



CHILD DEVELOPMENT

0637/01

Paper 1 Theory Paper

October/November 2018

MARK SCHEME

Maximum Mark: 100

Published

This mark scheme is published as an aid to teachers and candidates, to indicate the requirements of the examination. It shows the basis on which Examiners were instructed to award marks. It does not indicate the details of the discussions that took place at an Examiners' meeting before marking began, which would have considered the acceptability of alternative answers.

Mark schemes should be read in conjunction with the question paper and the Principal Examiner Report for Teachers.

Cambridge International will not enter into discussions about these mark schemes.

Cambridge International is publishing the mark schemes for the October/November 2018 series for most Cambridge IGCSE™, Cambridge International A and AS Level components and some Cambridge O Level components.

This document consists of **12** printed pages.

Generic Marking Principles

These general marking principles must be applied by all examiners when marking candidate answers. They should be applied alongside the specific content of the mark scheme or generic level descriptors for a question. Each question paper and mark scheme will also comply with these marking principles.

GENERIC MARKING PRINCIPLE 1:

Marks must be awarded in line with:

- the specific content of the mark scheme or the generic level descriptors for the question
- the specific skills defined in the mark scheme or in the generic level descriptors for the question
- the standard of response required by a candidate as exemplified by the standardisation scripts.

GENERIC MARKING PRINCIPLE 2:

Marks awarded are always **whole marks** (not half marks, or other fractions).

GENERIC MARKING PRINCIPLE 3:

Marks must be awarded **positively**:

- marks are awarded for correct/valid answers, as defined in the mark scheme. However, credit is given for valid answers which go beyond the scope of the syllabus and mark scheme, referring to your Team Leader as appropriate
- marks are awarded when candidates clearly demonstrate what they know and can do
- marks are not deducted for errors
- marks are not deducted for omissions
- answers should only be judged on the quality of spelling, punctuation and grammar when these features are specifically assessed by the question as indicated by the mark scheme. The meaning, however, should be unambiguous.

GENERIC MARKING PRINCIPLE 4:

Rules must be applied consistently e.g. in situations where candidates have not followed instructions or in the application of generic level descriptors.

GENERIC MARKING PRINCIPLE 5:

Marks should be awarded using the full range of marks defined in the mark scheme for the question (however; the use of the full mark range may be limited according to the quality of the candidate responses seen).

GENERIC MARKING PRINCIPLE 6:

Marks awarded are based solely on the requirements as defined in the mark scheme. Marks should not be awarded with grade thresholds or grade descriptors in mind.

Question	Answer	Marks										
1	Increase in size and mass (1) No mark for any deviation from the meaning of the response above, but differing wording might be awarded a mark.	1										
2	The learning of skills (1) No mark for any deviation from the meaning of the response above, but differing wording might be awarded a mark.	1										
3	Answers may vary from that stated, any reasonable correct response might be awarded a mark. Dress babies in light clothes, dress baby in a hat for shade in summer and warmth for winter, use sun shades on pushchairs and prams, keep bedrooms cool when babies sleep, keep babies warm when not mobile, check bath water not too hot/cold. One mark per response to a maximum of 4 marks.	4										
4	Answers may vary from that stated, any reasonable correct response might be awarded a mark. Disability, prematurity, hearing loss, abuse, long term hospitalisation. One mark per response to a maximum of 4 marks	4										
5	<table border="1" data-bbox="320 1081 1310 1615"> <thead> <tr> <th data-bbox="320 1081 667 1149">Emotion</th> <th data-bbox="667 1081 1310 1149">Possible cause</th> </tr> </thead> <tbody> <tr> <td data-bbox="320 1149 667 1249">Shyness</td> <td data-bbox="667 1149 1310 1249">Meeting new people, starting nursery, new unfamiliar places. (2)</td> </tr> <tr> <td data-bbox="320 1249 667 1384">Embarrassment</td> <td data-bbox="667 1249 1310 1384">Having accident while toilet training, getting something wrong, being centre of attention, getting told off. (2)</td> </tr> <tr> <td data-bbox="320 1384 667 1485">Jealousy</td> <td data-bbox="667 1384 1310 1485">New sibling, other child has something child wants, parent giving attention to another. (2)</td> </tr> <tr> <td data-bbox="320 1485 667 1615">Anger</td> <td data-bbox="667 1485 1310 1615">Dispute over toys, frustration unable to express through talking, leaving a play activity, wanting to do something different to parent/carer. (2)</td> </tr> </tbody> </table> <p data-bbox="316 1648 1305 1753"> Answers may vary from that stated, any reasonable correct response might be awarded a mark. One mark per response to a maximum of two marks per emotion. </p>	Emotion	Possible cause	Shyness	Meeting new people, starting nursery, new unfamiliar places. (2)	Embarrassment	Having accident while toilet training, getting something wrong, being centre of attention, getting told off. (2)	Jealousy	New sibling, other child has something child wants, parent giving attention to another. (2)	Anger	Dispute over toys, frustration unable to express through talking, leaving a play activity, wanting to do something different to parent/carer. (2)	8
Emotion	Possible cause											
Shyness	Meeting new people, starting nursery, new unfamiliar places. (2)											
Embarrassment	Having accident while toilet training, getting something wrong, being centre of attention, getting told off. (2)											
Jealousy	New sibling, other child has something child wants, parent giving attention to another. (2)											
Anger	Dispute over toys, frustration unable to express through talking, leaving a play activity, wanting to do something different to parent/carer. (2)											

Question	Answer	Marks						
6	<p>The responses must be stated as <i>safety</i> features, those that are not, will not be awarded a mark.</p> <p>Size – not easily swallowed No sharp edges to cut child No loose string that might choke No loose fibres that might break off Not heavyweight Not liable to break easily</p> <p>One mark per correct response to a maximum of 4 marks.</p>	4						
7	<table border="1" data-bbox="320 618 1310 1285"> <thead> <tr> <th data-bbox="320 618 815 719">Local provision or service</th> <th data-bbox="815 618 1310 719">Benefit of using the service or provision</th> </tr> </thead> <tbody> <tr> <td data-bbox="320 719 815 1055"> Doctor (1) </td> <td data-bbox="815 719 1310 1055"> Will help to check health of children and treat them if they are unwell. They will also provide antenatal care. May give vaccinations to prevent illness. There might be a wide variety of responses that will be awarded a mark. (1) </td> </tr> <tr> <td data-bbox="320 1055 815 1285"> Antenatal service (1) </td> <td data-bbox="815 1055 1310 1285"> Care given to women in pregnancy by a medical team or midwife can help to reduce the risk of ill health in pregnancy and increases chances of having healthy baby. (1) </td> </tr> </tbody> </table> <p>Other responses might include nurseries, advice services etc. Answers may vary from that stated, any reasonable correct response might be awarded a mark. One mark for each correct provision/service and one mark for each correct benefit.</p>	Local provision or service	Benefit of using the service or provision	Doctor (1)	Will help to check health of children and treat them if they are unwell. They will also provide antenatal care. May give vaccinations to prevent illness. There might be a wide variety of responses that will be awarded a mark. (1)	Antenatal service (1)	Care given to women in pregnancy by a medical team or midwife can help to reduce the risk of ill health in pregnancy and increases chances of having healthy baby. (1)	4
Local provision or service	Benefit of using the service or provision							
Doctor (1)	Will help to check health of children and treat them if they are unwell. They will also provide antenatal care. May give vaccinations to prevent illness. There might be a wide variety of responses that will be awarded a mark. (1)							
Antenatal service (1)	Care given to women in pregnancy by a medical team or midwife can help to reduce the risk of ill health in pregnancy and increases chances of having healthy baby. (1)							
8	<p>Answers may vary from that stated, any reasonable correct response might be awarded a mark.</p> <p>Polio, measles, mumps, rubella, tetanus, tuberculosis.</p> <p>One mark for each response to a maximum of 4 marks.</p>	4						

Question	Answer	Marks
Section B		
9(a)	<p>Males Growth of hair on lower face and top lip – sometimes removed by shaving, males have wider jaw than females, males shoulders broaden while females develop breasts, males sometimes grow hair on their chest, males and females have different genitalia. One mark for each correct point to a maximum of 3 marks for males</p> <p>Females Females develop wider hips in preparation for child birth, females menstruate each month, males have deeper voice than females. One mark for each correct point to a maximum of 3 marks for females</p> <p>Answers may vary from that stated, any reasonable correct response might be awarded a mark.</p>	6
9(b)	<p>Biological factors Inherited condition can make some babies develop more slowly. Babies who were born prematurely may have delayed development. Alcohol or drug use in pregnancy can affect development by causing disability. Maximum of 4 marks where two responses are fully explained.</p> <p>Social Children’s interactions with others – e.g. playing with other children might make them develop social skills more quickly. Children might develop more quickly if parents invest time in their learning and play with them. Attending a nursery or playgroup can help children to learn from others. Maximum of 4 marks where two responses are fully explained.</p> <p>Up to two marks for each factor to a maximum of 4 marks for biological factors and a maximum of 4 marks for social factors.</p> <p>Answers may vary from that stated, any reasonable correct response might be awarded a mark.</p>	8
9(c)	<p>Fertility drugs Taking fertility drugs may stimulate the woman to release more than one egg during ovulation. If all of these eggs are fertilised by sperm multiple foetuses will develop. (2)</p> <p>Artificial Insemination. Doctors <i>harvest eggs from the woman and fertilise these</i>, they return them to the woman’s body. Sometimes, the doctor replaces two or more fertilised eggs to increase the chance of the pregnancy being successful. (2)</p> <p>Variations that carry the same meaning will be awarded a mark. Award up to 2 marks for fertility drugs and up to 2 marks for artificial insemination to a maximum of 4 marks.</p>	4

Question	Answer		Marks
9(d)	Check	Reason for the check	12
	Urine (1)	Tests for signs of diabetes, protein may indicate pre-eclampsia and early tests confirm pregnancy. (2)	
	Ultra scan (1)	Checks dates of pregnancy and likely delivery date, checks for abnormalities and how many babies are present. (2)	
	Weight (1)	Increased abnormal weight gain can indicate diabetes, if other is obese extra care is needed in delivery. (2)	
	Blood test (1)	Check mothers blood for blood group to check for rhesus factor, can identify possible early abnormalities, can identify genetic conditions and some infections. (2)	
	Measuring abdomen (1)	Checks fetal size and rate of growth, can determine position to see if assistance is needed in delivery. (2)	
	Heart beat (1)	Can reassure mother if movement not felt. Helps to determine that baby is alive. Slow heartbeat might be sign of distress in foetus. (2)	
Answers may vary from that stated, any reasonable correct response might be awarded a mark.			
Award one mark for each correct check and up to two marks for each explained reason.			

Question	Answer	Marks
10(a)	<p>Advantages Ability to communicate with a wider range of people. Ability to speak to family and friends. Increased sense of identity.</p> <p>Disadvantages May find it difficult to express themselves. May not develop depth of understanding of either language. May feel reluctant to speak in case they get things wrong.</p> <p>Answers may vary from that stated, any reasonable correct response might be awarded a mark.</p> <p>One mark for each correct advantage up to a maximum of 2 and One mark for each correct disadvantage up to a maximum of 2.</p>	4
10(b)	<p>Talk to babies (1) so that they hear language. (1) Remove background noise (1) so babies can concentrate and listen.(1) Sing songs and rhymes (1) so children pick up pitch and tone. (1) Make eye contact (1) so babies learn to read emotions and understand facial expressions. (1)</p> <p>Answers may vary from that stated, any reasonable correct response might be awarded a mark.</p> <p>One mark for identifying a way and a second mark for explaining how this helps young babies to a maximum of 4 marks.</p>	4
10(c)	<p>Inability to speak (1) Inability to play cooperatively with others. Confusion and extreme reaction to situations. Bad behaviour and signs of frustration. Child not woken by loud noises.</p> <p>Answers may vary from that stated, any reasonable correct response might be awarded a mark.</p> <p>One mark for each response to a maximum of 3 marks.</p>	3

Question	Answer	Marks								
10(d)	<p>There is no order to the responses and might be a range of correct answers that might be awarded a mark.</p> <p>Holding crayon. Making marks on paper with crayon Using whole hand to grasp crayon Scribbling in circular motion without purpose Drawing backwards and forwards marks Drawing circles Making attempts are ascribing meaning Forming row of circles Writing individual letters Forming letters together to make a word.</p> <p>One mark for each response to a maximum of 6 marks.</p>	6								
10(e)	<table border="1" data-bbox="320 786 1310 1384"> <thead> <tr> <th data-bbox="320 786 663 851">Arithmetical area</th> <th data-bbox="663 786 1310 851">Activity</th> </tr> </thead> <tbody> <tr> <td data-bbox="320 851 663 1016">Counting</td> <td data-bbox="663 851 1310 1016">Children can count in rhymes and songs. Counting groups of objects such as fingers and toes. (1)</td> </tr> <tr> <td data-bbox="320 1016 663 1216">Number words</td> <td data-bbox="663 1016 1310 1216">Being able to say age. Recognising numbers on a number line. Playing lotto style game so recognising the number from the name (1).</td> </tr> <tr> <td data-bbox="320 1216 663 1384">Comparing quantities</td> <td data-bbox="663 1216 1310 1384">Understanding being able to help themselves to 'more' of food at snack time. Sharing out toys amongst friends. (1)</td> </tr> </tbody> </table> <p>Above are examples and there will be a large range of correct responses that might be awarded a mark. One mark for a correct activity for each area. Max. of one activity per area.</p>	Arithmetical area	Activity	Counting	Children can count in rhymes and songs. Counting groups of objects such as fingers and toes. (1)	Number words	Being able to say age. Recognising numbers on a number line. Playing lotto style game so recognising the number from the name (1).	Comparing quantities	Understanding being able to help themselves to 'more' of food at snack time. Sharing out toys amongst friends. (1)	3
Arithmetical area	Activity									
Counting	Children can count in rhymes and songs. Counting groups of objects such as fingers and toes. (1)									
Number words	Being able to say age. Recognising numbers on a number line. Playing lotto style game so recognising the number from the name (1).									
Comparing quantities	Understanding being able to help themselves to 'more' of food at snack time. Sharing out toys amongst friends. (1)									

Question	Answer	Marks
Section C		
11(a)	<p>There will be a range of correct responses. The responses must be written in logical constructed sentences not lists. Each response should be relevant to the question asked.</p> <p>0–7 low level response There are no logical links between behaviour and parents/carer influence. The candidate has attempted only part of the question. Responses are bullet points or not clearly explained or relevant.</p> <p>8–11 Medium level response The candidate has answered both parts of the question although without the same depth. The candidate has made some logical links between behaviours and ways parents can support this. Generally, the behaviours suggested are relevant to emotional problems, but not specific.</p> <p>12–20 High level response Both question parts have been responded to well and the answer is in-depth. Several good responses have been given for the ways that parents/carers can help children to behave well and these are positive. The behaviours in response to emotional problems are logical and well explained.</p> <p>Indicative content: Parents can help children to behave well by being good role models. Children will see this behaviour and think that this is the right way to act themselves. They will understand behaviour and follow the example set by their parents.</p> <p>Parents can provide clear boundaries and expectations. The parents and carers need to understand what is expected from children at differing ages so they are realistic. By providing clear rules and expectations children know what adults want from them and know what constitutes good behaviour.</p> <p>Having sanctions, children will test the rules at times. By having clear sanctions – such as not allowing children to play with a certain toy or removing a treat, children understand that there is a consequence for their poor behaviour, making them less likely to repeat it in the future.</p> <p>Being consistent is important because if parents change their minds or sometimes give in, children will constantly test the boundaries and push parents to see if they can get what they want.</p> <p>Not using physical punishment. Children who are smacked, hit or hurt by adults do not trust adults and are more likely to become aggressive and destructive. Children will not want to please adults who hurt them and so cooperation is less likely, especially as children get older. When children are hurt to make them behave it affects their emotional development, confidence and ability to develop well.</p> <p>Children might display a range of behaviours when they are suffering from emotional disturbance.</p>	20

Question	Answer	Marks
11(a)	<p>Aggression towards others is common when children have had aggression shown towards them. If they are feeling frustrated, confused or angry they might lash out. This might include hurting others and becoming a danger. This behaviour makes other children less likely to want to play with them. This leads to children becoming more frustrated and angry.</p> <p>Children might withdraw. They might not want to engage with other people and remove themselves from play. These children might find it hard to get along with others and become withdrawn and difficult to engage.</p> <p>Children might wet themselves and show other signs of anxiety such as hair pulling, thumb sucking and rocking. Some of these are behaviours where children are trying to comfort themselves or distract themselves from what is happening.</p> <p>Children might be attention seeking, they might crave positive attention from adults and be desperate to please them. Or, they might be happy with any attention and so do things that upset adults because they want to be centre of attention. Children might also make up lies or cry for adult attention.</p>	

Question	Answer	Marks
11(b)	<p>There will be a range of correct responses to this question. The responses must be written in logical constructed sentences not lists. Each response should be relevant to the question asked.</p> <p>0–7 low level response There are no logical links between responses and the question. The candidate has attempted only part of the question. Responses are bullet points or not clearly explained or relevant.</p> <p>8–11 Medium level response The candidate has answered both parts of the question although without the same depth. The candidate has made some logical responses and these state the different types of delivery methods. The role of the supportive adult is reasonably well explained although not for each delivery type.</p> <p>12–20 High level response Both question parts have been responded to well and the answer is in-depth. Several good responses have been given the types of delivery with several ways given for the supportive adult to help for each.</p> <p>Indicative content: Babies might be born naturally without pain relief. This means that the mother delivers the baby through the vagina without medical assistance. The mother does not have any drugs to help reduce pain or any intervention to help deliver the baby. Under these circumstances the supportive adult should comfort the mother; they can offer sips of water, help with back massage and provide friendly and calming company in between contractions. The supportive adult might help to cut the cord and congratulate the mother.</p> <p>Babies might be delivered naturally using pain relief. The type of pain relief can vary. The medical professional will give drugs that either help the pregnancy to progress – such as making the uterus contract or help to reduce pain. Under these circumstances the medical professional will need to measure the dose and talk through side effects. The supportive adult can help the mother to decide which pain relief is right for her and support her decision. They will be able to talk to the medical professional if the mother feels unable to. The supportive adult can help to reassure the mother and distract her from pain until the medication starts to work.</p> <p>Babies might be born by elective caesarean. This means that the baby will be delivered by cutting through the abdominal and uterus wall. This is planned in advance and is often because there is an underlying medical reason, such as twins, breech presentation or health issue. The mother will know when the baby will be born. She can also discuss what anaesthetic she will have. The supportive adult might be able to be with the mother during the operation. They can talk with the mother, relay what is happening and help the medical team by holding a bowl in case the mother feels sick or holding the baby after delivery while the mother's uterus and abdominal wall are stitched up. The supportive adult will need to be calm during the operation and not be upset by the sight of blood as this could worry the mother.</p>	20

Question	Answer	Marks
11(b)	<p>Babies might be born while the mother is in water. Water births allow the mother to move around and enjoy the sensation of being in water. The mother might also have other forms of pain relief. The baby will be born in the water by a person who has qualifications or experience in delivering babies. The supportive adult could get into the water with the mother in the early stages. Later, they can provide a towel to wipe the mother's eyes and maintain the temperature of the water. They can also help the mother to focus on them to help deal with the pain.</p> <p>Emergency caesareans are performed because there is a problem during delivery. Mothers are usually unaware that this is going to happen. This is often a result of needing to get the baby out quickly to save the mother's and/or the baby's lives. This can be highly stressful and the supportive adult needs to be calm and supportive. They might not be allowed in the room when the operation takes place. They might be required to sign medical documents with the mother or tell the mother what is happening. The supportive adult might be the first to hold the baby as the medical team treat the mother.</p>	