

2004 Care

Higher Paper 1

Finalised Marking Instructions

HUMAN DEVELOPMENT AND BEHAVIOUR

Case Study 1

Marie is a 38 year old woman who had a car crash nine months ago, which left her critically ill in hospital. After a month of tests the consultant informed her that she was unlikely to walk again. This came as a terrible shock. However, after a few days she began to believe that this would not really affect her way of life. Her friends were concerned that she was putting on a brave face. While in hospital, she received a lot of support and encouragement from physiotherapists, but she was very angry with staff, because she was frustrated by her lack of progress. As a result she became very depressed and withdrawn as she thought about the things she could no longer do.

When she first returned home Marie was devastated at the prospect of life in a wheelchair. She was moody and difficult with the doctor and her husband Derek as they tried to support her. She was concerned about becoming too reliant on her husband. She failed to co-operate with the physiotherapist at first and was often late for her visits to the clinic. She was also worried that her husband might reject her. This was not the case and the physiotherapist and her husband worked hard to motivate her.

She now accepts home care support, three days a week, as her husband now works part-time. He has encouraged her to develop new interests. She attends a support group for people who have also recently become wheelchair users and she has rejoined the choir she has sung with for ten years. She attends a weekly computing class and is enjoying using the Internet, a new experience for her, as computers had frightened her before her accident. She has been heard to tell her best friend that she now understands the need for her to accept the changes and get on with her life.

Use Case Study 1 to answer questions 1 and 2

Question 1

(a) Describe **either**

(i) the **Adams, Hayes and Hopson model of transition;**

or

(ii) the **Elizabeth Kubler-Ross model of loss.**

(4 marks)

Adams, Hayes and Hopson created a seven-stage model of transition

- Individuals experience a range of feelings as they go through transition.
- These feelings are 'normal' and in time will pass.
- These self esteem changes represent a cycle of change.
- **Immobilisation** – shock, disbelief.
- **Minimisation** – 'play down' what has happened.
- **Depression.**
- **Acceptance of reality/letting go.**
- **Testing** – testing out new ideas and behaviours; change behaviour.
- **Search for meaning** – trying to understand the need for change.
- **Internalisation** – acceptance of change.
- This is not a smooth process, people can become stuck at early stages – eg depression.
- The result of the transition may not be successful and individuals could start the whole process again.

Elizabeth Kubler-Ross model of loss

5 stages of the grieving process.

Developed as a response to news of terminal illness, but also used as general model of responding to an actual/anticipated loss.

1. **Denial:** numbness, disbelief, a mistake has been made.
2. **Anger:** directed at self or others; complain and feel bitter; feeling of loss of control.
3. **Bargaining:** trying to postpone events; praying 'doing a deal with God'; plead with others to ask what they can do to change things.
4. **Depression:** facing the reality; experiencing a real sense of loss; acknowledges life plans will not be met; sadness as death anticipated.
5. **Acceptance:** coming to terms with the situation; experiences a sense of peace; struggle is over.

For a full four marks, candidates should accurately describe the theorist's approach to loss and identify any "phases" or characteristics of the model accurately and in the correct order.

- (b) Use your chosen model to explain three of the stages that Marie has gone through which can be identified in paragraphs one and two of Case Study 1. (3 marks)

Adams et al model answer

Examples from the case study should accurately illustrate **the first three stages** only.

- **Immobilisation:** 'news came as a terrible shock'
- **Minimisation:** 'after a few days she began to believe it wouldn't affect her way of life. Friends were concerned she was putting on a brave face'.
- **Depression:** 'became depressed and withdrawn as she thought about the things she could no longer do'. 'Moody and difficult with the doctor and her husband'. 'Failed to co-operate and was often later for her visits to the clinic'.

Kubler-Ross model answer.

Examples of the **first four stages** only.

- **Denial:** 'after a few days she began to believe it wouldn't affect her way of life. Friends concerned she was putting on a brave face'.
- **Anger:** 'was very angry with staff because she was frustrated with her lack of progress'.
- **Bargaining:** no evidence of this stage in the case study.
- **Depression:** 'became depressed and withdrawn as she thought about the things she could no longer do'. 'Moody and difficult with the doctor and her husband'. 'Failed to co-operate and was often late for her visits to the clinic'.

Question 2

Describe the psychological theory of either Maslow or Rogers and use it to explain Marie's behaviour after she returned home from hospital. Refer to paragraph 3 of Case Study 1.

(7 marks)

4 marks for theory, 3 for applying it to Marie after she left hospital.

For either **Maslow or Rogers**:

Humanistic theories share 4 characteristics:

- **Holistic**: looks at the whole person.
- **Phenomenological**: behaviour explained from the unique point of the person.
- **Existential** perspective: humans aware of existing within ourselves and being separate from other people.
- Emphasise on **personal agency**: people have free will and the capacity for change.

Using **Maslow**:

- 7 levels in the Hierarchy of needs; at least 3 should be identified of physiological, safety, love and belongingness, esteem, cognitive, aesthetic, self-actualisation.
- Self-actualisation is a state of fulfilment, which very few individuals achieve.
- Many people experience deprivations, which result in some of their needs not being met.
- Each level requires to be at least partially met before an individual can meet their higher level needs.
- Marie's physical and safety needs have been met to some extent in hospital.
- Marie is now working on meeting her esteem needs: eg support group.
- And her social and aesthetic needs: eg choir.
- And her cognitive needs: eg using her computer and Internet.

Using **Rogers**:

- **Self concept**: self image + self esteem + ideal self.
- **Looking glass self**: our interpretations of others reactions to us are used to formulate our opinions of ourselves.
- **Unconditional positive regard**: required to develop high self-esteem.
- **Conditions of worth**: negative CoW from others can impede growth.
- Marie's self image has been dramatically affected by the change in her circumstances. She has been going through a period where her ideal self was very far away from her self-image whilst in hospital.
- Since she has left hospital, she has engaged in a number of activities, which have increased her self-esteem eg choir and computing.
- This has allowed her self image to grow much closer to her ideal self.
- It is likely that she experiences unconditional positive regard in the support group, and from her husband, and this will improve her self-esteem.

Question 3

Explain how an understanding of the behavioural sciences (sociology and psychology) can influence good care practice.

(5 marks)

- Psychological developmental theories and perspectives help staff to **explain human behaviour** (using concepts such as norms, values, beliefs, socialisation etc).
- If staff can understand the **stage of development** a client has reached, they can work with the client to help them progress to the next stage, if appropriate, or deal more effectively with the issues of the stage they are in.
- An understanding of theory and perspectives can help staff to **understand the needs** of service users more fully.
- Theories can provide a **planning and diagnostic** tool.
- Staff can use the clients' **experience in society** to help them identify factors (discrimination, labelling), which may need of be addressed to ensure further development of client's self-concept and confidence.
- Developmental theorists can help staff to understand that further development is still possible with a **conducive** environment and support from care workers and others whom the client views as significant.
- The wide range of theories available show there is a **variety of ways** of understanding behaviour, and therefore a **variety of appropriate response and interventions**.
- Or any other relevant point

Question 4

Explain deviance from a Symbolic Interactionist perspective.

(6 marks)

Deviance: general

- Deviance: behaving in ways which are not approved of by the main society or social group or culture.
- Deviance is **relative**: different things have been defined as deviant at different times, in different cultures and in different circumstances eg homosexuality.

Symbolic interactionism: general

- SI is a **micro** sociological approach: explains behaviour at individual/small group level.
- **Self**: the **way others perceive** me and the way I perceive myself will be used to **construct my image** of me/self.
- **Interaction**: the social encounter during which I receive feedback and give feedback to others.
- **Symbol**: the verbal and non verbal communications, which are used to provide feedback to and from others.

SI and Deviance

- Symbolic interactionists see crime and deviance as a **social construction**.
- Social **interactions serve to ‘police’ behaviour** since disapproval will be used to alter my behaviour into more acceptable forms.
- However, we have **choice** – to varying extents – over whom we socialise with.
- Emphasis is placed on the way in which the behaviour of some individuals and – groups become **labelled** as deviant or criminal.
- Labels are more likely to stick if they have **credibility**, are made **publicly**, are made **frequently** and are made **consistently**.
- Symbolic interactionists do not just focus on the deviant person, but on **society and the reaction** to breaking the law.
- Once labelled a deviant person might come to believe in the label and behave in the way the label suggests – **self-fulfilling prophecy**.
- The individual’s **self concept** can change to fit the label.

Question 5

Why is an understanding of culture important for those employed in caring for others?

(4 marks)

Culture

- Culture is **‘the way of life’** of a group or society.
- Being a member of a culture involves being able to **‘fit in’** to the group or society.
- Within any society there are a number of **sub-cultures**: middle-class, criminal, travelling people etc.
- But all may still see themselves as **part of a wider culture** eg being Scottish.
- The way in which members of society ‘learn’ their culture is through the process of **socialisation**.
- Existing members of society impart or teach the **rules, norms, and rituals** of that society to the new or incoming members. How this is done or whether it is a good thing varies depending on the sociological perspective.
- The **agents** of socialisation may be **primary** (family) or **secondary** (school, media, friends etc.)

Relevance for a care setting

- It is important to recognise that ‘fitting in’ might be a **stressful or difficult** transitional period for the new service user.
- It is important to make people feel **welcome and informed** of the rules, rituals etc.
- It is important to check whether the culture of the organisation may **consciously** or **unconsciously** exclude some people.
- It is important to give people **time to settle** into the culture of a new organisation.
- It is important to have mechanisms to ensure that there can be **change** in the culture to reflect the needs of all people in the organisation.
- It is important for workers and organisations to be **aware of the needs** of service users from a variety of different cultural backgrounds.
- It is important for workers and agencies to be **pro-active in meeting the needs** of service users from a variety of cultures.

Question 6

Describe three key features of a *conflict perspective* and relate them to how change occurs in society. (6 marks)

Discussions based on new version of the unit:

1. **Competing groups:** society is composed of individuals and groups who conflict (**fight**) over **control of the society**, control of the resources, control of the wealth etc.
2. **Power differentials:** each group wants to **maximise their own interests** at the cost of other groups. The greater the power the group has, the more likely it is to achieve its goal.

There is **no one fixed way to behave:** how to behave changes over time and will reflect the different power differentials in society.

3. **Dynamic Relationships:** society is in a state of constant change as the power of certain group's rise or fall. In order to avoid chaos and ensure a degree of stability, conflict theorists refer to two complementary processes: negotiation and compromise & constraint.
 - **Negotiation:** a process of bargaining in order to resolve a dispute. The outcome will be affected by the relative power each group has.
 - **Compromise:** the agreed conclusion of negotiation. It is required when each side has maximised its benefit and minimised its losses through bargaining.
 - any compromise position will only last for a certain period of time before **re-negotiation** and a new compromise is reached eg as a child grows s/he learns how to use his/her power more effectively and the balance of power with the parent alters.
 - this **dynamic relationship fosters change** within the ways members of society behave over time.
 - **Constraint:** sometimes, those with high levels of power will use their power to **impose their will and restrict the behaviours of others** eg dictators or adult v child.
 - this has often led those who are being constrained into **taking action** (often on a **collective basis** in order to gain as much power as possible) to negotiate and achieve compromise a new position eg the TU movement, Disability rights activists etc.
 - society is therefore in a **constant process** of change because of the myriad types and levels of negotiations and compromises.
 - this can exist at a **macro level** where the control of the whole society is fought over by groups with conflicting views of how the society should be run (politics); or, at a **micro level** where the individual and family conflict over their own needs, wants and desires.

Discussion based on old version of the unit:

Karl Marx (1818-83) Emphasised importance of 3 main factors:

1. **Economic determinist** approach:

- **Economic base** of society that determines human behaviour, not social norms and values.
- Primitive societies seen as **co-operating and sharing** resources for shelter/food.
- As societies evolve and become more industrialised, those who control the **means of production** control society.
- In capitalist society there will always be conflict; it is structural.

2. **Social Class:** In capitalist societies there are **divisions** between the owners and the workers.

- **Proletariat** must sell their labour to earn money to provide for basic needs.
- The **bourgeoisie** will protect their privileged position with the profits derived from the sale of their goods.
- **Wealth, status and power** remain in the hands of the ruling elite. This is achieved by various means.
 - family is involved in **physical and ideological reproduction** which ensures the survival of capitalism.
 - deviance is defined in such a way that benefits the ruling classes who protect their wealth and status through manipulation of values, selective law enforcement and self-interested law creation.
 - the educational system helps provide a subservient workforce to help make profits for the ruling classes through: acceptance of hierarchy, fragmentation of knowledge etc.

3. **Ideologies:** a broad framework of values and beliefs; a political doctrine

- Various ideologies, which seem to be for the benefit of all, actually **support the capitalist system** eg
 - **democracy**; through **socialisation and education processes**, democracy is emphasised, but in reality, power remains in the hands of the few who already enjoy status, wealth and power.

Change:

- In order to change this situation, there will be a **struggle** between the bourgeoisie and the proletariat.
- The resulting **revolution** will bring about a **classless society** where people are **not exploited** but work according to their abilities and receive according to their needs.

Case Study 2

Gloria is a black African woman who works as a home care worker in a local council. She has lived in Scotland for eighteen years. When she went to visit a new client, Mrs D, she was refused entry to the house. Mrs D shouted and screamed racial abuse at this visit. This was Gloria's first negative experience in her two years with the council. Gloria reported the incident to her supervisor and she was told this happens frequently to others and not to take it to heart. The supervisor allocated another worker to Mrs D, but no further action was taken. In fact, Gloria was told that she might lose her job if she 'made a fuss about it'. It is clear to Gloria that her manager has broken the law and has not followed the council's equal opportunities policy. Gloria has spoken to her union representative who told her that this has happened more than once before, and no action was taken.

Use **Case Study 2** to answer the appropriate parts of questions 7 and 8.

Question 7

What anti-discriminatory policies and procedures could be taken by Gloria's employer to ensure the situation described in Case Study 2 does not happen again?

(10 marks)

1 mark for any of the following points, or any other valid points unless the student mentions monitoring, evaluation and review.

- They already have a policy, but it is not being applied properly.
- They are in **breach of the Race Relations Act 1976 and Amendment Act 2001** and are therefore breaking the law if they do not take action.
- Need to consult **with staff/service users** to check if it is still a valid/workable Equal Opportunities Policy.
- Need to look at any of the **barriers to equal opportunities** eg physical, legal, attitudinal, organisational.
- Need to **rewrite any bits of the EOP that aren't working** (eg complaints policy)/add new sections (eg have a separate harassment policy), as a public body, they need to **actively pursue** this under RR Amendment Act.
- Need to **re-train all staff** about how the new policy works.
- Need to give **support/supervision to the staff** who will be implementing procedures eg managers.
- Need to give existing staff **general training on prejudice/stereotyping/discrimination/cultural awareness** etc.
- Need to ensure that **staff who recruit** new employees have had training in anti-discriminatory practice.
- Need to have guidelines/procedures to discuss and act on **discrimination from service users**.
- Need to have a **named person** outwith line management to approach about problems of harassment/discrimination.
- Need to have **regular supervision** for staff to ensure good practice.
- Need to have **access to counsellors/advisors** for people who experience harassment or discrimination.
- Need to have systems to **monitor** the policy to ensure that it is being applied appropriately (eg complaints get followed up and not ignored, who gets promoted etc.)
- Need to have a **regular evaluation** to ensure that the policy is still relevant and achieving its aims.
- Ethnic monitoring to check recruitment/interviewing procedures.

Question 8

- (a) **Identify two examples of direct discrimination from Case Study 2.** (2 marks)

- Mrs D refused entry to Gloria and shouted and screamed racial abuse.
- Gloria was told that she would lose her job if she made a fuss about the incident.
- No action was taken by the manager to deal with the incident.

- (b) **Explain why your choices in Question 8(a) are examples of direct discrimination.** (2 marks)

- Discrimination occurs when an individual or group is treated differently, favourably or unfavourably, from any other individual or group.
- Direct discrimination is carried out in an open or obvious manner.
- It may be conscious (the person knows they are doing it) or unconscious (the person is unaware they are discriminating).

Question 9

- (a) **Define institutional discrimination.** (2 marks)

Institutional discrimination exists when:

- the **rules policies and procedures** (1 mark) of the organisation can be seen to discriminate against certain individuals or groups
- the **culture** (1 mark) of the organisation discriminates against groups or individuals
- individuals experience **barriers** (1 mark), based on **stereotypes or prejudices** (1 mark) when using/working in the organisation.

- (b) **Explain the impact that institutional discrimination can have on an individual's potential to achieve in a care context.** (6 marks)

(The answer can refer to the case study, or be a general discussion)

- Low self esteem eg being treated unfairly by service user and manager.
- Disempowered eg not being listened to.
- Unable to voice your opinions or concerns.
- Marginalized eg not having your experience taken seriously.
- Being prevented from taking a full part in an organisation or a life's opportunities.
- Denial of opportunities eg not having access to active complaints procedures.
- Unable to exercise power, choice or control.
- Stereotyped eg feeling that you are not being treated as an individual.
- Anger at the discrimination could lead to a desire to fight back/stand up for your rights.

Question 10

- (a) Give the name and dates of *three* pieces of equality legislation, which protect people from discrimination.

(3 marks)

Sex Discrimination Act 1975 & 1986
Equal Pay Acts 1970 & 1986
Race Relations Act 1976 and RR Amendment Act 2001
Disability Discrimination Act 1995

- (b) Briefly describe the main features of each of the three pieces of legislation named in Question 10(a).

(6 marks)

1. Sex Discrimination Act 1975 & 1986

- Defined discrimination on the basis of gender or marital status (applies to men as well as women).
- Protection from discrimination in a number of fields eg employment, education and training, provision of goods, facilities and services, advertising.
- Defined direct and indirect discrimination, and victimisation.
- Act doesn't apply where gender is a 'Genuine Occupational Qualification'.
- Created Equal Opportunities Commission.
- Positive action is allowed, but not positive discrimination.

2. Equal Pay Acts 1970 & 1986

- Female employee entitled to equal pay, as well as contractual terms and conditions, to a male employee if:
 - they are doing work that is the same or similar
 - they are doing work that has been graded the same
 - they are doing work of equal value
 - enacted in 1975 along with the Sex Discrimination Act
 - enforced by the Equal Opportunities Commission.

3. Race Relations Act 1976 and RR Amendment Act 2001

Race Relations Act

- Defined discrimination on the basis of colour, race, nationality ethnic or national origins.
- Protection from discrimination in a number of fields eg employment, education and training, provision of goods, facilities and services.
- Defined direct and indirect discrimination, and victimisation.
- Act doesn't apply where race is a 'Genuine Occupational Qualification'.
- Created Commission for Racial Equality.
- Positive action is allowed, but not positive discrimination.

Amendment Act

- Response to institutional discrimination demonstrated by the Metropolitan Police investigation of the Stephen Lawrence killing.
- Places a duty on public bodies and organisations to actively pursue racial equality

4. Disability Discrimination Act 1995

- Defines disability.
- Service providers must take reasonable measures to ensure they do not discriminate on grounds of disability.
- Employers have a duty to make reasonable changes or adjustments to compensate for the effects of a disability.
- All buildings have to be fully accessible by 2005.
- All new transport should be fully accessible for people with disabilities.
- People with disabilities may be positively discriminated for eg in allocating points for a housing waiting list.

Question 11

Explain why it is important for care workers to be aware of their own prejudices during their work with service users.

(4 marks)

Students do not need to define prejudice, it is more important that they apply the definition.

Definition (maximum of 2 marks for definition)

- Prejudice occurs when people have **preconceived attitudes** or opinions about certain groups or individuals.
- Prejudice involves **prejudging people**, often on the basis of stereotypes.
- Stereotyping happens when we think that everyone who belongs to a particular group **shares the same characteristics**.
- Stereotype and prejudice are usually based on **fear and/or a lack of knowledge**.
- Stereotypes give a **simplified and superficial** picture and give a **distorted image** of the group.
- Stereotyping can be seen as a form of **labelling**.
- Prejudice and stereotypes come from the **values and beliefs** we have learned through **socialisation**.
- Prejudice can be **expressed** through language or actions.
- Prejudice often remains **unconscious** and can therefore be difficult to admit.
- Prejudice is often deeply embedded in the persons attitudes and so can remain quite **fixed** and therefore difficult to change.

Process which worker should go through to challenge their prejudices

- Awareness.
- Modification eg training.
- Review/support.

Students can illustrate this process with any relevant examples eg workers should be aware that the language they use might express prejudice and the service user might feel ridiculed or criticised.

Important to be aware of prejudices because:

- it minimises the negative effect on service users
- it encourages workers to treat service users as individuals
- this would encourage all service users to fulfil their potential
- the worker might be breaking the law and be disciplined/sacked
- the service user might raise a complaint against the worker and/or agency
- any other relevant answer.

[END OF MARKING INSTRUCTIONS]