

Health and Social Care

Advanced GCE

Unit **F920**: Understanding human behaviour

Mark Scheme for January 2013

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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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Annotations

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
1	(a)	<p>One mark for a correct response from:</p> <ul style="list-style-type: none"> • Piaget • Vygotsky 	1	Accept any other appropriate theorist.
1	(b)	<p>One mark for identification TWO required One mark for description, TWO required</p> <p>Piaget:</p> <ul style="list-style-type: none"> • staged theory (sensorimotor 0 – 2, pre-operational 2 – 7, concrete operations 7 – 11, formal operations 11 >) • links to educational stages – move to secondary school, developing more abstract thinking • cognitive development linked with maturation • processes of assimilation, accommodation , equilibrium – development of schemas • free play essential • child develops own understanding through experiences • trial and error learning • object permanence • concept formation – mass, volume etc • animism – attributing life-like qualities to inanimate objects 	4	2x1 2x1

Question	Answer	Marks	Guidance
	<p>Vygotsky:</p> <ul style="list-style-type: none"> • emphasises social interaction/importance of adults or 'more knowledgeable others' • language is the driving force behind cognitive development • pre-intellectual language and pre-intellectual thought operate separately before 2 – 3 • social linguist stage - language only used for social reasons (meeting needs) • at age 2 – 3 language and thought interact - controlling own behaviour and thinking – creating 'self-talk' (often spoken out loud, occurs during play) • from age 7 self- talk becomes silent inner speech • social processes shape language/language shapes thought • sensation and attention are innate • the process of learning stimulates a motive to learn more • zone of proximal development – the distance between the child's current and potential ability 		

Question		Answer	Marks	Content	Guidance
					Levels of response
1	(c)	<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 child is at risk of injury • 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' etc • be unsuitable for inviting other children to play therefore child has fewer opportunities for socialising with other children <p>Attending a day nursery is likely to provide opportunities to:</p> <ul style="list-style-type: none"> • play safely – less risk of accident/injury • engage in active/physical play – more space indoors and outdoors (development of gross motor skills) • play with large toys – bikes/trikes/see-saws/ climbing frames etc (developing phys skills) • greater variety of toys – different age related toys/books etc • engage in 'messy play'- sand/water/ playdough (developing fine motor skills) • have more freedom to play – encouraged by play leaders to be active/run around/make a lot of noise/use energy • play with other children – opportunities to develop social skills • skilled adults available - stimulate new learning • nutritious meals may be available 	10	<p>Levels checklist</p> <p>Level 3 Detailed and accurate discussion Two + benefits of attending day nursery May relate to PIES Clear understanding High QWC</p> <p>Level 2 Limited discussion/ description of day nursery Two + benefits Some understanding Possible errors in QWC</p> <p>Level 1 Limited discussion – likely to be more of a description/list like One + benefit Low QWC</p> <p>Benefits may be expressed in PIES (physical, intellectual, emotional and social aspects of development).</p>	<p>Level 3 (8–10 marks) Detailed discussion of at least two benefits to a child of attending a day nursery; good understanding of restrictions caused by living in poor quality housing and the opportunities provided by attending a day nursery. May refer to more than one aspect of development (physical, intellectual, emotional or social). Cohesive, health and social care terminology. There will be few, if any, errors of grammar, punctuation and spelling.</p> <p>Level 2 (5–7marks) More of a description of day nursery provision, or discusses the disadvantages of living in poor quality housing, with limited discussion of at least two benefits of attending a day nursery to a child. Sentences and paragraphs are not always relevant to the focus of the question. There may be some errors of grammar, punctuation and spelling. <i>Sub-max of 5 for one benefit done well.</i></p> <p>Level 1 (0–4 marks) Limited discussion of the benefits of a child attending a day nursery. May be a limited description of what a day nursery provides or what poor quality housing is. Muddled or list like. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</p>

Question		Answer	Marks	Content	Guidance
					Levels of response
2	(a)	<p>Nature side emphasises:</p> <ul style="list-style-type: none"> • genetics • inheritance • cannot be changed • biological approach <p>Nurture side emphasises:</p> <ul style="list-style-type: none"> • upbringing • social context • development through life • social learning approach. <p>Current view is of interaction between both.</p>	4	<p>Levels checklist</p> <p>Level 2 Balanced outline Both sides given Possible errors of QWC</p> <p>Level 1 Limited outline May only relate to one side Possible noticeable and intrusive errors in QWC</p>	<p>Level 2 (3–4 marks) Candidate gives a balanced outline of the debate commenting on both sides. There will be few, if any, errors of grammar, punctuation and spelling.</p> <p>Level 1 (0–2 marks) Candidate makes a limited attempt to give an outline of the debate, which may only address one side. Answer may be muddled or list like. There may be noticeable errors of grammar, punctuation and spelling.</p>
	(b)	<p>One mark for a correct response from</p> <ul style="list-style-type: none"> • Eysenck • Cattell <p>+ accept any other appropriate theorist</p>	1	Accept variations of spelling for Eysenck unless it is apparent that the candidate is actually referring to Erikson.	
	(c)	<p>One mark for a correct response from</p> <ul style="list-style-type: none"> • Tajfel • Latane • Bandura <p>+ accept any other appropriate theorist</p>	1	Accept variations of spelling.	

Question		Answer	Marks	Content	Guidance
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2	(d)	<p>Social and Emotional development:</p> <ul style="list-style-type: none"> • friends take on greater influence/ importance than family • strong need to 'fit in' with social group • 'struggle' to form own identity • emphasis on sexual development • changes in friendships as relationships dev • emotionally quite volatile/highly charged • personal social and emotional values dev • developing own (strongly held) views on major issues such as the environment • may feel strongly that they want to become involved in 'action' such as protests, doing voluntary work, becoming vegetarian etc <p>Biological Perspective:</p> <ul style="list-style-type: none"> • during adolescence hormonal changes will influence behaviour • puberty/adolescence represent a maturational process which affects social and emotional development <p>Eysenck:</p> <ul style="list-style-type: none"> • development is inherited/ genetically pre-programmed, this will determine behaviour and responses • personality traits – <ul style="list-style-type: none"> - introvert/extrovert - stable/unstable (neurotic) - toughminded/tenderminded will influence emotional/social development, behaviour • personality tests available to identify individual's traits 	14	<p>NB If both perspectives are used the one giving the stronger answer should be accepted for marking.</p> <p>Levels checklist</p> <p>Level 3 Detailed and accurate analysis Examples of both social and emotional development Clear links to adolescence Clear understanding of perspective High level of QWC</p> <p>Level 2 Sound analysis Some links to adolescence May only use either social or emotional development Some understanding Possible errors in QWC</p> <p>Level 1 Limited analysis Little reference to either social or emotional development in adolescence Possible noticeable and intrusive errors in QWC</p>	<p>Level 3 (11–14 marks) Clear understanding of an appropriate perspective. Analysis uses examples of both social and emotional development which can occur during adolescence clearly linked to features of the perspective selected. Detailed knowledge of the perspective should be evident at this level with specific relevance to social and emotional development which takes place during adolescence. The 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 uses an appropriate perspective and gives a sound analysis with links made to the social and emotional development which takes place during adolescence. Examples given may only relate to general behaviour. Alternatively only one aspect (social or emotional development) is covered. 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>

Question		Answer	Marks	Content	Guidance
					Levels of response
		<p>Cattell:</p> <ul style="list-style-type: none"> development is inherited/genetically pre-programmed, this will determine behaviour and responses personality traits – 16 personality factors (16PF) will influence emotional and social development. use of personality scale can be used to give a personal profile <p>Social Learning Perspective:</p> <ul style="list-style-type: none"> adolescence is a 'social construct' which is the result of the society that the person is brought up in. Social and emotional development is likely to follow learned behaviours. responses to the physical changes of puberty are learned behaviours resulting from upbringing and societal influences <p>Bandura:</p> <ul style="list-style-type: none"> Bobo doll experiment likely to be described. This needs to be related to the learning of social and emotional behaviours. behaviour is copied/imitated from those who- 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 by those who lack self-confidence (common feature of those who have poor self image) 			<p>Level 1 (0–5 marks) Candidate may identify an appropriate perspective but makes little attempt to use it in reference to social and emotional development during adolescence. Description of behaviours characteristic of adolescence may be given but with little reference to social and emotional development or to either perspective. Answer may be muddled or list like. Sentences and paragraphs have limited coherence and structure. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</p>

Question			Answer	Marks	Guidance	
					Content	Levels of response
			<p>Latane:</p> <ul style="list-style-type: none"> • bystander apathy experiments likely to be described • behaviour conforms to group expectations • social and emotional development largely influenced by peers and friends • people copy the behaviour of those around them • young people in particular want to fit in with peer group • people 'behave like sheep' <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 • social and emotional development largely influenced by friends and peers 			

Question		Answer	Marks	Guidance	
				Content	Levels of response
3	(a)	<p>One mark for a correct response from</p> <ul style="list-style-type: none"> • Freud • Erikson 	1	+ accept any other appropriate theorist	
	(b)	<p>One mark for identification, TWO required One mark for description, TWO required</p> <p>Freud:</p> <ul style="list-style-type: none"> • early childhood experiences influence later behaviour and development • stages need to be resolved – unsuccessful resolution leads to fixations • stages include oral, anal, phallic, latency • id, ego and superego influence behaviour • 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 • outcome of each age stage will influence later behaviour • stages: <ul style="list-style-type: none"> - 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 	4	2x1 2x1	Accept individual stages for both theorists – descriptions need to be more than just ages.

Question		Answer	Marks	Content	Guidance
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3	(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: <ul style="list-style-type: none"> oral stage – passive, dependent, gullible, oral pleasures eg smoking, eating drinking or suspicious and avoiding oral pleasure anal stage – stubborn, mean, obsessed with tidiness, organised or overgenerous, untidy, open to views of others phallic stage – recklessness, risk taking, obsessed with sexual activity or timid and avoiding reference to sexuality unconscious feelings direct the way we behave, people do not know why they behave in a certain way emotion and behaviour driven by the id, ego and superego. – balancing personal wants with social and moral values. <ul style="list-style-type: none"> id predominating – egocentric, self-seeking and selfish super-ego predominating – conformist and self-denying 	15	<p>Levels checklist</p> <p>Level 3 Good understanding Appropriate theorist used At least two experiences explained Clear links to psychodynamic perspective High level of QWC</p> <p>Level 2 Sound understanding Some links made At least two experiences Possible errors in QWC</p> <p>Level 1 Limited understanding Only one childhood experience implied Limited explanation Possible noticeable and intrusive errors in QWC</p> <p>Experiences could include:</p> <p>During feeding:</p> <ul style="list-style-type: none"> under pressure over/under feeding weaning too soon/too late punishment/threat 	<p>Level 3 (11–15 marks) Candidate demonstrates a good understanding of the psychodynamic perspective. One or more appropriate theorist is specifically referred to. The perspective is clearly applied in explaining how at least two childhood experiences could affect their future development and clear links are made between the psychodynamic perspective and the experiences of a child in early childhood. 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 will be few, if any, errors of grammar, punctuation and spelling.</p> <p>Level 2 (6–10 marks) Candidate attempts to apply knowledge of the psychodynamic perspective to the focus of the question. Some links are made between the perspective and experiences a child has in early childhood. Some understanding is shown in explaining how at least two experiences in early childhood can affect later development. 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 always relevant. There may be some errors of grammar, punctuation and spelling. <i>Sub-max of 7 for one experience done well.</i></p>

Question			Answer	Marks	Content	Guidance
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			<p>Defence mechanisms</p> <ul style="list-style-type: none"> • regression – during periods of stress may exhibit ‘childish’ behaviour –tantrums, sulking etc • denial – blocking threatening information eg diagnosis of serious illness • repression – blocking unpleasant thoughts eg bereavement • rationalisation – reinterpreting unpleasant events eg reasons for coming into care • displacement – transferring anger eg onto careworker • projection – blaming others for demonstrating characteristics which we have ourselves eg excessive tidiness • sublimation – redirecting mental energy – eg to objects/ possessions rather than people • reaction formation – overemphasising opposite emotions eg changing love into hate or hate into aggressive praise eg responses to carers 		<p>During toilet training:</p> <ul style="list-style-type: none"> • pressure/threat • too strict/too lenient • too early/too late • punishment/praise <p>Quality of care:</p> <ul style="list-style-type: none"> • abuse/neglect • love/security 	<p>Level 1 (0–5 marks)</p> <p>Candidate makes a limited attempt to explain how early childhood experiences could affect development in later life 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>

Question			Answer	Marks	Content	Guidance
						Levels of response
			<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: <ul style="list-style-type: none"> - trust v mistrust (birth to 18 months) - person is generally trusting, secure and hopeful or mistrustful of people or events, insecure and anxious. - autonomy v shame and doubt (18 months to 3 years) – person feels good about self and being able to be in control or lacks self belief - initiative v guilt (3 years to 7 years) – person is willing to try new things and is confident or always feels that they are in the wrong (being a ‘victim’) - ego-integrity v despair (later adulthood) – person can look back on life with satisfaction and sense of achievement, is content with their life or is regretful, dissatisfied and resentful (link to early experiences) 			

Question			Answer	Marks	Guidance	
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			<p>Bowlby:</p> <ul style="list-style-type: none"> • attachment to primary carer of key importance – bonding, enables confident, secure relationships to be made in future • separation anxiety similar to loss and grief when babies separated from primary carer – creates anxiety in future relationships, can result in a ‘needy’ fearful adult • as a baby is fed, held and spoken to emotional, loving relationships develop and deepen – basis for strong future relationships • babies who find that adults respond quickly to their cries become trusting of life and are well-attached in warm, stable relationships • babies who do not make close emotional bonds with carer experience general difficulty in forming stable, warm, loving relationships later in life • babies who are responded to quickly are less demanding later in life • now believed that babies can form close attachments with more than one person – foundations of strong social development • quality of the time spent with carers determines emotional attachment • difficulties arise from separation at birth eg baby needs special care – later relationships may be affected • attachment may be more difficult if baby has learning difficulties, vision or hearing impairments • children who have experienced many separations from those they have tried to form bonds with find it difficult in later life to understand social situations and form relationships 			

Question		Answer	Marks	Guidance	
				Content	Levels of response
4	(a)	<p>One mark for each correct responses, TWO required</p> <ul style="list-style-type: none"> • family • education • housing • culture • access to health services • nutrition – accept diet • income differences – accept income 	2	2 x 1	<p>Do not accept 'access to services'.</p> <p>Do not accept 'money'.</p>

Question		Answer	Marks	Content	Guidance
					Levels of response
4	(b)	<p>Adult on low income</p> <ul style="list-style-type: none"> cannot afford expenses associated with attending appointments/treatment screening check-ups etc such as: <ul style="list-style-type: none"> - transport – bus/train/taxi fares; petrol costs/parking - time off work – would lose pay - child care costs if children need to be looked after cannot afford treatment such as dental care, prescriptions (if not exempt), opticians (particularly paying for frames for glasses) may not be aware of possible benefits (financial) available and so may not seek treatment which has costs may not be registered with a GP or dentist (because of frequent changes of/no permanent address) may lack confidence/be intimidated by the medical profession <ul style="list-style-type: none"> - less likely to seek appointment - less likely to question/ask for second opinion - less likely to attend for screening etc 	10	<p>The answer should demonstrate an understanding that although NHS treatment is itself free there are associated expenses or difficulties which may limit an adult's ability to access services</p> <p>Levels checklist</p> <p>Level 3 Clear explanation At least two ways given Good understanding High level of QWC</p> <p>Level 2 Sound explanation At least two ways Some understanding Possible errors in QWC</p> <p>Level 1 Minimal explanation Only one way Limited understanding Possible noticeable and intrusive errors in QWC</p>	<p>Level 3 (8–10 marks) Candidate clearly explains at least two ways in which having a low income could affect an adult's ability to access health services giving a balanced answer. Good understanding of the focus of the question is demonstrated. The answer is in a planned and logical sequence, appropriate health, social care and early years terminology. There are few, if any, errors of grammar, punctuation and spelling.</p> <p>Level 2 (5–7 marks) Candidate briefly explains at least two ways in which having a low income could affect an adult's ability to access health services, although these may not be clearly expressed. Sentences and paragraphs are not always relevant and there may be confusion about which services have to be paid for. There may be some errors of grammar, punctuation and spelling. <i>Sub-max of 4 for one way done well</i></p> <p>Level 1 (0–4 marks) Candidate gives only a minimal explanation of how one way in which having a low income could affect an adult's ability to access health services. The answer may be muddled and list like and may not address the focus of the question. Errors of grammar, punctuation and spelling may be noticeable and intrusive</p>

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4	(c)	<p>One type of pollution from:</p> <p>Air pollution: Could cause/trigger/exacerbate respiratory conditions such as:</p> <ul style="list-style-type: none"> • asthma • bronchitis • hay fever <p>Could be linked to the spread of infectious illnesses leading to:</p> <ul style="list-style-type: none"> • frequent colds • flu • chest infections <p>May result in restricted opportunities for outdoor play:</p> <ul style="list-style-type: none"> • effects on gross physical development • effects on sleep because of lack of exercise <p>Effects of CO poisoning may be mentioned:</p> <ul style="list-style-type: none"> • headaches • lethargy • tiredness • (death in extreme cases) 	8	<p>Levels checklist</p> <p>Level 3 One appropriate example of pollution Clear explanation Good understanding Linked to physical development of young child High level of QWC</p> <p>Level 2 Appropriate example used Sound explanation Some understanding Limited links to physical development of young child Possible errors in QWC</p> <p>Level 1 Limited explanation Limited understanding May not relate to physical development of young child Possible noticeable and intrusive errors in QWC</p> <p>Accept other appropriate effects.</p>	<p>Level 3 (7–8 marks) Candidate gives a clear explanation of how one type of pollution could specifically affect the physical development of a young child demonstrating good understanding of the focus of the question. The answer is planned and logical using appropriate health and social care terminology. There will be few, if any, errors of grammar, punctuation and spelling.</p> <p>Level 2 (4–6 marks) Candidate gives an explanation of the effects of one type of pollution. The answer may or may not refer specifically to the effects on physical development of a young child. Sentences and paragraphs may not always be relevant to the question or the answer may not be applied directly to the physical development of a young child. There may be some errors of grammar, punctuation and spelling.</p> <p>Level 1 (0–3 marks) Candidate makes a limited attempt to explain the effects of pollution. The answer may not relate directly to the physical development of a young child and may be muddled or list like. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</p>

Question		Answer	Marks	Guidance	
				Content	Levels of response
4	(c)	<p>Water pollution: Effects of swimming/surfing in polluted water eg rivers/the sea off some beaches could include:</p> <ul style="list-style-type: none"> • stomach upsets • diarrhoea • nausea/vomiting • rashes/skin irritation • eye infections <p>Drinking polluted water eg in third world countries or after disasters eg earthquakes:</p> <ul style="list-style-type: none"> • hepatitis • cholera • typhoid etc • water borne parasites (worms etc) <p>Industrial accidents (eg Camelford, Cornwall) could result in chemical pollution with a wide range of consequences including</p> <ul style="list-style-type: none"> • headaches • tiredness • brain damage <p>Noise pollution: General noise such as traffic, neighbours etc:</p> <ul style="list-style-type: none"> • disturbed sleep, which in turn affects • physical growth (because of effects on release of growth hormones which takes place during sleep) <p>More direct, very loud noises can damage hearing, but this is more likely to be a long term consequence of prolonged noise pollution.</p>			

Question		Answer	Marks	Content	Guidance
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5	(a)	<p>Maslow:</p> <ul style="list-style-type: none"> needs met in order/hierarchy – deficit needs met first then higher order needs physical/physiological needs – food, water, sleep safety/security – housing, free from threat or intimidation sense of belonging/love – member of a family or social group self – esteem – feeling good about self cognitive – learning, intellectual stimulation aesthetic – sense of beauty, music, ‘awe and wonder’ self actualisation – ‘being all that you can be’ self motivation to progress – internal drive <p>Rogers:</p> <ul style="list-style-type: none"> positive regard from others leads to positive self regard conditions of worth distorts perception of self inbuilt drive/need to develop/explore – actualising drive/tendency social pressures decrease/distort the actualising drive unconditional love/regard required from carers 	7	<p>Levels checklist</p> <p>Level 3 Appropriate theorist Clear outline Good understanding High level of QWC</p> <p>Level 2 Appropriate theorist Brief outline Some understanding Possible errors in QWC</p> <p>Level 1 Appropriate theorist Limited outline Limited understanding Possible noticeable and intrusive errors in QWC</p>	<p>Level 3 (5–7 marks) Candidate has identified an appropriate theorist and has given a clear outline, demonstrating a good understanding of their theory. The answer is well planned and logical with health, social care and early years terminology used accurately. There will be few, if any, errors of grammar, punctuation and spelling.</p> <p>Level 2 (3–4 marks) Candidate has identified an appropriate theorist and has given a brief outline of their theory. Sentences and paragraphs may not always be relevant. There may be some errors of grammar, punctuation and spelling.</p> <p>Level 1 (0–2 marks) Candidate has identified an appropriate theorist but there is a limited outline of their theory. The answer may be muddled and list like. Sentences and paragraphs have limited coherence and structure and may have limited relevance to the focus of the question. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</p>

Question		Answer	Marks	Content	Guidance
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5	(b)	<p>Development includes; Physical, intellectual, emotional and social aspects (PIES), these relate to aspects of the humanist perspective.</p> <p>Maslow: Hierarchy of needs: Deficit needs -</p> <ul style="list-style-type: none"> • physical/physiological needs • safety and security • belonging • self-esteem <p>Becoming needs -</p> <ul style="list-style-type: none"> • cognitive • aesthetic • self-actualisation <p>Rogers:</p> <ul style="list-style-type: none"> • unconditional positive regard necessary in supporting older people • conditions of worth attached to meeting needs has a negative effect on development <p>Use in providing care in a residential care home:</p> <ul style="list-style-type: none"> • meet physiological needs by providing appropriate/nutritious food, drink, medication, medical care, comfortable temperature, sleep etc. • necessary support/encouragement/physical help with eating, drinking, personal hygiene etc given in an appropriate way 	18	<p>N.B. Although candidates are likely to use the theorist identified in 5a) as the focus for this answer it is not essential for them to do so, nor is it necessary for the candidate to use PIES in their answer.</p> <p>Level 4 High level of understanding Detailed analysis Appropriate examples Clear links to theory Linked to residential care and meeting needs of older people High level of QWC</p> <p>Level 3 Good understanding Sound analysis Appropriate examples Sound links to theory Linked to residential care and meeting needs of older people Possible occasional errors in QWC</p> <p>Level 2 Some understanding Examples may not be appropriate</p>	<p>Level 4 (15–18 marks) Demonstrates extensive understanding of the humanist perspective, using appropriate theory to give a detailed analysis of how it could be put into practice to support the development of older people in a residential care home. Appropriate examples are given to illustrate points made; these are clearly linked to theory and recognise the role of practitioners in a residential care home in meeting the needs of older people. Planned and logical sequence, appropriate health, social care and early years terminology. Sentences and paragraphs are consistently 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 3 (10–14 marks) Candidate uses the humanist perspective to give an analysis of how the development of older people in residential care can be supported. Good understanding is demonstrated of how theory could be put into practice, using examples which are relevant to providing residential care for older people. 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 grammar, punctuation and spelling.</p>

Question		Answer	Marks	Content	Guidance
					Levels of response
		<ul style="list-style-type: none"> secure environment provided, including emotional security, free from worry, threat, bullying, intimidation etc as well as physical security sense of belonging created by using preferred name, personal possessions around, own clothes etc self esteem supported by use of appropriate language, allowing for independence according to need and ability opportunities made available for involvement in activities appropriate to individual needs. flexible approach to social visits, family and friends encouraged to visit and to visit at times appropriate to them (shorter, more frequent visits may be more appropriate for someone needing nursing care, who may spend periods of time during the day receiving treatment or asleep) staff make time to talk, spend time with residents, ensure they have company as meets their need; don't ignore residents who cannot take part in a conversation, who are often asleep continuity of carers/identification of carers helps build social and emotional relationships regular visits from spiritual leaders (priest/vicar/rabbi etc) may be of particular relevance to individuals requiring care 		<p>May not relate to residential care or meeting needs of older people Limited links to theory Possible errors in QWC</p> <p>Level 1 Limited understanding Minimal attempt to link theory to residential care or meeting needs of older people Possible noticeable and intrusive errors in QWC</p>	<p>Level 2 (5–9 marks) Candidate has demonstrated some understanding of the humanist perspective although examples given may not always relate to a residential care home or may not be appropriate to supporting the development of older people. Links to theory may not be well explained. 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 noticeable errors of grammar, punctuation</p> <p>Level 1 (0–4 marks) Candidate has made a limited attempt to use the humanist perspective to analyse how the development of an older person could be supported in a residential care home. Alternatively ways in which the development of an older person in residential care could be supported are described but few links are made to theory. The answer may be muddled or list like, demonstrating little understanding of the focus of the question and lacking relevance to the question. Errors of grammar, punctuation and spelling may be noticeable and intrusive.</p>

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