

Health and Social Care

Advanced GCE

Unit **F920**: Understanding human behaviour

Mark Scheme for June 2013

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This mark scheme is 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.

Mark schemes should be read in conjunction with the published question papers and the report on the examination.

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Annotation	Meaning
	Positive
	Negative
	Benefit of doubt
	Cross
	Level 1
	Level 2
	Level 3
	Level 4
	Repeat
	Noted but no credit given
	Too vague
	Tick
	Development of point
	Omission mark

Question		Answer	Marks	Guidance	
				Content	Levels of response
1	(a)	<p>One mark for</p> <ul style="list-style-type: none"> • Eysenck • Cattell 	1	<p>Accept variations of spelling for Eysenck unless it is clear that the candidate is actually referring to Erikson.</p> <p>Accept other appropriate theorists.</p>	

Question		Answer	Marks	Guidance	
				Content	Levels of response
1	(b)	<p>One mark for each feature, TWO required</p> <p>One mark description, TWO</p> <p>Eysenck:</p> <ul style="list-style-type: none"> • personality is inherited / genetic • trait theory - individuals can be placed at a point on a continuum between extremes • extroversion – introversion • stability – instability (neuroticism) • tough minded – tender minded • personality can be tested, measured • linked to Galen’s work on ‘humours / body fluids’ • criminal behaviour can be linked to traits <p>Cattell:</p> <ul style="list-style-type: none"> • personality is inherited / genetic • 16 personality factors - personal profile plotted on continuum between extremes • sociable – unsociable • intelligent – unintelligent • emotionally stable – unstable • dominant – submissive • cheerful – brooding • conscientious – undependable • bold – timid • sensitive – insensitive 	<p>2x1</p> <p>2x1</p> <p>4</p>		

Question			Answer	Marks	Guidance	
					Content	Levels of response
			<ul style="list-style-type: none"> • suspicious – trusting • imaginative – practical • shrewd – naïve • self assured – apprehensive • radical – conservative • self-sufficient – group adherence • self-disciplined – uncontrolled • tense – relaxed • personality can be tested / measured 			

Question		Answer	Marks	Content	Guidance
					Levels of response
1	(c)	<p>Cystic fibrosis</p> <ul style="list-style-type: none"> • sticky secretions of mucus clog the airways, leading to breathing difficulties, chest infections • difficulty in conceiving in females, sterility in males • very salty sweat • physiotherapy needed daily to clear lungs • digestive difficulties lead to inability to absorb nutrients, 'failure to thrive' <p>Haemophilia</p> <ul style="list-style-type: none"> • deficiency in blood protein 'factor viii' • poor blood clotting • bruising • inflammation of joints • pain <p>Down's Syndrome</p> <ul style="list-style-type: none"> • distinctive facial features • poor muscle control of tongue • short stature • heart defects common <p>Huntington's disease</p> <ul style="list-style-type: none"> • physical effects not apparent until adulthood • tremors • jerky movements, twitches • poor muscle control • muscle rigidity leading to paralysis 	7	<p>Levels checklist</p> <p>Level 3 Appropriate condition used Clearly related to physical development Good understanding High level of QWC</p> <p>Level 2 Appropriate condition used Limited explanation of effects on physical development Some understanding Possible errors in QWC</p> <p>Level 1 Condition used not appropriate /relevant Little understanding shown May not relate to physical development Noticeable and intrusive errors in QWC</p> <p>Accept other appropriate physical effects for other genetic condition chosen.</p>	<p>Level 3 (6–7 marks) Candidate has used one appropriate genetic condition to explain the effects on physical development, demonstrating good understanding. The answer relates clearly to physical development. The answer is well structured using appropriate health, social care and early year terminology accurately. There are few, if any, errors of grammar, punctuation and spelling.</p> <p>Level 2 (3–5 marks) Candidate has used one genetic condition. There is limited explanation of how the condition could affect physical development. There is limited ability to organise the information given, sentences and paragraphs are not always relevant. The answer does not fully address the focus of the question. There may be some errors of grammar, punctuation and spelling.</p> <p>Level 1 (1–2 marks) Candidate may have used an inappropriate example, or may have used general terms without giving specific examples. Little understanding is demonstrated of the effects of the genetic condition or the answer may not relate to physical development. The answer may be muddled and list like; sentences and paragraphs have limited coherence and structure and do not address the focus of the question. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</p> <p>0 – response not worthy of credit.</p>

Question		Answer	Marks	Content	Guidance
					Levels of response
1	(d)	<p>A child who is anxious may:</p> <ul style="list-style-type: none"> not want to go to school - so will miss important foundation learning eg literacy, numeracy not be able to concentrate on learning - so will not keep up with/consolidate essential literacy/numeracy skills not be motivated to learn - will not willingly read/do homework/show interest in lessons not have time/energy to do homework etc – falls behind in learning/get low marks not be interested in reading etc – poor literacy skills have poor sleep patterns – lack of energy leading to lack of interest in learning, poor progress have poor memory because of lack of concentration – poor performance in tests/assessments/exams all the above will result in poor performance/test results/qualifications 	8	<p>Levels checklist</p> <p>Level 3 Detailed explanation Clear understanding of effects of anxiety on intellectual development At least two relevant examples of effects used High level of QWC</p> <p>Level 2 Sound evaluation Some understanding of ways anxiety affects intellectual development At least two relevant examples used Possible errors in QWC</p> <p>Level 1 Limited evaluation Limited understanding of effects of anxiety on intellectual development Possible noticeable and intrusive errors in QWC</p> <p>Accept other appropriate effects.</p>	<p>Level 3 (6–8 marks) Candidate gives a detailed explanation, demonstrating a clear understanding of at least two ways anxiety could affect a child's intellectual development using relevant examples. The answer is in a planned and logical sequence, using appropriate health, social care and early years terminology. Sentences and paragraphs are for the most part relevant, with information presented in a balanced, logical and coherent manner. There will be few, if any, errors of grammar, punctuation and spelling.</p> <p>Level 2 (3 – 5 marks) Candidate gives a sound explanation, demonstrating some understanding of at least two ways anxiety could affect a child's intellectual development. The candidate has shown limited ability to organise the relevant information with material presented in a way which does not always address the focus of the question. There may be some errors of grammar, punctuation and spelling.</p> <p>Level 1 (1–2) Candidate makes a limited attempt to explain how a child's intellectual development could be affected by anxiety. Answer may be muddled or list like, demonstrating little understanding of the focus of the question. Sentences and paragraphs have limited coherence and structure. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</p> <p>0 – response not worthy of credit.</p>

Question			Answer	Marks	Guidance	
					Content	Levels of response
2	(a)		<p>One mark for</p> <ul style="list-style-type: none"> • Pavlov • Skinner 	1	Accept other appropriate theorists.	
	(b)		<p>One for each feature, TWO required One mark for each description, TWO required</p> <p>Pavlov</p> <ul style="list-style-type: none"> • theory comes from classical conditioning – response to behaviour • work developed from experiments with dogs (salivating/food/bells) - useful in establishing routine behaviour eg in fire drills • behaviour learned by association and direct experience - becomes automatic • based on reward/response to specific behaviour - identification of appropriate rewards/responses • avoidance of unpleasant experiences – linked to changes in behaviour <p>Skinner</p> <ul style="list-style-type: none"> • uses operant conditioning - behaviour operates on the environment to produce a response • positive reinforcement / praise / reward leads to behaviour being repeated and strengthened • negative reinforcement – avoiding unpleasant situations leads to bringing about 'desired behaviour' 	<p>2x1 2x1 4</p>		

Question		Answer	Marks	Content	Guidance
					Levels of response
2	(c)	<ul style="list-style-type: none"> behavioural perspective views babies as 'empty vessels' which language has to be 'put in to' all language is developed by input from others – children simply absorb and repeat language carers react to random babbling sounds made by infants, giving attention, praise, reward etc – encourages infant to repeat the sounds to get more attention/ reaction carers 'interpret' for child by eg giving a biscuit when child makes an approximate sound such as 'bi bi', or pointing to object eg cat (or car) in response to the child saying 'ca' and saying/repeating the word by talking to the child/ describing what is happening/asking questions carers provide language which the child can imitate carers use of an 'elaborated code' of language enables child to extend and develop use of vocabulary and grammar operant conditioning indicates that sounds and words which are not rewarded are not reinforced and are extinguished carers can encourage and support child's language development by talking to the child, showing interest, engaging the child in conversations reading 'together', asking the child questions (Where's Spot) develop thinking skills and associated language carers can restrict a child's language development by over correcting errors/ ignoring / punishing the child's attempts at speech/language 	15	<p>Levels checklist</p> <p>Level 3 High level of understanding of behavioural perspective Detailed analysis related to carers influence Stages of language development mentioned High level of QWC</p> <p>Level 2 Some understanding of behavioural perspective. Limited analysis of carers influence Little reference to stages of language development Possible errors in QWC</p> <p>Level 1 Limited understanding of the behavioural perspective Little reference to carers influence Stages of language development not mentioned Possible noticeable and intrusive errors in QWC</p>	<p>Level 3 (11–15 marks) Candidate demonstrates a high level of understanding of the behavioural perspective using it to give a detailed analysis of how carers can influence a child's language development. Different stages of language development from birth to five years old are mentioned. The answer is in a planned and logical sequence, using appropriate health, social care and early years terminology accurately. There will be few, if any, errors of grammar, punctuation and spelling.</p> <p>Level 2 (6–10 marks) Candidate demonstrates understanding in using the behavioural perspective to analyse how carers can influence a child's language development. The answer may not fully cover the different stages of language development from birth to five years or the answer may be expressed in very general terms with limited reference to the influence of carers. The candidate has shown limited ability to organise the information, sentences and paragraphs may not always address the focus of the question. There may be some errors of grammar, punctuation and spelling.</p> <p>Level 1 (1–5 marks) Candidate demonstrates limited understanding in using the behavioural perspective to analyse how carers can influence a child's language development. The answer may be muddled or list like or may lack relevance to the question. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</p> <p>0 – response not worthy of credit.</p>

Question		Answer	Marks	Content	Guidance
					Levels of response
3	(a)	<p>Poor levels of nutrition in later adulthood may be because of difficulties in</p> <ul style="list-style-type: none"> shopping/carrying food from shops/ accessing shops – therefore limited variety of food available – eg basics such as bread, tea, biscuits etc lack of facilities/limited storage – limited food available appetite may be reduced – less food eaten lack of interest in preparing meals if on own – limited diet poor manipulative skills – unable to open tins/jars etc, difficulty in preparing foods eg vegetables, difficulties in lifting pans etc out of oven off cooker etc cognitive issues – forgetting to eat/not eating regularly lack of understanding of nutritional requirements- only eating ‘easy’ foods/meals rather than ensuring nutritional balance health issues eg poor digestion – diet limited to easily digested foods dental problems – some foods difficult to eat/chew/swallow so are avoided eg fruit money issues – not able to afford good quality foods, don’t want to waste food, small portions less economical may eat too much, especially fatty foods, high sugar and high carbohydrate foods – may be or become overweight/obese may eat too little food - weight loss/ tiredness/lethargy 	5	<p>Level checklist</p> <p>Level 2 Good understanding shown Sound explanation At least one appropriate example/reason Clear understanding Few errors in QWC</p> <p>Level 1 Limited explanation Examples/reasons may not be appropriate Little understanding Possible noticeable and intrusive errors in QWC</p>	<p>Level 2 (3–5 marks) Candidate demonstrates good understanding in explaining why a person in later adulthood might have poor levels of nutrition. At least one example/reason is well explained. Sentences and paragraphs address the focus of the question. There will be few, if any, errors of grammar, punctuation or spelling.</p> <p>Level 1 (0–2 marks) Candidate gives a limited explanation of why a person in later adulthood might have poor levels of nutrition. Alternatively reasons for poor reasons of nutrition are given but not related to later adulthood. There is little understanding of the focus of the question; examples/reasons given may be of little relevance. Answer may be muddled or list like. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</p> <p>0 – response not worthy of credit.</p>

Question		Answer	Marks	Content	Guidance
					Levels of response
3	(b)	<p>Effects:</p> <ul style="list-style-type: none"> body odour/smell because bathroom/toilet is upstairs/difficult to get to/poorly maintained/cold/out of order/broken etc - individual avoids using skin problems/sores/lesions etc develop/worsen because unable to wash/bath/shower infections (MRSA /urinary infections etc) develop because of lack of facilities/hot water – individuals unable to wash/bath/shower dental problems - teeth not cleaned – because of lack of facilities constipation/incontinence because toilet difficult to get to/cold/poorly maintained – individual avoids using possible infestation eg of lice/fleas/bedbugs etc because clothes unwashed/dirty due to limited facilities for washing 	8	<p>Question asks for effects on personal hygiene, not an explanation of poor quality housing</p> <p>Levels checklist</p> <p>Level 3 Two effects analysed Related to later adulthood Clear understanding High level of QWC</p> <p>Level 2 Two effects briefly analysed Limited links to later adulthood Some understanding <i>Sub-max of 4 for one effect done well.</i> Possible errors in QWC</p> <p>Level 1 Only one effect Limited understanding Possible noticeable and intrusive errors in QWC</p> <p>Accept other appropriate effects on personal hygiene.</p>	<p>Level 3 (7–8 marks) Candidate analyses at least two effects that living in poor quality housing could have on the personal hygiene of a person in later adulthood. The answer is planned and logical; sentences clearly address the focus of the question, demonstrating good understanding. There will be few, if any, errors of grammar, punctuation or spelling.</p> <p>Level 2 (4–6 mark) Candidate analyses at least two effects that living in poor quality housing could have on the personal hygiene of a person in later adulthood. Candidate has shown limited ability to organise the relevant information with material presented in a way which does not always address the focus of the question. There may be some errors of grammar, punctuation and spelling. <i>Sub-max of 4 for one effect done well.</i></p> <p>Level 1 (0–3 marks) Candidate makes a limited attempt to analyse at least one effect that living in poor quality housing could have on the personal hygiene of a person in later adulthood. The answer is muddled or list like. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</p> <p>0 – response not worthy of credit.</p>

Question			Answer	Marks	Guidance	
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3	(c)		<p>One mark for each, TWO required</p> <ul style="list-style-type: none"> • residential care home • nursing home • day care centre • support day care 	<p>2x1</p> <p>2</p>	<p>Do not accept services such as meals on wheels, respite care, domiciliary care, GPs etc.</p> <p>Whilst 'care home' would be acceptable, do not accept repeats which imply the same setting e.g. 'residential home / care home / residential care'.</p> <p>Accept</p> <ul style="list-style-type: none"> • hospital • hospice <p>Accept other appropriate settings.</p>	

Question		Answer	Marks	Content	Guidance
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4	(a)	<p>Self-concept An adolescent's cultural background and upbringing (primary socialisation) would teach them to be proud of (positive) or to be ashamed of (negative), aspects such as:</p> <ul style="list-style-type: none"> • appearance/skin colour • religion/values/lifestyle • family/cultural group • accent/language • clothes/fashion • music/entertainment/films • education/qualifications/career/work • food/dietary observances • traditions/customs/festivals/celebrations • country of origin • mixed racial background may result in cultural confusion. <p>All of the above can affect/determine an individual's self-concept, which can also be affected by :</p> <ul style="list-style-type: none"> • media portrayal of a particular culture • stereotypical views <p>+ any other appropriate aspect of culture and upbringing</p>	6	<p>Levels checklist</p> <p>Level 3 Clear explanation Good understanding of effects of cultural background on self concept High level of QWC</p> <p>Level 2 Sound explanation Some understanding of effects of cultural background on self concept Possible errors in QWC</p> <p>Level 1 Limited explanation Limited understanding shown Possible noticeable and intrusive errors in QWC</p>	<p>Level 3 (5–6 marks) Candidate clearly explains how an adolescent's cultural background could affect their self concept. Candidate demonstrates a good understanding of the focus of the question. The answer is in a planned and logical sequence, using appropriate health, social care and early years terminology accurately. Sentences and paragraphs are for the most part relevant, with information presented in a balanced, logical and coherent manner. There will be few, if any, errors of grammar, punctuation and spelling.</p> <p>Level 2 (3–4 marks) Candidate attempts to explain how an adolescent's cultural background could affect their self concept, demonstrating some understanding. The candidate has shown limited ability to organise the relevant information, sentences and paragraphs may not always be relevant, with the answer presented in a way that does not always address the focus of the question. There may be some errors of grammar, punctuation and spelling.</p> <p>Level 1 (1–2 marks) At least one aspect of an adolescent's cultural background is explained although only limited links are made to self concept. Alternatively self-concept is explained but this is not linked to cultural background. The answer may be muddled or list like demonstrating little understanding of the focus of the question. The candidate has used little, if any, appropriate health, social care and early years terminology. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</p> <p>0 – response not worthy of credit.</p>

Question		Answer	Marks	Content	Guidance
					Levels of response
4	(b)	<p>Self-concept may be vulnerable during adolescence.</p> <p>Adolescents with a low self concept are more likely to be influenced by others.</p> <p>Self-concept includes</p> <ul style="list-style-type: none"> • self-esteem - how adolescents feel about themselves • self-image – how adolescents see themselves <p>Social learning perspective:</p> <ul style="list-style-type: none"> • adolescence is a ‘social construct’ which is the result of the society in which the person is brought up • adolescents will compare themselves with others, how they judge their comparison will affect their self-concept • responses to the physical changes of puberty are learned behaviours resulting from upbringing and societal influences – including media etc <p><i>Examples of changes in behaviour could include:</i></p> <ul style="list-style-type: none"> • smoking • experimenting with drugs • fashion changes • taste in music • antisocial behaviour • supporting causes (eg ‘green issues’) <p>Accept other appropriate examples.</p>	14	<p>Answer should relate to how self-concept affects behaviour, not on how self concept develops.</p> <p>Levels checklist</p> <p>Level 3 Clear understanding of perspective demonstrated Clear links between self concept and changes in behaviour At least two examples of changes in behaviour during adolescence High level of QWC</p> <p>Level 2 Some understanding of perspective Some links between self concept and changes in behaviour One relevant change in behaviour Possible errors in QWC</p> <p>Level 1 Limited understanding Little reference to links between self concept and changes in behaviour Possible noticeable and intrusive errors in QWC</p>	<p>Level 3 (11–14 marks) Candidate demonstrates clear understanding of the social learning perspective. Clear links between self concept and at least two relevant changes in behaviour which can occur during adolescence are clearly analysed. Detailed knowledge of theory should be evident at this level. Answer is presented in a planned and logical sequence, using appropriate health, social care and early years terminology accurately. Sentences and paragraphs are for the most part relevant with the material presented in a balanced, logical and coherent manner which addresses the question; there will be few, if any, errors of grammar, punctuation and spelling.</p> <p>Level 2 (6–10 marks) Candidate briefly uses an appropriate theory and some links are made to analyse ways in which self concept can affect behaviour during adolescence. At least one relevant change in behaviour is given. Sentences and paragraphs may contain irrelevancies or may not always address the main focus of the question. There may be some errors of grammar, punctuation and spelling.</p> <p>Level 1 (1–5 marks) Candidate gives only a very brief analysis which is more of a description of an appropriate theory, little or no reference is made to self concept and how this can affect changes in behaviour which can occur during adolescence. Alternatively a description of behaviours characteristic of adolescence may be given but with little or no reference to self</p>

Question			Answer	Marks	Content	Guidance
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			<p>Tajfel</p> <ul style="list-style-type: none"> • individuals seek group identity e.g. by age, interests, gender etc • personal identity is established through socialisation • groups are seen as being 'in-groups' or 'out-groups' • behaviour conforms to the expectations of the in-group • young people in particular want to fit in with their in-group • adolescents gain a 'sense of belonging' by being accepted as a group/gang member, which they may not feel within their family <p>Latane</p> <ul style="list-style-type: none"> • bystander apathy experiments likely to be described • behaviour conforms to expectations of the group • people copy the behaviour of those around them • young people in particular want to fit in with peer group • people 'behave like sheep', adolescents will go along with the views of others in their social group • adolescents particularly concerned about what others of their age think of them 			<p>concept. Answer may be list like, sentences and paragraphs have limited coherence and structure. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</p> <p>0 – response not worthy of credit.</p>

Question			Answer	Marks	Content	Guidance
						Levels of response
			<p>Bandura</p> <ul style="list-style-type: none"> • Bobo doll experiment likely to be described –should be linked to adolescence and self concept. • behaviour is copied/imitated <i>from</i> those who <ul style="list-style-type: none"> - a person identifies with - a person looks up to/sees as role models - a person sees being rewarded • behaviour is more likely to be imitated <i>by</i> those who <ul style="list-style-type: none"> - lack self-confidence – commonly a feature of - have poor self image – commonly a feature of adolescence - adolescents are more likely to copy peers/friends/celebrities rather than parents 			

Question		Answer	Marks	Content	Guidance
					Levels of response
5	(a)	<p>Piaget</p> <ul style="list-style-type: none"> • learning through own experience importance of free play • stages of development– sensory motor(0-2), pre-operational (2-7), concrete operations (7-11), formal operations (11+) • accommodation, assimilation and equilibrium – the development of schemas to cope with dilemmas and construct understanding • egocentricity – the world is seen from the child’s perspective • constructing own understanding as a result of experiences. • concept formation – conservation etc <p>Vygotsky</p> <ul style="list-style-type: none"> • child’s learning takes place within a social context / culture –understanding develops through interaction with others • importance of more knowledgeable other (child or adult) and structure of learning experiences • Zone of proximal development - child should be provided with opportunities to challenge level of understanding and be helped to tackle more difficult concepts • use of language to explain and develop understanding • importance of supported play – adults involved internalisation of social interaction 	7	<p>Levels checklist</p> <p>Level 3 Appropriate theorist used Detailed outline given Good understanding High level of QWC</p> <p>Level 2 Appropriate theorist used Clear outline Some understanding Possible errors in QWC</p> <p>Level 1 Appropriate theorist Brief outline Limited understanding Possible noticeable and intrusive errors in QWC</p>	<p>Level 3 (6–7 marks) Candidate has identified either Piaget or Vygotsky, and has given a detailed outline, demonstrating a good understanding of their theory. The answer has a well planned and logical sequence with health, social care and early years terminology used accurately. Sentences and paragraphs are used to address the focus of the question. There are few errors of punctuation and spelling.</p> <p>Level 2 (3–5 marks) Candidate identifies and gives a clear outline of an appropriate theory. Sentences and paragraphs are not always relevant, with material presented in a way that does not fully address the question. There may be noticeable errors of grammar, punctuation and spelling.</p> <p>Level 1 (1–2 marks) A brief outline of an appropriate theory is given. Sentences and paragraphs have limited coherence and structure, often being of doubtful relevance to the question. There may be noticeable and intrusive errors of grammar, punctuation and spelling.</p> <p>0 – response not worthy of credit.</p>

Question		Answer	Marks	Content	Guidance
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5	(b)	<p>Putting Piaget into practice</p> <p>Useful in supporting intellectual development because:</p> <ul style="list-style-type: none"> • clear identification of ages and stages • allows for selection of age/stage related activities • provide a wide range of activities/ experiences • adults role is to facilitate learning/development by providing opportunities for children to learn from • encourages clear structuring of learning programmes • emphasises individual play • detailed record keeping of child's progress helps planning • 'culture free' – importance of background seen to have less importance (although experiences will vary) <p>Not useful because</p> <ul style="list-style-type: none"> • different children may go through stages at different ages • requires detailed record keeping to identify child's stage of progress • minimises value of group activities – less appropriate for early years settings • emphasises individual experiences for child – minimises role of teacher • minimises role of background culture and interaction with others • learning by 'trial and error' can be time consuming 	18	<p>Levels checklist</p> <p>Level 4 Detailed evaluation Clear application to setting Relevant to intellectual development of preschool child Appropriate examples given Both positive and negative aspects used Good understanding High level of QWC Conclusion drawn for full marks</p> <p>Level 3 Clear evaluation Application to setting Relevant to intellectual development of preschool child Examples given Both positive and negative aspects used Some understanding Occasional errors in QWC <i>Sub-max of 9 if only positive aspects or only negative aspects used.</i></p> <p>Level 2 Some evaluation Some application to setting Either positive or negative aspects Some understanding Possible errors in QWC</p>	<p>Level 4 (15–18 marks) A detailed evaluation of the application of the theory in a preschool setting to support children's intellectual development is given, using appropriate examples and giving both positive and negative aspects of the theory's usefulness. A clear conclusion has been drawn for full marks. The answer has a clearly defined structure, using appropriate health, social care and early years terminology accurately and with confidence. Sentences and paragraphs, consistently relevant, are well structured and clearly address the focus of the question. There will be few, if any, errors of grammar, punctuation and spelling.</p> <p>Level 3 (10–14 marks) An evaluation of the application of the theory in a preschool setting is given using examples and giving both positive and negative aspects of the theory's usefulness. There may not be a clear conclusion. The answer has a well planned and logical sequence with health, social care and early years terminology used accurately. Sentences and paragraphs address the focus of the question. There may be occasional errors of punctuation and spelling. <i>Sub-max of 9 if only positive aspects or only negative aspects used.</i></p> <p>Level 2 (5–9 marks) An attempt has been made to apply the theory to a practical situation with some evaluation, either positive or negative aspects being identified. There is limited ability to organise relevant material, using some appropriate</p>

Question			Answer	Marks	Content	Guidance
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			<p>Putting Vygotsky into practice</p> <p>Useful in supporting intellectual development because:</p> <ul style="list-style-type: none"> • emphasises role of adult in being able to interact with child to help learning • group work and shared learning activities are seen to be beneficial • children can learn from other children 'more knowledgeable others' • planning activities allows flexibility • encourages social interaction – useful in preschool settings • structured learning can be planned more easily for a group <p>Not useful because</p> <ul style="list-style-type: none"> • family background has major impact on early development • importance of child working quietly on their own minimised – how do children learn to be 'independent learners'? • same age groupings may not be most beneficial - difficult to arrange mixed age groups • careful observation and recording of progress essential to identify zone of proximal development • ages/stages not so clearly identified – less easy to compare child's progress 		<p>Level 1 Limited evaluation Little application to setting Only positive or negative aspects Limited understanding Possible noticeable and intrusive errors in QWC</p>	<p>health, social care and early years terminology. Sentences and paragraphs are not always relevant, with material presented in a way that does not fully address the question. There may be noticeable errors of grammar, punctuation and spelling.</p> <p>Level 1 (1–4 marks) A limited attempt is made to apply or link the theory to practice. Alternatively examples of activities related to a preschool setting are given but not linked to theory. Some appropriate health, social care and early years terminology is used although not fully related to the question. Sentences and paragraphs have limited coherence and structure, often being of doubtful relevance to the question. There may be noticeable and intrusive errors of grammar, punctuation and spelling.</p> <p>0 – response not worthy of credit.</p>

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