

GCE

Health and Social Care

Unit **F920**: Understanding human behaviour

Advanced GCE

Mark Scheme for June 2016

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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 of annotation
	Good response/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
			<ul style="list-style-type: none"> • Much behaviour is 'unconscious' • Defence mechanisms used to protect sense of self. <p>Erikson:</p> <ul style="list-style-type: none"> • Development is 'lifelong' • Age related stages are seen as 'dilemmas' or 'crises' • Resolution of crises can be positive or negative • Stages: Trust v Mistrust Autonomy v Shame and doubt Initiative v Guilt Industry v inferiority Identity v role confusion Intimacy v isolation Generativity v stagnation Integrity v despair. • Outcome of each age stage will influence later behaviour <p>Bowlby:</p> <ul style="list-style-type: none"> • Importance of attachment in first weeks of life • Bonding with one or more significant carers essential <p>+ any other appropriate comment</p>			

Question		Answer	Marks	Guidance	
				Content	Levels of response
	(c)	<p>Freud:</p> <ul style="list-style-type: none"> • Childhood experiences responsible for personality development • Stages need to be successfully resolved – fixation at each stage gives rise to specific behaviours • Oral stage can lead to being passive, dependent, gullible, with emphasis on oral pleasures eg smoking, eating, drinking or suspicious and avoiding oral pleasure • Anal stage can lead to being stubborn, mean, obsessed with tidiness, organised or being overgenerous, untidy, open-minded. • Phallic stage can lead to recklessness, risk taking, being obsessed with sexual activity or being timid and avoiding reference to sexuality. • Unconscious feelings direct the way we behave, people do not know why they behave in a certain way – during adolescence behaviour may be particularly unpredictable. • Emotion and behaviour is driven by the id, ego and superego. – balancing personal wants with social and moral values – particularly important during adolescence. <ul style="list-style-type: none"> – Id predominating – egocentric, self- seeking and selfish – Superego predominating – conformist and self- denying. <p>Defence mechanisms may be developed:</p> <ul style="list-style-type: none"> • regression – during periods of stress may exhibit ‘childish’ behaviour – 	12	<p>The childhood experiences could be expressed in general terms such as: being cared for/feeling secure/being neglected etc. or could be very specific such as: death of a parent/divorce of parents/ illness/adoption etc.</p> <p>Use  to annotate experience.</p> <p>Levels checklist</p> <p>Level 3 Good understanding At least two experiences explained Clear links to psychodynamic perspective Clearly related to adolescence High level of QWC</p> <p>Level 2 Sound understanding Childhood experiences may be expressed in general terms. Some links made to psychodynamic perspective May not relate directly to adolescence. Sound QWC</p> <p>Level 1 Limited understanding Limited reference to childhood experiences.</p>	<p>Level 3 (9–12 marks) Candidate demonstrates a good understanding of the psychodynamic perspective. The perspective is clearly applied in analysing how at least two childhood experiences could affect emotional development in adolescence and clear links are made between the psychodynamic perspective and the experiences. The answer is well planned and has a logical sequence, using appropriate health and social care terminology accurately. Sentences and paragraphs address the focus of the question. There are few errors of grammar, punctuation and spelling.</p> <p>Level 2 (5–8 marks) Candidate shows sound understanding of the psychodynamic perspective. Experiences a child has in early childhood may be expressed in very general terms, some understanding is shown in analysing how those experiences could affect later development, although this may not be directly related to adolescence. There is limited ability to organise the information, with the material presented in a way that does not fully address the question. Sentences and paragraphs are not</p>

Question			Answer	Marks	Guidance	
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			<ul style="list-style-type: none"> tantrums, sulking etc denial – blocking threatening information eg not doing well at school repression – blocking unpleasant thoughts rationalisation – reinterpreting unpleasant events eg reasons for arguments with parents/friends displacement – transferring anger eg onto parents projection – blaming others for demonstrating characteristics which we have ourselves eg not having friends/being popular sublimation – redirecting mental energy – eg to computer games/sports rather than people reaction formation – overemphasising opposite emotions eg changing love into hate or hate into aggressive praise eg responses to girl/boy friends. <p>Erikson:</p> <ul style="list-style-type: none"> People continue to develop throughout lives Early experiences provide a foundation for later development Generally optimistic – people can change Life stages seen in terms of crises/dilemmas Development requires resolution of different stages –each stage has a generally positive or negative outcome which will affect their future behaviour and approach to life: Trust v Mistrust (birth to 18 months) – becomes generally trusting, secure 		<p>Few links made Limited or no reference to adolescence Mainly theory Low QWC</p>	<p>always relevant There may be occasional errors of grammar, punctuation and spelling.</p> <p>Level 1 (1–4 marks) Candidate makes a limited attempt to explain how early childhood experiences could affect emotional development in adolescence with little reference to theory. Alternatively the psychodynamic perspective is explained but there is little reference to the child's future development. The answer may be muddled and list like. Sentences and paragraphs have limited coherence and structure often being doubtful in relevance to the main focus of the question. There may be noticeable and intrusive errors of grammar, punctuation and spelling.</p> <p>0 marks: No response worthy of credit given.</p>

Question			Answer	Marks	Guidance	
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			<p>and hopeful or becomes mistrustful of people or events, insecure and anxious - relevant to developing friendships/meeting new people/having new experiences during adolescence.</p> <ul style="list-style-type: none"> • Autonomy v Shame and doubt (18 months to 3 years) – feeling good about self and being able to be in control or lacking self- belief- links to development of self-concept during adolescence. • Initiative v Guilt (3 years to 5 years) – being willing to try new things and be confident in making most of opportunities available during adolescence or always feels that they are in the wrong (being a 'victim') • Industry v inferiority (approx. 6 years to 11 years)- individual is willing to work hard, take chances and can cope when they are not always successful or is unwilling to try because of 'fear of failure' • Identity v role confusion (approx. 12 years to 21 years) – adolescent develops own set of personal values and has a clear self-concept or they lack self-confidence and is easily influenced by others, always wanting to please others having no clear personal views or values. <p>Candidates may also refer to Bowlby's work.</p>			

Question			Answer	Marks	Guidance	
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			<p>Bowlby:</p> <ul style="list-style-type: none"> Attachment to primary carer is of key importance – bonding, enables confident, secure friendships/relationships to be made during adolescence. lack of secure attachments/ bonding creates anxiety in future relationships, can result in being 'needy'/suspicious/possessive – particularly in developing new relationships during adolescence. Children who have experienced many separations from those they have tried to form bonds with find it difficult to understand social situations and form relationships. <p>+ any other appropriate comment</p>			
2	(a)		<p>Nature side –</p> <ul style="list-style-type: none"> biological approach – Eysenck and Cattell <p>emphasises:</p> <ul style="list-style-type: none"> genetics inheritance cannot be changed <p>Nurture side –</p> <ul style="list-style-type: none"> social learning approach – Bandura, Latane & Tajfel behavioural approach – Skinner and Pavlov Bowlby – attachment theory emphasises: upbringing social context development through life 	6	<p>Levels checklist</p> <p>Level 2 Appropriate theorist for both sides Balanced outline Both sides given Interaction of both for full marks Few errors of QWC</p> <p>Level 1 Limited outline May only relate to one side Noticeable and intrusive errors in QWC</p>	<p>Level 2 (4 - 6 marks)</p> <p>Appropriate theorist from both 'nature' and 'nurture' given. Candidate gives a balanced outline of the debate commenting on both sides. Indication of interaction between the two approaches is necessary for full marks. There will be few errors of grammar, punctuation and spelling.</p> <p>Level 1 (1 – 3 marks)</p> <p>Candidate makes a limited attempt to give an outline of the debate, which may address only one side. May only mention one theorist. Answer may be muddled or list like.</p>

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		<p>Current view is of interaction between both.</p> <p>Where Chomsky is used accept 'born with Language Acquisition Device' (nature), but the need for interaction is also essential (nurture).</p>			<p>There are noticeable errors of grammar, punctuation and spelling.</p> <p>0 marks: No response worthy of credit given.</p>
	(b)	<p>Humanist perspective emphasises that</p> <ul style="list-style-type: none"> Individuals know themselves best/ are their own experts Each individual experiences life differently Everyone has an internal drive to survive/ succeed/ progress <p>Maslow: Underpinning theory based on</p> <ul style="list-style-type: none"> self-motivation to progress – internal drive – schools should recognise and support individuals in meeting their needs/reaching their goals – may be difficult when dealing with large numbers. hierarchy of needs – deficit needs to be met first then higher order needs – not always easy to recognise if a child's basic needs are not being met at home physical/physiological needs - ensure physiological needs are supported – food and drink – some schools provide breakfast clubs, water freely available, classrooms have appropriate ventilation/temperature. Appropriate 	14	<p>The question does NOT require a theorist to be named in the answer therefore do not award a mark just for giving a name.</p> <p>Levels checklist:</p> <p>Level 3: Detailed assessment Good understanding Two ways given More than one aspect of development (PIES) Examples clearly relate to school setting Good QWC</p> <p>Level 2: Sound assessment Some understanding Two ways given One aspect of development Examples may not relate specifically to school setting.</p>	<p>Level 3 (11 – 14 marks) Candidate is able to give a detailed assessment of at least two ways in which schools could use the humanist perspective, showing a high level of understanding. Candidates are likely to have included appropriate examples to support their answer, which relate specifically to a school setting and different aspects of development. The answer clearly addresses the focus of the question. Sentences and paragraphs are for the most part relevant, with information presented in a balanced, logical and coherent manner. There may be occasional errors of grammar, punctuation and spelling.</p> <p>Level 2 (6 – 10 marks) Candidate gives sound assessment of two ways in which schools could use the humanist perspective, showing some understanding. Examples given may not relate specifically to a school and may relate to only one aspect of development. Sentences and</p>

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			<p>breaks given, opportunities to exercise. Difficult to meet needs of sleep, many children arrive at school having had insufficient sleep.</p> <ul style="list-style-type: none"> • safety/security – physical security provided by restricted access/ visitors signing in/ physical presence of trusted adults/ supervision of ‘at risk’ areas – toilets, corridors, outside spaces etc Physical environment clean and well maintained. Emotional security provided by ‘zero tolerance’ anti-bullying policies/approach. Support/ pastoral/ counselling systems in place and accessible. Should be a priority for schools but bullying is very difficult to monitor or eradicate • sense of belonging - pupils have sense of identity with groups within the school eg tutor/form/class group, belonging to sports teams/ ‘houses’/year groups. School uniform provides sense of group identity/cohesion. Pupils have lockers/cloakrooms which are secure for leaving personal property. Difficult to ensure that all children feel a sense of inclusion, some may still feel that they ‘do not belong’ because of cultural differences/ not being good at sport etc. • self-esteem – pupils encouraged to feel good about themselves – reward systems in place – star charts/house points/merit 		<p>Sound QWC</p> <p>Level 1: Limited assessment One or two ways may be given One aspect of development Little understanding Examples may not be related to school setting Mainly theory Low QWC</p>	<p>paragraphs are not always relevant, with the material presented in a way that does not always address the focus of question. There may be some errors of grammar, punctuation and spelling.</p> <p>Sub-max of 7 marks for one way done well.</p> <p>Level 1 (1 – 5 marks) Candidate gives limited assessment of one or two ways in which the humanist perspective could be used. Examples given may not relate specifically to a school setting. The answer may be more of an account of the humanist perspective with little attempt to assess how it could be used. Sentences and paragraphs have limited coherence and structure, information presented may be muddled and of doubtful relevance to the focus of the question. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</p> <p>0 marks: No response worthy of credit given</p>

Question			Answer	Marks	Guidance	
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			<p>marks/tokens/prizes/certificates of achievement/sports awards/medals etc. Verbal praise given often - effort & good behaviour recognised and noted. Should be a priority for schools.</p> <ul style="list-style-type: none"> • cognitive needs – pupils provided with appropriate intellectual challenge and opportunity. Resources available and easy to access. Lessons stimulating and interesting. Work set at appropriate level to stretch individual levels of intellectual ability. Individual differentiation of work is difficult to achieve with large numbers. • Higher level needs such as aesthetic needs – sense of beauty, music, ‘awe and wonder’ may be mentioned. Self - actualisation not likely to be achieved until adulthood – if at all. <p>Rogers: Underpinning theory based on:</p> <ul style="list-style-type: none"> • Individuals’ inbuilt need to explore/actualising tendency - schools should provide opportunities to meet all interests/needs. Difficult to achieve • Positive self-regard linked to individuals secure development • Need for positive/unconditional regard from others. Difficult to maintain when a child misbehaves/ demonstrates behaviour 			

Question			Answer	Marks	Guidance	
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			<p>inappropriate to a group/school setting.</p> <ul style="list-style-type: none"> • Positive regard from others leads to positive self-regard – pupils treated with respect, high expectations encourage pupils to believe that they can do well. Difficult to maintain if work/test results are poor. • Conditions of worth distort perception of self – therefore all pupils to be treated fairly, all achievements praised/noted. Where necessary reprimands/ punishment emphasise what is being punished (the deed) rather than who is being punished (the person). Difficult to demonstrate consistently in group setting. • Emphasis put on what an individual can achieve/personal goals/targets rather than failures. Difficult to achieve where exam results are expressed as pass/fail. • Inbuilt need to explore – facilities and resources support individual study/research. Lessons are stimulating, encouraging pupils to want to find out more. Difficult to meet all individual's interests. • Social pressures decrease/distort the actualising drive – competition should be seen as supportive, celebrating success rather than the identification of weakness/failure. Difficult to achieve in a competitive situation such as sports/exams • Unconditional positive regard – 			

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			<p>strong pastoral/support systems in place to value each pupil as an individual. Difficult to ensure all children are 'recognised', often those who break the rules get more attention than those who obey them.</p> <p>.+ any other appropriate comment</p>			
3	(a)		<p>Poor levels of nutrition could be caused by:</p> <ul style="list-style-type: none"> • Poor mobility – cannot get to shops, stand to prepare meals, too much effort to make meals so makes do with snacks • Physical disability – difficulty in opening tins/packets etc., using/holding cutlery/ lifting cups etc. so food/drink intake limited • Poor dental health – loose dentures/lack of teeth/dry mouth – making eating difficult/painful • Apathy/boredom/depression/lack of appetite – cannot be bothered/ has no interest in eating • Cognitive impairment – may not remember to eat/drink, may refuse food thinking that they have already eaten. • Limited food/drink intake preferences – may choose to eat just one thing eg toast/ biscuits etc therefore lack of nutritional balance. • Lack of knowledge/understanding /skills – may have relied on a partner to do the shopping/ cooking and so had never needed to be responsible 	2x2	<p>One mark given for identification of cause of poor nutrition ✓</p> <p>Second mark given for explanation/ further development ✓+</p> <p>Two reasons required.</p> <p>Do not accept generalised statements which imply that simply being 'old' means that the individual 'can't cook/doesn't know about healthy eating/hasn't been educated'.</p> <p>Knowledge of specific nutrients is not required.</p> <p>Accept answers based on specific nutrients such as low protein intake with appropriate reason such as cannot chew/afford to buy meat.</p>	

Question			Answer	Marks	Guidance	
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			<p>for food buying or preparation</p> <ul style="list-style-type: none"> • Poor housing conditions/lack of facilities- cannot prepare/cook meals, no suitable storage for fresh foods, no freezer/ microwave – makes do on snack foods/'tea and biscuits' • Lack of money to afford range of easily prepared nutritious foods/ use services such as Wiltshire Farm food deliveries which provide well planned ready meals – limited food intake • Lack of availability of services such as 'meals on wheels' – no regular meals • Effects of medication – may reduce appetite/affect absorption of nutrients • Effects of illness – appetite may be reduced/absorption of nutrients affected • May be in care/hospital and does not like the food offered no alternatives provided - so does not eat • Food/drink intake not monitored by professionals/carers - so no encouragement/assistance given • alternatives/ food supplements not offered/given – so lack of nutrients <p>+ any other appropriate reason</p>			
	(b)		<p>ONE mark for each correct response (TWO required) from:</p> <p>Day-care centre</p>	2x1	<p>Accept luncheon club. Do NOT accept 'meals on wheels' (which is a service not a setting) or respite care which is not a setting.</p>	

Question			Answer	Marks	Guidance	
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			Residential/care home Hospice Hospital Nursing home + any other appropriate setting			
	(c)	<p>Carers should:</p> <p>Understand/identify individual needs/preferences:</p> <ul style="list-style-type: none"> religious/cultural requirements medical restrictions/requirements (some foods should be avoided with certain medication) personal taste physical restrictions (ability to chew/swallow/digest) nutritional needs – client may be ‘malnourished’ because of being <i>over</i> or <i>undemourished</i> (too much or too little food) – which leads to imbalance of nutrients - may need nutrient dense foods such as full fat milk to increase intake of vitamins minerals, protein and calories, rather than low fat/low calorie foods. <p>Provide appropriate meals/snacks/drinks:</p> <ul style="list-style-type: none"> If caring at home this could include shopping and/or cooking If appropriate suggest/arrange for 	9	<p>Carers may be working with individuals living in their own homes or those living in residential care. It is not necessary for answers to specify a setting, although examples given should be expressed appropriately.</p> <p>It is not necessary to demonstrate knowledge of specific nutrients in answering this question.</p> <p>Levels checklist:</p> <p>Level 3: Good analysis Two ways given Good understanding Examples clearly relate to later adulthood Good QWC</p> <p>Level 2: Some analysis Two ways given Some understanding Examples may not relate specifically to later adulthood. Sound QWC</p>	<p>Level 3 (7 – 9 marks) Candidate is able to give a good analysis of at least two ways in which carers could ensure that the nutritional needs of individuals in later adulthood could be met showing a high level of understanding. Candidates are likely to have included appropriate examples to support their answer, which relate specifically to later adulthood. The answer clearly addresses the focus of the question. Sentences and paragraphs are for the most part relevant, with information presented in a balanced, logical and coherent manner. There may be occasional errors of grammar, punctuation and spelling.</p> <p>Level 2 (4 – 6 marks) Candidate gives some analysis of two ways in which carers could ensure that the nutritional needs of individuals in later adulthood are met, showing some understanding.</p>	

Question			Answer	Marks	Guidance	
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			<p>'meals on wheels'</p> <ul style="list-style-type: none"> • Prepare foods in a suitable way (stewed apple rather than raw) • Choose/prepare nutritionally appropriate meals/snacks / drinks (may need to restrict calorie intake but it is more likely that nutritional intake needs to be enhanced) • Enhance/increase nutritional value of foods which are enjoyed/easy to eat such as adding egg/cream to mashed potato) • Include appropriate supplements/ fortified foods (for increased vitamin/mineral/ protein intake) • Include milky drinks (Horlicks/hot chocolate etc.) as well as tea or coffee • Provide variety/choice to stimulate interest <p>Encourage/assist the individual:</p> <ul style="list-style-type: none"> • Serve food appropriately/ attractively (small, manageable portions) • Provide snacks/drinks frequently/ regularly/on demand • Serve food that does not need cutting up as appropriate (chicken casserole rather than chicken portions) • Provide appropriate plates/ dishes/ cutlery (non-slip plates/dishes/easy handle spoons/forks/knives) • 'Finger foods' – sandwiches, toast etc. may be easier for some 		<p>Level 1: Limited analysis One or two ways may be given Little understanding Examples may not be related to later adulthood Poor QWC</p>	<p>Examples given may not always be appropriate or relate specifically to later adulthood. Sentences and paragraphs are not always relevant, with the material presented in a way that does not always address the focus of question. There may be some errors of grammar, punctuation and spelling.</p> <p>Level 1 (1 – 3 marks) Candidate attempts to give a limited analysis of one or two ways in which carers could ensure that the nutritional needs of individuals in later adulthood are met, demonstrating limited understanding. Examples may have little relevance to individuals in later adulthood, or may be inappropriate or inaccurate. Sentences and paragraphs have limited coherence and structure, information presented may be muddled and of doubtful relevance to the focus of the question. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</p> <p>0 marks: No response worthy of credit given</p>

Question			Answer	Marks	Guidance	
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			<ul style="list-style-type: none"> • Soups served in a mug/cup can be easy to drink and valuable nutritionally • Eating with the individual at mealtimes can provide encouragement. In residential care sitting with clients at a table and providing assistance is more appropriate than 'supervising while walking around'. <p>Monitor and record food/nutritional intake as appropriate:</p> <ul style="list-style-type: none"> • Keep records to build up an understanding of overall situation • Be specific in recording what has been eaten/drunk rather than what was provided/served • If appropriate monitor and record body weight, otherwise record observable changes such as clothes/rings become tighter/looser • Note changes in/loss of appetite • Note changes in food preferences • If appropriate carry out blood tests to check nutritional status • Talk to the client to discuss specific issues <p>+ any other appropriate way</p>			
4	(a)		<p>Poor quality housing may:</p> <ul style="list-style-type: none"> • have restricted space (both indoor and outdoor), therefore restricting opportunities for physical play • be in a poor state of repair, therefore 	2x2	<p>One mark awarded for the identification of an effect </p> <p>Second mark given for</p>	

Question			Answer	Marks	Guidance	
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			<p>child is at greater risk of injury</p> <ul style="list-style-type: none"> • have few facilities, therefore limiting play activities • cause parents/carers to be stressed/anxious, therefore putting pressure on the child to 'be quiet/behave/sit still/watch television' etc. • be unsuitable for inviting other children to play therefore child has fewer opportunities for socialising with other children. <p>Living in poor housing conditions might affect:</p> <p>Physical development</p> <ul style="list-style-type: none"> • poor diet because of restricted food storage/preparation facilities • poor health / frequent illnesses such as colds / respiratory infections etc. • poor sleep because of cold/damp /crowded conditions • greater risk of accident and injury <p>Intellectual development</p> <ul style="list-style-type: none"> • crowded / noisy / inappropriate living conditions – reduces opportunities for language development, reading, doing homework • living in temporary accommodation leading to frequent moves / lack of stability linked to disruption of attendance at preschool settings / school etc. • limited access to toys / resources / 		<p>development .</p> <p>Two effects required, (they do not need to be from different areas of PIES. i.e. could be two physical or two intellectual etc)</p>	

Question			Answer	Marks	Guidance	
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			<p>books / internet etc. leading to lack of intellectual stimulation</p> <p>Emotional and Social development</p> <ul style="list-style-type: none"> • stress for parents leading to lack of attention/neglect of child • not able to have friends to play/stay/social interaction <p>May be positive aspects in that parents may be more determined to overcome difficulties – child taken to playgroups/social groups/libraries etc. to compensate for limitations at home.</p> <p>+ any other appropriate way</p>			
	(b)		<p>Carer's attitude may be positive therefore they will:</p> <ul style="list-style-type: none"> • Talk in positive ways about school/learning so that the child looks forward to starting/going to school • Encourage child to go to school/ prioritise school attendance • Show interest in what the child does at school • Provide support/time/facilities/ space for the child to do homework/practice reading etc. • Meet with teachers, express support/approval for teachers to the child • Provide opportunities for learning – reading/educational visits/use libraries/visit museums etc. 	6	<p>Levels checklist:</p> <p>Level 3: Good assessment Two ways assessed Good understanding Appropriate examples Linked to intellectual development Good QWC</p> <p>Level 2: Some assessment Two ways given</p>	<p>Level 3 (5 – 6 marks) Candidate assesses at least two ways in which the carer's attitude could affect the intellectual development of a child showing a high level of understanding. Appropriate examples will have been given to support the answer which clearly relate to intellectual development. The answer clearly addresses the focus of the question. Sentences and paragraphs are for the most part relevant, with information presented in a balanced, logical and coherent manner. There may be occasional errors of grammar, punctuation and spelling.</p>

Question	Answer	Marks	Guidance	
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	<p>All the above will have a positive effect on the child's intellectual development and encourage them to:</p> <ul style="list-style-type: none"> • Enjoy learning/reading/finding things out • Enjoy going to school • Be interested in school work • Want to work hard/engage in school activities • Spend time doing homework/ revising for exams/tests • Want to continue with education • Value academic achievement both in themselves and in others • Try hard to do well • Behave well/be co-operative and so be liked by teachers which further encourages learning <p>Carer's attitude may be negative therefore they will:</p> <ul style="list-style-type: none"> • Make negative comments about starting/going to school, therefore the child becomes reluctant/ anxious/ unwilling to go to school • Not encourage school attendance/ not make it a priority (allow absence for very minor reasons, take holidays etc. because 'school doesn't matter') • Dismiss/ignore what the child does at school • Not give child time/space/ opportunity 		<p>Some understanding Examples may not relate to intellectual development Sound QWC</p> <p>Level 1: Limited assessment One or two ways may be given Little understanding Examples may not be appropriate Poor QWC</p>	<p>Level 2 (3 – 4 marks) Candidate gives some assessment of two ways in which a carer's attitude could affect the intellectual development of a child, showing some understanding. Examples given may not relate to intellectual development or may be inappropriate. Sentences and paragraphs are not always relevant, with the material presented in a way that does not always address the focus of question. There may be some errors of grammar, punctuation and spelling.</p> <p>Level 1 (1 – 2 marks) Candidate attempts to give a limited assessment of one or two ways in which carer's attitudes could affect a child's intellectual development, demonstrating little understanding. Examples given which may be of little relevance. Sentences and paragraphs have limited coherence and structure, information presented may be muddled and of doubtful relevance to the focus of the question. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</p> <p>0 marks: No response worthy of credit given</p>

Question			Answer	Marks	Guidance	
					Content	Levels of response
			<p>to study/practice/do homework at home</p> <ul style="list-style-type: none"> • Talk dismissively/disparagingly about schools/learning/teachers in front of the child • Not provide opportunities for learning/reading/educational visits etc. <p>All the above will have a negative effect on the child's intellectual development meaning that they will</p> <ul style="list-style-type: none"> • Not be interested in/enjoy learning/reading/finding things out • Not want to go to school • Not be motivated to learn/do well • Not see school/education as being important/relevant/useful to them • Not want to continue in education • Not do homework/revise for tests/exams • Not do well in tests/exams which further decreases motivation • Not value academic achievement in either themselves or in others <p>+ any other appropriate comment</p>			
	(c)	<p>Constructivist perspective is based on:</p> <ul style="list-style-type: none"> • Children 'constructing' their own understanding of the world by 	10	Attendance at a children's centre may be occasional/drop in or regular and pre-programmed. Parents/carers may or may not also take part. The children's	Level 3: (8 – 10 marks) Candidate demonstrates a good understanding of the constructivist perspective giving a detailed	

Question	Answer	Marks	Guidance	
			Content	Levels of response
	<p>interaction with people/ resources/activities</p> <ul style="list-style-type: none"> • Children learning through 'play'/activity/experimentation • Adults role is to provide <ul style="list-style-type: none"> – appropriate resources and learning environment (Piaget) – interaction, demonstration and explanation (Vygotsky) <p>Benefits of attending a children's centre will include:</p> <ul style="list-style-type: none"> • opportunities for play in a warm/ safe environment • stress free environment facilitates exploratory play • space to play with variety of large/expensive toys and equipment • free play with range of materials/ equipment • age/stage related toys/resources available • opportunities for varied experiences - value of sand/ water/ playdough etc. • encouragement to engage in messy/noisy play • may be opportunities for active outdoor play • adults/professionals interacting with child during play will aid learning • opportunities to mix with other children of range of ages – enabling social interaction • discussion and use of language / explanation supports learning/ 		<p>centre may involve voluntary staff, especially if they are run by organisations such as Barnardo's, NSPCC, Action for Children etc.</p> <p>Levels checklist:</p> <p>Level 3: Good understanding Detailed analysis Two ways Clearly related to children's centre Good QWC</p> <p>Level 2: Sound understanding Sound analysis Two ways May not clearly relate to a children's centre Sound QWC</p> <p>Level 1: Little understanding Little analysis One way May not relate to children's centre Mainly theory Muddled or list like Low QWC</p>	<p>analysis of at least two ways a child could benefit from attending a children's centre. The answer has a clearly defined structure with a logical approach which fully addresses the focus of the question. Appropriate health, social care and early years terminology is used confidently and accurately. There are few, if any, errors of grammar, punctuation and spelling.</p> <p>Level 2: (5 - 7 marks) Candidate demonstrates some understanding of the constructivist perspective giving a sound analysis of at least two ways a child would benefit from attending a children's centre, although examples given may not always be fully relevant. The answer is in a planned and logical sequence with health, social care and early years terminology used accurately. Sentences and paragraphs are for the most part relevant and address the focus of the question. There may be occasional errors of grammar, punctuation and spelling. Sub-max of 5 for one way done well</p> <p>Level 1: (1 – 4 marks) Candidate demonstrates little understanding of the constructivist perspective in attempting to analyse one way a child might</p>

Question			Answer	Marks	Guidance	
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			<ul style="list-style-type: none"> understanding demonstration/explanation given will extend understanding opportunities for play can be structured and variety of experiences made available experiences beyond current level of understanding (ZPD) will be available children with a range of ages could provide opportunities for interaction with a 'more knowledgeable other' <p>+ any other appropriate comment</p>			<p>benefit from attending a children's centre. Alternatively the candidate describes a relevant theory but does not relate this to a children's centre, or ways a child might benefit from attending. The 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 marks: No response worthy of credit given.</p>
5	(a)		<p>Adults might develop fear due to:</p> <ul style="list-style-type: none"> financial insecurity, they think they do not have enough money what they have read/heard/ seen in newspapers/on television about neglect/abuse things they have been told by others/friends/family poor personal experience in similar/related situations eg hospital/boarding school/being in residential care as a child 'historical' memories – equating residential care with old style asylums/workhouse conditions worries about deterioration in their physical/mental health worries that they might be developing 	6	<p>Candidates might answer in terms of what might cause the fear or what the adult fears the effects of moving into residential care might be. Both approaches are acceptable</p> <p>Levels checklist:</p> <p>Level 2: Clear explanation Shows understanding More than one example or one in detail Few errors of QWC</p> <p>Level 1: Limited explanation Little understanding Muddled or list like Possible noticeable errors of QWC</p>	<p>Level 2: (4 – 6 marks) Candidate gives a clear explanation of why an adult might develop a fear of having to move in to residential care, demonstrating clear understanding. It is likely that more than one reason is given or one reason is explained in detail. There will be few errors of grammar, punctuation and spelling.</p> <p>Level 1:(1 – 3 marks) Candidate gives a limited explanation of why an adult might develop a fear of having to move in to residential care. Little understanding of the focus of the question is demonstrated. The answer may be muddled or list like. There may be noticeable errors of</p>

Question			Answer	Marks	Guidance	
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			<p>cognitive impairment/dementia</p> <ul style="list-style-type: none"> worries that they might be about to die threats/comments made to them by 'carers' about being 'put/sent away'. <p>Fear could be about:</p> <ul style="list-style-type: none"> Losing independence/becoming isolated from family and friends Being neglected/abused/ ill-treated/ patronised/treated like a child Being 'locked away' Having to live with others who are more disabled/incapacitated than they are Having to live with others who they may dislike/be frightened of Having to share a room/ shared bathroom /facilities Having to obey lots of rules eg meal times/ bed times Running out of money – being 'turned out'/made homeless Not liking the food/not having enough to eat/ limited food types available Not being able to carry out hobbies/activities they enjoy Having to take part in group activities eg Bingo Not being able to have/keep pets – what will happen to their pet <p>+ any other appropriate reason</p>			<p>grammar, punctuation and spelling.</p> <p>0 marks: No response worthy of credit given.</p>

Question		Answer	Marks	Guidance	
				Content	Levels of response
	(b)	Theorists from the behavioural perspective: <ul style="list-style-type: none"> • Pavlov • Skinner + any other appropriate theorist	1	One mark for a correct theorist.	
	(c)	The behavioural approach can be used positively to: <ul style="list-style-type: none"> • establish routines – particularly appropriate for residential settings • clearly identify and reinforce required behaviour – useful for ‘setting standards’ of behaviour • promote socialisation and good behaviour in a social setting • promote a positive environment – everyone is expected to behave/ reinforces ‘good manners’/being polite etc. • promote positive staff attitudes emphasising encouragement, expressions of verbal approval • may be useful in supporting individuals with dementia/ Alzheimer’s disease or others who present inappropriate/ antisocial behaviour/aggression etc. However, there are a number of difficulties (negatives) in using the behavioural perspective: <ul style="list-style-type: none"> • The approach can appear to be demeaning/ patronising if used with individuals in later adulthood – treating them as if they were children. 	18	Annotate with  and  to indicate evaluation. Levels checklist: Level 4: High level of understanding Detailed evaluation Examples appropriate to later adulthood Clearly relates to residential care Both positive and negative Clear conclusion High QWC Level 3: Good understanding Sound evaluation Examples mainly appropriate to later adulthood Relates to residential care Either mainly positive or mainly negative Good QWC Level 2: Sound understanding Some evaluation Examples may not be fully appropriate to later adulthood Not clearly related to residential care May be only positive or only negative	Level 4: (15 – 18 marks) Candidate demonstrates a high level of understanding of the behavioural perspective, giving a detailed evaluation of its usefulness in working with individuals in later adulthood living in residential care. Examples given are appropriate to both the life stage and setting, demonstrating understanding of the application of the approach. Both positive and negative aspects are given demonstrating a clear understanding of the focus of the question. The answer is in a planned and logical sequence using appropriate health and social care terminology accurately. Sentences and paragraphs are relevant and structured with a clear conclusion being drawn. There will be few errors of grammar, punctuation or spelling. Level 3: (11 – 14 marks): Candidate demonstrates a good understanding of the behavioural perspective, giving a sound evaluation of its usefulness in working with individuals in later

Question			Answer	Marks	Guidance	
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			<ul style="list-style-type: none"> Staff need to be well trained if the approach is to be used consistently and constructively It may be difficult to identify the cause/intention of inappropriate behaviour – may be beyond the individual's control Positive reinforcement/ rewards will need to be based on praise and personal approval, again may appear to be patronising if not genuinely expressed (star charts/stickers etc. likely to be inappropriate) Negative reinforcement will need to be based on the disapproval/ disappointment/ dismay expressed by practitioners – may be difficult to be consistent/calm Removal from the scene (being taken to a quiet room/out into the garden etc.) would be most effective response to conflict/ argument – needs individual staffing ('naughty step' inappropriate for use in later adulthood). Punishment is likely to be most inappropriate to use with individuals in later adulthood – especially if their behaviour is the result of mental health or cognitive disorders. Verbal comments/reprimands such as being told off for being 'naughty' are likely to be inappropriate Avoidance of potential 'flash points'/confrontations etc. would be more appropriate. 		<p>Sound QWC</p> <p>Level 1: Limited understanding Little or no evaluation Examples not appropriate to life stage Not related to residential care Only positive or only negative Mainly theory Low QWC</p>	<p>adulthood living in residential care. Examples given are mainly appropriate to both the life stage and the setting. The answer is likely to be either mainly positive or mainly negative. The answer is in a planned and logical sequence using appropriate health and social care terminology accurately. Sentences and paragraphs are relevant and structured in a way that clearly addresses the focus of the question. There may be occasional errors of grammar, punctuation or spelling.</p> <p>Level 2: (6– 10 marks) Candidate demonstrates a sound understanding of the behavioural perspective, giving some explanation of how it could be used, although this may not relate specifically to individuals in later adulthood or to a residential setting. Examples given may not be fully appropriate to the life stage or setting specified. Answer may focus only on either positive or negative aspects of the approach. Sentences and paragraphs are not always relevant, with the material presented in a way that does not always address the focus of question. There may be some errors of grammar, punctuation and spelling.</p>

Question			Answer	Marks	Guidance	
					Content	Levels of response
			<ul style="list-style-type: none"> Punishment may be appropriately linked to staff behaviour – being disciplined/sacked. <p>+ any other appropriate reason</p>			<p>Level 1: (1 – 5 marks). Candidate demonstrates limited understanding of how the behavioural perspective could be useful or why it might not be useful. Examples given may not be appropriate to the life stage or setting. The answer may be more of an account of a theory from the behavioural perspective with little or no attempt to apply the theory to the setting or life stage. The answer may be muddled and list like and little understanding of the focus of the question is demonstrated. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</p> <p>0 marks: No response worthy of credit.</p>

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

OCR Customer Contact Centre

Education and Learning

Telephone: 01223 553998

Facsimile: 01223 552627

Email: general.qualifications@ocr.org.uk

www.ocr.org.uk

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Head office
Telephone: 01223 552552
Facsimile: 01223 552553

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