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Course Assessment Specification
Early Education and Childcare (Higher)

The purpose of this document is to provide:
♦ details of the structure of the External Assessment in this Course
♦ guidance on how to use information gathered from a Question Paper appropriate for this Course to estimate candidate performance.

Part 1

This part of the Course Assessment Specification details the structure of the External Assessment in this Course.

The External Assessment:
♦ consists of 2 Question Papers - each Question Paper has a time allocation of 1 hour 20 minutes
♦ covers the three mandatory Units
♦ has a total mark allocation of 100
♦ assesses approximately 50% knowledge and understanding and 50% application, analysis and evaluation
♦ assesses integration of knowledge and understanding and application, analysis and evaluation across the Units
♦ uses language appropriate to the reading range expected of Higher candidates in any case study or stimulus.

Question Paper

Each Question Paper has 2 questions.
In Question Paper 1:
♦ Question 1 examines the content of the ‘Child Development: birth – 12 years’ Unit
♦ Question 2 examines the content of the ‘Developmental Theory in Early Education and Childcare’ Unit

In Question Paper 2:
♦ Question 3 examines the content of the ‘Holistic Approaches to Child Health’ Unit
♦ Question 4 examines the content of any two of the mandatory Units in an integrative way.

Candidates should answer all questions and detailed guidance on the content of each section is given below.

Question 1: Total marks 25
♦ This question examines the content of the ‘Child Development: birth – 12 years’ Unit.
♦ It contains 4-6 questions covering up to three of the four aspects of development and two of the following age groups: 0-3, 3-5, 5-8 and 8-12.
♦ The structured questions have a possible mark range of 3 -10.
♦ Some questions will require application of knowledge and analysis and evaluation to a case study.
♦ The structured questions are all one part.
♦ Each structured question requires either a restricted or extended response.
Question 2: Total Marks 25
♦ This question examines the content of the ‘Developmental Theory in Early Education and Childcare’ Unit.
♦ It will examine either one or two developmental theories related to one aspect of development and candidates should relate across the age range birth – 12 years.
♦ It contains 2 – 4 structured questions and one extended response question.
♦ The structured questions have a possible mark range of 2 – 8 and are all one part.
♦ The extended response question will be in 1 or 2 parts and will be in the mark range 10 – 16.
♦ The question will examine at least one method of assessing Child Development.

Question 3: Total Marks 25
♦ This section examines the content of the ‘Holistic Approaches to Child Health’ Unit.
♦ It contains 3-5 questions based on a case study or short scenario.
♦ The structured questions have a possible mark range of 2-8.
♦ The structured questions are all one part.
♦ Each structured question requires either a restricted or extended response.

Question 4: Total Marks 25
♦ This section examines the content of any two of the mandatory Units in an integrated way.
♦ It contains 2-5 questions based on a short naturalistic observation of children or short scenario from within one of the age groups mentioned in Question 1.
♦ The structured questions have a possible mark range of 2-8.
♦ The structured questions may have more than one part.
♦ Each structured question requires either a restricted or extended response although one question should require an extended response.

There is no choice of questions in the Question paper. Where a Case Study is used for Question 1, a shorter scenario of no more that 5 sentences should be used for Question 2 and vice versa.

The Added Value of the Course
Achieving success in the Course requires some additional skills and abilities over and above those involved in passing individual Units. These are detailed in the Assessment section of the Course Arrangements Document and provide added value by placing additional demands on candidates by testing their ability to:
♦ integrate knowledge and skills across the component Units
♦ retain knowledge and skill levels over a longer period of time
♦ apply knowledge and skills in more challenging ways, for example, in less familiar contexts

When selecting questions, the points above should be kept in mind. All sections of the Question Paper provide opportunities to address these points. Particular attention should be paid to the balance between knowledge and understanding and analysis and evaluation. Table 1 summarises the balance in both Unit and Course assessment.

Table 1
<table>
<thead>
<tr>
<th>Type of Assessment</th>
<th>Knowledge and Understanding</th>
<th>Application, Analysis and Evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unit Assessment</td>
<td>Approx. 60% of the marks available</td>
<td>Approx. 40% of the marks available</td>
</tr>
<tr>
<td>Course Assessment</td>
<td>Approx. 50% of the marks available</td>
<td>Approx. 50% of the marks available</td>
</tr>
</tbody>
</table>
Part 2

This part of the Course Assessment Specification provides guidance on how all components contribute to the Course Award. It also indicates how to use the assessment information gathered from these components to estimate candidate performance.

The Course Assessment is based on two Question Papers with two questions in each. The mark range, indicated on Table 2, for questions 1, 2 and 3 reflects the equal weighting given to each Unit which makes up the Course. The mark range of Section 4 indicates the importance of the holistic nature of the Unit content.

<table>
<thead>
<tr>
<th>Question</th>
<th>Mark Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Question 1</td>
<td>25</td>
</tr>
<tr>
<td>Question 2</td>
<td>25</td>
</tr>
<tr>
<td>Question 3</td>
<td>25</td>
</tr>
<tr>
<td>Question 4</td>
<td>25</td>
</tr>
<tr>
<td>Total Marks for paper</td>
<td>100</td>
</tr>
</tbody>
</table>

Course awards are based on the candidate’s total marks; there is no requirement that they pass both Question Papers.

In the Early Education and Childcare (Higher) Course cut-off scores are set at approximately 70% for grade A and 50% for grade C with grade B falling midway at between 60% and 69%. Table 3 gives an indication of appropriate cut-off scores

<table>
<thead>
<tr>
<th>Grade</th>
<th>Band</th>
<th>Mark range</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>1</td>
<td>86-100</td>
</tr>
<tr>
<td>A</td>
<td>2</td>
<td>70-85</td>
</tr>
<tr>
<td>B</td>
<td>3</td>
<td>65-69</td>
</tr>
<tr>
<td>B</td>
<td>4</td>
<td>60-64</td>
</tr>
<tr>
<td>C</td>
<td>5</td>
<td>55-59</td>
</tr>
<tr>
<td>C</td>
<td>6</td>
<td>50-54</td>
</tr>
<tr>
<td>D</td>
<td>7</td>
<td>45-49</td>
</tr>
<tr>
<td>No Award</td>
<td>8</td>
<td>40-44</td>
</tr>
<tr>
<td>No Award</td>
<td>9</td>
<td>Less than 40</td>
</tr>
</tbody>
</table>

These cut-off scores may be lowered if the Question Paper component turns out to be more demanding, or raised if the Question Paper is less demanding than intended.

In estimating candidate grades:
♦ Centres should apply the assessment criteria with the range of marks available for both Question Papers.
♦ The total of the marks gained over both Question Papers should then provide the estimate grade.

Worked example
♦ In a Centre’s own prelim, a candidate scores 62/100.
♦ The Centre’s view is that their prelim is slightly less demanding than SQA examination.
♦ Using the mark range, a realistic estimate may be band 5 rather than band 4.
Answer all questions.
Question 1

(a) Describe what is meant by cognitive development in children. 3

(b) Describe three cognitive skills you would find in children in one of the following age ranges: 0 – 3 years or 8 – 12 years. 6

Read the following scenario and answer the questions which follow.

In a recent court case a mother and father were imprisoned for willful neglect of their 3½ year old child. The parents’ home contained expensive furniture and the latest television, DVD and Video equipment. The child was alone in a cot in another room, inadequately clothed, malnourished, in urine-soaked bedding and an unchanged faeces-caked nappy. He was withdrawn and unresponsive to the adults who took him into care.

(c) Explain how the parenting style in the scenario above might influence the child’s emotional, personal and social development. 4

(d) Evaluate the short and long-term impact that the home conditions above, may have on the emotional, personal and social development of the child. 8

(e) Explain how these conditions might also affect the linguistic development of the child in the scenario above. 4

(25)

Question 2

(a) Explain the effectiveness of using longitudinal studies for studying child development: birth – 12 years. 4

(b) Explain two significant theories of development in children in terms of research methods and criticisms. 16

(c) Analyse the effectiveness of implementing one of the theories explained in (b) on current early education and childcare practice. 5

(25)
Early Education and Childcare  
Higher  
Specimen Question Paper  
For use in and after 2005/6  
Paper II  

Answer all questions.
Question 3

Read the following case study and answer the questions below:

Jos is 11 years old and lives with his parents, 6-year-old twin sisters, Rebecca and Rachel and six month old baby brother Reuben. They all live in a two-bedroom flat on the seventh floor of a block of flats on a housing estate in a large city. The flats are damp and expensive to heat. The estate has busy main roads on all sides with heavy goods vehicles passing regularly and there have been several road accidents involving young children. There is concern about air pollution on the estate and Jos has asthma. His sisters cannot play outside unless he or one of their parents is with them. Jos’s father has recently been made redundant and now suffers from depression sitting for long periods watching daytime TV, rarely communicating with the children.

Jos’s parents used to share their children’s care but now Jos tries to take some of his father’s responsibilities. The children’s mother takes the main responsibility for their care and is finding it increasingly more difficult to ensure their needs are met. However, she still manages the bedtime routine for the three younger children with Jos’s help when they have a daily bath followed by a story session. Jos’s mother attended the local Child Health Clinic regularly when he and his sisters were babies. Recently she has missed developmental checks for Reuben and asthma clinic appointments for Jos. Jos’s parents always encouraged their children to explore and investigate for themselves and to talk about all they had done and seen, encouraging their communication skills. Their mother now finds she has less energy to respond.

The family income is low and Jos’s mother shops carefully to provide a healthy and varied diet for her family. She tries to follow national guidelines on healthy eating as far as the family budget and local provision will allow. The local shops have a limited range of fresh produce and prices are high.

The flat is small and restricting. Occasionally Jos’s mother takes the children to the local play park where there are swings, chutes and climbing frames but they must cross two busy roads to get there. At present the three older children share a bedroom which is only just big enough for three beds. Reuben sleeps in his parents’ bedroom. Jos’s parents are on a list for a move to a larger flat or even a house.

Jos’s mother takes Reuben to parent and baby group three mornings a week. Jos and his sisters attend the local primary school and Jos is looking forward to starting secondary school at the beginning of the next academic year.

(a) With reference to one relevant theorist, explain Jos’ and Reuben’s basic health needs.

(b) Explain three environmental factors that may affect the health of the children.

(c) Describe two positive and two negative socio-economic factors that may affect the health of Jos and his siblings.

(d) Evaluate the impact of two social trends on the health of Jos and his siblings.
Marit Borg sits on a sofa breastfeeding Britt (7 months) making eye contact and vocalising softly. Her two sons sit either side of her – Stefan, aged 9, who is watching a nature programme on TV and Sven, aged 4, who is looking at a picture book. Marit interacts with Sven while she is feeding Britt and listens to him talking about the pictures in his book, responding and sometimes asking a question.

The door opens and the children’s father comes home from work. Sven runs to meet his father who swings him into the air and gives him a big hug and kiss. They enter the room and Sven says “Look what I did at nursery today Dad” and shows him the picture Marit has put up on the wall, which his father admires.

The children’s father sits beside Stefan with Sven on his lap and ruffles Stefan’s hair. Stefan looks up and says “Hi Dad” and returns to watching his TV programme. The children’s parents chat to each other quietly. Stefan’s TV programme finishes and the children’s father asks the two boys to help him lay the table for the family’s evening meal. Stefan and Sven go with their father.

(a) Describe one aspect of development and give four examples you would expect Britt to have attained.

(b) Relate one theory of development to the family’s parenting style.

(c) Explain how the theory chosen in (b) might impact on the Borg children’s development.

(d) Analyse the possible impact on Stefan’s cognitive development of watching TV.

(25)
Early Education and Childcare Higher
Specimen Marking Instructions
For use in and after 2005/6
Question 1

(a) **Describe what is meant by cognitive development in children.**  
3 marks K&U

Cognitive development is the “acquisition, processing, organisation and use of knowledge – in other words, all those abilities associated with thinking and knowing”. (Birch 1997)

(b) **Describe three cognitive skills you would find in children in one of the following age ranges: 0 – 3 years or 8 – 12 years.**  
6 marks K&U

Any reasonable answer relating to recognition, memory, perception, knowledge, imagination, etc.

For the younger age group – recognising main carer, feeding, etc., routines, language, anticipation in action rhymes, looking for hidden objects, toys requiring problem solving, names, colours, etc., etc., (the list could be endless).

For the older age group – more complex concepts would be expected. The ability to read, write and solve mathematical problems, understand simple concepts of morality, reasoning, negotiation, etc., etc.

(c) **Explain how the parenting style in the scenario above might influence the child’s emotional, personal and social development.**  
1 mark K&U  
3 marks A&E

Up to 1 mark for identifying the parenting style as laissez-faire/permisissive (or possibly authoritative/autocratic?)

Up to 3 marks for a description of the importance of bonding and attachment in infancy and that the lack of care might produce a child who would find it difficult to make attachments outside of the home. It could equally, produce a child who was very demanding of adult attention.

(d) **Evaluate the short and long term impact that the home conditions above, may have on the emotional, personal and social development of the child in the scenario above.**  
8 marks A&E

Up to 4 marks for a clear evaluation of how the child might be affected in the short-term – problems with attention-seeking behaviour, lack of self-esteem and self-confidence, reluctance to socialise, aggressive or passive, warm or cold, etc.

Up to 4 marks for a clear evaluation of long-term effects including under-achievement, problems with authority, social exclusion, etc.
(e) Explain how these conditions might also affect the linguistic development of the child in the scenario above.

2 marks K&U
2 marks A&E

Up to 2 marks for an explanation of the importance of adults in the development of language; that the child might not have been in a language rich environment where early communication would be encouraged and lead to the development of language.

Up to 2 marks for the effects on the child – limited vocabulary, lack of exposure to books, rhymes, songs, games, etc. leading to possible delay.

Question 2

(a) Explain the effectiveness of using longitudinal studies for studying child development: birth – 12 years.

2 marks K&U
2 marks A&E

Up to 2 marks for demonstrating knowledge and understanding of the use of longitudinal studies such as:

- ongoing observation and assessment of children
- takes place over a long timescale of months or years
- studies children at intervals during the timescale of the study
- follows individual children or groups at different stages in their lives

Up to 2 marks for an explanation of the effectiveness of longitudinal studies which could include:

- useful for seeing the effects of age and/or changing environments on individuals and groups
- useful for seeing changes in development and behaviour in children
- can be used to record children’s developmental progress
- ensures observation and assessment are ongoing
- difficult to make comparisons between children as individuals will have their own set of experiences
- can be time consuming because of the timescale involved
- can provide information for further research
(b) Explain two significant theories of development in children in terms of research methods and criticisms.

Two relevant and appropriate theories should be clearly and accurately described, including the most significant concepts/stages and an explanation of their research methods and criticisms, from theorists such as:

- **Bowlby** – primary attachment, separation anxiety, etc.
- **Rutter** – successful later attachments, effects of conflict in the home
- **Chomsky** – language development being innate and genetically pre-programmed and an explanation of the concept of Language Acquisition Device (LAD)
- **Brown** – telegraphic speech, five stages of sentence production
- **Fischer** – nature/nurture, optimal levels
- **Piaget** – sensori-motor, pre-operational, concrete operational, formal operational/schema(ta), accommodation, assimilation, etc.

Other theorists who are relevant but are not covered in the mandatory content of the course are:

- **Bruner** – enactive, iconic and symbolic modes of representation/scaffolding, etc.
- **Vygotsky** – importance of language and culture, social settings, zone of proximal development, etc.
- **Erikson** – stages of psychosocial development: trust-v-mistrust, autonomy-v-shame and doubt, initiative-v-guilt, industry-v-inferiority, etc.
- **Bandura** – social learning, role models, etc.
- **Shaeffer and Emmerson** – multiple attachments, etc.
- **Ainsworth** – types of attachment: Type A – insecure (anxious/avoidant), Type B – secure, Type C – insecure (ambivalent).
- **Donaldson** – accurate definitions of “embedded” and “disembedded” thought giving examples of how Donaldson’s theory relates to children’s thinking and their ability to “decentre”.  
- **Skinner** – theory would involve an accurate definition of operant conditioning and an explanation of the use of reinforcement to encourage the development of language.
- **Trevarthen** – theory would include reference to the need for social interaction between children and adults in the development of language and the need to respond to individual differences in children. Trevarthen emphasises the need to listen to babies and children and give them time to respond to language overtures.

**Or any other relevant theorist.**

Among the researchers who have criticised these theorists are:

**Cognitive development**

Bower’s research on “object permanence” in infants. Piaget claimed that young babies had no concept of object permanence. Bower’s experiments with infants found that they showed surprise when an object they had been shown seemed to disappear.
Martin Hughes developed an experiment to test Piaget’s findings in his “three mountains” task that children were egocentric. Hughes found that children were capable of seeing things from another’s viewpoint if the task was made meaningful to them.

McGarrigle and Donaldson studied conservation in children. Their experiment showed that children were able to conserve number if they could establish a reason for changes. Piaget claimed that children could not conserve number when two rows of counters, each with the same number, were changed so that one row became much longer than the other. Children said the longer row had more counters. McGarrigle and Donaldson introduced “naughty teddy” to change the rows. The children had no difficulty in conserving number in this situation.

**Linguistic development**

Bruner’s development of Chomsky’s LAD theory to include Language Acquisition Support System (LASS). Bruner suggested that although children seemed to possess an innate ability to learn language, the role of relationships with adults is extremely important. It is not enough to bathe children in language, they also need appropriate interaction.

Skinner’s theory is too simplistic. Although imitation and reinforcement play a part in the development of language, children also create their own speech forms and make errors which they are unlikely to have heard.

**Social development**

Dunn’s studies of children’s relationships with their parents and siblings found that children learn from their own social interactions with others. They recognise the impact of their input. Observations of children’s play have indicated that they learn social and cultural norms from observing the society in which they live. When they are involved in role play, they explore social rules. Barnes suggested that role play encourages the development of inter-personal skills.

Dowling has suggested that the behaviourist theory of Skinner does not have long-term effects and does not help children to develop self-regulation. It is better to encourage children to develop “intrinsic motivation” to follow a course of action because they recognise the benefits.
(c) Analyse the effectiveness of implementing one of the theories explained in (b) on current early education and childcare practice. 5 marks A&E

Up to 5 marks for a balanced evaluation which could include for example:

John Bowlby’s theory of emotional development:

- Parents benefit from the opportunity to develop relationships and share their unique knowledge of their children with those involved in their care
- Parents and children benefit from sharing knowledge of the setting and its activities and routines which contributes to their ongoing relationships
- Parents benefit from being considered an equal partner in the care and education of their children which gives them confidence in staff in the setting
- Parents may feel anxious about their child developing bonds with others and feel the bond developed with a key worker may become stronger than theirs
- A child’s key worker may develop a strong bond with the child which has a negative effect on the key worker’s relationship with the parents
- Children benefit from establishing bonds with key workers and other setting staff encouraging the development of multiple bonds and trust in others
- Children benefit from learning about the setting, activities and routines in the company of their parents giving them confidence to investigate and explore
- Children benefit from the knowledge their key workers have of their family backgrounds and individual characteristics giving a sense of identity
- Children benefit from being allowed to settle in to settings in their own time and at their own pace providing for the development of self-esteem and self-confidence
- Individual children may need a longer settling-in time than their parents can provide which may have a negative effect on their emotional development
- Long term benefits for children include the development of emotional skills that allow them to establish positive relationships with others as they grow and mature

Roger Brown’s theory of linguistic development:

- Children encouraged to develop language by hearing speech from adults
- Children given language appropriate to their age and stage of linguistic development to encourage repetition
- Some adults may not provide appropriate language to assist linguistic development in children
- Children encouraged to participate in conversations which promotes social development
- Children whose conversational overtures meet with no response may find difficulty in social interaction
- Children will possess self-esteem if their speech is subject to active listening
- Children will develop self-confidence in using language when their efforts are not criticised
- Children will develop correct grammatical forms when they hear their own efforts repeated correctly
- Children whose linguistic efforts are continually corrected and criticised will lack confidence in communication skills
Jean Piaget’s theory of cognitive development

– Early education and childcare workers who are aware of Piaget’s theory will be encouraged to respond to individual children’s stage of cognitive development and provide a stimulating and enriched environment
– An understanding of schemata as patterns of behaviour will assist early education and childcare workers to recognise the learning processes of individual children and provide a range of meaningful activities for them
– The stages of sensory motor stage, pre-operational stage, concrete operational stage and formal operational stage are useful guides to what to expect of children at different ages and stages
– Identifying what level a child is operating at should enable the key worker to encourage cognitive development to the full.
– Piaget’s stages are rather inflexible as children develop at different rates. Some children achieve skills at an earlier age than Piaget identified
– Children are more cognitively skilled than Piaget recognised. For example babies as young as 4 months appear to have a concept of object permanence and young children are capable of conservation if given a meaningful context
– Cognitive development occurs as a result of active exploration and discovery of the world by children and they will benefit from a variety of hands on experience and active exploration
– Piaget did not acknowledge the role of the adult in children’s cognitive development which is important in supporting and promoting a child’s learning and developmental progress

Question 3

(a) With reference to one relevant theorist, explain Jos’ and Reuben’s basic health needs.

2 marks K&U
4 marks K&U

Up to 2 marks for a description of the theory of a relevant theorist such as:
Maslow – summary of theory covering:

– hierarchy of needs – relevant to all people, not proposed just for children
– some needs take precedence over other needs
– 5 levels of need – physical, safety, social, self-esteem, creativity
– each level must be met before progressing to the next level
– difficult to reach full potential unless the lower level needs have been met.
Kellmer Pringle – summary of theory covering:
− all needs are interrelated and interdependent – theory developed specifically for child development
− for children to develop their full potential all needs must be met – no hierarchical sequence
− concentrates on psycho-social needs – four basic needs which require to be met throughout life: love and security, new experiences, praise and recognition, responsibility
− early experiences and environment greatly influence later development.

Up to 4 marks for demonstrating knowledge and understanding of the needs of the two boys.

Maslow’s theory used to explain the basic health needs of Jos and Reuben

Basic physical health needs for food, shelter, warmth and clothing are being met for Jos and Reuben. Safety needs may not be being met for Jos due to his environment with busy roads and air pollution. He already has asthma and his further safety need for monitoring of his condition has not been met. Reuben’s safety needs are not being met as he has not been taken for regular checks on his growth and developmental progress. As these needs have not been met in full, the social needs, self-esteem needs and creativity needs of the brothers may, in consequence, not be met.

However some higher level health needs are being met. Both Jos and Reuben have their needs for belonging met especially Reuben as his bedtime routine continues. Jos’s feeling of belonging is strong as he is trying to take on some of the role of his father in the care of his younger siblings. However, he may lack self-esteem as a result of his father’s withdrawal from family life. According to Maslow it will be unlikely for self-esteem and creativity needs to be met if social need for belonging and being valued is not fully met. Jos may have friends at school and therefore his social needs may be being met and he may be able to move on to meet his self-esteem and creativity needs. His asthma will require regular checks to allow him to progress. Reuben perhaps needs to have his physical need for regular weight checks and for immunisation against childhood diseases met in order for him to meet his full potential. As the youngest in a family under stress he may not have his social or full belonging needs met.

Kellmer Pringle's theory used to explain the basic health needs of Jos and Reuben

Kellmer Pringle stressed the importance of the inter-relationship between children’s physical, emotional, intellectual and social needs. Kellmer Pringle felt that early experiences and environment could greatly influence later development and needs. It is likely that the need for love and security although met in many ways by being together as a family unit may not have been fully met since the father’s redundancy. The children may have feelings of insecurity and anxiety. These experiences may impact on the children's health for a long time to come. It could be argued that the need for new experiences has been met at school for Jos.
Jos and Reuben need praise and recognition – with loving parents they should receive this, but their father has now withdrawn from interaction with them. However, the teachers that Jos comes into contact with can help meet this health need. Jos has accepted responsibility for helping his mother in the care of his siblings but this may be more than he can manage.

It could be that Reuben’s developmental progress may be delayed because of lack of sufficient praise and recognition to encourage him due to his mother’s situation. He may also not feel secure in the love and affection of his parents due to the difficult circumstances the family have been living in. It is possible that Reuben should have assessment of his developmental stage.

(b) Explain three environmental factors that may affect the health of the children.

Up to 2 marks for each environmental factor clearly explained which may include:

**Housing**
- the over-crowded flat causes lack of sleep and no privacy for family members with negative effect on family’s emotional health
- housing damp and expensive to heat may mean the home is cold which could lead to the family being more susceptible to infection
- all four children may benefit emotionally from living a family life in their own home
- a damp and cold environment may exacerbate Jo’s asthma
- density of housing – over populated areas compared to isolated areas – impact on emotional and social health.

**Pollution**
- noise pollution from traffic can cause emotional distress, may stop children from sleeping.
- air pollution affects the family’s general health and well being
- traffic pollution can affect the air quality – cause allergic reactions such as some types of asthma.

**Accident prevention**
- the roads are not safe and there have already been road accidents involving young children
- good accident prevention campaigns and awareness – decrease the risk of accidents
- poorer quality housing and furnishing and busy main roads more likely to lead to accidents
- heavy traffic threatens the physical safety of the children in the family and restricts their freedom to play outdoors
- young children at risk from wide range of accidents on the roads and playing outside
• balance for parents to assess the risk of activities – children need new and varied experiences to develop their full health and well-being – not desirable to protect children so much that they are prevented from developing healthily.

(c) Describe two positive and two negative socio-economic factors that may affect the health of Jos and his siblings.

2 marks K&U
2 marks K&U
2 marks K&U
2 marks K&U

Up to 2 marks each for two positive and two negative socio-economic factors clearly explained which may include:

– being part of a two-parent family may provide emotional security for the children and contribute to their social health by providing positive role models
– access to mother and baby group and primary school may contribute to the cognitive, emotional and social health of the children
– housing for the family may positively affect the health of the children
– positive parenting, experienced by the children until recently, may contribute to the emotional health of the children encouraging the development of self-esteem and self-confidence
– parental commitment to their children’s development and learning may affect the children’s cognitive health as they are encouraged to learn from their experiences

• the father’s unemployment may negatively affect the emotional health of the children as it may create family stress
• inadequate housing may negatively affect the children’s physical health, limiting opportunities for exercise and possibly disturbing their sleep patterns
• poverty may negatively affect the children’s physical health as they may have inadequate nutrition, warmth and clothing
• father’s depression may negatively affect the children’s emotional health reducing their self-esteem and self-confidence
• difficulty in accessing outdoor play may affect the children’s physical and emotional health

(d) Evaluate the impact of two social trends on the health of Jos and his siblings.

5 marks A&E

Up to 5 marks total for two balanced evaluations of two appropriate social trends such as:

Family stress –

• lower family income may lead to poorer diet and possible malnutrition
• less cognitive stimulation may lead to underachievement for Jo and his sisters at primary school, alienation, truancy or negative behaviour leading to exclusion. Long term effects could be low level of literacy and low achievement at secondary school. Sisters may repeat pattern
• health needs not met – Jos’s asthma not monitored may lead to deterioration and hospital admission, absence from school with falling behind peer group and developmental regression.
• Reuben’s developmental progress not checked resulting in possible deviations from the norm missed
• mother’s tiredness and stress may lead to children feeling less secure as family routines disappear

Question 4

(a) Describe one aspect of development and give 4 examples you would expect Britt to have attained.

3 marks K&U
4 marks K&U

Up to 3 marks for an accurate description of an aspect of development.
Up to 4 marks for four examples given of skills appropriately related to the age and stage of development of Britt at seven months old.

Physical development

Physical development and growth go together. Physical development includes the increase in size of the body as children grow and mature. It also includes increase in muscle strength and size and in ossification, lengthening and strengthening of bones. Physical development includes the gradual development of control of the body. As children grow and mature they develop physical skills such as bladder and bowel control and gross and fine motor skills. Gross motor skills are those developed by the large muscles that control the spine and neck, arms, hands, feet and legs. Fine motor skills relate to the development of the manipulative skills of the fingers and/or toes. The development of physical skills in children follows a sequence. Children will usually follow this sequence as they grow and develop but individual children will achieve specific skills at different ages.

At the age of 7 months Britt could be expected to have attained:
• head control
• sitting unsupported
• rolling over back to front
• reaching for object
• palmar grasp
• passing object hand to hand

Emotional, personal and social development

Emotional and personal development relates to how children cope with and express different feelings. This includes how children feel towards others, both positive and negative feelings, and the feelings they experience from others towards themselves. Children’s emotional development includes bonding and attachment, the establishment of trust in others, developing a concept of self and becoming self-confident and independent.
Social development describes how we interact with family members and others outside the family. It involves making friends, co-operating, sharing and learning group responsibility. It relates to our social interaction with others both verbal and non-verbal. Social development also relates to how children learn the rules and norms of the society and culture in which they live. This aspect of social development is often referred to as socialisation. Primary socialisation is learning to behave in the way our immediate family and friends behave. Secondary socialisation is learning the social rules outside our homes such as those that apply in school, in clubs and what we see on television and in newspapers.

The study of emotional, personal and social development involves looking at how children develop an awareness of themselves, how they feel about themselves and others, and how they interact in society.

At the age of 7 months Britt could be expected to have attained
- expression of feelings by crying, vocalising and smiling.
- close observation of her carers’ faces while being fed, changed, bathed and talked to.
- within her first two weeks imitation of facial expressions she sees.
- recognition of familiar voices such as her mother, father and siblings
- showing signs of being soothed when she hears familiar tones
- until she reached approximately 6 months old she would smile and coo at anyone who spent time interacting with her and make social overtures by smiling and vocalising
- from approximately 6 months old onwards, she is likely to develop wariness of strangers.

Cognitive development

Cognitive development concerns our ability to think, reason, understand and learn and includes memory and recall. Perceptual and sensory skills are part of our cognitive development. The development of the five senses, sight, hearing, taste, touch and smell contribute to our cognitive development and are linked to physical development such as development of binocular vision and fine motor skills. Cognitive development also includes understanding concepts such as time, size, shape and colour.

At the age of 7 months Britt could be expected to have attained
- recognition of familiar faces and objects
- recognition of familiar routines
- concept of object permanence
- putting all objects into mouth to explore their properties
- fear of strangers
- enjoying looking at books
Linguistic development

Linguistic development involves the development of language and communication skills and includes verbal and non-verbal communication. Children’s linguistic development relates to hearing and reproducing the speech of others. Also involved is turn-taking in conversation and the development of listening skills.

Children use language to reason and problem solve. Young children will talk to themselves as they attempt a task, giving a running commentary on their progress. As children become older, they are able to internalise their thoughts and reasoning processes.

At the age of 7 months Britt could be expected to have attained

- crying
- gurgling/early sounds
- tuneful babble
- gestures
- squealing with delight
- understanding familiar words

(b) Relate one theory of development to the family’s parenting style.

3 marks K&U
4 marks A&E

Up to 3 marks for demonstration of knowledge and understanding of a relevant theory such as

Bowlby’s theory of emotional development:
- theory of attachment, separation, grief and loss
- importance of primary bond between mother and baby
- need to form attachments is biological
- first 5 years of life most important for later personality development
- children without warm, continuous relationship with mother suffer from maternal deprivation
- partial deprivation is the result of the introduction of a mother substitute
- complete deprivation is the result of no attachment being formed
- age of child, length of separation and degree of deprivation have significant effects on future development

Brown’s theory of linguistic development:
- concentrates on the uses of language in explaining language acquisition
- adults should talk about real things that are happening so child can relate speech to events
- transcribed and analysed children's conversations – use short simple sentences when talking with children
- adults should repeat children’s words and sentences in their correct form for children to hear
- proposes 5 stages of language acquisition
Up to 4 marks for relating the chosen theory to the parents’ democratic/authoritative parenting style which could include:

− authoritative style of parenting (firm but reasoned control, encouragement, warmth and love) tends to result in children with the highest self-esteem and self-reliance

− children have developed strong bonds with both parents with positive effects on their future emotional and personality development

− in families where children are treated as responsible individuals, given responsibility and praise and set fairly strict and clear limits on their behaviour they are more likely to develop into individuals with high self-esteem and self-reliance.

− children encouraged to participate in conversations with their parents and present their ideas and opinions

− children will possess self-esteem if their speech is subject to active listening

− children will develop self-confidence in using language when their efforts are not criticised

(c) Explain how the theory chosen in (b) might impact on the Borg children’s development

8 marks A&E

Up to 8 marks for a relevant explanation of the impact of the chosen theory on the children’s development

The impact of Bowlby’s theory on the Borg children’s emotional, personal and social development includes the following:

• All three children have developed secure relationships with their parents which will encourage high self-esteem and self-confidence.

• Marit’s interaction with Britt and Sven will contribute to strengthening their attachment

• The children’s father’s demonstration of warmth and affection to both boys contributes to their developing self-esteem and a feeling of self-worth

• Involving the boys in the father’s household task will help to strengthen their bond with him

• The establishment of a secure relationship with both parents will have a positive effect on the long term emotional well-being of all three children

• The children have established secure relationships with their parents so will be able to establish trust in others

• The children have developed strong bonds with their parents which will contribute to their ability to develop positive emotional relationships with others as they grow and mature
The impact of Brown’s theory on the Borg children’s linguistic development includes the following:

- Early communication from birth, talking, singing, eye contact, reading stories is very important in the development of children's linguistic skills. Britt is able to watch her mother’s mouth movements during speech and begin to imitate them.
- Marit is encouraging Britt to hear the spoken word which precedes her ability to reproduce it
- Both parents listen and respond to the boys, conversing with them about the day’s events. Because the children are listened to they will gain confidence in using and developing their linguistic skills
- Involving the boys in household tasks encourages discussion of equipment needed and the food to be eaten which will extend their vocabularies
- The children’s father responds to Sven’s request to see his picture. Talking about real things that are happening allows Sven to relate speech to events
- The children are encouraged to develop language by hearing speech from their parents
- Marit encourages Sven to participate in conversation which promotes social development
- All three children will possess self-esteem as their communication is subject to active listening

(d) **Analyse the possible impact on Stefan’s cognitive development of watching TV**

3 marks A&E

**Up to 3 marks** for a short balanced analysis. Candidates should refer to the nature of the programme that Stefan was watching. The opportunity to watch TV programmes that are informative will encourage Stefan’s cognitive development by providing knowledge and understanding of the world around him. It may extend his knowledge of other cultures and countries. His concentration skills could also be encouraged. He may learn new words and expressions and extend his vocabulary.

Stefan may develop an interest in the subject of the nature programme encouraging him to investigate further. Watching TV could also encourage the development of Stefan’s imagination and creativity.