

CHILD DEVELOPMENT

Examiners' report

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KS4 PERFORMANCE TABLES

OCR Level 1/Level 2

Cambridge National in
Child Development

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R057 Summer 2025 series

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Introduction

Our examiners' reports are produced to offer constructive feedback on candidates' performance in the examinations. They provide useful guidance for future candidates.

The reports will include a general commentary on candidates' performance, identify technical aspects examined in the questions and highlight good performance and where performance could be improved. A selection of candidate responses is also provided. The reports will also explain aspects which caused difficulty and why the difficulties arose, whether through a lack of knowledge, poor examination technique, or any other identifiable and explainable reason.

Where overall performance on a question/question part was considered good, with no particular areas to highlight, these questions have not been included in the report.

A full copy of the question paper and the mark scheme can be downloaded from [Teach Cambridge](#).

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R057 series overview

Many candidates were able to access all questions on the paper achieving a full range of marks demonstrating the paper's accessibility and level of demand.

When answering Level of Response questions candidates were able to achieve Level 1 or 2 but only a few were able to achieve Level 3. They should be encouraged to look at the space provided when answering Level of Response questions, as this will guide them as to how long their response needs to be. List like and bullet point responses are likely to limit candidates to Level 1. The most successful candidates demonstrated comprehensive subject knowledge, and their answers were fully developed, applied to the scenario or topic effectively, and they used appropriate terminology.

Question 5 proved to be the most challenging as candidates appeared to lack detailed knowledge and understanding of natural family planning.

Candidates should be reminded that where a question requires only one answer they must not 'hedge their bets' by providing two as the first answer given will be marked and not the second.

Handwriting was sometimes difficult to decipher, and in some instances, candidates had continued their answers outside of the lines provided which made marking of the questions difficult at times. Candidates should be encouraged to continue their answers on the additional pages provided and make sure to label them correctly.

Candidates who did well on this paper generally:	Candidates who did less well on this paper generally:
- understood the different command words - ensured that their responses related fully to the context or scenario - read the questions carefully so that their responses were relevant to what they had been asked - structured their answers to Level of Response questions and developed their answers - demonstrated accurate knowledge of: - Question 1 (a) (i) key signs and symptoms of measles - Question 1 (b) (ii) reducing SIDS - Question 2 (a) emergency caesarean - Question 3 (b) (i) (ii) advantages and disadvantages of giving birth at home - Question 5 (a) (ii) how many days emergency contraceptive pill can be taken.	- repeated information from the question as their response (Question 4 (a)) - did not read the question carefully - did not use the number of marks allocated as a guide to the level of detail required in Level of Response questions - lacked specific knowledge of: - Question 1 (b) (i) qualities when choosing a cot mattress - Question 2 (b) (i) why a baby is weighed immediately after birth - Question 2 (c) emotional and physical support (understanding the terms emotional and physical) - Question 4 (b) healthy lifestyle and diet during pregnancy - Question 5 (a) natural family planning - Question 6 (b) stage 3 of labour.

Section A overview

Section A consists of three questions based in different contexts. The three scenarios for this paper focused on working in a nursery and helping to write an information leaflet, Umi who has given birth to her first child by emergency caesarean section and Heidi who is pregnant with her second child. Candidates are required to apply their knowledge of the four Topic Areas of the R057 specification to produce responses that are relevant to the scenarios.

Question 1 (a) (i)

1 You are working in a nursery and are helping to write an information leaflet for the parents and carers of the babies and children that attend the nursery.

(a) The leaflet has information about measles.

(i) In the table below identify with a tick (✓) **four** key signs and symptoms of measles that parents and carers should look out for.

Key signs and symptoms of measles	Tick (✓) four only
Blotchy red rash on face and body	
High fever	
Itchy rash	
Red, sore and watery eyes	
Sore throat	
Spots that become blisters	
White spots inside mouth	

[4]

Most candidates achieved 2 marks for this question with the most common correct answers being blotchy red rash on face and body and high fever. Less successful candidates did not appear familiar with the other signs and symptoms of measles confusing them with other childhood illnesses such as chickenpox.

Question 1 (a) (ii)

The leaflet tells parents and carers to keep their child at home if they have measles.

(ii) Describe the treatment parents and carers could give a child with measles.

.....

.....

.....

..... [3]

Most candidates were able to gain at least one mark with the most common answers referring to a child needing rest, fluids or Calpol. Incorrect answers included visit the GP and give the child antibiotics. Where candidates had given the incorrect answer in Question 1 (a) (i) of itchy rash, they then incorrectly suggested that the child should be treated with cream to reduce the itchiness.

Assessment for learning



When learning about topics such as general signs and symptoms of illness in children and how to meet their needs, candidates must be able to recall specific treatment relevant to the illness. Many candidates did not gain marks where they gave vague answers such as 'give medicine'. They must identify the type of medication a child should be given, for example paracetamol.

Question 1 (a) (iii)

(iii) Describe **one** way that parents and carers can meet a child's **social** needs when they are ill at home with measles.

.....

..... [1]

The most common correct answers given were facetime and call friends and family. Less successful candidates suggested that friends could come and visit which was not accepted as measles is contagious. The mark could not be awarded where candidates did not qualify playing or reading a book together.

Question 1 (a) (iv)

(iv) Describe **two** ways that parents and carers can meet a child's **emotional** needs when they are ill at home with measles.

1

.....

2

.....

[2]

There was a mixed response to this question with some candidates clearly understanding emotional needs describing that parents and carers could give love and tell them they will get better for example. Some candidates confused emotional needs with social or physical, suggesting that they could play with the child or encourage them to rest.

Question 1 (b) (i)

(b) The leaflet also has information about reducing the risk of Sudden Infant Death Syndrome (SIDS).

(i) Choosing the correct cot mattress is important to reduce the risk of SIDS.

State **two** qualities parents and carers should look for when choosing a cot mattress.

1

2

[2]

Many candidates could not state the qualities that should be looked for when choosing a cot mattress.

Incorrect terminology was used by some candidates who used the word 'hard' rather than 'firm'.

Some candidates appeared to misread the question and focused on the cot frame or discussed bedding rather than the mattress. Reference was also made to the quality of the mattress, for example too thick/soft rather than the safety aspects to reduce the risk of SIDS.

Common correct answers included ensure it is the correct size and breathable.

Question 1 (b) (ii)

(ii) State **two** other ways parents and carers can reduce the risk of SIDS when babies are sleeping.

- 1
- 2

[2]

Many candidates correctly identified that parents and carers should not co sleep with the baby. Placing baby feet to foot and removing items such as soft toys were also common correct answers.

Less successful candidates included more than one point in their answer, for example, stating 'no blankets and pillows' or 'no blankets and toys', therefore missing out on the mark. Vague answers could also not be credited where candidates stated 'put baby at bottom' for example.

Question 2 (a)

2 Umi gives birth to her first child by emergency caesarean section.

(a) State **four** reasons why an emergency caesarean section may be necessary.

- 1
- 2
- 3
- 4

[4]

There was a mixed response to this question with most candidates gaining 2 or 3 marks. Correct responses included baby being in the breech position, mother too tired to push and severe bleeding.

Less successful candidates didn't acknowledge that it was an emergency caesarean and suggested why an elective section may be given for example if it was a multiple birth. Vague answers such as 'there may be problems with mother' did not gain a mark.

Question 2 (b) (i)

(b) Immediately after the birth the midwife weighs Umi's baby.

(i) State **two** reasons why Umi's baby is weighed immediately after birth.

- 1
- 2

[2]

There were very few correct answers to this question.

Less successful candidates stated, 'to check baby is healthy' rather than 'check baby is a healthy weight'.

More successful candidates were able to link weighing the baby to tracking weight over time.

Question 2 (b) (ii)

(ii) Identify **two** other checks the midwife does on Umi's baby immediately after birth.

- 1
- 2

[2]

Many candidates focused on the checks that are undertaken between days 1 to 5 of birth and not the checks that are carried out immediately after birth. Some candidates were able to gain 1 mark for identifying the AGPAR test or a condition it assesses.

Question 2 (c) (i)

(c) When Umi leaves hospital she will need support from her partner, friends or family.

(i) State **two** ways they can provide Umi with emotional support.

- 1
- 2

[2]

Talk to Umi, reassure her and give love or hugs were common answers, and most candidates gained 1 mark for this question. There were many repeats which prevented candidates accessing the second mark.

Question 2 (c) (ii)

(ii) State **two** ways they can provide Umi with physical support.

- 1
- 2

[2]

Where candidates understood the term physical support they achieved 2 marks. The most common answers included doing household chores, making meals and shopping. Vague answers such as 'look after the baby' were not accepted, however where candidates qualified their answer with 'so Umi could rest' the mark was awarded.

Misconception



Some candidates misunderstood the terms emotional support in Question 2 (c) (i) and gave ways that Umi could be provided with physical or social support. It is important that they can differentiate between the different areas of PIES and give relevant examples for them.

Question 3 (a)

3 Heidi is pregnant with her second child.

(a) At her first antenatal appointment the midwife takes Heidi's blood pressure.

Explain **one** reason Heidi's blood pressure is taken at this appointment.

.....

.....

.....

..... [2]

Few candidates answered this question well. Many candidates lacked an understanding of why the midwife takes blood pressure at the first antenatal appointment with many referring to gestational diabetes or to check it is not too high or low.

More successful candidates were able to link it to high blood pressure and gained 1 mark and where full marks were awarded, they were able to explain it is taken to check for pre-eclampsia which causes high blood pressure.

Question 3 (b) (i)

(b) Heidi wants to give birth to her second child at home.

(i) State **two** advantages of Heidi giving birth at home.

1

.....

2

.....

[2]

Generally well answered with familiar surroundings and no restriction on visitors being common answers. Incorrect responses referred to privacy and a quiet environment.

Question 3 (b) (ii)**(ii)** State **two disadvantages** of Heidi giving birth at home.

1

.....

2

.....

[2]

Most candidates gained 1 or 2 marks. Incorrect responses stated that there would be 'no' pain relief or 'no' medical staff available, failing to acknowledge that there would be a midwife present and some options for pain relief.

Where candidates explained that not all methods of pain relief are available and an obstetrician is not available at home for example, marks were awarded.

Question 3 (c)**(c)** Heidi's first child is two years old. She asks her health visitor for advice on establishing a feeding and bath time routine for her first child.

Discuss the benefits to Heidi and her first child of good feeding and bath time routines.

.....

.....

.....

.....

.....

.....

[8]

A complete range of responses were given for this question although mainly Level 1 and just into Level 2. Common responses referred to knowing when it is mealtime, preparing for bed and less stressful for Heidi giving her more time to relax.

Answers were rarely developed, and appropriate terminology was not always used.

Less successful candidates described when bathing should take place and some even described a healthy menu for each mealtime and therefore did not gain marks. Where candidates appeared to have misread the question, they discussed the benefits to Heidi and her second child rather than the first.

Some candidates included generic benefits to having a good routine and did not acknowledge feeding and bathtime routines which limited marks to Level 1.

Level 3 responses gave a balanced discussion of both feeding and bathtime routines and the benefits to both Heidi and her first child.

Exemplar 1

Establishing a feeding routine may allow for good bonding time between Heidi and her first child. The feeding routine can allow for Heidi to eat with her first born and communicate over a meal together. Next, a feeding routine can allow Heidi to keep check on her child's diet. The routine will make sure her child is eating the correct amount she needs a day as well as allowing Heidi to keep check on the snacks her child also eats throughout the day.

Establishing a bath time routine allows for Heidi's first child to get into a habit of having a bath every day. This will help teach her child about cleanliness as she grows older.

Lastly, a bath routine can allow for Heidi and a partner to take turns doing personal things they need to do. The routine will make Heidi's timing more organised so if she can focus on something she needs to do while, for example, her partner bathes the child.

Exemplar 1 is a Level 3 response. The candidate has discussed both feeding and bath time routines in detail. Many relevant points are made related to Heidi and her first child which are developed. The candidate consistently uses appropriate terminology, for example when referring to bonding and communication and developing good habits for the future.

Section B overview

Section B of the examination paper consists of three questions that are fact and knowledge based. Candidate responses do not have to relate to a particular situation or scenario.

Question 4 (a)

4 Two topics that antenatal (parenting) classes give advice on to help parents prepare for a healthy pregnancy, labour and parenthood are:

- healthy lifestyle and diet during pregnancy
- foods to avoid during pregnancy.

(a) State **four** other topics the antenatal (parenting) classes will provide advice on.

- 1
- 2
- 3
- 4

[4]

Most candidates gained 1 or 2 marks for this question with common answers being options for pain relief and how to feed baby. Where candidates did not achieve any marks, they had focused on topics given in the stem of the question. There were also many repeats which limited the number of marks that could be awarded to one. For example, bathing baby, feeding baby, safe sleeping and how to hold baby are all examples of how to care for a baby.

Question 4 (b)

- (b) Explain why following advice on keeping a healthy lifestyle and diet during pregnancy is important for a pregnant woman.

.....

.....

.....

.....

..... [3]

Many candidates gained 1 or 2 marks and could explain that a healthy lifestyle and diet during pregnancy was important for the health of the unborn baby. Some could explain that smoking, drinking alcohol and taking recreational drugs has a negative impact and increases the risk of birth defects and abnormalities. There were some vague answers such as 'the baby is likely to have problems' which did not gain a mark.

Question 4 (c)

- (c) Identify **four** foods a pregnant woman should avoid during pregnancy.

1

2

3

4 [4]

There was a mixed response to this question. More successful candidates used appropriate terminology such as 'raw meat', 'unpasteurised milk' and 'raw eggs'.

Less successful candidates gave incorrect answers such as fatty foods, spicy foods and chocolate and others omitted the word 'raw' identifying just meat or eggs for example.

Question 5 (a) (i)

5

(a) Natural family planning is a method of preventing pregnancy.

(i) Describe how natural family planning prevents pregnancy.

.....

.....

.....

.....

.....

..... [6]

There were very few Level 2 or 3 responses to this question.

More successful candidates explained what natural family planning is and identified that women can monitor their menstrual cycle. Monitoring temperature and cervical mucus were mentioned in some responses. A few could then link this to fertility and ovulation and explained that to prevent pregnancy a couple would need to abstain from sex or use another form of contraception to achieve Level 3.

Less successful candidates misunderstood the question and focused on the importance of finances and positive relationships when planning a family for example.

Assessment for learning



Candidates need to be able to understand the three different methods of natural family planning and how they prevent pregnancy, how effective they are if used correctly, the availability and be able to explain the suitability in relation to personal circumstances (Topic area 1.3):

Exemplar 2

There are three types of natural family planning: the temperature method, the cervical mucus method and the calendar method. The temperature method is checking the temperature of the mother every day and if it is at a certain temperature e.g. 38°C , the mother would avoid having sex as that is seen as the optimum temperature for fertilisation, therefore they avoid having sex. Similarly, a woman could track her menstrual cycle via an app for example and she would avoid having sex during ovulation as this is a time where a woman is most fertile and more likely to conceive. The cervical mucus method is when a woman checks how much and how thick or thin her mucus is. Thicker mucus is ~~more~~ better at preventing pregnancy as this means the sperm cannot meet the egg and fertilise which is the same for the other methods. Natural family planning is a natural contraception^[6] that can be used by all no matter religion.

Exemplar 2 is a Level 3 answer. There is a thorough description showing detailed knowledge and understanding of how natural family planning prevents pregnancy and the candidate uses appropriate terminology. Many relevant points are made, and the candidate has described how a woman would monitor her temperature, cervical mucus, and track her menstrual cycle. Ovulation is well explained as is the need to abstain from sex during this time.

Question 5 (a) (ii)

(ii) State **one** advantage of natural family planning.

.....
..... [1]

Where candidates didn't understand natural family planning fully for Question 5 (a) (i), this question was answered incorrectly with vague responses given such as 'know when to get pregnant' and 'know when they can start a family'.

More successful candidates correctly stated, 'no side effects' or 'no cost'.

Question 5 (a) (iii)

(iii) State **one disadvantage** of natural family planning.

.....
..... [1]

This question was not well answered. Where candidates gained the mark, the most common correct answer was 'doesn't protect against STI's'.

Question 5 (b) (i)

(b) The emergency contraceptive pill prevents pregnancy after unprotected sex.

(i) State **one** other time when the emergency contraceptive pill may be taken to prevent pregnancy.

..... [1]

Many candidates did not gain a mark for this question with the most common incorrect answer being 'take it before sex'. Where candidates understood the question, they correctly stated that it would be taken if the condom split for example.

Question 5 (b) (ii)

(ii) How many days after unprotected sex can the emergency contraceptive pill be taken?

..... [1]

This was well answered with most candidates gaining the mark. Answers of between 1 and 5 days were accepted.

Question 5 (c)

(c) Identify **one** barrier method of contraception.

..... [1]

Most candidates understood the term barrier method and gained the mark for this question.

Less successful candidates misunderstood the term and identified hormonal methods of contraception.

Question 6 (a)

6

(a) Below are the names of parts of the female reproductive system.

Cervix
Fallopian tube
Ovary
Uterus/womb
Vagina

Complete the table below to match the correct definition with the correct part of the female reproductive system.

Use the name of parts of the female reproductive system in the box above.

Use each name once or not at all.

Definition	Name of part of the female reproductive system
Controls the production of the hormones, oestrogen and progesterone	
It keeps the baby securely in place while the woman is pregnant	
Where the baby develops until it is born	
Where the man's penis enters the body during sexual intercourse	

[4]

This was well answered by most candidates.

Assessment for learning



Candidates must be taught to read all instructions in the question carefully. In this question they are instructed to use each name once or not at all. Therefore, if the same name is used more than once no mark can be awarded even if the repeated name is used against the correct definition.

Question 6 (b)

(b) Describe what happens during **Stage 3** of labour.

.....

.....

.....

.....

.....

..... [4]

Stage 2 of labour was often described when answering this question and there appeared to be a lack of knowledge of Stage 3 of labour by many candidates.

Some candidates were able to achieve 1 or 2 marks with most describing that the placenta is delivered, and the umbilical cord is cut.

More successful candidates also described that tears or cuts would be sewn up and contractions start again.

Very few candidates described that an injection may be given to speed up the process of the delivery of the placenta. Some candidates mentioned that an injection could be given but did not state why and this is too vague.

Exemplar 3

Stage 3 of labour is the stage ~~of~~ ~~at~~ after the birth of the baby. Contractions start up again as the placenta is shed and exits through the birth canal. If the process is slow, syntocin can be given to speed up the process. During this stage, any cuts or tears to the perineum ~~are~~ stitched up. It is the shortest stage of labour.

Exemplar 3 gained full marks. The candidate clearly describes that stage 3 of labour is the stage after the baby is born and that contractions will start again to deliver the placenta. Appropriate terminology is used to explain that syntocinon will be given to speed up the process. The candidate also explains correctly that any cuts and tears will also be sewn up and it is the shortest stage of labour. These points are in addition to the four valid points that were credited.

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