

GCSE (9–1)

Exemplar Candidate Work

DRAMA

J316

For first teaching in 2016

Devising – Exemplar 6 with commentary

Version 1



Introduction

This work has been produced by Drama students as part of their school curriculum time, studying how to devise drama using a stimulus. It offers teachers an insight into how the devising process can be recorded by students in their portfolio for Devising Drama (component 01/02).

As these responses have not been through moderation, an indication of the level of each response has not been included. A version of this resource which provides an indication of the level of the response will be made available in addition to this version in due course.

Please note that this resource is provided for advice and guidance only and does not in any way constitute an indication of an endorsed approach to creating a portfolio.

The sample assessment material used as the starting point for this work can be found on the GCSE (9–1) Drama web page and accessed via the following link: <http://www.ocr.org.uk/Images/242631-unit-j316-01-02-devising-drama-sample-assessment-material.pdf>

EXEMPLAR CANDIDATE WORK 6

Stimulus 10
Monster - song

characters -

K-C - jamie - Schizophrenia

Molly - Good angel

Rob - Bad angel

Sara - Mother

Lilly - Monster

Style

Non-naturalistic

Structure

Journey or Pathway

Our idea has
come from the
lyrics and our
link to mental
health.

Scenes -

Scene one - intro

Scene two - mom - blue light

Scene three - jamie & mom
Plaine light

Scene four - jamie &
monster red light

Scene five Good angle red
bad angel blue spot

Scene Six - jamie & the
angels.

Scene seven -

jamie & mom out

jamie has an paranoia
attack

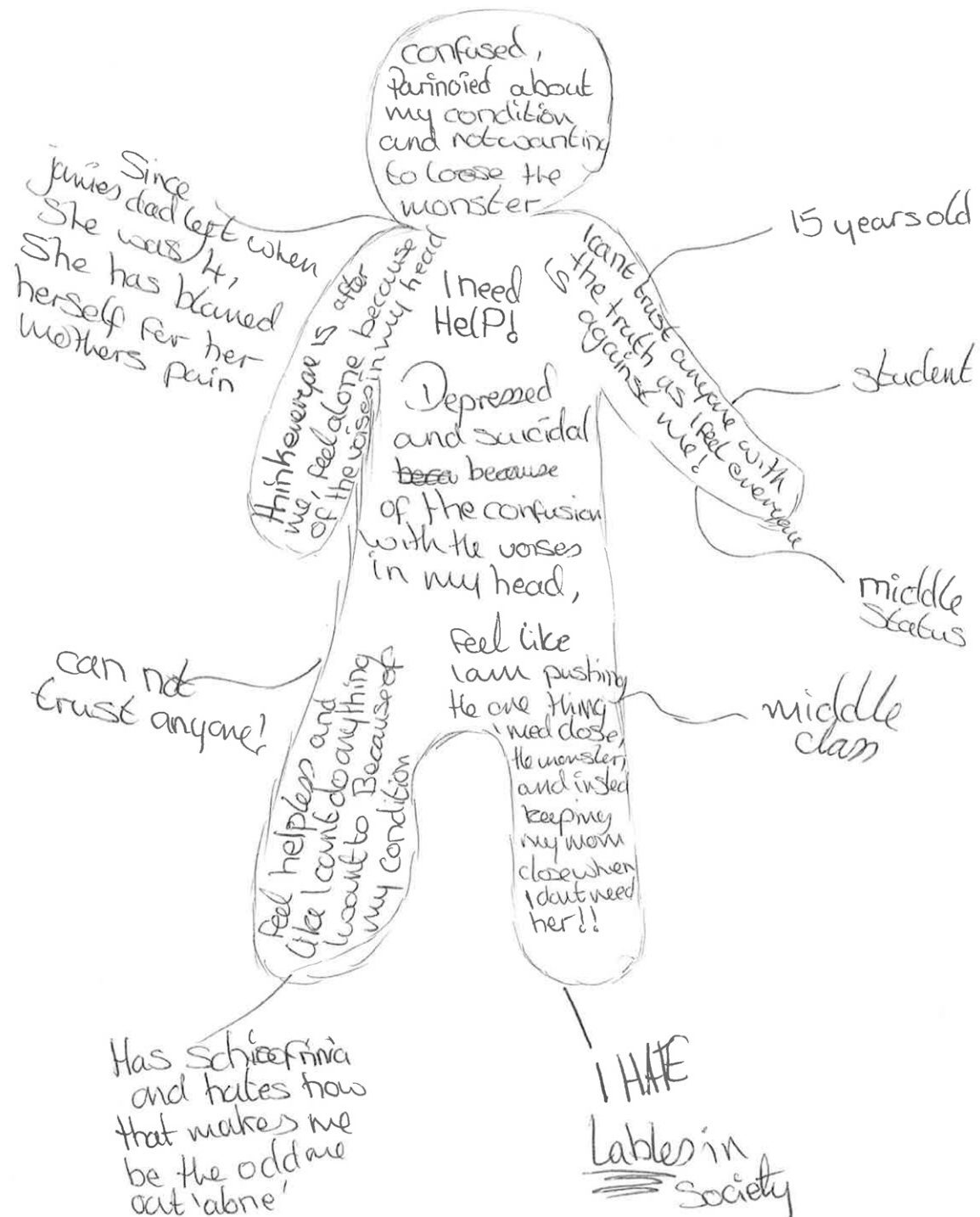
Scene 8
eight - suicide attempt

Scene nine - mental
asylum - ~~over~~

Scene ten -
free frame - jamie
overcomes them.

Role on the wall -

character - Janie



Magic if -

If I were really my character I would feel so depressed as I would blame myself for my dad leaving when I was 4 and I also blame myself for my mother's pain! I feel as if I am alone with no one to talk to or confide in as my condition makes me feel like everyone is against me and like everyone talks about me, I would also feel as though the voices in my head are pulling me into an age old dispute when there is no need! The monster ~~is~~ would make me feel as though no one can hear my silent crys for help or all the times I would cry myself to sleep over the pain I have caused I was all alone with no where to turn so I ~~let~~ will end up suicidal and like the only way out of this pain I am in would be to end my suffering, But if I did that then I would still be causing pain to others and also be ruining the monster's life and mutual feel the monster is all that I want to keep close to me! I also feel like I have no one as I ~~have~~ would have no friends because I would push them all away!

Please note: this page was followed by two pages of unannotated song lyrics that have been omitted from this pdf.

A long-term mental disorder of a type involving a breakdown in the relation between thought, emotion, and behavior, leading to faulty perception, inappropriate actions and feelings, withdrawal from reality and personal relationships into fantasy and delusion, and a sense of mental fragmentation. synonyms: insanity · insaneness · dementia · mental illness

Paranoid schizophrenia, also called schizophrenia, paranoid type is a sub-type of schizophrenia as defined in the Diagnostic and Statistical Manual of Mental Disorders, DSM-IV code 295.30. It is the most common type of schizophrenia. Schizophrenia is defined as "a chronic mental disorder in which a person loses touch with reality." Schizophrenia is divided into subtypes based on the "predominant symptomatology at the time of evaluation." The clinical picture is dominated by relatively stable and often persecutory delusions that are usually accompanied by hallucinations, particularly of the auditory variety, and perceptual disturbances. These symptoms can have a huge effect on functioning and can negatively affect quality of life. Paranoid schizophrenia is a lifelong disease, but with proper treatment, a person with the illness can attain a higher quality of life.

jamie

History-

After my dad left, after my diagnosis of I felt alone because at the age of 4 you should have a father!

I am now 15 and I live with my mum.

class- middle class because my parents, although split up, have a lot of money.

Status- middle as I am not really important but important enough to matter.

Attitudes- aggressive, confused, Bizarre, indignant

job- student at college although I ~~rate~~ rarely

~~rate~~ attend

Beliefs- monster and ~~angel~~ angels & no religion

Personality- stuck up & ~~and~~ indignant about my condition, I can be argumentative and think I'm always right.

jamie

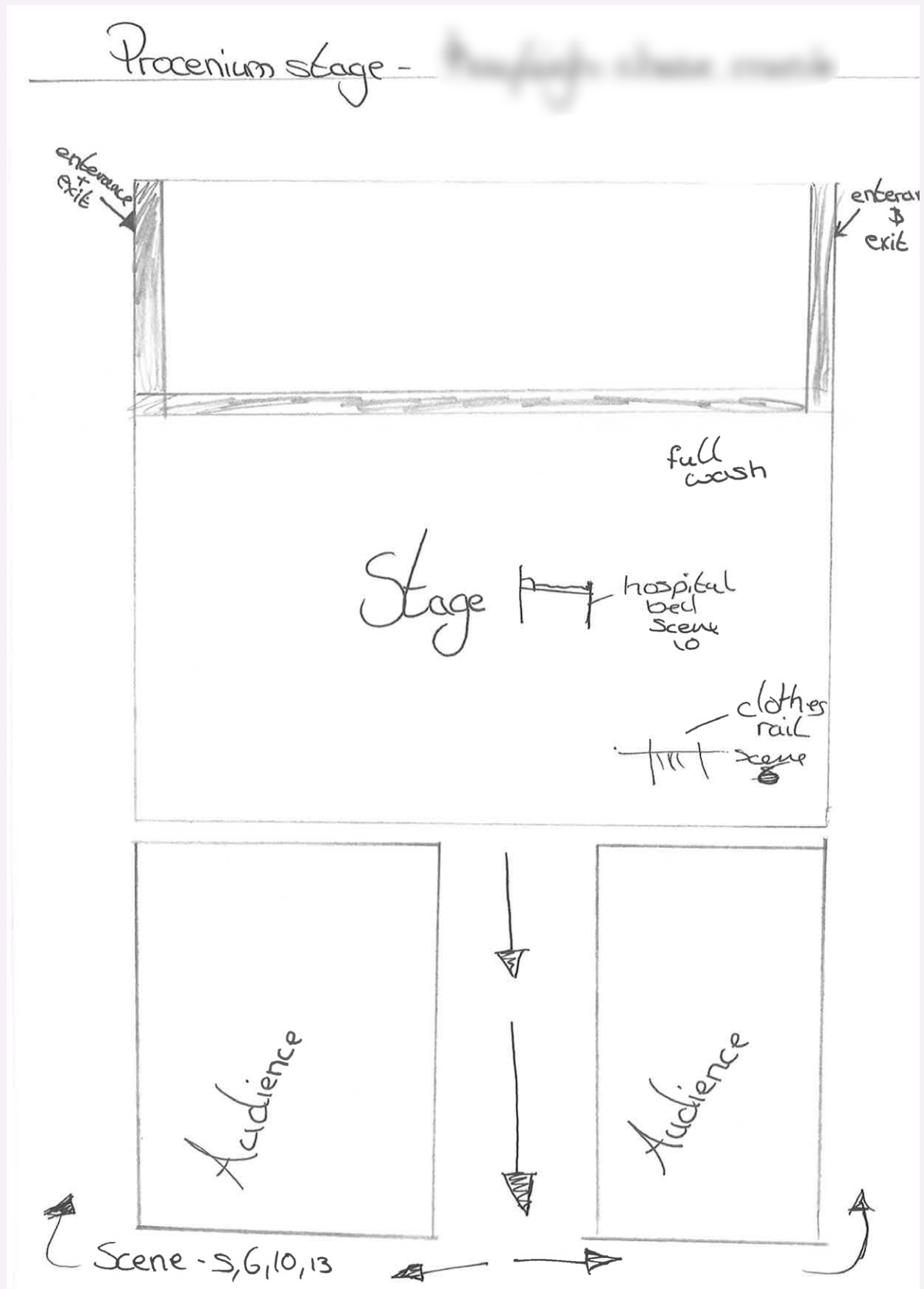
Question 1- what is your daily life like?

Question 2- why do you not attend school?

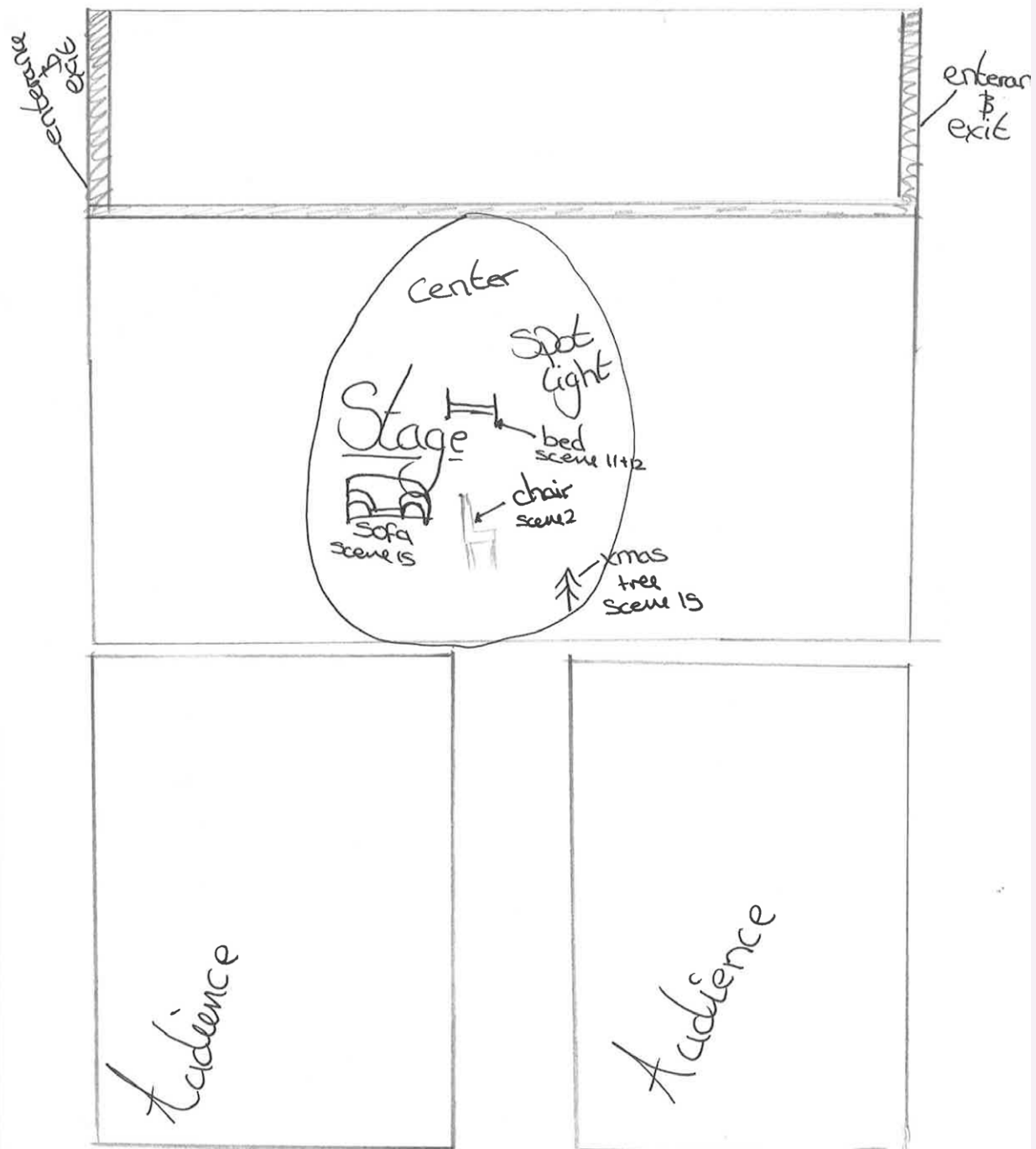
Question 3- what is your relationship like with your mother?

Answer one- My daily life is hard to say the least but in all honesty it is extremely depressing and hard to put into elaborate ~~explorative~~ explanation of how difficult it really is. So all in all my life is full of paranoia!

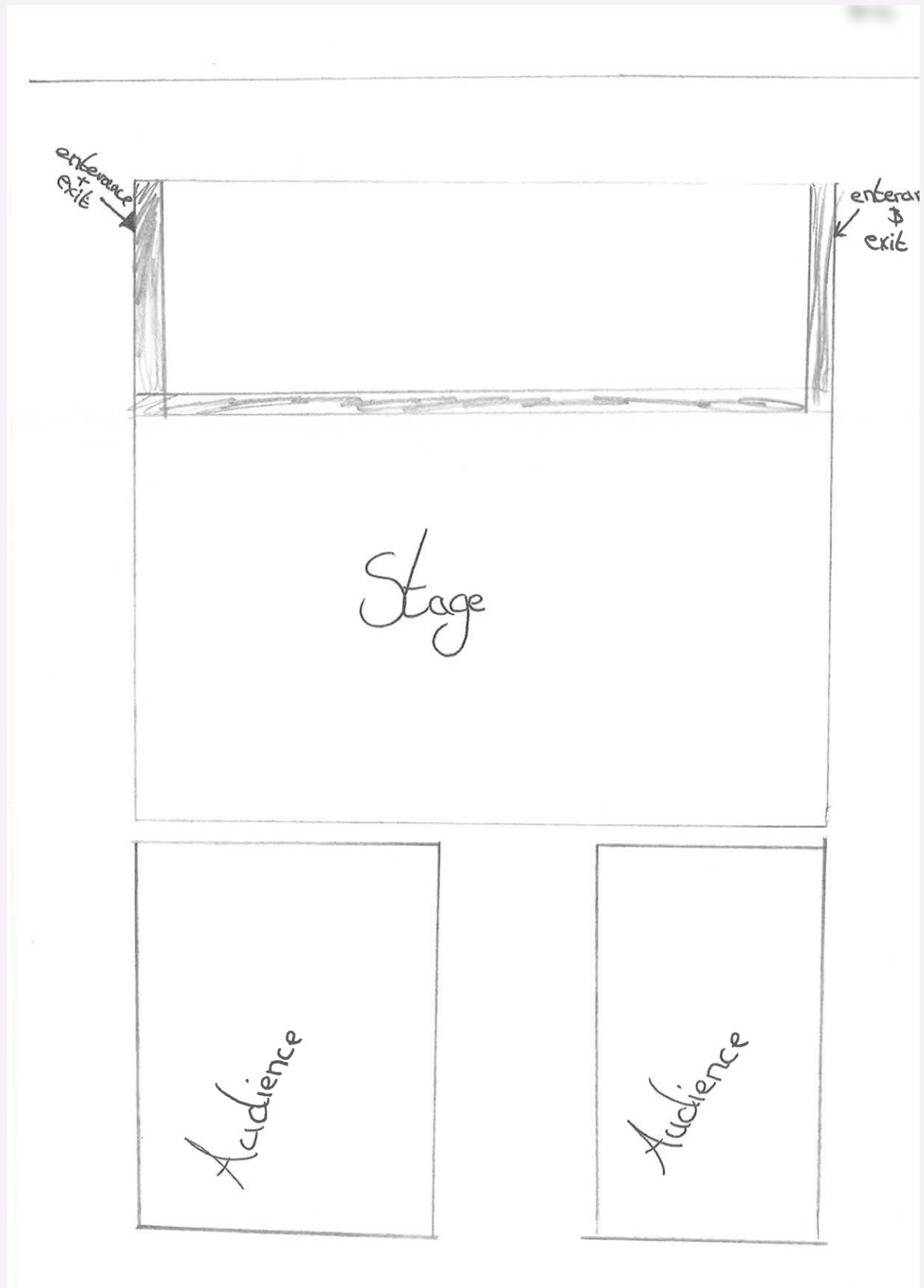
Answer 2- School... That is a sensitive subject as I always get bullied,

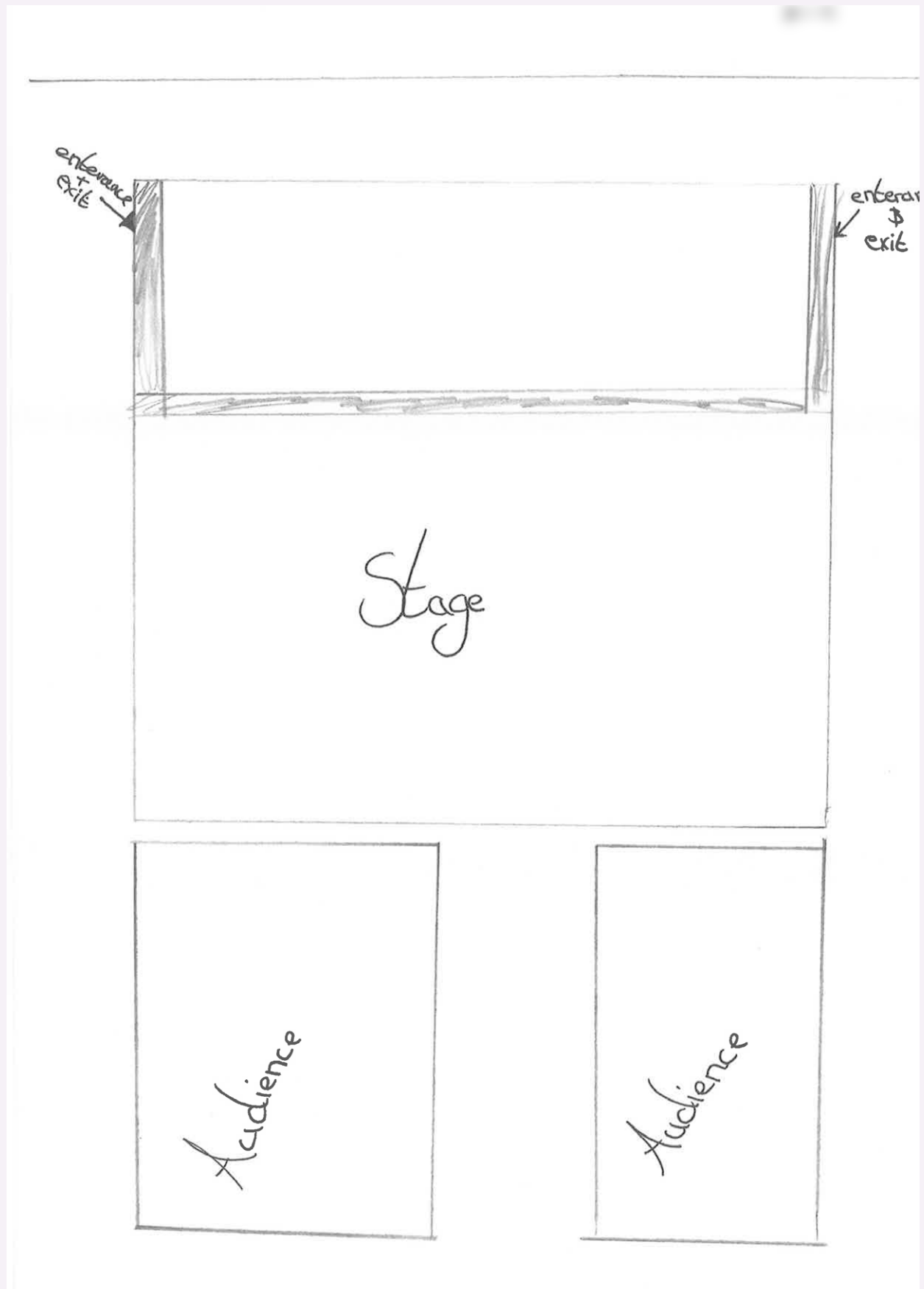


Proscenium Stage - By [unclear]



Scenes - 1, 2, 4, 9, 11, 12, 15





Wednesday 6th
July
2016

our structures are;

The journey or pathway, this is when we create a story based on a characters journey

Separated lives, ~~which~~ which shows two or more people that are the complete opposites from one another.

A day in the life, this is where the performers show the audience a day in the life of a specific character.

Scenes -

- 1- Intro - Silent-music only - sad :-)
- 2- Sara-mothers monolog with jamie entering
- R 3- jamie & the monster arguing
- 4- angels arguing - good or bad
- W Swap → 5- jamie to mom - Shopping; monster argue with jamie
- W → 6- jamie and angels argue

Our Genre is: modern tragedy and Theater in education; we chose modern tragedy because we wanted to get the point across and make the performance memorable, and we chose theater in education because the performance was intended to increase awareness about mental instability.

Our performance style's are Non-Naturalistic and abstract; we have chosen to use good angle, bad angle and also figures of imagination, we have chosen abstract as well because we have made our performance 'far out' as to engage the audience.

We have used around 7 conventions such as: Still image, choral speech, sound tracking, marking the moment, split staging, mimed activities and good angle, bad angle. We have used all of our conventions to the best of our ability and for effect.

Marks

Portfolio - Section 1	AO1	1 out of 10 marks
Portfolio - Section 2	AO1	1 out of 10 marks
Portfolio - Whole Portfolio	AO4	3 out of 20 marks
Total		5

Commentary

Section 1 – Research and developing ideas

The candidate made no reference to the stimulus.

There was some research on schizophrenia but there was no evidence to indicate how the research was going to be used to inform the drama being created.

Section 2 – Creating and developing drama

The candidate used role on the wall as one technique for developing character – this has limited effect.

Reference was made to the 'magic if' which contained some limited character detail.

A list of scenes was given but no detail of function or purpose of each scene.

Some basic detail was given about the role to be played by the candidate. No other roles were identified with any detail.

The candidate identified genre and performance style.

The candidate listed conventions but no detail as to why these were being used.

No reference was made to target audience.

Stage plans were included – labelled but no key.

Semiotics were not addressed:

Hot-seating responses given which added little to the developing drama.

Reference to structure.

Whole portfolio – Analysis and evaluation

This was a very limited portfolio with limited/basic reasoning for changes made. No evaluation or analysis evident.



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