

Home Economics (Child Development)

General Certificate of Secondary Education **GCSE 1972**

Mark Schemes for the Components

June 2007

1972/MS/R/07

OCR (Oxford, Cambridge and RSA Examinations) is a unitary awarding body, established by the University of Cambridge Local Examinations Syndicate and the RSA Examinations Board in January 1998. OCR provides a full range of GCSE, A-level, GNVQ, Key Skills and other qualifications for schools and colleges in the United Kingdom, including those previously provided by MEG and OCEAC. It is also responsible for developing new syllabuses to meet national requirements and the needs of students and teachers.

The mark schemes are published as an aid to teachers and students, to indicate the requirements of the examination. It shows the basis on which marks were awarded by Examiners. It does not indicate the details of the discussions which took place at an Examiners' meeting before marking commenced.

All Examiners are instructed that alternative correct answers and unexpected approaches in candidates' scripts must be given marks that fairly reflect the relevant knowledge and skills demonstrated.

The reports on the Examinations provide information on the performance of candidates which it is hoped will be useful to teachers in their preparation of candidates for future examinations. It is intended to be constructive and informative and to promote better understanding of the syllabus content, of the operation of the scheme of assessment and of the application of assessment criteria.

Mark schemes and Reports should be read in conjunction with the published question papers.

OCR will not enter into any discussion or correspondence in connection with this mark scheme or report.

© OCR 2007

Any enquiries about publications should be addressed to:

OCR Publications
PO Box 5050
Annesley
NOTTINGHAM
NG15 0DL

Telephone: 0870 870 6622
Facsimile: 0870 870 6621
E-mail: publications@ocr.org.uk

CONTENTS

General Certificate of Secondary Education Home Economics (Child Development) (1972)

MARK SCHEMES FOR THE UNITS

Unit	Content	Page
1972/01	Paper 1	1
1972/02	Paper 2	15
*	Grade Thresholds	30

Mark Scheme 1972/01
June 2007

INSTRUCTIONS ON MARKING SCRIPTS

All page references relate to the Instructions to Examiner booklet (revised June 2006)

For many question papers there will also be subject or paper specific instructions which supplement these general instructions. The paper specific instructions follow these generic ones.

1 Before the Standardisation Meeting

Before the Standardisation Meeting you must mark a selection of at least 10 scripts. The selection should be drawn from several Centres. The preliminary marking should be carried out **in pencil** in strict accordance with the mark scheme. In order to help identify any marking issues which might subsequently be encountered in carrying out your duties, **the marked scripts must be brought to the meeting.** (*Section 5c, page 6*)

2 After the Standardisation Meeting

- a) Scripts must be marked in **red**, including those initially marked in pencil for the Standardisation Meeting.
- b) All scripts must be marked in accordance with the version of the mark scheme agreed at the Standardisation Meeting.
- c) **Annotation of scripts**

The purpose of annotation is to enable examiners to indicate clearly where a mark is earned or why it has not been awarded. Annotation can, therefore, help examiners, checkers, and those remarking scripts to understand how the script has been marked.

Annotation consists of:

- the use of ticks and crosses against responses to show where marks have been earned or not earned;
- the use of specific words or phrases as agreed at standardisation and as contained in the final mark scheme either to confirm why a mark has been earned or indicate why a mark has not been earned (eg indicate an omission);
- the use of standard abbreviations eg for follow through, special case etc.

Scripts may be returned to Centres. Therefore, any comments should be kept to a minimum and should always be specifically related to the award of a mark or marks and be taken (if appropriate) from statements in the mark scheme. General comments on a candidate's work must be avoided.

Where annotations are put onto the candidates' script evidence, it should normally be recorded in the body of the answer or in the margin immediately adjacent to the point where the decision is made to award or not award the mark.

d) Recording of marking: the scripts

- i) Marked scripts must give a clear indication of how marks have been awarded, as instructed in the mark scheme.
- ii) All numerical marks for responses to part questions should be recorded unringed in the right-hand margin. The total for each question (or, in specified cases, for each page) should be shown as a single ringed mark in the right-hand margin at the end of each question.
- iii) The ringed totals should be transferred to the front page of the script, where they should be totalled.
- iv) Every page of a script on which the candidate has made a response should show evidence that the work has been seen.
- v) Every blank page should be crossed through to indicate that it has been seen. (*Section 8a – d, page 8*)

e) Handling of unexpected answers

The Standardisation Meeting will include a discussion of marking issues, including:

- a full consideration of the mark scheme in the context of achieving a clear and common understanding of the range of acceptable responses and the marks appropriate to them, and comparable marking standards for optional questions;
- the handling of unexpected, yet acceptable answers. (*Section 6a, bullet point 5, page 6*)

There will be times when you may not be clear how the mark scheme should be applied to a particular response. In these circumstances, a telephone call to the Team Leader should produce a speedy resolution to the problem. (*Appendix 5, para 17, page 26*)

Section A

1 (a) (i)	ONE mark for each correct answer. ONE required, eg: Condom/vasectomy/abstinence	1	[1]
(ii)	ONE mark for each correct answer. THREE required, eg: Female condom/femidom Diaphragm/cap IUS/IUD/IUCD/coil/copper T/copper 7	3x1	[3]
(iii)	ONE mark for each correct answer. ONE required, eg: Sterilisation/sterilised	1	[1]
(b)	ONE mark for each correct answer. THREE required, eg: Medicines Drugs Cigarettes/cigarette smoke/nicotine/tobacco Alcohol Aromatherapy oils Glue/solvents/harmful chemicals Cat/dog faeces NB Do not accept food	3x1	[3]
(c)	ONE mark for each correct answer. FOUR required, eg: Medication Nightie/pyjamas Dressing gown/shawl/bed jacket Pants Sanitary towels Nursing bra/bra Breast pads Slippers Socks Toiletries/makeup Brush/comb Book/magazines CD/MP3 player Phone card/cash/mobile phone /address book Writing materials/cards Towels Water/juice Camera NB Accept underwear if pants/bra are not mentioned at all.	4x1	[4]
(d)	ONE mark for each correct answer. THREE required. Mother/baby's health more easily monitored throughout labour Specialist equipment available/incubator More choice of pain relief available Nurses to help with the care of the baby Trained staff always available/help and advice if needed No domestic chores/can rest after the birth/able to relax Restrictions on visitors Opportunities to meet/talk to other mums Advice about care of the baby/how to bath baby/feeding	3x1	[3]
		Total	[15]

2 (a)	ONE mark for each correct answer. THREE required, eg: Birth- 3 months 3 -6 months 6 -9 months CORRECT ORDER ONLY NB Accept an age within the ranges Do not accept an age range as an answer	3x1	[3]
(b) (i)	ONE mark for each correct answer. Layette	1	[1]
(ii)	ONE mark for each correct answer. FOUR required, eg: Soft Lightweight Warm/cool/ depending on the season Washable/easy to wash/dry Non irritant (won't scratch or irritate skin) Flame resistant (will not easily catch fire) /non flammable Easy to put on/off/access to nappy Loose/not tight/right size /correct fit Porous (allows moisture to escape) No drawstrings/ribbons (especially around the neck)/no small buttons Avoid loose weave/open knitted garments (to prevent fingers getting caught) Cost Colour	4x1	[4]
(iii)	ONE mark for each correct answer. THREE required, eg: Variety of sizes for different ages/weight Nappies for day time and night time use Designed for boys/girls No washing involved/saves time and effort Saves electricity Less bulky/neater/shaped No nappy pins/no risk of injury to baby/fastenings are easy to use Useful when travelling/holidays/parent is ill/working parents Cost of buying is spread out/bulk buying could be cheaper	3x1	[3]
(c)	ONE mark for each correct answer. FOUR required, eg: Staff offer help/advice Trained staff Patient/(child) friendly staff Foot measuring service /shoe fitting Range of shoe styles /different types Shoes for different occasions(trainers/slippers etc) Range of sizes/half sizes Choice of widths Queuing system at busy times Toy corner	4x1	[4]
		Total	[15]

3 (a) (i)	ONE mark for correct answer. ONE required, eg: 18 months – 3 years	1	[1]
(ii)	ONE mark for correct answer. ONE required, eg: Beginning to walk	1	[1]
(iii)	ONE mark for correct answer. ONE required, eg: Painting	1	[1]
(iv)	ONE mark for correct answer. TWO required, eg: Sand Water Cooking Drawing/crayons/colouring Cutting and sticking/collage Junk toys Papier mache Plasticine/playdough Building blocks/bricks Dressing up/fancy dress	2x1	[2]
(b)	ONE mark for each correct answer. TWO required. Nature/genes/health Nurture/Environment/Health NB Only accept health once.	2x1	[2]
(c)	ONE mark for each correct answer. THREE required. Teaches colours/shapes/letters/numbers/counting Increases vocabulary/learn new words Increases knowledge Explains information/helps understand Encourages talking/discussion/communication Stimulates curiosity/ask questions Helps concentration Memory skills Songs/nursery rhymes	3x1	[3]
(d)	ONE mark for each correct answer. FOUR required, eg: Pre school groups/playgroups/mother and toddler groups/day nursery/crèche/kindergarten Swimming Tumble tots/soft play/jungle gyms Ballet/dancing class Music/drama workshops Restaurants/eating out Shopping Parks Going to friends/parties Visiting relatives Church/Sunday school	4x1	[4]

(e)	<p>ONE mark for each correct answer. THREE required, eg:</p> <p>Parallel play Looking on play Solitary play</p> <p>CORRECT ORDER ONLY</p>	3x1	[3]
(f)	<p>ONE mark for each correct answer. THREE required, eg:</p> <p>Not talked to Not read to Inherited development Other developmental aspects first/not ready Not enough attention given/ignored/not listened to Older siblings talk for them/no sibling to copy Deaf Emotional problems (fear)/parents over critical/emotional trauma Lack of praise/encouragement Speech disorder/defect/impediment Cultural language difficulties Brain damaged/learning difficulty</p>	3x1	[3]
		Total	[20]

Section B

4 (a)	<p>ONE mark for each correct answer. THREE required, eg:</p> <p>Fathers have a closer relationship/bonding with their children Mothers/fathers can enjoy their children more Mothers have time for other interests/free time Children benefit from the variety of care/two role models/different role models The quality of the marriage improves/relationship/partnership improves/mother/father/parents feel less stressed If mother works then more money available therefore standard of living could be improved/both parents can work Children brought up with the attitude of sharing responsibilities/equal responsibility/one example of responsibility</p> <p>NOT role model on its own</p>	3x1	[3]
(b)	<p>ONE mark for each correct answer. THREE required, eg:</p> <p>Parents separated/divorced/in refuge One parent died One parent in hospital long term One parent working away long term Births to single women/more women choosing to be single parents/sexual attack/adoption/donor sperm/teenage pregnancies One parent in prison</p>	3x1	[3]
(c) (i)	<p>ONE mark for correct answer. ONE required, eg:</p> <p>Local Authority/Social Services/Department of children, young people and families/Children and young people's services</p>	1	[1]
(ii)	<p>ONE mark for each correct answer. THREE required, eg:</p> <p>Children may/may not be related to foster parents Children in the foster family may/may not be related to one another Foster parents have no legal rights over children Can be for a short/temporary or long term period Foster parents may be able to adopt foster child Foster parents are paid an allowance/paid money Foster children often have emotional problems because they have been removed from their natural family Arrangements for children to live in other people's homes Children can be reunited with their family</p>	3x1	[3]
(d)	<p>ONE mark for each correct answer. TWO required, eg:</p> <p>Nanny Au pair Mothers help Relative/parent Childminder</p>	2x1	[2]

(e)	<p>ONE mark for each correct answer. FOUR required, eg:</p> <p>Where parents are going The time parents are expected home How to contact parents/rules for using phone What to do in an emergency/Doctors number/help nearby Where to find the first aid box If a child has a medical condition / need any medication How to operate electrical equipment (TV/microwave/cooker) Where to find food/drinks/meals/what is to be given The child's routine/rules/times for playing/watching TV The child's language for important items/activities (toilet/drink/etc) Child's favourite toy/comforter/fears Time for naps/bedtime Favourite story/story before settling down/book If bedroom light is left on/off If bedroom door is left open/shut Allergies/allergies to food</p>	4x1	[4]
(f)	<p>ONE mark for each correct answer. FOUR required, eg:</p> <p>Parent/carer set a good example Use reins/ wrist lead Teach child to hold parents/carers hand Teach child not to cross on its own/cross with an adult Teach child to use zebra/pelican/pedestrian/green man crossings/lollipop lady Teach child Green Cross Code Not to cross where cars are parked Wear bright/reflective clothing Role play/books/games about road safety Educational TV programmes/Videos/DVD's Talk/teach about dangers</p>	4x1	[4]
		Total	[20]

5 (a)	ONE mark for correct answer. ONE required, eg: Colostrum	1	[1]
(b)	ONE mark for correct answer. ONE required, eg: Too much/more protein Too much/more salt Less sugar Different types of fat and protein Antibodies (for a calf) that are of no use to baby/not the right antibodies	1	[1]
(c)	ONE mark for each correct answer. THREE required, eg: Cheaper/free Saves preparing feeds/no sterilising/saves preparation time/convenient Periods longer to return Womb/uterus shrinks back more quickly Spends more time with baby/allows for bonding Helps mother to lose weight/regain her normal weight quicker Mother knows it's safe/correct temperature/correct amount powder	3x1	[3]
(d)	ONE mark for each correct answer. THREE required, eg: Inverted nipples/unable to latch on Multiple birth Baby premature Mother seriously ill/taking medication/post natal depression Not enough milk Sore/infected nipples/cause pain Working mother Parents/carers lifestyle/ mother on drugs/ mother has HIV Cultural background Personal viewpoint/choice/does not like it Embarrassment Lack of support/encouragement from partner and/or health professionals May not be birth mother/may be adopted/fostered Breast surgery/cancer	3x1	[3]
(e)	ONE mark for correct answer. ONE required, eg: Formula Milk/Formula/Milk Formula	1	[1]
(f)	ONE mark for each correct answer. THREE required, eg: Chemical sterilisation/sterilising solution/sterilising tablets/chemical Steam sterilising/steam Microwave steriliser/microwave Boiling for 10 minutes/boil	3x1	[3]

(g)	ONE mark for each correct answer. THREE required, eg: Correct size teats Wide neck Graduated measures on the side/measurements Easy to read measures A cap/lid/cap fits well/does not leak Clear plastic Sealing disc Designed to allow teat to be placed upside down in bottle for travelling/storage/hygiene Easy to hold shape	3x1	[3]
		Total	[15]

6	<p>This question is marked according to the quality of response. In order to achieve a high level response both areas must be addressed in detail. A candidate answering only one part of the question remains in the medium level response and can access up to 7 marks only. Must be answered well with clear descriptions or explanations</p> <p>If candidates only list answers, they remain in the lower level response. Bullet point sentences can achieve up to the medium level response only.</p> <p>High Level Response: 10 – 15 A high level candidate is likely to be able to suggest at least 5/6 ways for caring for a child who is unwell at home and is able to explain in detail 4/5 ways a parent/carer could prepare a child for a stay in hospital. The candidate can demonstrate the accurate use of spelling, punctuation and grammar. A range of specialist terms is used with precision.</p> <p>Medium Level Response: 5 – 9 The candidate can suggest 3/4 ways for caring for a child who is unwell at home and is able to explain 2/3 ways a parent/carer could prepare a child for a stay in hospital will be outlined, but lack detail. There may be occasional errors in punctuation, spelling and grammar. The candidate uses some specialist terms.</p> <p>Low Level Response: 0 – 4 The candidate can give 1/2 basic ways for caring for a sick child. A list or brief description how to prepare a child for a hospital stay will be given but with limited supporting evidence. There will be errors in spelling, punctuation and grammar. The candidate uses few, if any, specialist terms. Ideas may be muddled or repetitive.</p>			
	How to care for a child who is unwell at home may include:			
	<ul style="list-style-type: none"> Quiet room Own bed Warm draught free room Enough ventilation Plenty of fluids Follow instructions for medication Light meals/small portions Do not force to eat Keep child clean Change bed linen/make bed more often Extra pillows Bedside table Comfort Toys/games Spend time with child/ give attention/ company Encourage visitors/friends/grandparents Check temperature If child gets worse contact doctor 	<ul style="list-style-type: none"> For sleep/rest Feel more secure/comfortable Comfort/22c To prevent stuffiness To remove/dilute toxins/infections/hydrated To aid recovery/combat infection Easily digested Give plenty of fluids instead To stop further cross infection To make child feel fresher/more comfortable To sit up if wish to play games/jigsaws So books/toys/drinks are at hand Reassurance/stops child from feeling frightened To occupy child/stop from feeling miserable/distract Not feel left out/isolated/neglected Keep company/will amuse/read to child To monitor illness To allay fears/reassure parents 		

How to prepare a child for a stay in hospital			
Talk to child about hospitals/what happens	So they can understand/overcome fears		
Look at books/videos/DVD's about hospital	Opportunities to talk about situation/recognise familiar things when get to hospital		
Tell child about Drs/nurses jobs	To understand they are there to help/make them better		
Role play	Act out fears		
Visit beforehand	So places are less frightening/ becomes familiar/meet nurses		
Tell child there will be other children/toys	Not on own/people of their age to talk/play with/things to do		
Pack suitcase together	Not left out/part of process		
Let child take toys/books/game	To keep them occupied		
Let child take a comforter/familiar item	Security/comfort		
Let them choose something new to take	To feel special/boost self esteem		
Tell them you will visit/stay with them	So know they are not abandoned/know parent is still there for them/coming back		
Tell them they will get better/will come home	Reassurance/allay fears/worries		
		Total	[15]

Mark Scheme 1972/02
June 2007

INSTRUCTIONS ON MARKING SCRIPTS

All page references relate to the Instructions to Examiner booklet (revised June 2006)

For many question papers there will also be subject or paper specific instructions which supplement these general instructions. The paper specific instructions follow these generic ones.

1 Before the Standardisation Meeting

Before the Standardisation Meeting you must mark a selection of at least 10 scripts. The selection should be drawn from several Centres. The preliminary marking should be carried out **in pencil** in strict accordance with the mark scheme. In order to help identify any marking issues which might subsequently be encountered in carrying out your duties, **the marked scripts must be brought to the meeting.** (*Section 5c, page 6*)

2 After the Standardisation Meeting

- a) Scripts must be marked in **red**, including those initially marked in pencil for the Standardisation Meeting.
- b) All scripts must be marked in accordance with the version of the mark scheme agreed at the Standardisation Meeting.
- d) **Annotation of scripts**

The purpose of annotation is to enable examiners to indicate clearly where a mark is earned or why it has not been awarded. Annotation can, therefore, help examiners, checkers, and those remarking scripts to understand how the script has been marked.

Annotation consists of:

- the use of ticks and crosses against responses to show where marks have been earned or not earned;
- the use of specific words or phrases as agreed at standardisation and as contained in the final mark scheme either to confirm why a mark has been earned or indicate why a mark has not been earned (eg indicate an omission);
- the use of standard abbreviations eg for follow through, special case etc.

Scripts may be returned to Centres. Therefore, any comments should be kept to a minimum and should always be specifically related to the award of a mark or marks and be taken (if appropriate) from statements in the mark scheme. General comments on a candidate's work must be avoided.

Where annotations are put onto the candidates' script evidence, it should normally be recorded in the body of the answer or in the margin immediately adjacent to the point where the decision is made to award or not award the mark.

d) Recording of marking: the scripts

- i) Marked scripts must give a clear indication of how marks have been awarded, as instructed in the mark scheme.
- ii) All numerical marks for responses to part questions should be recorded unringed in the right-hand margin. The total for each question (or, in specified cases, for each page) should be shown as a single ringed mark in the right-hand margin at the end of each question.
- iii) The ringed totals should be transferred to the front page of the script, where they should be totalled.
- iv) Every page of a script on which the candidate has made a response should show evidence that the work has been seen.
- v) Every blank page should be crossed through to indicate that it has been seen. (*Section 8a – d, page 8*)

e) Handling of unexpected answers

The Standardisation Meeting will include a discussion of marking issues, including:

- a full consideration of the mark scheme in the context of achieving a clear and common understanding of the range of acceptable responses and the marks appropriate to them, and comparable marking standards for optional questions;
- the handling of unexpected, yet acceptable answers. (*Section 6a, bullet point 5, page 6*)

There will be times when you may not be clear how the mark scheme should be applied to a particular response. In these circumstances, a telephone call to the Team Leader should produce a speedy resolution to the problem. (*Appendix 5, para 17, page 26*)

Section A

1 (a)	<p>ONE mark for each correct answer. THREE required, eg:</p> <p>Fathers have a closer relationship/bonding with their children Mothers/fathers can enjoy their children more Mothers have time for other interests/free time Children benefit from the variety of care/two role models/different role models The quality of the marriage improves/relationship/partnership improves/ mother/father/parents feel less stressed If mother works then more money available therefore standard of living could be improved /both parents can work Children brought up with the attitude of sharing responsibilities/ equal responsibility/one example of responsibility</p> <p>NOT role model on its own</p>	3x1	[3]
(b)	<p>ONE mark for each correct answer. THREE required, eg:</p> <p>Parents separated/divorced/in refuge One parent died One parent in hospital long term One parent working away long term Births to single women/more women choosing to be single parents/sexual attack/adoption/donor sperm/teenage pregnancies One parent in prison</p>	3x1	[3]
(c) (i)	<p>ONE mark for correct answer. ONE required, eg:</p> <p>Local Authority/Social Services/Department of children, young people and families/Children and young people's services</p>	1	[1]
(ii)	<p>ONE mark for correct answer. THREE required, eg:</p> <p>Children may/may not be related to foster parents Children in the foster family may/may not be related to one another Foster parents have no legal rights over children Can be for a short/temporary or long term period Foster parents may be able to adopt foster child Foster parents are paid an allowance / paid money Foster children often have emotional problems because they have been removed from their natural family Arrangements for children to live in other people's homes Children can be reunited with their family</p>	3x1	[3]
(d)	<p>ONE mark for each correct answer. THREE required.</p> <p>Nanny Au pair Mothers help Relative/parent Childminder</p>	2x1	[2]

(e)	<p>ONE mark for each correct answer. FOUR required.</p> <p>Where parents are going The time parents are expected home How to contact parents/rules for using phone What to do in an emergency/Doctors number/help nearby Where to find the first aid box If a child has a medical condition/need any medication How to operate electrical equipment (TV/microwave/cooker) Where to find food/drinks/meals/what is to be given The child's routine/rules/times for playing/watching TV The child's language for important items/activities (toilet/drink/etc) Child's favourite toy/comforter /fears Time for naps/bedtime Favourite story/story before settling down/book If bedroom light is left on/off If bedroom door is left open/shut Allergies/allergies to food</p>	4x1	[4]
(f)	<p>ONE mark for each correct answer. FOUR required.</p> <p>Parent/carer set a good example Use reins/ wrist lead Teach child to hold parents/carers hand Teach child not to cross on its own/cross with an adult Teach child to use zebra/pelican/pedestrian/green man crossings/ lollipop lady Teach child Green Cross Code Not to cross where cars are parked Wear bright/reflective clothing Role play/books/games about road safety Educational TV programmes/videos/DVD's Talk/teach about dangers</p>	4x1	[4]
		Total	[15]

2 (a)	ONE mark for correct answer. ONE required, eg: Colostrum	1	[1]
(b)	ONE mark for correct answer. ONE required, eg: Too much/more protein Too much/more salt Less sugar Different types of fat and protein Antibodies (for calf) that are of no use to baby/not the right antibodies	1	[1]
(c)	ONE mark for each correct answer. THREE required, eg: Cheaper/free Saves preparing feeds/no sterilising/saves preparation time/convenient Periods longer to return Womb/uterus shrinks back more quickly Spends more time with baby/allows for bonding Helps mother to lose weight/regain her normal weight quicker Mother knows it's safe/ correct temperature/correct amount powder	3x1	[3]
(d)	ONE mark for each correct answer. THREE required, eg: Inverted nipples/unable to latch on Multiple birth Baby premature Mother seriously ill/taking medication/post natal depression Not enough milk Sore/infected nipples/cause pain Working mother Parents/carers lifestyle/mother on drugs/mother has HIV Cultural background Personal viewpoint/choice/does not like it Embarrassment Lack of support/encouragement from partner and/or health professionals May not be birth mother/may be adopted/fostered Breast surgery/cancer	3x1	[3]
(e)	ONE mark for correct answer. ONE required, eg: Formula Milk/Formula/Milk Formula	1	[1]
(f)	ONE mark for each correct answer. THREE required, eg: Chemical sterilisation/sterilising solution/sterilising tablets/chemical Steam sterilising/steam Microwave steriliser/microwave Boiling for 10 minutes/boil	3x1	[3]

(g)	<p>ONE mark for each correct answer. THREE required, eg:</p> <p>Correct size teats Wide neck Graduated measures on the side /measurements Easy to read measures A cap/lid/cap fits well/does not leak Clear plastic Sealing disc Designed to allow teat to be placed upside down in bottle for travelling/storage/hygiene Easy to hold shape</p>	3x1	[3]
		Total	[15]

3	<p>This question is marked according to the quality of response. In order to achieve a high level response both areas must be addressed in detail.</p> <p>A candidate answering only one part of the question remains in the medium level response and can access up to 7 marks only. Must be answered well with clear descriptions or explanations.</p> <p>If candidates only list answers, they remain in the lower level response. Bullet point sentences can achieve up to the medium level response only.</p> <p>High Level Response: 10 – 15 A high level candidate is likely to be able to suggest at least 5/6 ways for caring for a child who is unwell at home and is able to explain in detail 4/5 ways a parent/carer could prepare a child for a stay in hospital. The candidate can demonstrate the accurate use of spelling, punctuation and grammar. A range of specialist terms is used with precision.</p> <p>Medium Level Response: 5 – 9 The candidate can suggest 3/4 ways for caring for a child who is unwell at home and is able to explain 2/3 ways a parent/carer could prepare a child for a stay in hospital will be outlined, but lack detail. There may be occasional errors in punctuation, spelling and grammar. The candidate uses some specialist terms.</p> <p>Low Level Response: 0 – 4 The candidate can give 1/2 basic ways for caring for a sick child. A list or brief description how to prepare a child for a hospital stay will be given but with limited supporting evidence. There will be errors in spelling, punctuation and grammar. The candidate uses few, if any, specialist terms. Ideas may be muddled or repetitive.</p>			
	How to care for a child who is unwell at home may include:			
	<p>Quiet room Own bed Warm draught free room Enough ventilation Plenty of fluids Follow instructions for medication Light meals/small portions Do not force to eat Keep child clean Change bed linen/make bed more often Extra pillows Bedside table Comfort</p> <p>Toys/games</p> <p>Spend time with child/ give attention/ company Encourage visitors/friends/grandparents Check temperature If child gets worse contact doctor</p>	<p>For sleep/rest Feel more secure/comfortable Comfort/22c To prevent stuffiness To remove/dilute toxins/infections/hydrated To aid recovery/combat infection Easily digested Give plenty of fluids instead To stop further cross infection To make child feel fresher/more comfortable To sit up if wish to play games/jigsaws So books/toys/drinks are at hand Reassurance/stops child from feeling frightened To occupy child/stop from feeling miserable/distract Not feel left out/isolated/neglected</p> <p>Keep company/will amuse/read to child To monitor illness To allay fears/reassure parents</p>		

How to prepare a child for a stay in hospital			
Talk to child about hospitals/what happens	So they can understand/overcome fears		
Look at books/videos/DVD's about hospital	Opportunity to talk about situation/recognise familiar things when get to hospital		
Tell child about Drs/nurses jobs	To understand they are there to help/make them better		
Role play	Act out fears		
Visit beforehand	So places are less frightening/ becomes familiar/meet nurses		
Tell child there will be other children/toys	Not on own/people of their age to talk/play with/things to do		
Pack suitcase together	Not left out/part of process		
Let child take toys/books/game	To keep them occupied		
Let child take a comforter/familiar item	Security/comfort		
Let them choose something new to take	To feel special/boost self esteem		
Tell them you will visit/stay with them	So know they are not abandoned/know parent is still there for them/coming back		
Tell them they will get better/will come home	Reassurance/allay fears/worries		
		Total	[15]

Section B

4 (a)	ONE mark for each correct answer. THREE required, eg: Cap/Diaphragm IUD/IUS/IUCD/coil/copper 7/copper T The Pill/combined pill/mini pill	3x1	[3]
(b)	ONE mark for each correct answer. TWO required, eg: Femidom Condom Natural Family Planning (NFP)/Rhythm method/temperature Abstinence/saying 'no'	2x1	[2]
(c)	ONE mark for correct answer. ONE required, eg: Chlamydia Gonorrhoea	1	[1]
(d) (i)	ONE mark for correct answer. ONE required, eg: 28 days	1	[1]
(ii)	ONE mark for correct answer. ONE required, eg: To produce an egg/release an egg To prepare uterus/build up uterus lining To receive fertilised egg Lining removed if egg not fertilised	1	[1]
(iii)	ONE mark for correct answer. ONE required, eg: In the fallopian tube	1	[1]
(e) (i)	ONE mark for correct answer. ONE required, eg: Pre conceptual care	1	[1]
(ii)	ONE mark for each correct answer. FIVE required, eg: Good nutritious diet/balanced diet Not to be overweight/underweight/correct weight Take regular exercise To give up smoking/avoid smoky places To give up drinking alcohol To avoid taking drugs/medicines Free from infections/STD's Check for rubella immunity Take plenty of Folic acid Genetic counselling if there are any hereditary diseases Time without taking hormone-based contraceptives/the pill/ injections/coil NB Do not accept 'healthy diet'.	5x1	[5]
		Total	[15]

5 (a)	<p>ONE mark for each correct answer. THREE required, eg:</p> <p>Fontanelle Genitals Heart rate/pulse/heartbeat Skin colour/appearance Grimace Activity/movement Head circumference/round the head Number of fingers and toes Baby's eyes/ears/nose Mouth/cleft palate Hips/dislocation of hips Abdomen/liver/spleen/hernia</p>	3x1	[3]
(b)	<p>ONE mark for each correct answer. TWO required, eg:</p> <p>Midwife (community midwife) Health Visitor GP</p> <p>NB Do not allow 'doctor' on own</p>	2x1	[2]

Tick in the body of the text when marking this question

(c)	Ways ONE mark for each correct point e.g. Ways to help a child to be toilet trained	Reason ONE mark for each correct reason(must match check) Reason	 5x1 5x1	(10)
	Remain calm Don't get/show anger/don't smack Don't pressurise/force/don't start too early Praise/encouragement/cuddle Star charts Look for signs child needs toilet Trainer pants Special potties/potty Pot regular/key times (before going out) Special toilet seats/steps Restricts fizzy drinks/cola/caffeine Restrict liquids near bedtime Remind/ask child regularly Remove nappy Watch parents/siblings	Child does not lose confidence Child does not become frightened/worried/stressed about situation Will do it when ready/more likely to succeed quicker Make child feel good/want to succeed To make it a game/see achievement Anticipate to prevent failure/remind child before too late Easier/quicker to pull down/allows child to do by itself To make fun/personalise/fear of falling down the toilet Encourage child/establish routine Feel more secure/less frightening Stimulates kidneys to produce more liquid To reduce risk of accidents in the night To prevent accidents For speed/so child will be aware of wetness Correct procedure/role model		
		Total	[15]	

6	<p>Marks allocated depending on the quality of response. Candidates should be able to show their depth of knowledge and understanding, using correct terminology.</p> <p>In order to achieve a high level response, both areas must be addressed in detail.</p> <p>A candidate answering only one part of the question well remains in the medium level response and can access up to half the marks i.e. 5 valid points with an explanation of each (sub max 10)</p> <p>If candidates respond by giving answers in a list, they remain in the low level response.</p> <p>High Level Response: 14 – 20</p> <p>A good candidate can identify and describe 4-5 or more methods of teaching good discipline.</p> <p>A good candidate is able to give at least 5 reasons why a child needs to learn how to behave with an explanation of each. Good use of correct terminology.</p> <p>Medium Level Response: 7 – 13</p> <p>The candidate may give 2-3 methods of teaching good discipline but with little depth to explanations.</p> <p>A medium range candidate is likely to give 3-4 reasons why a child needs to learn how to behave but lack detail. Some correct terminology may be used.</p> <p>Low Level Response: 0 – 6</p> <p>The candidate is likely to give limited/muddled or incorrect ways about how to teach discipline generally with no real knowledge. Little or no use of correct terminology.</p> <p>A low level candidate may name 1-3 reasons why a child must know how to behave but answers may be brief or muddled.</p>		
---	---	--	--

	Method	Explanation		
(a)	Make clear expectations/set boundaries/not too many rules	So child learns/understands what is expected in different situations/prevent confusion		
	Be consistent	Avoid mixed messages. Learn right/wrong		
	No empty threats/mean what you say/be firm	So child learns if it does something wrong firm there is a consequence/won't go away/warning can't be ignored		
	Deal with immediately/do not ignore poor behaviour	So punishment is clearly linked to actions		
	Do not smack	Child will fear situation rather than understand/teach violence/encourage aggression		
	Explain why wrong	So child understands and learns		
	Give warning before carrying out punishment	So child has chance to modify behaviour		
	Show not pleased/displeasure/stern voice	Sometimes enough for a child to stop before a situation escalates/threats issued		
	Praise good behaviour/use star/sticker chart	More effective as children like to please/learns quicker		
	Withdraw activity/item	So know that what doing is wrong/not acceptable		
	Quiet area/naughty chair/step	Cool off time/time to think about what done		
	Set a good example	Good role model for child to copy		
	Avoid battles cannot win	Cannot force children to sleep/eat so no point threatening		
	Parents say sorry	Helps child to learn to say sorry		
	Remain quiet/calm/do not shout	To avoid further conflict/escalate situation		
	Distract child	Divert bad behaviour		

	Reason	Explanation		
(b)	Acceptable to others/co-operative	So will fit in with others/less likely to be uncooperative		
	Teaches/keeps child safe	Young children not aware of dangers/don't understand dangers so have to learn		
	Develops self control	Know what is expected/integrates better/less likely to be disobedient/know they can't get everything they want		
	Pleasanter environment	Work together as family/less conflict/family life a pleasant experience/bonding		
	Considerate of others/less likely to be greedy	Aware of the needs of others/less self centred/selfish		
	Thinks of other peoples feelings	Less likely to be rude/inconsiderate		
	Can take child anywhere	Therefore more opportunities offered to child/chances to be included in other events		
	Develops well socially	People will like them/make friends easier		
	Develops well emotionally	Feel loved/secure/know parents care		
	Knows right from wrong	Understand the word 'no'/rules have to be obeyed/limits made for a reason		
	To feel secure	Know limits placed on their behaviour		
			Total	[20]

General Certificate of Secondary Education

Home Economics Child Development (1972)

June 2007 Assessment Series

Component Threshold Marks

Component	Max Mark	A	B	C	D	E	F	G
1	100			45	37	29	21	13
2	100	70	60	50	40			
3	100	79	67	56	44	33	22	11
83	100	79	67	56	44	33	22	11

Specification Options

Foundation Tier

	Max Mark	A*	A	B	C	D	E	F	G
Overall Threshold Marks	200				98	79	61	43	25
Percentage in Grade	200				34.0	27.8	19.6	12.1	4.5
Cumulative Percentage in Grade	200				34.0	62.0	82.0	94.0	98.0

The total entry for the examination was 10860

Higher Tier

	Max Mark	A*	A	B	C	D	E	F	G
Overall Threshold Marks	200	162	143	124	106	84	73		
Percentage in Grade	200	4.8	18.8	32.3	26.4	13.7	2.0		
Cumulative Percentage in Grade	200	4.8	23.6	56.0	82.2	96.0	98.0		

The total entry for the examination was 6975

Overall

	A*	A	B	C	D	E	F	G
Percentage in Grade	1.9	7.4	12.6	31.0	22.3	12.7	7.3	2.7
Cumulative Percentage in Grade	1.9	9.4	22.4	54.2	77.0	89.9	97.0	99.1

The total entry for the examination was 17835

Statistics are correct at the time of publication.

OCR (Oxford Cambridge and RSA Examinations)
1 Hills Road
Cambridge
CB1 2EU

OCR Customer Contact Centre

(General Qualifications)

Telephone: 01223 553998

Facsimile: 01223 552627

Email: general.qualifications@ocr.org.uk

www.ocr.org.uk

For staff training purposes and as part of our quality assurance programme your call may be recorded or monitored

Oxford Cambridge and RSA Examinations
is a Company Limited by Guarantee
Registered in England
Registered Office; 1 Hills Road, Cambridge, CB1 2EU
Registered Company Number: 3484466
OCR is an exempt Charity



OCR (Oxford Cambridge and RSA Examinations)
Head office
Telephone: 01223 552552
Facsimile: 01223 552553

© OCR 2007