



Rewarding Learning

**General Certificate of Secondary Education
2025**

Home Economics: Child Development

Unit 2

The Development of the Child
(0–5 years)

[GCD21]

WEDNESDAY 11 JUNE, AFTERNOON

MARK SCHEME

General Marking Instructions

Introduction

The main purpose of the mark scheme is to ensure that examinations are marked accurately, consistently and fairly. The mark scheme provides examiners with an indication of the nature and range of candidates' responses likely to be worthy of credit. It also sets out the criteria which they should apply in allocating marks to candidates' responses.

Assessment objectives

Below are the assessment objectives for Home Economics: Child Development.

Candidates should be able to:

- AO1** Recall, select and communicate their knowledge and understanding of a range of contexts;
- AO2** Apply knowledge, understanding and skills in a variety of contexts and in planning and carrying out investigations and tasks; and
- AO3** Analyse and evaluate information, sources, and evidence; make reasoned judgements and present conclusions.

Quality of candidates' responses

In marking the examination papers, examiners should be looking for a quality of response reflecting the level of maturity that may reasonably be expected of a 16-year-old, the age at which the majority of candidates sit their GCSE examinations.

Flexibility in marking

Mark schemes are not intended to be totally prescriptive. No mark scheme can cover all the responses which candidates may produce. In the event of unanticipated answers, examiners are expected to use their professional judgement to assess the validity of answers. If an answer is particularly problematic, then examiners should seek the guidance of the Supervising Examiner.

Positive marking

Examiners are encouraged to be positive in their marking, giving appropriate credit for what candidates know, understand and can do rather than penalising candidates for errors or omissions. Examiners should make use of the whole of the available mark range for any particular question and be prepared to award full marks for a response which is as good as might reasonably be expected of a 16-year-old GCSE candidate.

Awarding zero marks

Marks should only be awarded for valid responses and no marks should be awarded for an answer which is completely incorrect or inappropriate and not worthy of credit.

Types of mark schemes

Mark schemes for tasks or questions which require candidates to respond in extended written form are marked on the basis of levels of response which take account of the quality of written communication.

Other questions which require only short answers are marked on a point for point basis with marks awarded for each valid piece of information provided.

Levels of response

In deciding which level of response to award, examiners should look for the “best fit” bearing in mind that weaknesses in one area may be compensated for by strength in another. In deciding which mark within a particular level to award to any response, examiners are expected to use their professional judgement.

The following guidance is provided to assist examiners:

- **Threshold performance:** Response which just merits inclusion in the level and should be awarded a mark at or near the bottom of the range.
- **Intermediate performance:** Response which clearly merits inclusion in the level and should be awarded a mark at or near the middle of the range.
- **High performance:** Response which fully satisfies the level description and should be awarded a mark at or near the top of the range.

Quality of written communication

Quality of written communication is taken into account in assessing candidates’ responses to all tasks and questions that require them to respond in extended written form. These tasks and questions are marked on the basis of levels of response. The description for each level of response includes reference to the quality of written communication.

For conciseness, quality of written communication is distinguished within levels of response as follows:

Level 1: Quality of written communication is basic.

Level 2: Quality of written communication is competent.

Level 3: Quality of written communication is highly competent.

In interpreting these level descriptions, examiners should refer to the more detailed guidance provided below:

Level 1 (Basic): The candidate makes only a limited selection and use of an appropriate form and style of writing. The organisation of material may lack clarity and coherence. There is little use of specialist vocabulary. Presentation, spelling, punctuation and grammar may be such that intended meaning is not clear.

Level 2 (Competent): The candidate makes a reasonable selection and use of an appropriate form and style of writing. Relevant material is organised with some clarity and coherence. There is some use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are sufficiently competent to make meaning evident.

Level 3 (Highly competent): The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is organised with a high degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of a high standard and ensure that meaning is clear.

1 Read the following and tick the box beside each correct answer.
Tick [✓] only **one** box for each.

If the candidate has selected multiple answers without scoring out then they are awarded [0]

(a) Night blindness is caused by a deficiency of:

D – Vitamin A [1]

(b) The health professional who visits the baby 10 days after birth is called:

C – Health visitor [1]

(c) A child suffering from coeliac disease should avoid foods rich in:

B – Gluten [1]

(d) Swelling of the glands around the jaw and neck is a common symptom of:

C – Mumps [1]

(e) Playing alone can be defined as:

A – Solitary play [1]

2 (a) Write down **three** gross motor skills.

- Pushing
- Climbing
- Catching
- Throwing a ball
- Crawling
- Walking
- Running
- Jumping
- Skipping
- Kicking
- Hopping
- Riding a bike/scooter
- Swimming
- Head control/lifting head
- Learning to sit
- Prone position
- Dancing
- Rolling over
- [0] for grasping, grabbing, touching, eating
- (3 × [1])

[3]

(b) Identify the types of play.

- (i) imaginative
- (ii) creative
- (2 × [1])

[2]

AVAILABLE
MARKS

5

(c) Accidents happen in the garden.
Write down **two** types of accidents and explain how each could be prevented.

Answers may address:

Type of accident ([1] mark)	Prevention (2 × [1])
Choking	<ul style="list-style-type: none"> • Check there are no small parts on outdoor toys or shrubs that child could choke on • Do not leave small objects sitting around in the garage or shed that they may eat, e.g. screws, bolts • Do not leave child unattended in the garden
Burns sun/ chemical	<ul style="list-style-type: none"> • Ensure barbecues/firepits are out of reach/extinguished fully <p>Sunburn</p> <ul style="list-style-type: none"> • apply sun cream • encourage child to sit in the shade between 12 – 3pm • wear a sun hat <p>Chemical burn</p> <ul style="list-style-type: none"> • ensure products, e.g. cleaning products, paint thinners, fertilisers are locked away/out of reach
Falls / trips	<ul style="list-style-type: none"> • Encourage them to use a hand rail when using steps in the garden • Encourage appropriate footwear for outdoor play, e.g. gripped soles • Ensure paths are not uneven that the child could trip on • Ensure ladders are stored securely • Wear helmet if playing on bikes • Safety nets around trampoline • Ground is level • Grass area to play • Lower swings with padding underneath • Designated area for children to play • Roll up hose pipe • Items/toys/gardening equipment tidied away • Supervise children
Poisoning	<ul style="list-style-type: none"> • Keep weedkiller, slug pellets, fertiliser, chemicals out of reach of children • Store cleaning products in the original containers/in a locked cupboard in the garage • Avoid having poisonous plants in the garden
Cuts/bruises	<ul style="list-style-type: none"> • Ensure outdoor garden equipment is tidied away to prevent cuts from rakes/sharp tools • Check play equipment has no sharp edges/exposed screws • Prune shrubs/avoid having thorny bushes and hedges • Ensure broken glasses are tidied up from the play area
Drowning	<ul style="list-style-type: none"> • Garden ponds covered securely • Paddling pools emptied/supervised when using • Supervise children

All other valid answers will be credited.

[6]

11

AVAILABLE
MARKS

3 (a) Write down **two** ways to relieve the discomfort of teething.

Answers may address **two** of the following:

- Rub gums with soothing gel
- Give hard/cold food to bite on
- Give teething ring to bite on
- Comfort or play to distract
- Give baby paracetamol/calpol

[0] for numbing gel

[2]

(b) Lucy is two years old and is refusing to eat at mealtimes.
Discuss how Lucy's parents could encourage her to eat.

Answer may include **two** of the following:

- Give Lucy something she enjoys eating to make mealtimes more enjoyable
- Praise, reward with stickers if she eats her meal as then she will be more likely to do it again
- Give Lucy enough time to eat, do not rush her as this could discourage her from trying new foods and flavours, offer a variety of foods
- Serve small portions as then Lucy could ask for more/feel a sense of accomplishment
- Speak positively to Lucy about food and mealtimes so she adopts a positive attitude towards food
- Use attractive dishes and cutlery to make mealtimes more enjoyable/ play a game of finding the character on the plate/distraction/game
- Set a good example, eat together at table/not eating alone
- Present colourful food attractively, make it into a face/picture/theme so it appears more appealing to Lucy
- Involve Lucy in choosing the foods/encourage Lucy to help prepare meals
- Avoid high fat/sugar/grazing/snacks between meals as Lucy will want these foods over her proper meal times

(2 × [2])

All other valid answers will be credited.

[4]

- (c) The following foods are often given to children as snacks.
Discuss the nutritional benefits of each.

AVAILABLE
MARKS

Answers may address:

<p>Strawberries</p>	<p>Vitamin C</p> <ul style="list-style-type: none"> • aids the absorption of iron to form healthy red blood cells/ prevent anaemia • heals wounds/required for the formation of collagen/healthy skin • acts as antioxidant • protects cells • helps immune system/promotes immunity • prevents infections/colds and flu <p>Vitamin A</p> <ul style="list-style-type: none"> • immune system • cell growth • healthy skin • vision/retina/night vision <p>Fibre</p> <ul style="list-style-type: none"> • aids digestion and prevents constipation • provides a feeling of fullness and prevents snacking
<p>Multigrain hoops</p>	<p>Carbohydrates</p> <ul style="list-style-type: none"> • provides energy needed for active lifestyles • higher satiety value so will keep the child feeling fuller/ prevents child snacking • provides dietary fibre/NSP/prevents constipation <p>Calcium (if referred to milk)</p> <ul style="list-style-type: none"> • helps build strong bones and teeth • promotes development of bones and teeth • blood clotting • regulates muscle contractions • prevents rickets along with Vitamin D <p>Fibre</p> <ul style="list-style-type: none"> • aids digestion and prevents constipation • provides a feeling of fullness and prevents snacking <p>Protein (if referred to milk)</p> <ul style="list-style-type: none"> • growth • repairs damaged cells <p>Iron</p> <ul style="list-style-type: none"> • red blood cell formation • prevents anaemia

Cheese	<p>Protein</p> <ul style="list-style-type: none"> • supports growth • repairs damaged tissue • maintains muscles and bones • maintains blood and body organs • secondary source of energy <p>Fat</p> <ul style="list-style-type: none"> • warmth/insulation • concentrated source of energy • protects vital organs <p>Vitamin D</p> <ul style="list-style-type: none"> • aids the absorption of calcium <p>Calcium</p> <ul style="list-style-type: none"> • helps build teeth/strong teeth • promotes the development of bones/strong bones • supports blood clotting • regulates muscle contractions/heartbeat • prevents rickets (along with Vitamin D)
--------	--

AVAILABLE MARKS
15

[0] = 5 a day, water, sugar
 [1] mark for correct nutrient
 [2] marks for discussion of nutrient
 All other valid answers will be credited.

[9]

4 (a) Discuss **three** ways parents/carers can prevent obesity in children.

AVAILABLE
MARKS

Answers may discuss **three** of the following points:

- Read nutritional information on labels to assess fat and sugar content of foods
- Avoid buying sugary snacks and drinks/saying no to unhealthy snacks/ set a good example/child will copy
- Encourage eating three meals a day/avoid snacks between meals
- Be a positive role model, eating healthy foods, fruits and vegetables
- Encourage physical activity, do activities together/involve in sport/ improve overall health/whole family/child not singled out
- Reduce 'screen time' in front of television, computers or electronic devices
- Use a smaller plate, reduce amount of foods served/small portion size/ right amount for age
- Encourage children to eat only when hungry and to eat slowly
- Encourage the drinking of water rather than drinks with added sugar
- 5,5,3,2/Use of Eatwell Guide to plan and prepare meals/government guidelines to plan and prepare meals
- Choose lower fat/low sugar options
- Grill/bake foods instead of frying
- Prepare home cooked meals/healthy ingredients/less processed foods
- Provide filling meals, e.g. higher in fibre/carbohydrates less likely to snack
- Eat 5 a day as substitute for biscuits/crisps
- Do not use sweet treats as a reward – excess sugar contributes to weight gain

(3 × [2])

All other valid answers will be credited.

[6]

(b) Describe how a GP supports a mother and child.

One explained point may address:

- Diagnose illness and prescribe suitable medication and example
- Discuss immunisation explaining the side effects to be aware of
- Refer a child to a specialist if milestones are not being met, e.g. speech and language therapist or to diagnose a condition, e.g. ASD
- Carry out post-natal check and advise on support or appropriate medication for mother, e.g. depression, contraception, breastfeeding

(1 × [2])

All other valid answers will be credited.

[2]

8

5 (a) Four-year-old Amy is making a birthday card.

Discuss **two** ways this activity will promote her fine motor skills.

Answers may address **two** of the following points:

- Amy can hold crayons with more control so can colour in her images neatly/within the lines
- Amy can use scissors to cut around shapes for her card. The cutting out may not be accurate but she can use hand eye co-ordination
- Amy can use a tripod grip when holding a pencil and demonstrate more control/may be able to form some letters in her name
- Amy can use a gluestick to secure materials to the card
- Amy may use her pincer grasp to peel stickers off/pick up materials to use on her card
- Amy may use her fingers to point to the materials she wishes to use

(2 × [2])

All other valid answers will be credited.

[4]

(b) Discuss **two** ways parents and carers can create a comfortable environment when caring for Amy when she is sick.

Answers may address **two** of the following points:

- Clean bed sheets/PJs/shower/wash to help Amy feel cleaner and fresher
- Make sure bed or sofa is comfortable and warm to ensure Amy can sleep and relax/use soft fleece, blankets and pillow
- Stay with/comfort/hug Amy to relax her, she may be distressed and in pain/frightened/feel lonely/feel safer
- Clean room to prevent infection/may make Amy's illness worse
- Keep room cool/keep the room airy/at comfortable temperature/don't let Amy overheat
- Provide her with books, puzzles, easy to use in bed toys to keep her occupied and take her mind off her illness
- Make Amy's favourite films/tv programmes available – no loud or scary films/keep child quiet and well rested
- Allow only a few visitors/Amy needs to have rest and not get over-tired, may slow down recovery
- Read to Amy/she will enjoy the attention and feel relaxed, can take her mind off feeling sick
- Give medication regularly/follow doctor's instructions on medication to ensure she recovers quickly
- Give Amy plenty to drink/give small meals and snacks – no strong flavoured foods/she may not eat much, do not force her to eat
- Cool down with cold cloth/ice lollies to reduce temperature

(2 × [2])

All other valid answers will be credited.

[4]

(c) Discuss **two** advantages of a relative as a childminding option for Amy.

AVAILABLE
MARKS

Answers may address **two** of a relative as a childminding option.

- Know Amy's likes and dislikes so able to prepare food and activities easily
- Parents will feel happier knowing Amy is being looked after by family member. Able to trust them/speak openly to them about their day
- Amy is able to be looked after in her own home, better for parents. Amy can play with her own toys
- May not charge so it is a more affordable option which helps to relieve financial pressure
- Easier to contact/may be more flexible with working hours and holidays which reduces stress for parents, come at short notice/stay late
- Will know how parents want Amy raised, will know their values and expectations of behaviour/discipline
- May do some housework for parents which can enable more quality time with Amy after work
- Able to take Amy to school and pass on concerns to her teacher on the parent's behalf
- Amy will feel more familiar/comfortable with her relative because she knows them/helps her settle
- Bond more with grandparents/develop a relationship by spending more time together

(2 × [2])

All other valid answers will be credited.

[4]

12

6 Discuss how a nurturing environment and passing on family traditions can influence a child's development.

AVAILABLE
MARKS

Discussion may include:

Nurturing environment

- The child should experience a caring, kind and sympathetic home environment, always being cherished and valued which will help to promote their self-esteem and confidence/loved/feel safe
- The environment should also provide boundaries and the child should experience discipline that is firm, consistent and fair/better behaviour
- A positive attitude should be shown towards the child's learning and preparation for preschool/school
- Parents should encourage their child's talents and skills to promote their confidence and ability/try new things
- Parents should support their child if they face any challenges, e.g. mental health, concerns, communication, illness so they are encouraged

Passing on family traditions

- Traditions help children to have a sense of belonging because everyone is sharing a task or activity, e.g. faith, hobby
- Traditions give security as they provide a routine that children can depend on year after year/gives purpose and identity
- Traditions help promote healthy relationships between the generations when they are enjoyed and anticipated by everyone and promote social development
- Children will remember the special experiences of family traditions more than toys and gifts which create special memories and opportunities/creates excitement
- Sharing skills and expertise to widen the child's experiences such as baking, woodwork, sport, knitting, musical

All other valid answers will be credited.

[0] Response not worthy of credit

Level 1 ([1]–[2])

Overall impression: Basic

- Shows limited knowledge and understanding.
- Identifies and comments on a few obvious points relevant to either a nurturing environment and passing on family traditions and their influence on a child’s development.
- A limited discussion of how a nurturing environment and passing on family traditions influence development.

Level 2 ([3]–[4])

Overall impression: Competent

- Shows good knowledge and understanding.
- Identifies and comments on some key points relevant to either a nurturing environment and passing on family traditions and their influence on a child’s development.
- A competent discussion of how a nurturing environment and passing on family traditions influence development.

Level 3 ([5]–[6])

Overall impression: Highly Competent

- Shows excellent knowledge and understanding.
- Identifies and comments on a range of key points relevant to both a nurturing environment and passing on family traditions and their influence on a child’s development.
- A highly competent discussion of how both a nurturing environment and passing on family traditions influence development.

(1 × [6])

All other valid answers will be credited.

[6]

6

- 7 Analyse the role of parents, carers and family members in promoting positive behaviour in children.

AVAILABLE
MARKS

Answers may address the following:

- **Let children know the rules**, explain simply in terms they understand why the rules are important, tell them your expectations – they then know what is expected and will then understand what to do and not do
- **Have realistic expectations**, don't expect too much, child needs to learn/ good manners, what is acceptable and may need to be reminded frequently
- **Establish routines**, e.g. for getting dressed, bedtime, to ensure child understands what to do and what is expected, less chance of unacceptable behaviour, routine will become normal behaviour and lessen risk of poor behaviour
- **Be a good role model**, show the child how to behave, children copy behaviour and will copy good behaviour and see it as the norm/use language and behaviour that parents/carers want to hear and see from them
- **Reward good behaviour**, focus on positive behaviour, this reinforces the behaviour you expect and will accept – use trip to park, extra play time as reward or a reward chart (award only once)
- **Praise child when they do as you ask**, e.g. they make a good behaviour choice/complete small tasks. Reward good behaviour with a smile or a hug – lets the child know you are pleased with them, children enjoy pleasing their parents and carers
- **Make time, spend time with child**, poor behaviour is often child seeking attention from parents and carers
- **Correct inappropriate, unacceptable behaviour when it happens**, e.g. use of inappropriate language, not sharing a toy, and tell child what would have been acceptable behaviour, child will understand what they did wrong and understand what to do next time
- **Keep child occupied**, e.g. play with them, bring friends round, take to nursery and on outings – some children misbehave because they are bored
- **Encourage friendships**, socialising with other children and adults, child will learn social skills and how to play and talk to others – they learn from other people and copy behaviour **or** – teach manners and example
- **Be consistent**, do not make idle threats, child needs consistency or they get confused about what is acceptable and then do not realise they are doing something unacceptable

All other valid answers will be credited

[0] Response not worthy of credit

Level 1 ([1]–[3])

Overall impression: Basic

- Shows limited knowledge and understanding.
- Limited range of points, little or no analysis on the role of parents, carers and family members in promoting positive behaviour in children.
- Quality of written communication is basic.

Level 2 ([4]–[6])

Overall impression: Competent

- Shows good knowledge and understanding.
- Identifies and comments on the role of parents, carers and family members in promoting positive behaviour in children.
- Competent range of analysed points.
- Quality of written communication is competent.

Level 3 ([7]–[9])

Overall impression: Highly Competent

- Shows excellent knowledge and understanding.
- Identifies and analyses the key points on the role of parents, carers and family members in promoting positive behaviour in children.
- Highly competent range of analysed points.
- Quality of written communication is highly competent.

(1 × [9])

[9]

9

AVAILABLE
MARKS

8 Discuss how communication difficulties can be overcome through:

- medical intervention and support from health professionals
- provision of a stimulating environment.

Answers may address the following:

Medical Intervention and support from health professionals

- Once a problem is suspected a child should be seen by a GP who can then refer the child to a specialist
- Hearing Loss – technology has improved for people with hearing loss, providing lots of different options to help to enhance hearing. A referral by a General Practitioner (GP) to an audiology clinic will allow a child to be assessed for implantable hearing devices, e.g. a hearing aid. Help to amplify sound
- Usually if a child has glue ear no treatment will be given for 3 months to one year as this is a condition that can improve on its own. The GP will monitor this and if there is no improvement surgery will be recommended, e.g. vents/grommets which allow the fluid to drain away
- Lazy eye/squint – child may need to wear a patch to encourage the eye muscle to change position
- Cleft palate – will have surgery to rectify this situation
- Audiologist – will perform a series of tests to check hearing loss and suggest options to manage this
- Speech and language therapist – provides exercises and activities to promote speech if the child has a stammer. If they cannot communicate verbally, they will encourage the child to use alternative methods/identify other problems, e.g. autism/non verbal
- Teacher of the deaf – qualified teacher to teach deaf children and encourage their development
- Optometrist – prescribes glasses, helps to diagnose and treat eye conditions, e.g. squints, visual impairment
- Health visitor – conduct developmental screening and refer child to GP for further support
- GP – refers the child to specialists for further support, e.g. ENT consultant
- Classroom assistant – help to support child in school, e.g. modify resources to promote participation in lesson

The provision of a stimulating environment

- Quiet areas in which a child can feel relaxed so that they can look at a picture book or listen to a story
- A place where adults take time to talk to children about everyday activities and ask questions
- A place where story books and audio books can be valued and shared
- A safe and loving environment without fear where the child is listened to
- A place where a child is encouraged to play to develop skills and talents
- A place where children are encouraged to engage in conversation and develop language and pronunciation
- A place where children are encouraged to express their thoughts, ideas and feelings and talk about them, enhancing self-esteem and confidence
- Rhymes and songs are shared with children to promote speech and understanding of concepts and other cultures in a fun and interactive way/ sensory room
- A range of toys, books and games that encourage imaginative play and conversation. Appropriate to age and stage of development

All other valid answers will be credited.

[0] Response not worthy of credit

Level 1 ([1]–[3])

Overall impression: Basic

- Shows limited knowledge and understanding of medical intervention support from health professionals and a stimulating environment.
- Limited range of points, little or no explanation.
- Quality of written communication is basic.

Level 2 ([4]–[6])

Overall impression: Competent

- Shows good knowledge and understanding of medical intervention support from health professionals and a stimulating environment.
- Identifies and comments on the strategies used to overcome the barriers of communication.
- Competent range of explained points.
- Quality of written communication is competent.

Level 3 ([7]–[9])

Overall impression: Highly Competent

- Shows excellent knowledge and understanding of medical intervention support from health professionals and a stimulating environment.
- Identifies and comments on the key points relevant to overcoming communication difficulties.
- Highly competent range of well explained points.
- Quality of written communication is highly competent.

(1 × [9])

[9]

9

Total**75****AVAILABLE
MARKS**