1500. This was a question about change and continuity, and answers needed to pay equal attention to medicine and public health during the medieval period.

Answers that were basically a description of the Roman period followed by the medieval period, were usually Level 2; to achieve Level 3, aspects of change and/or continuity needed to be discussed. To achieve Level 4, there needed to be an evaluation of the nature or extent of change and continuity. Typically, Level 3 answers covered the Roman period then the medieval period, identifying change and continuity within this, whereas a Level 4 answer was planned in advance and thematic in approach, discussing examples of change separately from examples of continuity.

Examples of continuity included the:

- Roman public baths and medieval stewes
- Roman government action and local councils paying for water conduits, pipes, sewers or toilets in the Middle Ages
- 1347 Act
- miasma theory
- use of herbal remedies and medicine based on the ideas of Galen.

Examples of change included the:

- collapse of the Roman structures
- lack of a centralised system
- problems of public health as a result of the growth of towns
- new theories about astrology etc.

In some cases, candidates saw the collapse of Roman structures as very abrupt and appeared to suggest that the people chose to be dirty and unhygienic. Better answers recognised that the decay in structures was gradual and that many people continued to have high standards of hygiene. However, some candidates were confused about chronology and referred to Vesalius, Harvey, cholera, Bazalgette and the role of government in public health acts. It should also be remembered that this Thematic Study is about British history and therefore comments about Rome itself (such as the Cloaca Maxima) are not relevant.

Some candidates defined the 'importance' of Roman ideas as meaning that these ideas were correct and did not examine how far they influenced medieval ideas and practices. Others interpreted the question to simply mean 'were Roman ideas important?'



I am going to examine whether the ideas of Romans were important in medicine and public health throughout the medieval period until c.1550.

The ideas of the Romans were important because people still believed in Galen's work. Galen was favored by the Church as what he said fitted into the Christian way of life. Galen had dissected animals to retrieve information and also came up with the theory of opposites. Moreover, in the era of the Romans public health was stressed a lot as Rome needed their soldiers to be healthy so, certain measures were taken. They made aqueducts which produced 2 million gallons of fresh water every day and also everything was organized and planned.

However, the ideas of Romans were not important as, when the era of medieval came public health was destroyed and also the aqueducts. People would live in poor quality towns which had no drains or sewage disposal. In the Roman era there were sewers but this all was destroyed. People would chuck waste into roads and also there were water fountains where they drank from. People also dug cesspits to dump waste into which would mix

in to the water supply. This meant that public health was really appalling and also with no dirty and clean water mixed there was more chance of disease and illnesses spreading. Moreover, public health was really bad as the worst world plagues continued on the road and also there was the problem of overcrowding as well. Furthermore, people themselves didn't stay clean as they believed that the water would irritate their skin and they would become exposed.

In conclusion I disagree with the statement. This is because in the medieval era public health was not stressed at all for example throwing waste onto the roads. The Romans believed in having a good network of water supply however, in the medieval era they were destroyed. The Romans also believed in keeping drains and bathing up to twice a day but it was the opposite in the medieval era so, therefore, I disagree.



### ResultsPlus Examiner Comments

This response explains the change in public health after the Romans left and does cover continuity as well, although not in detail. It receives 10 marks. For this question, details were needed from both the Roman and the medieval periods, to show change and continuity.

The spelling, punctuation and grammar are good and gain 3 marks.

Question - 10

SPaG - 3

13 marks



### ResultsPlus Examiner Tip

Think about the target of the question – this question was targeting change and continuity, therefore make sure that you give examples of both.

In some ways I agree that the Romans were important in medicine and public health throughout the medieval period because a lot of their ideas were still used. However I also think that they were not as important because a lot of their ideas about public health were not applied.

The Romans believed in the teachings and work of Galen and his ideas about the four humours and his 'theory of opposites', which was the idea that disease could be treated using the rebalancing of the four humours, (blood, yellow bile, black bile and phlegm).

These Roman ideas were believed throughout the medieval period as the ideas of Galen were supported by the church. This suggests that the work

of Galen was significantly important in medicine as his ideas were used to treat ~~and~~ illnesses for around two thousand years. However his ideas have no impact on public health.

The Romans however were not as significantly important to public health throughout the middle ages as they would have only been important at the start of his period. This is because the sewers worked in disposing of human waste but they were not maintained so they fell into disrepair and were not used. Also after the Romans left Britain, a lot of people during the Anglo-Saxon period moved away from Roman towns and cities and moved back to the countryside and small villages which would have had no public health systems at all.

The ideas of the Romans in regards to medicine were also relatively unimportant (apart from the work of Galen). This is because around 410 AD, when the Romans left Britain, the Anglo Saxons who then invaded destroyed a lot of Roman buildings such as libraries where medical knowledge ~~was~~ would have been stored. Also, when the Romans left Britain, they took ~~to~~ the majority of their books containing medical knowledge with them. They also took their doctors and physicians with them as they would have been needed to treat the Roman army.

In summary, I think that the Romans were unimportant throughout the middle ages as the majority of their knowledge regarding medicine and public health was lost or not applied. Only the work of Galen truly survived because it was

enforced by the church.  
Galen's ideas however  
were inaccurate so for around  
two thousand years, incorrect  
ideas about the human anatomy  
and how to treat illness  
were believed.



**ResultsPlus**

**Examiner Comments**

This answer shows continuity and change, and then the conclusion weighs the two sides in order to reach a judgement. It receives 15 marks.

The spelling, punctuation and grammar are good and receive 3 marks.

Question - 15

SPaG - 3

18 marks



**ResultsPlus**

**Examiner Tip**

At Level 4, you need to evaluate both sides of the issue, not just sum up what you have already said.

## Question 7

This question illustrated very clearly the importance of checking the question. A number of candidates focussed simply on the topic of the NHS. They wrote detailed answers about Bevan's work creating the NHS and the opposition he faced, or about the work of the NHS generally, including diagnosis, prevention and surgery. Yet the question focussed specifically on the treatment of illness.

Answers about developments in surgery were often not related to illness and an understanding of DNA has not yet led to treatment. Therefore, some answers with accurate knowledge did not achieve high marks because the detail was not relevant to this question. Other candidates discussed the role of the NHS or government in the prevention of illness, for example in the provision of vaccinations or the various healthy living campaigns; these are not part of treatment and therefore could not be rewarded. There were also some problems with chronology, with the work of Jenner, Chadwick, Nightingale and Pasteur also being discussed.

The importance of the NHS offering access to free healthcare was well understood but often the supporting detail was vague. Answers usually mentioned treatment and prescribed medicine and the significance of this for poorer members of society. However, few candidates differentiated between access to a GP and access to consultants, or the provision of drugs and the provision of other forms of treatment, such as radiotherapy.

In many answers, the importance of the NHS was often stated, rather than demonstrated through an explanation of how the NHS ended many of the problems of access to health care in the early twentieth century. Some answers placed the creation of the NHS in the context of the emergency service set up during the Second World War, or the context of the Beveridge Report, but few actually made explicit the improvement from a system of city infirmaries and local cottage hospitals, or the payments made by patients to GPs.

Some candidates confused magic bullets and penicillin, but on the whole, the details were well known, with a number of answers also mentioning Prontosil. However, the significance of these drugs was less well explained, with answers often providing a narrative of their discovery. Other answers about penicillin focussed on its role in saving lives during the Second World War but not developing their significance for treating killer diseases such as syphilis or blood poisoning.

Some candidates approached this question by discussing the importance of various factors such as the role of government, scientific discoveries, the role of war and the role of technology. In most cases, this was not successful. Even in answers where the focus on treatment was recognised, this question was about the importance of the creation of the NHS, not an open-ended question about the most important reason why treatment improved.

Nevertheless, there was a number of high-level answers that weighed the importance of the development of treatment against access to that treatment. Candidates were divided about whether the NHS was more important because it provided access to treatment, or whether the development of drugs was more important because without them, the NHS would have a very limited role.

There were many important changes in the treatment of illness during the twentieth century including the creation of the NHS as well as the discovery of penicillin, magic bullets and also liberal reforms.

The creation of the NHS <sup>in 1948</sup> may be seen as the most important change in the treatment of illness during the twentieth century as it meant that people were finally able to access free healthcare, regardless of class or status. This was greatly influenced by the war after the health of evacuees became a concern and free hospitals were set up. The NHS led to modern day health campaigns such as anti-smoking and also began to provide treatments for illness through either hospital care or prescribing medications in order to treat illness. This is shown to be a drastic



change in the treatment of illness during the twentieth century as the NHS meant that hospitals and doctors were finally accessible to those who required treatment.

Another important change in the treatment of illness during the twentieth century was Fleming's discovery of penicillin in 1928.

This was an important discovery as it eventually led to further research by Florey and Chain who were able to find ~~an~~ a way ~~to~~ to produce the drug in order for it to be used as a treatment for disease. They got loans from the American government to fund the mass production of ~~penicillin~~ penicillin so that it could eventually be used to treat injured soldiers in the war. This made penicillin a very important change in the treatment of illness in the twentieth century as it was able to save a lot of lives with its use.

during the war on D-Day.

A further change in the treatment of illness during the twentieth century was the discovery of the magic bullets. Although developed from Koch's work in identifying and dying microbes, this discovery was vital in attacking specific disease in the body. The first was developed in 1909 and was called salvarsan 606 - it specifically targetted syphilis. The second in 1932 was prontosil and targetted a specific type of blood poisoning. The magic bullets were important changes in the treatment of illness during the twentieth century as they were able to specifically attack diseases.

~~The most important change in the treatment~~

The weight of the evidence suggests that the most important change in the treatment of illness

in the twentieth century was the introduction of the ~~NHS~~ NHS because it meant that the government and doctors became more actively involved in finding treatments to be used in hospitals, even for those who had little money.



**ResultsPlus**

**Examiner Comments**

This answer has a good explanation of the importance of the NHS and healthcare, but it is not focussed on the question because it then talks about stopping smoking and the prevention of illness. The section on penicillin tends to be descriptive and focussed on its importance during the war, rather than its importance in treating illness – and magic bullets are only mentioned briefly. It receives 10 marks.

Spelling, punctuation and grammar are good and receive 3 marks.

Question – 10

SPaG – 3

13 marks



**ResultsPlus**

**Examiner Tip**

Despite the conclusion talking about the 'weight of evidence' this answer does not evaluate the two sides of the issue, therefore it is not placed in Level 4.

Notes: . NHS - Aneurin Bevan, post WW2. - Had order. led to change in treatment due to this.

. Penicillin - Florey, Chain, Fleming

. Magic bullets - 1st treatment of syphilis - big killer. 2nd - blood poisoning led to cures for scarlet fever

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## Answer

The creation of the NHS in 1948 was the most important change in the treatment of illness to a small extent compared to <sup>the</sup> Magic bullets and ~~the~~ the discovery of penicillin.

The NHS was established in 1948 as <sup>Aneurin</sup> ~~Bevan~~ Bevan realised how organised treatment of illness had been during the war and thought this should continue into daily life as free health care for people of all backgrounds. However, <sup>after just</sup> ~~in the beginning~~ a few years, the NHS could not fund free

dental and eye checks so a cost was put to those. The issue with this was it <sup>the</sup> <sup>NHS</sup> did not lead to a massive change in treatment as not everyone could afford it so not everyone benefited. Even though parts of the NHS were free, prescriptions too had a charge so not everyone could get the treatment they needed because they may not have been able to afford it. ~~Therefore~~ On ~~the NHS~~ the other hand, it was free for people to see a doctor or a midwife so ~~many~~ people were able to get some of the treatment they needed without money through the NHS. Therefore the NHS was the most important change in the treatment of illness in the 20<sup>th</sup> century to a small extent.

Penicillin was the most important change in illness treatment to a medium extent. After reading the work Fleming had abandoned, Florey and Chain attempted to work on using the penicillin mould but were unable to get funding from the UK government due

to the war. Florey then went to the US government who initially refused but gave Florey the <sup>THEMSELVES</sup> funding once they joined the war. This was important for treatment because penicillin meant people could be treated for injuries and survived instead of dying as they had before. Therefore penicillin was the most important change in illness treatment to a medium extent as they saved lives however it took ~~a while~~ a war and ~~many~~ failed treatments for it to work.

The magic bullets were the most important change in the treatment of illness to a large extent. The 1st Magic bullet <sup>(salvarsan 606)</sup> was ~~created~~ <sup>→ PEN</sup> by a team led by Ehrlich. When Dr Hata joined the team he discovered the 606<sup>th</sup> compound which had been dismissed was effective at curing syphilis, meaning many lives could be saved. The 2nd magic bullet ('Prontosil') was ~~the~~ found to work after Domag's daughter pricked her finger on a needle and was dying of

blood poisoning. Realizing Prontosil worked not only saved many lives during WW2 which shortly followed but also led to treatments for things like Scarlet fever which claimed many lives. This was incredibly important for treatment as the magic bullets had a knock-on-effect for other treatments. Therefore the Magic Bullets were the most important change in the treatment of illness to a large extent.

Overall, the magic bullets were the most important change because the NHS was not affordable to all and penicillin took a long time to come into fruition whereas the magic bullets spiralled treatments for other things.



**ResultsPlus**

**Examiner Tip**

This answer looks at the importance of the NHS (although the comment about the introduction of charges affecting the poor are not valid). It also offers comments about the importance of penicillin and magic bullets in the treatment of illness.

The final comment is attempting to explain why the discovery of magic bullets was the most important development and, although there are some mistakes, this is just enough to push this answer into Level 4; it receives 13 marks.

Spelling, punctuation and grammar are good and receive 3 marks.

Question – 13

SPaG – 3

16 marks



**ResultsPlus**

**Examiner Tip**

A plan helps to keep the answer focussed and to cover three aspects, and both sides, of the issue.



## Paper Summary

Based on their performance on this paper, candidates are offered the following advice.

### Spelling, punctuation and grammar

The SPaG marks will be reduced if there are weaknesses in these areas:

- Appropriate use of capital letters
- Correct use of apostrophes
- Weak grammar ('would of') and casual language ('chucked') — this is not appropriate in an examination
- Paragraphs: failure to structure answers in paragraphs not only affects the SPaG mark, but may also make it difficult for the examiner to identify whether three different aspects have been covered
- Poor handwriting: this is causing an increasing number of problems and exacerbates the difficulty in understanding a badly-expressed answer

### General Points to note

- Confusion over chronology is the main difficulty for candidates.
- High-level answers are characterised by a focus on the specific question being asked, and the use of precise detail.
- Well-prepared candidates demonstrate excellent knowledge being deployed to support thoughtful analysis and evaluation.

Examiners noted that there were many candidates who displayed impressive knowledge deployed in well-structured answers that were a joy to mark.

## **Grade Boundaries**

Grade boundaries for this, and all other papers, can be found on the website on this link:

<http://www.edexcel.com/iwantto/Pages/grade-boundaries.aspx>



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