

GCSE

Home Economics Child Development

Unit **B013**: Principles of Child Development

General Certificate of Secondary Education

Mark Scheme for June 2017

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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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Annotations

Used in the detailed Mark Scheme (to include abbreviations and subject-specific conventions)

Subject specific - insert details in table making sure that the annotation matches the image that appears on RM Assessor. Your Qualifications Manager or Qualifications Leader will be able to help.

Annotation	Meaning
L1	Level 1
L2	Level 2
L3	Level 3
L4	Level 4
SEEN	Noted but no credit given
	Tick
BP	Blank page
REP	Repetition within response
X	Incorrect

ADDITIONAL OBJECTS: You **must** annotate the additional objects for each script you mark. If no credit is to be awarded for the additional object, please use annotation as agreed at the SSU, likely to be 'Seen' or the highlighting tool.

CROSSED OUT, RUBRIC ERROR (OPTIONAL QUESTIONS) AND MULTIPLE RESPONSES

Crossed-out Responses: Where a candidate has crossed out a response and provided a clear alternative then the crossed out response is not marked. Where no alternative response has been provided, examiners may give candidates the benefit of the doubt and mark the crossed out response where legible.

Multiple Choice Question Responses: When a multiple choice question has only a single, correct response and a candidate provides two responses (even if one of these responses is correct), then no mark should be awarded (as it is not possible to determine which was the first response selected by the candidate).

When a question requires candidates to select more than one option/multiple options, then local marking arrangements need to ensure consistency of approach.

Contradictory Responses: When a candidate provides contradictory responses, then no mark should be awarded, even if one of the answers is correct.

Short Answer Questions (requiring only a list by way of a response, usually worth only **one mark per response**): Where candidates are required to provide a set number of short answer responses then only the set number of responses should be marked. The response space should be marked from left to right on each line and then line by line until the required number of responses have been considered. The remaining responses should not then be marked. Examiners will have to apply judgement as to whether a 'second response' on a line is a development of the 'first response', rather than a separate, discrete response. *(The underlying assumption is that the candidate is attempting to hedge their bets and therefore getting undue benefit rather than engaging with the question and giving the most relevant/correct responses.)*

Short Answer Questions (requiring a more developed response, worth **two or more marks**): If the candidates are required to provide a description of, say, three items or factors and four items or factors are provided, then mark on a similar basis – that is downwards (as it is unlikely in this situation that a candidate will provide more than one response in each section of the response space.)

Longer Answer Questions (requiring a developed response): Where candidates have provided two (or more) responses to a medium or high tariff question which only required a single (developed) response and not crossed out the first response, then only the first response should be marked. Examiners will need to apply professional judgement as to whether the second (or a subsequent) response is a 'new start' or simply a poorly expressed continuation of the first

Question		Answer	Marks	Guidance
1	a	<ul style="list-style-type: none"> • 18 months - can thread large beads • 6 months - hold a rattle for a short amount of time without dropping it • 2 years - can pick up small toys using a fine pincer grasp • 5 years - can dress independently • 3 years - can control a pencil using a thumb and first two fingers 	5	5 x 1 mark
1	b	<ul style="list-style-type: none"> • Uses the large muscles in the body • Movement of large limbs of the body 	1	1 x 1 mark Do not credit if gives an example as this is the next part of the question
1	c	<ul style="list-style-type: none"> • Ball games / bouncing a ball / bat and ball • Climbing / slide • Crawling • Hide and Seek • Hopping / hopscotch / balancing • Jumping / trampoline • Kicking a ball / football • Pushing / pulling toys • Riding a bike / tricycle / scooting • Rolling over • Running • Skipping • Swinging • Swimming • Throwing and catching activities • Walking / paddling 	4	1 x 4 mark

Question		Answer	Marks	Guidance
1	d	<ul style="list-style-type: none"> • Comfortable / allows freedom of movement / easy for a child to move in • Loose if fitted over other clothing / correct fit • Cool / absorbent fabrics in warm weather / lightweight / breathable • Easily washable • Protection from sun – sun hats / UV suits / T shirts / cover shoulders • Keep children warm in cold weather / scarves / gloves / hats / • Keep dry – waterproofs • Non irritant • Not too expensive / could get ruined / dirty • Strong / hardwearing fabrics / durable • Suitable for the activities being carried out - may give an appropriate example • Underwear which is comfortable / absorbent / cotton 	3	3 x 1 mark Do not accept dress for the weather (too vague)
1	e	<ul style="list-style-type: none"> • Both feet should be measured for length, width and girth • Buy from a shop where there are trained shoe fitters • Choose leather if possible / allows the feet to breathe • Comfortable for the child / right size / fits correctly • Do not buy second hand shoes • Do not buy shoes a size too big can cause blisters • Easy to clean / wash • Easy to fasten / fastening over the instep / adjustable fastening • Easy to put on / take off • Not slippery sole / grip • Shoes should fit snugly round the heel • Strong / hard wearing / lasts for a few months / durable • Suitable for the activity • Suitable for the season • There should be at least 1 cm between the longest toe and 	4	4 x 1 mark

Question		Answer	Marks	Guidance
		the end of the shoe		
1	f	<ul style="list-style-type: none"> • Always use light controlled / zebra crossing / school crossing patrol if there is one • Child walks on side away from the road / parents walk next to the road • Do not allow the child to run • Hold child's hand / put on reins • If in a pushchair make sure they are strapped in • Look out for and encourage the child to look for hidden entrances / drive ways • Set a good example • Talk to/Teach the child about dangers • Use the Green Cross Code as a model of good practice 	3	3 x 1 mark Only allow reference to the Green Cross Code once
2	a	1. Fallopian tube 2. Uterus 3. Ovary 4. Cervix 5. Vagina	5	5 x 1 mark
2	b	<ul style="list-style-type: none"> • Stage 4 / Receptive 	1	1 x 1 mark
2	c	<ul style="list-style-type: none"> • Lining of the womb breaks down • Lining of the womb leaves the body / lining sheds / results in bleeding /period • Lasts approximately 5 day 	2	2 x 1 mark

Question		Answer	Marks	Guidance
2	d	<ul style="list-style-type: none"> • Age / early onset menopause • Alcoholism / heavy drinking • Blocked / damaged fallopian tubes • Cancer / cancer treatment / chemotherapy • Drug abuse • Endometriosis • Hormonal problems / thyroid • Obesity / overweight / underweight / anorexia / eating disorders • Ovulation problems / no eggs released / not enough eggs • Polycystic ovary syndrome / PCOS • Poor diet • Poor egg quality • Sexually transmitted diseases / STD / STI • Severe stress / avoiding stress • Smoking 	3	3 x 1 mark Do not accept 'Drugs', 'Alcohol' on their own
2	e	<p>In vitro fertilisation / IVF</p> <ul style="list-style-type: none"> • Woman's eggs collected and fertilised with partner's / donated sperm • Healthiest eggs are put back in to the woman's womb <p>Gamete intra-Fallopian transfer / GIFT</p> <ul style="list-style-type: none"> • Eggs and sperm are collected / screened • Sperm and eggs mixed and placed in one of the fallopian tubes <p>Intra-cytoplasmic sperm injection / ICSI</p> <ul style="list-style-type: none"> • Used in combination with IVF • Single sperm is injected into an egg • After fertilisation eggs placed in the uterus <p>In vitro maturation / IVM</p> <ul style="list-style-type: none"> • Immature eggs are collected from the woman 	4	2 x 2 mark Explanation has to match the named treatment No marks for explanation with incorrect treatment

Question	Answer	Marks	Guidance
	<ul style="list-style-type: none"> Eggs are matured (1-2 days) in the laboratory before being fertilised with sperm 		
3	<p>Birth plan</p> <ul style="list-style-type: none"> Written plan indicating how the woman would like to give birth Allows thinking time before the birth of how she would like it to be managed e.g. Type of delivery – water bed, C-section Where – home, domino, hospital, birth centre Types of pain relief - epidural, pethidine, alternative, gas & air Atmosphere you want - music, surroundings, family Positions for giving birth – ball, all fours, on back Medical intervention - forceps, ventouse, C-Section Delivery of the placenta/ cut umbilical cord Birth partner Breast or bottle feeding Allow students/ trainees at birth Religious needs Special dietary needs if in hospital Means mother does not need to think about this when giving birth It can be written all in one go or a bit at a time and amended as necessary Also used to talk ideas through with the midwife / partner / husband so feel involved Must be flexible with the birth plan when labour starts as things may change 	15	<p>15 marks 0 = no response worthy of credit</p> <p>Level 4: 13 - 15 marks There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant and substantiated.</p> <p>The candidate explains in detail the birth plan and discusses the advantages and disadvantages of home and hospital delivery with comprehensive explanations. The information will be presented in a clear and organised way. A whole range of specialist terms are used with precision. The candidate can demonstrate the accurate use of spelling, punctuation and grammar.</p> <p>Level 3: 9 - 12 marks There is a line of reasoning presented with some structure. The information presented is in the most part relevant and supported by some evidence.</p> <p>The candidate describes some of the aspects of a birth plan and explains some of the advantages and disadvantages of home and hospital delivery. Information will be offered to support the answer but in general terms with little detail. The information will be offered in a structured format. The candidate can use a range of specialist terms. There may be occasional errors in spelling, punctuation and grammar.</p>

Question	Answer	Marks	Guidance
	<p>Hospital Advantages</p> <ul style="list-style-type: none"> • If special delivery such as ventouse / Caesarean section are needed - must be done in a hospital • Midwives available after birth to assist with any concerns e.g. Breast feeding • More opportunities for rest - baby may be looked after in nursery • More options available for pain relief e.g. Epidural / anaesthetist available if necessary • No household responsibilities • Opportunity to meet with other mothers • Range of specialist equipment available if needed • Trained staff available as soon as you arrive • Visiting hours limited - therefore opportunity to rest <p>Disadvantages</p> <ul style="list-style-type: none"> • If labour is lengthy the mother may be cared for by several staff / shift changes • May be intimidated / frightened by the hospital environment • More likely to receive some form of medical intervention in hospital, compared with giving birth at home e.g. your midwife or obstetrician may advise you to have measures to speed up your labour • Some hospitals are better than others at encouraging an active birth, allowing you the time and space you need to get comfortable during labour • Lack of privacy in hospital. You may hear others, and they may hear you 		<p>Level 2: 5 - 8 marks The information has some relevance and is presented with limited structure. The information is supported by limited evidence.</p> <p>The candidate gives a limited explanation of a birth plans and / or gives some advantages and / or disadvantages of home and hospital delivery. Some information will be relevant. The candidate uses some specialist terms, although these may not always be used appropriately. There may be errors in spelling, punctuation and grammar</p> <p>Level 1: 1 - 4 marks The information is basic and communicated in an unstructured way. The information is supported by limited evidence and the relationship to the evidence may not be clear.</p> <p>The candidate is likely to give limited, muddled or incorrect answers generally with no real knowledge. Answers may be in the form of a list. Answers may not always relate to the question. Answers may be ambiguous or disorganised There will be little or no use of specialist terms. Errors of grammar, punctuation and spellings may be intrusive.</p>

Question	Answer	Marks	Guidance
	<ul style="list-style-type: none"> • Lack of sleep / rest • May not be able to give birth at hospital of choice if busy • Possibility of picking up a hospital-acquired infection such as MRSA <p>Home birth</p> <p>Advantages</p> <ul style="list-style-type: none"> • Can have as many people present as wanted • Can still have pain relief such as gas and air, pethidine, TENS machine • May feel more relaxed and in control / in familiar surroundings • Medical intervention is less likely • No travel is involved • Other family members less disrupted • Other children can be involved / present at birth • Partner can spend more time with mother after / no visiting times • Will have built up relationship with midwife over time <p>Disadvantages</p> <ul style="list-style-type: none"> • Cannot have epidural at home - transfer to hospital if want epidural • First time giving birth home birth is slightly less safe for the baby than giving birth in a delivery suite • Home birth may be less safe if there are complicating factors e.g. carrying twins or have had a previous Caesarean birth. You still have the right to a home birth with appropriate support • If the hospital is very busy, they may say they're unable to send a midwife and that you should come to the hospital 		

Question		Answer	Marks	Guidance
		<p>instead. You can still stay at home and insist that care is provided</p> <ul style="list-style-type: none"> • May find that there is disapproval from family or friends • May need to transfer to hospital if there are complications 		
4	a	<ul style="list-style-type: none"> • Check food is within date / check date marks / use by date • Cover any cuts with plaster • Don't cough or sneeze over food • Ensure food is thoroughly cooked/ not undercooked • Ensure foods which are reheated are piping hot (over 72°C) • Keep foods covered • Keep pets away from food preparation / out of kitchen • Keep raw and cooked foods separate / avoid cross contamination • Keep work surfaces /chopping boards / utensils clean • No nail varnish / short nails / clean nails • Separate / coloured boards for raw and cooked or wash in between use • Tie hair back • Wash all fruit and vegetables before eating • Wash hands / accept any relevant example of washing hands • Wear clean protective clothing / apron • When using microwave - stir foods to avoid hot spots • Never smoke in food preparation rooms 	5	<p>5 x 1 mark</p> <p>Do not accept reference to storing food</p>

Question		Answer	Marks	Guidance
4	b	<ul style="list-style-type: none"> • Arrange visit to the hospital - helps to overcome fear of the unknown / familiarises child with the surroundings • Talk / explain to the child - be honest with the child e.g. don't say something won't hurt if it will / you will always be there if you won't • Encourage child to talk about feelings - so you can explain uncertainties • If having an operation - explain the anaesthetic/procedure in simple terms e.g. going to sleep / special sleep / prevents them feeling pain • Do not show your fears to the child - this will cause - them to worry • Role play hospital - allows them to act out fears / understand what it may be like • Take toy / comforter - familiar things will make child feel safer / involved / distraction/ calm • Tell hospital staff - any particular sleeping patterns / food patterns / dietary requirements • Read books / TV programs / DVD about hospitals – to illustrate what will happen • Pack the bag – e.g. toothbrush, pyjamas • Reassure the child – you will stay with them 	4	<p>2 x 2 mark</p> <p>Can mix and match the explanations</p>
4	c	<ul style="list-style-type: none"> • Drink / keep hydrated • Exercise if possible • Food • Fresh air • Hygiene • Medicines • Rest • Sleep • Temperature control / not too hot / cold 	2	2 x 1 mark

Question			Answer	Marks	Guidance
4	d		<ul style="list-style-type: none"> • Droplet infection - by breathing in air containing tiny droplets of infection e.g. sneezing • Ingestion - Infected foods or drink - food and drink is infected with bacteria this is then eaten credit reference given to names of food poisoning bacteria e.g. salmonella, listeria etc. • Contact/touching infected people - can pass by touching an infected person or using the same things / combs / towels / verruca's etc / not washing hands / hands in mouth / not washing hands after going to toilet / skin to skin • Cuts/open wounds – bacteria can enter blood 	2	2 x 1 mark
4	e		<ul style="list-style-type: none"> • Diphtheria • Haemophilus influenza type B / Hib • Polio • Tetanus • Whooping cough / pertussis 	2	2 x 1 mark
5	a		<ul style="list-style-type: none"> • Crying / screaming • Eye contact • Facial expressions / smiling / grimace • Making noises / gurgling / cooing • Hand gestures • Pulling at objects / reaching / grabbing • Touching 	2	2 x 1 mark
5	b	i	<ul style="list-style-type: none"> • Answering questions • Asking questions • Listening to a child • Praising and encouraging a child • Play games which involve speech / role play / puppets • Repeating words and phrases / showing objects and repeating name • Singing to / with a child / rhymes/ nursery rhymes • Socialising/Taking the child out to a social/educational 	2	2 x 1 mark Do not accept reference to reading

Question			Answer	Marks	Guidance
			activity/venue • Talking to them • Watching TV/DVD/using iPad with parent/carer		
5	b	ii	• Develops concentration • Develops confidence / feel valued • Develops their imagination / make believe / fantasy • Encourages creativity • Enjoyment • Helps to build relationships / social interaction / bonding • Intellectual development / memory skills • Introduces them to different cultures • Learn about true stories • Life skill • Listening skills • Relate to own experiences / future experience / empathy • Reading is a valued skill / activity	2	2 x 1 mark Do not accept reference to language / vocabulary
5	c		• Age related / right age for child • Bold clear pictures / lots of pictures / includes pictures • Bright colours/colourful/variety of colours / attractive • Clear writing / bold writing / big writing • Have a few words on each page or label objects / short sentences / short story • Have a rhyming or repetitive theme • Interactive / pop-ups / textures / sounds • Safe / has safety label / CE mark / no loose components • Well made / durable / strong / washable / wipeable	2	2 x 1 mark
5	d		• More lone parents • More women are working/both parents work • Know benefits of early education/nursery education • More people working	1	1 x mark

Question		Answer	Marks	Guidance
5	e	<p>Child minding Advantages</p> <ul style="list-style-type: none"> • Can care for all siblings together/offer discount for siblings • Can be flexible • Can be close to home / work place • Have OFSTED rating so know the standards/deliver EYFS • Complete local authority training & first aid • Knows facilities in area/local parks • No disruption in own home • Often mothers - experienced in looking after other children • Often take up to secondary age so continuity • Provide homely environment • Relatively affordable may be cheaper than nursery • Usually more than one child / company for children / mixed ages reflect family life / socialising for child / builds confidence <p>Disadvantages</p> <ul style="list-style-type: none"> • Charges fees per child / can be expensive • High turnover • May not be local to parent • May not provide alternate provision if ill / holidays / not weekends / evenings / not always flexible • Parents/carers need to do fact finding - often don't have a website • Parents/carers have to travel to drop child off/pick up • Can be tiring for young children if child minder collects / takes children to several different schools • More limited facilities • May ask to be paid during holiday times • Will not accept sick children so need other care 	6	<p>6 x 1 mark</p> <p>Do not use an advantage in one type of provision as a disadvantage in the other type</p>

Question	Answer	Marks	Guidance
	<p>Nannies</p> <p>Advantages</p> <ul style="list-style-type: none"> • Available in school holidays • Can do some household chores/extra support in the home • Child looked after in own home • No travelling to drop off child • Could be shared with another family • Fixed salary rather than cost per child • Look after children when they are ill • May do baby sitting • Offer one to one (or the number of children in your household) care / close bond formed • Often have professional qualifications in child care • Schedule can be tailored to parents individual requirements / flexible hours to work around the family / more flexible <p>Disadvantages</p> <ul style="list-style-type: none"> • Can be expensive • Have to provide accommodation as well • Lack of socialisation if an only child • May leave suddenly / upset the child if leaves • Need own accommodation/room if live in • Need to pay add on costs - insurance etc • Not monitored by Social Services - ref safety 		<p>If disadvantages in child minder then do not credit advantage if the same point in nannies</p>

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