



GCSE Home Economics

Child Development for AQA

Student Workbook Activity Answers

The following are the answers to the activities in Collins' *GCSE Home Economics (Child Development) for AQA Student Workbook*. Guidance on allocating marks has been provided – a tick indicates where a mark can be awarded, and maximum marks per question are shown in bold, in brackets, at the end of each question.

There is not always one right answer to a question, but where this is the case, examples or other guidance are provided, and marks should be awarded for any correct answer up to the maximum marks for the question.



1 Parenthood

Topic 1.1 The family

1. Examples of family structures (any four): nuclear family ✓ extended family ✓ one-parent family ✓ reconstituted family ✓ same-sex family ✓ adoptive family ✓ foster family. ✓ **(max 4 marks)**
2. An adoptive family includes one or more adopted, non-biological children ✓ and may be nuclear, extended, one-parent, reconstituted or same-sex. ✓ Adopted children are permanent members of the new family. ✓ There are many types of foster care. ✓ A foster child's stay with a foster family is usually temporary. ✓ Adoptive parents have full legal responsibility for adopted children. ✓ **(max 3 marks)**
3. The modern family promotes child development by providing (any three):
 - ▶ physical resources (e.g. food, shelter and clothing) for the healthy growth and development of children ✓
 - ▶ physical and psychological protection of family members ✓
 - ▶ the primary socialisation of children ✓
 - ▶ love and emotional support ✓
 - ▶ opportunities for learning and development. ✓ **(max 3 marks)**
4. Socialisation is the process of teaching (and learning) the attitudes, values and expectations of society ✓ within the family. ✓ **(max 2 marks)**
5. Examples of how families socialise young children (any two):
 - ▶ Families teach appropriate attitudes and values. ✓
 - ▶ Families teach children how to behave in different situations. ✓
 - ▶ Family members act as role models, guiding and supporting children's development. ✓ **(max 2 marks)**
6. Extended families are nuclear families ✓ who are extended by the presence of grandparents or other relatives ✓ who live in the same household as part of a single family unit ✓ (e.g. parents, children and grandparents living in the same household) ✓ or other combinations of relatives. ✓ **(max 3 marks)**
7. Examples of reasons for the decline in the number of extended families in the UK (any four):
 - ▶ families now more geographically dispersed ✓
 - ▶ growth in lone-parent and nuclear families ✓
 - ▶ availability of contraception leads to smaller families ✓
 - ▶ increased affluence in society, so more people can own or rent a home, making them less dependent on parents or other family members ✓
 - ▶ more homes available to buy or rent ✓
 - ▶ changing attitudes to cohabitation ✓
 - ▶ increased diversity of family structures. ✓ **(max 4 marks)**
8. The main characteristics of a blended or reconstituted family are as follows.
 - ▶ Reconstituted or blended families have been (re)formed, usually from pre-existing lone-parent or nuclear families. ✓
 - ▶ Both parents may bring children from previous relationships. ✓
 - ▶ Alternatively, one parent may already have children. ✓
 - ▶ The new couple may subsequently have children of their own. ✓
 - ▶ Reconstituted families consist of a blend of relationships in which individuals can be biologically related, or step-children and half-brothers or sisters. ✓ **(max 4 marks)**
9. Reasons for the growth in the number of blended families in the UK (any three): changes in attitude to marriage and remarriage ✓ rising divorce rates ✓ changing attitudes to cohabitation and having children outside marriage ✓ increased acceptance of diverse family structures. ✓ **(max 3 marks)**



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10. How roles and responsibilities have changed and possible benefits for children's development:
- ▶ Men and women more likely to share childcare responsibilities ✓ resulting in a better relationship all round. ✓
 - ▶ Women are more likely to go out to work than previously ✓ resulting in a (possibly) more relaxed mom, and children learning how to be independent. ✓
 - ▶ Men are more likely to want closer involvement ✓ with their children. ✓ **(max 6 marks)**
11. A 'local authority' is an organisation that is responsible for the local government of a specified area. Also known as a council or county, borough or metropolitan. ✓ **(max 1 mark)**
12. Examples of reasons why a child may be unable to live with his or her family (any four): death of parents ✓ serious, long-term or incapacitating illness of parent(s) ✓ rejection by parents ✓ experience of abuse ✓ being 'at risk' within the family ✓ breakdown of family relationships ✓ neglect or inadequate care within the family. ✓ **(max 4 marks)**
13. Examples of reasons for fewer children living in children's homes:
- ▶ Foster care is seen to provide better development opportunities for children. ✓
 - ▶ The standard of care in residential children's homes is sometimes poor. ✓
 - ▶ Children have suffered harm or abuse in children's homes in the past. ✓
 - ▶ The educational achievements of children in care are usually poor. ✓
 - ▶ Children leaving care often struggled to cope with independent living after leaving at the age of 18. ✓ **(4 marks)**

14. Residential childcare for vulnerable children

Arguments in favour	Criticisms
i) Childcare homes provide vulnerable and 'at risk' children with a professional level of care. ✓	i) Childcare homes are institutions that may have poorer quality facilities than family homes. ✓
ii) They can meet children's needs in a crisis or at short notice. ✓	ii) Children have to follow more explicit 'rules' than in family homes; childcare homes are not as informal, and so may be more stressful. ✓
iii) Can provide respite (short-term) support when a family has a crisis. ✓	iii) Childcare homes may not provide emotional and physical bonding for parents who have children living in a family environment. ✓
iv) They offer a place of safety for 'at risk' children. ✓	iv) Some children may be vulnerable to exploitation and abuse in institutional settings. ✓

(max 8 marks)

15. The role and responsibilities of Eva's foster parents include:
- ▶ treating Eva as part of the family ✓
 - ▶ ensuring that Eva's physical, intellectual, emotional and social needs are met ✓
 - ▶ safeguarding her by protecting her physical safety and emotional wellbeing ✓
 - ▶ providing emotional support ✓
 - ▶ ensuring that contact is maintained with Eva's mum. ✓ **(max 4 marks)**
16. Reasons why fostering may be the best way to provide care for Eva are as follows (any three).
- ▶ Fostering avoids institutionalising Eva and promotes her individual development in a family context. ✓
 - ▶ It gives Eva the experience of living in a supportive family structure. ✓
 - ▶ It provides Eva with opportunities to develop the skills needed for supportive family relationships ✓
 - ▶ Foster care can be more focused, flexible and individualised to meet Eva's needs than the more impersonal care that may be provided in larger residential children's home settings. ✓ **(max 3 marks)**


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17. Differences between adoption and fostering

Adoption	Fostering
Permanent placement – child lives with the adopted family. ✓	Temporary placement – child may move between foster placements. ✓
Adults have full parental responsibility. ✓	Adults have no legal rights over the child. ✓
Adoptive parents are responsible for paying the costs of caring for the child. ✓	Foster carers receive an allowance from the fostering agency to cover childcare costs. ✓
Adoptive parents not monitored or supported by local authority. ✓	Foster carers monitored and supported by local authority. ✓

(max 6 marks)

18. The emotional benefits might include: a sense of belonging and increased self-esteem ✓ a settled family life, leading to lower stress ✓ a stronger sense of emotional security ✓ better self-esteem. ✓ **(max 3 marks)**
19. Possible reasons for adopting a child: to form a family (one or both partners may be infertile) ✓ to extend the family ✓ to provide a child or children with a secure family life. ✓ Adoptive parents' rights and responsibilities include: having full legal rights as parents ✓ the responsibility for safeguarding the child or children ✓ the responsibility for promoting the health and wellbeing of the child or children ✓ responsibility for all costs of raising the child. ✓ **(max 6 marks)**

Topic 1.2 Planning for a family

1. Answers about why the following factors are important when deciding to have a baby should include two points in each.
- a) A secure, stable relationship:
- ▶ The decision to have a baby is a lifelong commitment. ✓
 - ▶ A couple must be mature enough to accept the responsibility of having a baby to look after. ✓
 - ▶ Having a baby can be stressful, so a couple's relationship should be strong enough for them to be able to support each other. ✓
 - ▶ A couple needs to be able to deal with the demands of a new baby (e.g. sleepless nights). ✓
- b) Realistic expectations about the changes a baby makes to your lifestyle:
- ▶ Having a baby will change the couple's social life. ✓
 - ▶ It may have an impact on the employment situation (e.g. having to give up work, work part time or stay at home). ✓
 - ▶ Having a baby could have an impact on the financial situation (increased expenditure, different employment pattern). ✓
 - ▶ It may have an impact on a couple's living situation (they may need a bigger house; they may have to live with family). ✓ **(max 4 marks)**
2. Examples of other lifestyle factors a couple should consider before deciding to have a baby (any two): age ✓ physical factors ✓ mental health ✓ support from family ✓ living situation ✓ other children ✓ being able to provide for the child's needs. ✓ **(max 2 marks)**




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3. Answers could include any two of the three points in each section.

Age of parents	Advantages	Disadvantages
Young	i) Have more energy ✓ ii) Will still be young when children are grown up ✓ ii) May not be established in a career (so don't have to give it up) ✓	i) Have less life experience ✓ ii) May not be in a secure relationship ✓ iii) May not be financially secure ✓
Older	i) Have more life experience ✓ ii) May be in a more secure relationship ✓ iii) May be more financially secure ✓	i) May have less energy ✓ ii) May be established in a career and be unwilling to give it up ✓ iii) Will be much older and could be more dependent on children as they grow up ✓

(max 8 marks)

4. Importance for Karl and Joanna to plan their family:

- ▶ They need to be ready to accept the responsibilities of parenthood. ✓
- ▶ They should think about the changes that having a baby will make to their lifestyle. ✓
- ▶ They should think about how many children they want eventually, so they can space the arrival of each one. ✓
- ▶ They need to be able to provide for the child's needs. ✓
- ▶ They may both need to make decisions about their employment situations. ✓
- ▶ They need to plan their financial situation. ✓ **(max 3 marks)**

5. Important pre-conceptual decisions (any two and the reason why):

- ▶ Karl should decide to stop smoking because smoking can affect fertility and the process of conception. ✓
- ▶ Either of them might have to decide to stop working in order to care for the baby. ✓
- ▶ They should both have a general physical check up to make sure that they are both fit and healthy. ✓
- ▶ They might decide to move house. ✓ **(max 4 marks)**

Topic 1.3 Preparing for the baby

1. A layette is a complete set of clothing for a new baby. ✓ **(max 1 mark)**

2. Examples of essential items that one might expect to be included in a new baby's layette (any five): vests ✓ all-in-one stretch suits or babygrows ✓ hat ✓ socks ✓ booties ✓ pram suit/outdoor wear ✓ nappies ✓ nightdresses. ✓ **(max 5 marks)**

3.

Type of nappy	Advantages	Disadvantages
Disposable	▶ Easy to use/convenient ✓ ▶ Available in different sizes ✓ ▶ Do not need washing ✓ ▶ Save time ✓	▶ Expensive ✓ ▶ Not good for the environment ✓ ▶ Wasteful ✓
Reusable	▶ Can be used over and over/repeatedly ✓ ▶ More environmentally friendly ✓ ▶ Should last for more than one baby ✓	▶ Need washing and sanitising ✓ ▶ More time-consuming ✓ ▶ More complicated to use ✓

(max 12 marks)





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4. Below are examples of advice to offer parents who are buying the following items.
- A pram for the new baby: It must carry a British Standard Safety Kite mark. ✓ (This point *must* be included.) And any three of: sturdy construction, strong, well balanced ✓ safe brakes ✓ weather resistant rain hood ✓ fitted with a safety harness ✓ size and weight, easy to manoeuvre, ✓ matches lifestyle, environment where it will be used. ✓
 - Clothing for the new baby: It must carry a British Standard Safety Kite mark. ✓ (This point *must* be included.) And any three of: comfortable ✓ warm ✓ washable ✓ not too many newborn sizes ✓ cost should be taken into account ✓ practicality ✓ suitability for the time of year. ✓ **(max 8 marks)**

Topic 1.4 Provision of a safe environment

- Examples (accept other suitable suggestions) related to playing in the garden to explain the following terms.
 - Hazard: a source of danger ✓ such as a pond ✓ garden equipment (e.g. spade, fork, weeding tool) ✓ an open gate. ✓
 - Risk: the chance of loss ✓ damage or injury occurring ✓ such as the chance of a child falling into a pond and drowning ✓ or walking into the road from an unfenced garden. ✓ (Fences and child-resistant gate latches should be used.) **(max 4 marks)**
- Hazards to a young child's safety in domestic kitchens (accept other examples): hot pans ✓ hot oven or hob ✓ knives (and forks) ✓ especially if left pointing upwards (e.g. in a dish rack) ✓ electrical flexes. ✓ **(max 4 marks)**
- Examples of safety equipment that can be used to reduce the risk of kitchen hazards to children (any four):
 - ▶ safety shutters to reduce the chance of the child being electrocuted ✓
 - ▶ flex covers (so that the wiring is not exposed) ✓
 - ▶ curly cords for kettles (to shorten the length of kettle cords and make it more difficult for children to reach them) ✓
 - ▶ cooker and hob guards (to prevent children reaching elements or pulling pots off the stove – though these do not always provide the best protection) ✓
 - ▶ child-resistant locks for doors, cupboards, refrigerators and dishwashers (to keep poisons, such as medicines, cleaners, paints and chemicals as well as sharp objects such as knives and tools safely out of the reach of children) ✓
 - ▶ child-resistant catches for drawers and cupboards (to prevent small children opening cupboards and drawers) ✓
 - ▶ child-resistant closures and packaging (e.g. for some poisonous products such as household cleaners and chemicals) ✓
 - ▶ safety glass in all glass doors and windows (so that if children do run into or fall against the glass, it will not cut them) ✓
 - ▶ safety film to toughen glass and prevent it from splintering if broken (can be applied to existing glass) ✓
 - ▶ smoke alarms (should be tested regularly to ensure that they work well) ✓
 - ▶ fire extinguishers (could be used to put out small fires, but use with caution because different extinguishers are used to put out different types of fires) Note that using the wrong fire extinguisher can make the situation worse. ✓
 - ▶ guards for open fires and heaters to stop children touching hot surfaces or flames (the guard should be sturdy and should not move if a child pushes or falls on it) ✓
 - ▶ playpens (if the kitchen is large, to keep young children in one place, away from dangers) ✓
 - ▶ door slam protectors (to stop children's fingers being trapped in doors) ✓ **(max 4 marks)**




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4. Reasons why babies, toddlers and young children are at risk of having accidents:
- ▶ They have less awareness of, and may not understand, everyday dangers and hazards. ✓
 - ▶ They may not understand the possible consequences of their actions. ✓
 - ▶ They are very curious, which may result in dangerous situations. ✓
 - ▶ They may become too excited or upset, therefore losing focus on sources of danger. ✓
 - ▶ They may be left unsupervised in hazardous situations. ✓
 - ▶ They may become physically tired and stop concentrating – late afternoon and early evening are danger periods for accidents. ✓
 - ▶ They may become overly boisterous or start showing off, thus forgetting about possible dangers. ✓
 - ▶ They may be upset by major events or changes (e.g. illness, death, divorce, moving house) in their family and everyday environment. ✓ **(max 5 marks)**
5. Road accidents involving children in the UK in 2009: 22 948 ✓ **(max 1 mark)**
6. Country in the UK with the lowest number of fatal road accidents involving children in 2009: Wales ✓ **(max 1 mark)**
7. Reasons why young children are at risk of being involved in road accidents (accept other examples):
- ▶ They may not understand road or traffic dangers. ✓
 - ▶ They are unable to judge the speed or distance of moving traffic. ✓
 - ▶ They are likely to panic and act impulsively when frightened by busy, noisy traffic. ✓ **(max 3 marks)**
8. Heather's parents should buy: a forward-facing child seat ✓ ✓ **(max 2 marks)**
9. To ensure that toys meet UK minimum safety standards:
- ▶ Make sure that the toys have the British Standards kitemark. ✓
 - ▶ Buy toys with the CE mark – the European Toy Safety Directive (TSD). ✓
 - ▶ Buy toys with the Lion Mark, indicating that the toy meets the safety requirements of the British Toy and Hobby Association. ✓ **(max 3 marks)**
10. Examples of items that should be included in a basic first aid box (any four): sterile dressings ✓ assorted bandages ✓ tweezers ✓ non-allergenic plasters ✓ and adhesive tape ✓ disposable gloves ✓ antiseptic wipes ✓ a first aid manual. ✓ **(max 4 marks)**
11. Completed chart

First aid situation	Treatment
Nose bleed	Answer must include the following point. ▶ Pinch the soft part of the nose. ✓ And one of these points: ▶ Hold for at least 10 minutes. ✓ ▶ Tell the child not to blow ✓ or pick his or her nose. ✓
Choking	▶ Lay the child over your knee, face down. ✓ ▶ Slap the child between the shoulder blades. ✓
Poisoning	▶ Rinse the child's mouth with water. ✓ ▶ Do not make the child get sick/vomit. ✓

(max 6 marks)

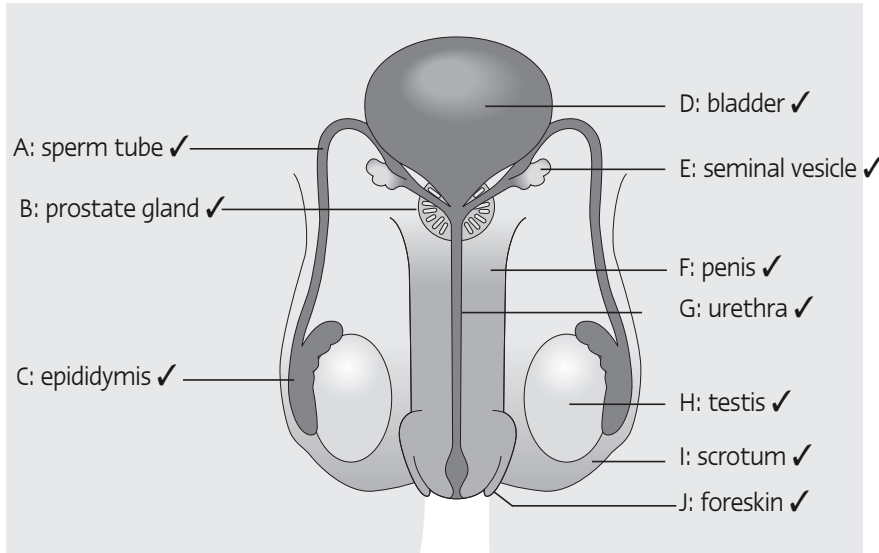




2 Pregnancy

Topic 2.1 Reproduction

1. a) Labels for male reproductive system (half a mark per tick):

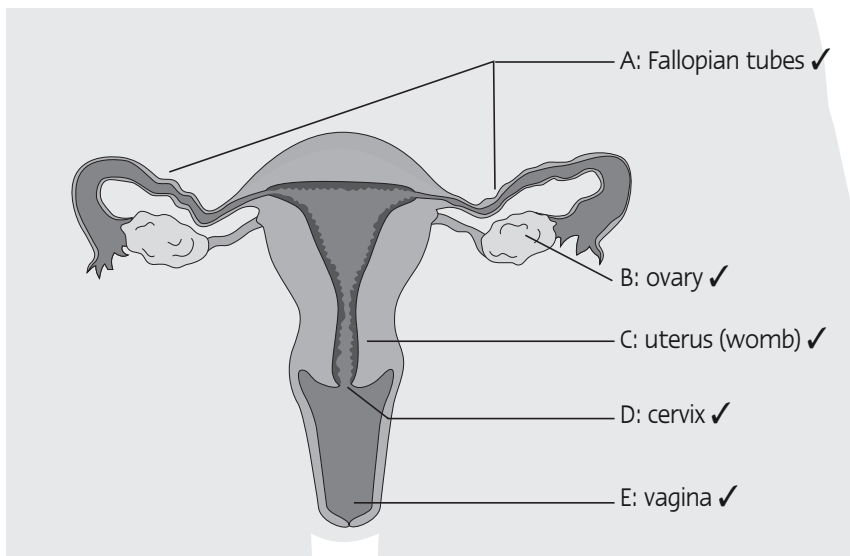


(max 5 marks)

b) Sperm are produced in the:	testis (or testes) ✓
The male sex hormone is called:	testosterone ✓
The mixture of sperm and seminal fluid is called:	semen ✓

(max 3 marks)

2. a) Labels for female reproductive system:



(max 5 marks)

b) The process of ova (eggs) being released from the ovaries is called:	ovulation ✓
The female menstrual cycle lasts for approximately:	28 days ✓
The two female sex hormones are called:	oestrogen and progesterone ✓

(max 3 marks)




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3. The process of fertilisation should include the following points.

- ▶ An egg is released from the ovary (process of ovulation). ✓
- ▶ The egg travels along the Fallopian tube. ✓
- ▶ During sexual intercourse, semen (containing sperm) is ejaculated into the vagina. ✓
- ▶ Sperm swim up through the uterus and into the Fallopian tube. ✓
- ▶ Fertilisation takes place when the sperm penetrates the egg. ✓
- ▶ Fertilisation takes place in the Fallopian tube. ✓ **(max 6 marks)**

4. Implantation is when the fertilised egg ✓ attaches to the lining of the uterus. ✓ **(max 2 marks)**

5. If a female egg is fertilised by a Y sperm cell, the baby will be: male ✓ **(max 1 mark)**

6. How non-identical (binovular) twins are conceived: two eggs are released from the ovary at the same time ✓ each egg is fertilised by a different (separate) sperm. ✓ **(max 3 marks)**

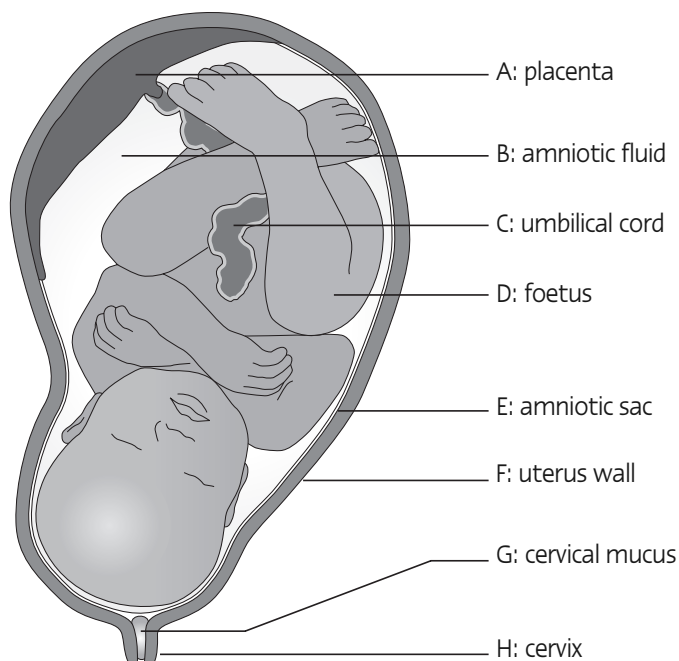
7. Characteristics of non-identical (binovular) twins (any three): do not have identical genes ✓ have separate placentas ✓ can be the same gender or different genders ✓ not identical in appearance. ✓ **(max 3 marks)**

8. True statements:

She will have the same blood group as her twin.	True ✓
She will not be the same sex as her twin.	
She will look exactly like her twin.	True ✓
She will have the same genes as her twin.	True ✓

(max 3 marks)

9. Labels:



(max 8 marks)

10. Main functions of the placenta: provides foetus with nourishment (nutrients/food) ✓ provides foetus with oxygen ✓ removes waste products from the foetus (carbon dioxide/waste materials) ✓ acts as a barrier between the blood of the foetus and of the mother ✓ allows some harmful substances to pass through, (e.g. nicotine). ✓ **(max 3 marks)**




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Topic 2.2 Pre-conceptual care

1. Answers can include any 12 of the following points.

Method of contraception	Advantages	Disadvantages
Male condom	<ul style="list-style-type: none"> ▶ Protects against STIs ✓ ▶ Widely available ✓ ▶ If used correctly, 98% effective ✓ ▶ Does not require medical supervision ✓ 	<ul style="list-style-type: none"> ▶ May slip off or split ✓ ▶ Can interrupt sexual intercourse ✓ ▶ Male needs to withdraw quickly after ejaculation ✓
Intrauterine device (IUD)	<ul style="list-style-type: none"> ▶ Can stay in place for three to 10 years ✓ ▶ Works as soon as it is inserted ✓ ▶ Contraception decision planned in advance and therefore less stressful ✓ ▶ 98% effective ✓ 	<ul style="list-style-type: none"> ▶ Female periods may be heavier and longer ✓ ▶ Does not protect against STIs ✓ ▶ Requires medical supervision ✓
Male sterilisation (vasectomy)	<ul style="list-style-type: none"> ▶ Permanent ✓ ▶ Once effective, contraception decision planned in advance and therefore less stressful ✓ 	<ul style="list-style-type: none"> ▶ Can take a few months until no sperm are produced ✓ ▶ Contraception must be used until male has had two negative sperm tests ✓ ▶ Vas deferens may rejoin spontaneously ✓

(max 12 marks)

2. Barrier methods of contraception: male condom ✓ female condom (femidom) ✓ diaphragm (cap) with spermicide. ✓ **(max 2 marks)**
3. How the combined contraceptive pill works as a method of contraception: it contains the hormones oestrogen and progesterone ✓ and it prevents the process of ovulation. ✓ **(max 2 marks)**
4. Suitable methods of contraception and reasons:
- a) Male sterilisation (because it's permanent) ✓✓ female sterilisation (because it's permanent) ✓✓ intrauterine device or system (because it can stay in place for up to 10 years). ✓✓ **(max 4 marks)**
- b) Combined contraceptive pill ✓ (not permanent; more than 99% effective; easy to use; not suitable for smokers) ✓ contraceptive injection/implant ✓ (not permanent; more than 99% effective; easy to use) ✓ male or female condoms ✓ (not permanent; easy to use; widely available; 98% effective) ✓ diaphragm with spermicide ✓ (not permanent; easy to use; 96% effective) ✓ intrauterine device/system ✓ (not permanent; 98% effective; contraception does not have to be thought about). ✓ **(max 4 marks)**
- c) Male/female condoms ✓ (protects against STIs; easy to use; widely available; 98% effective) ✓ diaphragm with spermicide ✓ (protects against STIs; easy to use; 96% effective). ✓ **(max 4 marks)**
5. How natural family planning works:
- ▶ It works according to the female menstrual cycle. ✓
 - ▶ It involves knowing when the fertile and infertile times of the menstrual cycle occur. ✓
 - ▶ The most fertile time of the menstrual cycle is during ovulation. ✓
 - ▶ Women can take their own body temperature every morning to help identify when they are ovulating (body temperature rises slightly after ovulation). ✓
 - ▶ Pregnancy is unlikely to happen during the infertile time of the menstrual cycle. ✓
 - ▶ Sexual intercourse should only take place during the infertile time of the menstrual cycle. ✓
 - ▶ Sexual intercourse should be avoided during the fertile time of the menstrual cycle. ✓ **(max 4 marks)**




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6. The combined contraceptive pill contains: oestrogen ✓ and progestogen. ✓ **(max 2 marks)**
7. Answer *must* include 'Condoms help to prevent STIs'. ✓ In addition, include one of these points.
- ▶ Condoms are free, widely available and easy to use. ✓
 - ▶ If used correctly, condoms are 98% effective. ✓ **(max 2 marks)**
8. Problems when using a condom: condom might split ✓ condom might slip off ✓ condom might not be put on correctly. ✓ The male might not withdraw quickly enough after ejaculation and some semen might leak into the female's vagina. ✓ **(max 2 marks)**
9. If in need of emergency contraception: Contact the GP within 72 hours ✓ or go to the chemist within 72 hours. ✓ Obtain the morning-after pill. ✓ Take the morning-after pill as instructed within 72 hours. ✓ Have a copper IUD inserted by a doctor within five days. ✓ **(max 3 marks)**
10. 'Contraception' is the use of birth control methods to prevent pregnancy. Factors that could influence choices – include any four with a valid reason for each:
- ▶ stage of relationship (protecting against STIs; embarrassment; ease of use) ✓
 - ▶ age (level of familiarity or comfort with different methods; availability) ✓
 - ▶ whether they want any more children (choosing permanent contraception or not) ✓
 - ▶ lifestyle (the combined pill is not suitable for women who smoke) ✓
 - ▶ woman's health (the IUD is not suitable for women who have heavy periods; some medical conditions would rule out the combined pill/injection/implant) ✓
 - ▶ need for medical supervision (some couples may prefer methods that do not require medical supervision, e.g. condoms) ✓
 - ▶ religion/culture (some religions do not sanction some contraceptive methods) ✓
 - ▶ emergency situations (having engaged in unprotected sexual intercourse; failed contraception) ✓
- (max 10 marks)**
11. Completed table (one point per row):

Factor	Influence on the foetus
Smoking during pregnancy	Low birth weight ✓ increased risk of miscarriage ✓ premature birth
Drinking excessive amounts of alcohol during pregnancy	Foetal alcohol syndrome ✓ increased risk of miscarriage ✓ premature birth
Rubella (German measles) virus during pregnancy	Deafness ✓ blindness ✓ heart defects
Drugs taken during pregnancy	Increased risk of miscarriage ✓ premature birth ✓ addiction
Toxoplasmosis during pregnancy	Birth defects ✓ blindness ✓ increased risk of miscarriage ✓ stillbirth

(max 5 marks)

12. Examples of points to explain 'genetic counselling':
- ▶ basic genetics and the principle of chromosomes in every human cell ✓
 - ▶ genes carrying information about the inheritance of characteristics, including diseases ✓
 - ▶ genetic counselling involves consulting/seeking advice from a specialist doctor ✓
 - ▶ discussing the risk of conceiving a baby with an inherited condition ✓
 - ▶ the couple both having special blood tests ✓
 - ▶ discussing options available (including abortion). ✓ **(max 4 marks)**
13. Reasons why a couple might decide to have genetic counselling as part of their pre-conceptual health care:
- ▶ One or both partners have a medical history of inherited conditions. ✓
 - ▶ The woman has had repeated miscarriages/stillbirths. ✓ **(max 2 marks)**





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14. Reasons for fertility problems:

- ▶ Simon may have a low sperm count (or a sperm problem). ✓
- ▶ Natalie may have ovulation problems. ✓
- ▶ Natalie may have blocked Fallopian tubes. ✓
- ▶ Either partner may have a hormonal imbalance. ✓
- ▶ Either partner may have had treatment for cancer, leaving them infertile. ✓
- ▶ Natalie may have taken the combined oral contraceptive pill for a long time. ✓
- ▶ Natalie may have a problem with her uterus (preventing implantation). ✓ **(max 3 marks)**

15. Infertility treatment options:

- ▶ **Drug treatment** for ovulation problems ✓ drugs stimulate egg production, ✓ which can result in a multiple pregnancy. ✓
- ▶ **Surgery** ✓ to unblock the Fallopian tubes ✓ is usually very successful. ✓
- ▶ **In vitro fertilisation (or IVF)** ✓ an egg is removed from the woman and fertilised with the man's sperm in laboratory conditions ✓ the resulting embryo is re-implanted in the woman's uterus, ✓ which can result in a multiple pregnancy. ✓
- ▶ **Gamete intra-Fallopian transfer (or GIFT)** ✓ can use the couple's own or donated eggs or sperm ✓ eggs and sperm re-introduced into the Fallopian tube for fertilisation to take place, ✓ which can result in a multiple pregnancy. ✓ **(max 6 marks)**

16. Facts about infertility treatment to be aware of: not always successful ✓ often results in a multiple pregnancy ✓ can take a long time ✓ is not always available on the NHS and so can be expensive ✓ may not be possible to use the couple's own eggs or sperm. ✓ **(max 2 marks)**

Topic 2.3 Pregnancy

1. Answers should include the routine antenatal check and a reason why (not tests that are not routine):

- ▶ Mother's blood pressure: ✓ high blood pressure can be a sign of pre-eclampsia (can cause damage to the foetus). ✓
- ▶ Mother's weight: ✓ to check that the mother is gaining a normal amount of weight (not too much or too little). ✓
- ▶ Test of mother's urine: ✓ to check for sugar (which could indicate diabetes) and protein (which could indicate an infection). ✓
- ▶ Abdominal exam (examination of the uterus): ✓ to check the size and position of the baby. ✓ **(max 8 marks)**

2. Specialised tests - any two, including explanations:

- ▶ Ultrasound scan, ✓ which uses sound waves to produce an image of the baby ✓ and can show the baby's size, position, heartbeat and sex. ✓
- ▶ AFP (alpha-fetoprotein) test, ✓ which is a blood screening test ✓ that can detect conditions like spina bifida and Down's syndrome. ✓
- ▶ Amniocentesis, ✓ which tests the amniotic fluid ✓ and may be done if other tests indicate a higher risk for Down's syndrome. ✓
- ▶ CVS (chorionic villus sampling), ✓ which removes a small sample of placenta tissue ✓ and can be used to test for Down's syndrome. ✓ **(max 6 marks)**

3. Facts about Jane's foetus: viable (able to survive independently from the mother) ✓ quite energetic ✓ skin covered in lanugo hair ✓ skin covered in vernix (white greasy substance) ✓ weighs about 900 g (32 oz) ✓ measures about 38 cm. ✓ **(max 3 marks)**




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4. Examples of advice should include why the advice is given and why it is important (any two).
- ▶ Eat healthily ✓ to provide nutrients for the baby. ✓
 - ▶ Do not smoke ✓ as this can cause premature labour or low birth weight. ✓
 - ▶ Do not drink excessive amounts of alcohol, ✓ which can cause foetal alcohol syndrome. ✓
 - ▶ Do not take any medicines unless prescribed by a doctor, ✓ which can cause birth defects or damage to the baby. ✓
 - ▶ Avoid contact with infectious diseases (e.g. rubella, toxoplasmosis), ✓ which can cause birth defects or damage to the baby. ✓
 - ▶ Do plenty of exercise, ✓ which prevents excessive weight gain and improves mother's wellbeing. ✓
 - ▶ Have plenty of rest, ✓ as this helps to prevent aches, pains, backache and too much strain on the mother's body. ✓
 - ▶ Wear comfortable clothing and shoes ✓ to allow for increase in size of the abdomen and breasts ✓ and wear comfortable shoes to help to prevent backache. ✓ **(max 4 marks)**
5. Support during pregnancy: practical household help (e.g. shopping cooking, cleaning) ✓ emotional support (helping her to feel special and good about herself) ✓ attending antenatal appointments with her (to share information and provide support) ✓ attending parenting classes together (sharing the information and preparation for having the baby) ✓ helping to prepare the baby's room or nursery (practical tasks, decorating, buying equipment). ✓ **(max 4 marks)**
6. Topics included in parenting classes: development of the foetus ✓ health during pregnancy ✓ preparation for birth and birth plan ✓ pain relief during labour ✓ relaxation and breathing exercises ✓ breast and bottle feeding ✓ practical care of a newborn baby. ✓ **(max 4 marks)**
7. Roles of health professionals (answers must relate to support during pregnancy; 2 marks each for a-c).
- a) Midwife:
- ▶ responsible for the health and wellbeing of the woman during pregnancy, labour and immediately after birth ✓
 - ▶ works in hospitals, clinics and in the community (home visits and home births) ✓
 - ▶ carries out routine checks on the mother during pregnancy ✓
 - ▶ provides advice and support for pregnancy, labour and birth ✓
 - ▶ consults with the couple about a birth plan ✓
 - ▶ may teach parenting classes. ✓
- b) Health visitor:
- ▶ may teach parenting classes ✓
 - ▶ provides advice and support about local services ✓
 - ▶ provides information about child health and development ✓
 - ▶ works in the community (clinics, health centres, Children's Centres) and makes home visits. ✓
- c) Obstetrician:
- ▶ a doctor, specialising in pregnancy and birth; works in a hospital ✓
 - ▶ may examine the mother during antenatal visits ✓
 - ▶ may carry out routine or specialised tests during pregnancy (ultrasound scans, amniocentesis, blood tests) ✓
 - ▶ may give information about health during pregnancy ✓
 - ▶ may give information about labour, delivery and birth ✓
 - ▶ may give information about pain relief during labour ✓ **(max 6 marks)**





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8. Symptoms of pre-eclampsia: high blood pressure ✓ swollen ankles ✓ excessive weight gain ✓ protein in the urine. ✓ **(max 2 marks)**
9. Tests to detect Down's syndrome during pregnancy (any one, with an explanation):
- ▶ Down's risk screening test ✓ is a blood test ✓ usually done between the 14th and 20th weeks of pregnancy. ✓ If the result indicates the mother is high risk, then further tests will be offered. ✓
 - ▶ AFP (alpha-fetoprotein) test ✓ is a blood test, ✓ which can be done at the same time as the Down's risk screening test (14 to 20 weeks of pregnancy). ✓ This test can also detect spina bifida. ✓
 - ▶ CVS (chorionic villus sampling) ✓ involves removing a small piece of the placenta ✓ using a needle and guided by an ultrasound scan. ✓ It is carried out after 10 weeks of pregnancy. ✓ This test poses the risk of miscarriage. ✓ The results can be available within a few days. ✓
 - ▶ Amniocentesis ✓ is usually carried out from week 15 onwards. ✓ It tests the chromosomes of the foetus ✓ and involves removing a sample of amniotic fluid ✓ using a needle that is guided by an ultrasound scan. ✓ It is usually carried out if other tests have indicated a risk ✓ or if there is an increased risk of the baby having Down's syndrome because of family history ✓ or the mother's age. ✓ This test poses the risk of miscarriage. ✓ The results take 2-3 weeks. ✓ **(max 4 marks)**
10. Ectopic pregnancy: occurs when the fertilised egg implants outside of the uterus ✓ most often happens in the Fallopian tube ✓ is quite rare ✓ occurs when the foetus cannot grow and develop outside the uterus ✓ frequently results in a miscarriage ✓ can be very dangerous for the mother. ✓ **(max 3 marks)**
11. Reasons why a miscarriage may occur: fertilised egg does not implant normally in the uterus ✓ foetus is not developing normally ✓ a problem with the placenta ✓ smoking during pregnancy ✓ drinking alcohol during pregnancy ✓ taking drugs during pregnancy ✓ infection during pregnancy (toxoplasmosis) ✓ accident or trauma ✓ unknown (no identified reason). ✓ **(max 2 marks)**

Topic 2.4 Preparation for the birth

1. Factors that Jessica and Rikki may have considered (include two points):
- ▶ where the birth will take place ✓ (hospital or home) ✓
 - ▶ pain relief in labour ✓ (none, epidural, pethidine, entonox, TENS) ✓
 - ▶ what kind of delivery ✓ (water birth, in bed, squatting) ✓
 - ▶ who will be present ✓ (partner, friends, older children). ✓ **(max 4 marks)**
2. Information that might be recorded in Jessica's hand-held notes (any four): Jessica's weight ✓ blood pressure ✓ blood group ✓ urine analysis ✓ any other health issues ✓ results of scans, blood tests or other special tests in pregnancy ✓ dates of antenatal appointments ✓ record of visits with the midwife or obstetrician ✓ details of the birth plan and choices for labour and birth, including decisions about pain relief. ✓ **(max 4 marks)**
3. Why it is important to record information in hand-held notes during pregnancy:
- The importance of the woman having access to all the information about her pregnancy ✓ provides information for everyone involved in caring for the pregnant woman. ✓ Having the information is very important if the woman moves house or leaves the area ✓ and it keep all the information together ✓ highlighting any problems or difficulties. ✓ **(max 4 marks)**
4. Examples of benefits that Jessica and Rikki might gain from attending parenting classes (any four): the opportunity to meet and speak to the midwife and other health professionals involved in the birth ✓ have questions answered ✓ get information about pain relief ✓ receive advice and support ✓ learn about labour and birth ✓ learn breathing exercises for labour ✓ visit the labour ward ✓ learn about practical baby care (e.g. infant feeding, bathing) ✓ learn about being new parents ✓ meet other new parents-to-be. ✓ **(max 4 marks)**





Topic 2.5 Labour and birth

1. Signs that could indicate the onset of Jessica's labour: contractions beginning ✓ a show (plug of mucus and blood) ✓ breaking of the waters (rupture of the amniotic sac). ✓ **(max 3 marks)**
2. Three stages of labour (full descriptions required):
 - Stage 1:** Contractions gradually become stronger and more frequent. ✓
They gradually open up the cervix (neck of the womb). ✓
This is the longest stage of labour and can last, on average, 12–18 hours. ✓
Stage 1 is complete when the cervix is fully dilated (10 cm). ✓
 - Stage 2:** Contractions are very strong. ✓
The mother will need to push with each contraction. ✓
Delivery of the baby's head is the most difficult part of this stage. ✓
An episiotomy (small cut to widen the vagina) may be necessary. ✓
Stage 2 is complete once the baby is born. ✓
 - Stage 3:** After the birth, the umbilical cord is clamped and cut. ✓
The placenta separates from the wall of the uterus and is delivered through the vagina. ✓
Stage 3 is complete once the placenta has been delivered. ✓ **(max 10 marks)**
3. Other methods of pain relief during labour (2 marks each): pethidine ✓ ✓ entonox (or gas and air) ✓ ✓
transcutaneous electrical nerve stimulation (TENS) ✓ ✓ relaxation and breathing. ✓ ✓ **(max 8 marks)**
4. Reasons why labour may be artificially induced: if the pregnancy continues beyond 42 weeks ✓ if the mother has high blood pressure ✓ if the mother has pre-eclampsia ✓ for twins or multiple birth ✓ if the baby's health is at risk ✓ if the mother's health is at risk. ✓ **(max 2 marks)**
5. Correct order of second stage of labour (deduct 1 mark for each wrong answer): B ✓ D ✓ A ✓ E ✓ G ✓ F ✓ C ✓ **(max 7 marks)**
6. To encourage the process of attachment (bonding):
 - ▶ The baby is delivered directly on the mother's abdomen/skin to make skin contact. ✓
 - ▶ The parents hold the baby immediately after birth. ✓
 - ▶ The parents make eye contact with the baby immediately after birth. ✓
 - ▶ The mother breastfeeds the baby as soon as possible after birth. ✓
 - ▶ The parents spend time together with the baby immediately after birth. ✓
 - ▶ The baby stays close by (in the same room) with the parents after birth. ✓ **(max 4 marks)**
7. A Caesarean section may be performed:
 - ▶ as an emergency ✓ because the health of the baby or mother is at risk ✓ and delivery needs to be quick ✓
 - ▶ planned in advance ✓ because of problems in pregnancy ✓ multiple birth ✓ previous Caesarian section birth. ✓ **(max 4 marks)**
8. Role of the father or partner during labour and birth (any four):
 - ▶ to provide moral support and encouragement ✓
 - ▶ to provide physical comfort ✓
 - ▶ to help with breathing exercises and relaxation ✓
 - ▶ to help in decision making (e.g. about pain relief or method of delivery) ✓
 - ▶ to share the experience ✓
 - ▶ to begin the attachment process with the baby. ✓ **(max 4 marks)**




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Topic 2.6 Newborn baby

1. Completed table

Characteristic	Description
Fontanelle	<ul style="list-style-type: none"> ▶ Soft spot on the top of the head ✓ ▶ Where the soft skull bones have not fully closed ✓
Vernix	<ul style="list-style-type: none"> ▶ White greasy substance on the skin ✓ ▶ Protects the baby's skin in the uterus ✓
Startle reflex	<ul style="list-style-type: none"> ▶ If startled by a sudden loud noise ✓ the baby will move its arms outwards ✓

(max 6 marks)

2. Abnormalities that may be detected after a routine examination of a newborn baby:

- ▶ Listening to the heart ✓ may help to detect a heart murmur. ✓
- ▶ Checking fingers and toes ✓ may help to detect extra digits. ✓
- ▶ Checking the hips ✓ may help to detect congenital dislocation. ✓
- ▶ Checking the mouth ✓ may help to detect a cleft palate. ✓
- ▶ Checking the eyes ✓ may help to detect an infection. ✓
- ▶ Testing the reflexes ✓ may help to detect a problem (with the nervous system). ✓
- ▶ Checking the skin ✓ may help to detect a birthmark. ✓
- ▶ (Blood tests are not part of the routine newborn examination, but are carried out after six days.) ✓

(max 4 marks)

 3. Average birth weight of a newborn baby: 3–3.5 kg ✓ **(max 1 mark)**

 4. Conditions that are checked for by a routine blood test around six days after the baby is born: Phenylketonuria (PKU) ✓ Hypothyroidism ✓ Cystic Fibrosis. ✓ **(max 2 marks)**

5. Basic needs of all newborn babies:

- ▶ to feel loved and cared for ✓ to help them feel safe and secure (develops attachment) ✓
- ▶ food and nourishment ✓ to grow and develop normally ✓
- ▶ rest and sleep ✓ for physical wellbeing (general health) ✓
- ▶ warmth and comfort ✓ as babies cannot control their own body temperature ✓
- ▶ protection from infection, danger and harm ✓ as babies are vulnerable (their immune system is immature and they cannot protect themselves). ✓ **(max 6 marks)**

6. To make sure they are meeting Chris' basic needs, Julia and Garry should:

- ▶ Provide food and nourishment ✓ (continuing with breast feeding, support from the health visitor). ✓
- ▶ Make sure Chris gets plenty of rest and sleep ✓ (regular bedtime, naps during the day). ✓
- ▶ Make sure he feels loved and cared for ✓ (regular playtime, nappy changing, bath time, lots of cuddles and close contact). ✓
- ▶ Make sure he is warm ✓ (room temperature, bedding, adequate clothing). ✓
- ▶ Make sure he is safe ✓ (in the home, when out and about, planning for his immunisations). ✓

(max 6 marks)



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7. Cot death is the sudden, unexpected death of a baby for no apparent reason. ✓ It is also known as sudden infant death syndrome (SIDS) ✓ and often happens when the baby is asleep in the cot. ✓

Factors that can reduce the risk of cot death:

- ▶ Do not smoke ✓ during pregnancy or anywhere near the newborn baby. ✓
- ▶ The baby should be put to sleep on its back ✓ with feet to the foot of the cot. ✓
- ▶ Do not let the baby get too hot ✓ (check bedding). ✓
- ▶ Seek medical advice ✓ if the baby is unwell. ✓
- ▶ Do not provide a pillow ✓ as this can cause breathing problems or suffocation. ✓
- ▶ Ideally, the baby's cot should be in the parents' room ✓ for the first 6 months of life. ✓
- ▶ Do not share a bed with the baby ✓ or fall asleep with the baby. ✓ **(max 10 marks)**

8. Reasons why Ria's baby could have been born prematurely: smoking ✓ alcohol ✓ or taking drugs during pregnancy ✓ accident or trauma ✓ family history ✓ previous premature birth ✓ medical problem unknown. ✓ **(max 4 marks)**

9. Problems Ria's baby might experience during the first few days of life: breathing ✓ sucking ✓ maintaining body temperature ✓ vulnerable to infection. ✓ **(max 2 marks)**

10. Difficulties in caring for Ria's premature baby during the first few weeks: fears about his health ✓ difficulties related to his small size ✓ handling him, nappy changing, bathing, clothing sizes ✓ difficulties related to his immaturity ✓ worry about difficulties in feeding him ✓ worry that he is vulnerable to infection. ✓ **(max 6 marks)**

Topic 2.7 Postnatal care

1. Physical and emotional changes during the postnatal period:

Physical	Emotional
<ul style="list-style-type: none"> ▶ Uterus contracting (reducing) to normal size ✓ ▶ Lactation (breasts producing milk) ✓ ▶ Losing weight ✓ ▶ Abdominal and pelvic floor muscles tightening ✓ 	<ul style="list-style-type: none"> ▶ Feeling tearful or easily upset ✓ ▶ Feeling depressed/baby blues ✓ (not postnatal depression, as this is not a normal emotional change)

(max 4 marks)

2. Key items of advice from Angela's midwife:

- ▶ Breastfeeding the baby ✓ (how frequently, any problems) ✓
- ▶ Healthy eating ✓ (importance of iron in the diet and drinking plenty of fluids) ✓
- ▶ Postnatal exercises ✓ (to help tighten abdominal and pelvic floor muscles) ✓
- ▶ Getting plenty of rest and exercise ✓ (looking after her own needs) ✓
- ▶ Making sure she is getting support from her partner and/or family ✓ (help around the house and with the baby). ✓ **(max 6 marks)**

3. Importance of eating healthily in this stage of the postnatal period. (Note: the answer should concentrate on why it is important to eat healthily, not just the foods to eat.)

- ▶ The process of lactation relies on a healthy, balanced diet ✓ particularly protein calcium and iron. ✓
- ▶ Healthy nutrition is important for Angela to fully recover from the birth ✓ both physically ✓ and emotionally. ✓ **(max 4 marks)**

4. Foods that would be good dietary sources of iron: any kind of red meat ✓ any green vegetables ✓ dried fruit ✓ eggs ✓ cocoa ✓ bread. ✓ **(max 3 marks)**

5. Angela can promote her attachment relationship with Sam by: cuddling ✓ skin to skin contact ✓ eye contact ✓ talking or singing ✓ tickling or playing games ✓ breastfeeding ✓ nappy changing ✓ bath time ✓ enjoying being together. ✓ **(max 3 marks)**



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6. Reasons why attachment is so important in the early stages of a baby's life: It helps the baby to develop trust and security. ✓ It makes the baby feel valued. ✓ The baby knows that his or her needs will be met. ✓ It is important for the baby's emotional development (self-concept/self esteem). ✓ It develops the relationship between parents and their baby, known as bonding. ✓ **(max 3 marks)**
7. Angela's husband could support her by providing:
- ▶ practical support ✓ such as housework or shopping ✓
 - ▶ emotional support ✓ such as giving attention and affection, and making her feel special ✓
 - ▶ help with the baby ✓ such as nappy changing, bathing, taking the baby out (so that Angela can rest or just have some time to herself). ✓ **(max 3 marks)**
8. Two checks that the health visitor might carry out on Sam: weight ✓ height ✓ head circumference ✓ gross motor skills ✓ vision ✓ hearing ✓ feeding ✓ environment of the baby ✓ physical wellbeing ✓ descent of testes (in male baby) ✓ discussion about immunisation. ✓ **(max 4 marks)**
9. Examples of questions that the health visitor might ask Angela.
- a) About herself:
- ▶ how she feels physically and emotionally ✓
 - ▶ how she is coping with breastfeeding ✓
 - ▶ how well she is eating/sleeping/taking care of herself ✓
 - ▶ how much support she has from her partner/friends/other family members. ✓
- b) About Sam:
- ▶ how well he is feeding and sleeping ✓
 - ▶ if he seems content with his feeding routine and is gaining weight ✓
 - ▶ if he responds to her voice and face, and if he is smiling yet ✓
 - ▶ if she has any questions or concerns about Sam ✓
 - ▶ if she has information about the baby clinic/health centre/local support group. ✓ **(max 4 marks)**
10. Postnatal depression: is a rare condition. ✓ It is different to 'baby blues' (which is normal). ✓ It can be a serious condition. ✓ It should always be carefully monitored and referred for specialist help. ✓ Hormone levels in a woman's body change after the birth of a baby. ✓ Changing hormone levels can influence a woman's mood or emotional state. ✓ **(max 4 marks)**





3 Diet, health and care of the child

Topic 3.1 Nutrition and healthy eating

1. Completed table

Nutrient	Function in the body	Example foods
Protein	growth and repair of body tissue ✓	meat, fish, milk, cheese, eggs, soya, beans, pulses
Carbohydrate (starches and sugars)	to provide energy	starch: bread ✓ potatoes ✓ pasta ✓ rice ✓ biscuits and cakes ✓ sugar: sugar ✓ sweets ✓ chocolate ✓ biscuits and cakes ✓
Fat ✓	to provide warmth and energy	butter, cream, cheese, eggs, olive oil, nuts
Vitamin A	healthy skin and eyes	oily fish ✓ green vegetables ✓
Vitamin B group	healthy nervous system ✓	wholegrain cereals and bread
Vitamin C	protection against infection	citrus fruits ✓ green vegetables ✓
Vitamin D	helps the body to use calcium ✓	oily fish, eggs, natural sunlight on the skin
Minerals: Iron	healthy red blood cells	red meat ✓ green vegetables ✓
Calcium ✓	strong bones and teeth	milk, cheese, yoghurt, green vegetables, nuts
Fibre	helps digestion ✓ and prevents constipation ✓	fruit, vegetables, wholegrain cereals and bread

(max 10 marks)

2. How to encourage young children to eat healthily:

- ▶ Offer a variety of different foods ✓ and encourage children to try different foods, even if it is just a small amount. ✓
- ▶ Enjoy family mealtimes together ✓ and encourage children to stick to regular mealtimes, rather than 'snacking' between meals. ✓
- ▶ Cook and bake with young children and encourage them to enjoy eating what they make (in moderation). ✓
- ▶ Go shopping as a family and include children in making food choices for meals. ✓
- ▶ Grow food in the garden or in planters and encourage children to help. ✓
- ▶ Have fun with food. For example, discuss the presentation and how the colours may also provide healthy choices (e.g. potatoes, peas and butternut or carrots as part of a meal, or lettuce and tomato when added to a sandwich). ✓
- ▶ Avoid fizzy drinks and processed or 'fast' food, and offer healthier options instead (try to explain why the unhealthy options are unhealthy). ✓
- ▶ Seek advice from the health visitor or family support worker. ✓ **(max 6 marks)**

3. Factors that can influence a child's diet: religion and/or culture ✓ family lifestyle and income or poverty ✓ family preference and/or choices ✓ allergies or food intolerances ✓ illness or medical conditions ✓ exercise and activity level ✓ age or stage of development. ✓ **(max 6 marks):**




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4. a) Lunch for Jack, aged 5 years, who is allergic to wheat flour: should not include foods that contain wheat flour (e.g. pasta, bread, cereal, biscuits, cake) ✓ could include meat, fish, soya, beans (protein, vitamin B) ✓ rice (carbohydrate) ✓ cheese and eggs (fat, vitamin D) ✓ fruit and green vegetables (vitamins A and C, calcium, fibre) ✓ milk (calcium, protein) or water. ✓ **(max 4 marks)**
- b) Dinner for Liad, aged 3 years, who is Jewish: should not include any pork or pork products (e.g. bacon, ham or pork sausage) ✓ could include meat (not pork), fish, soya, beans (protein, vitamin B) ✓ pasta (carbohydrate) ✓ cheese and eggs (fat, vitamin D) ✓ fruit and green vegetables (vitamins A and C, calcium, fibre) ✓ fresh orange juice (vitamin C) or water. ✓ **(max 4 marks)**
- c) Breakfast for Lucy, aged 18 months, whose parents want her to be vegan: should not include any animal products (e.g. meat, milk, cheese, eggs, yoghurt) ✓ could include soya milk (protein, calcium) ✓ cereal (carbohydrate, vitamin B) ✓ wholemeal bread (carbohydrate, vitamin B, iron, fibre) ✓ sunflower spread (fat, vitamins A and D) ✓ fresh orange juice (vitamin C) or water. ✓ **(max 4 marks)**

Topic 3.2 Feeding babies and young children

1. Examples of advice that the midwife may give to Mary about breastfeeding (any three):
- ▶ Eat healthily and include plenty of protein and iron in the diet. ✓
 - ▶ Drink plenty of water. ✓
 - ▶ Avoid drinking alcohol. ✓
 - ▶ Do not take any medication unless advised by the doctor. ✓
 - ▶ Make sure the baby feeds from both breasts at every feeding time. ✓
 - ▶ Feed the baby 'on demand', when the baby is hungry rather than by watching the time. ✓
 - ▶ Have plenty of rest so that you are relaxed when breastfeeding. ✓ **(max 3 marks)**
2. Advantages of breastfeeding (any four):
- ▶ Breast milk is nutritionally balanced for babies. ✓
 - ▶ It is easier to digest. ✓
 - ▶ Breast milk contains antibodies to help protect the baby against some infections. ✓
 - ▶ It is always the right temperature. ✓
 - ▶ There is no need to sterilise any equipment, so there is less risk of the baby contracting infections such as gastroenteritis. ✓
 - ▶ There is less risk to the baby of developing allergies. ✓
 - ▶ Breast milk helps Emma to develop an attachment with her mother. ✓ **(max 4 marks)**
- Note:** The question asks for the advantages of breastfeeding *for the baby*, not the mother, so do not include reasons such as: helps the uterus to contract; uses calories.
3. Examples of the disadvantages of breastfeeding with explanations (any two):
- ▶ Mary's husband or partner will not be able to feed the baby, ✓ so may feel left out. ✓
 - ▶ Mary will not be able to tell how much milk the baby has swallowed during each feed, ✓ which may be a concern for her. ✓
 - ▶ She might want to return to work, ✓ so may not be able to breastfeed Emma. ✓
 - ▶ Mary might find it embarrassing to breastfeed in public. ✓ **(max 4 marks)**
4. Answer should state: Colostrum is the first milk produced by the breasts. ✓
Plus, any two of these points: very high in calories ✓ contains antibodies ✓ a straw-coloured fluid ✓ is produced for about the first three days of lactation (replaced by the production of 'true milk'). ✓
(max 3 marks)
5. Correct order of making up bottle feeds: D ✓ I ✓ G ✓ H ✓ B ✓ J ✓ F ✓ A ✓ E ✓ C ✓ **(max 10 marks)**
6. Sterilise feeding equipment, by: using an electric steam steriliser ✓ using a microwave steriliser ✓ using cold water, chemical steriliser ✓ boiling in water for 10 minutes. ✓ **(max 3 marks)**




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7. It is important to sterilise feeding equipment:
- ▶ to prevent bacteria or germs from spreading infection to the baby, ✓ who has little resistance to infection, ✓ as he or she has an immature immune system ✓ and is thus vulnerable to infection ✓
 - ▶ to prevent the baby from getting infections such as gastroenteritis or thrush. ✓ **(max 3 marks)**
8. Main symptoms of gastroenteritis: tummy cramps ✓ fever ✓ severe vomiting ✓ severe diarrhoea ✓ dehydration. ✓ **(max 4 marks)**
9. Factors that could have caused Jamie's gastroenteritis: not sterilising feeding equipment ✓ not sterilising dummy ✓ poor personal hygiene when preparing feeds ✓ reheating leftover milk for feeding ✓ not storing milk feed in the refrigerator. ✓ **(max 2 marks)**
10. Main symptoms of gastroenteritis in young babies: Severe vomiting and diarrhoea can lead to dehydration. ✓ The baby may need to be hospitalised. ✓ It can be life threatening. ✓ **(max 3 marks)**
11. Advice about preventing gastroenteritis in the future:
- ▶ Always sterilise feeding Jamie's equipment. ✓
 - ▶ Always sterilise Jamie's dummy. ✓
 - ▶ Always wash hands thoroughly before preparing Jamie's feeds. ✓
 - ▶ Never reheat leftover milk for Jamie's feeds. ✓
 - ▶ Always store Jamie's milk feeds in the refrigerator. ✓ **(max 3 marks)**
12. Examples of safe bottle feeding practice (any four):
- ▶ Hold the baby close when feeding. ✓
 - ▶ Make sure the hole in the teat is not blocked or too large. ✓
 - ▶ Throw away any milk that is left in the bottle at the end of the feed. ✓
 - ▶ Make up feeds one bottle at a time. ✓
 - ▶ Store the made up bottle feed in the refrigerator (if it will not be used immediately). ✓
 - ▶ Warm feeds if necessary (use a bottle warmer or stand the bottle in hot water). ✓
 - ▶ Always check the temperature of the milk (on the inside of the wrist) before feeding. ✓
 - ▶ Do not prop up the bottle against a pillow, or leave the baby alone when bottle feeding. ✓
 - ▶ Do not feed the baby too quickly. ✓
 - ▶ Do not reheat any formula milk that is left in the bottle after a feed. ✓
 - ▶ Do not use any milk feed that has been left at room temperature and has not been used within two hours. ✓
 - ▶ Do not keep any milk in the refrigerator for longer than 24 hours. ✓
 - ▶ Do not use a microwave to warm bottle feeds. ✓ **(max 4 marks)**
13. The process of weaning (starting on solid food)

Stage of weaning and age	Consistency of food	Suitable examples
Stage: First ✓ Age: 6-7 months ✓✓	pureed	baby rice mixed with breast of bottle milk, carrot, banana, lentils
Second About 6-9 months	mashed ✓ finger foods ✓	potato, cooked apple, dhal, yoghurt, carrot sticks, pitta bread, rusks
Stage: Third ✓ Age: 9 months ✓	chopped	meat ✓ fish ✓ pasta ✓ rice ✓ beans ✓

(Accept other suitable examples - max 16 marks)

14. Stage Omar has reached: first ✓ **(max 1 mark)**





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15. Suitable foods for Omar at this stage: baby rice mixed with breast milk ✓ pureed carrot or other vegetables (but not cabbage) ✓ pureed banana or apple ✓ pureed lentils or other pulses ✓ jar or packet of a first-stage weaning food. ✓ **(max 4 marks)**
16. Advice about continuing to wean Omar over the next few months, with explanations:
- ▶ Never leave Omar alone when feeding; he can easily choke. ✓
 - ▶ Do not add sugar or salt to weaning foods; this can damage the baby's kidneys. ✓
 - ▶ Do not give Omar cow's milk until he is at least 1 year old; he will not be able to digest it properly. ✓
 - ▶ Avoid offering Omar foods containing additives; these may affect his digestive system and increase the risk of allergies. ✓
 - ▶ Offer a wide variety of foods to encourage Omar's developing sense of taste. ✓
 - ▶ Offer a variety of fruit and vegetables to encourage healthy eating. ✓
 - ▶ Do not rush the weaning process; allow Omar to go through it at his own pace. ✓
 - ▶ Encourage independence by allowing Omar to feed himself with his fingers or with a spoon ✓ and offer Omar drinks in a feeder cup. ✓
 - ▶ Include Omar at family mealtimes, to encourage his social behaviour in the family. ✓
 - ▶ Make mealtimes a happy occasion, to encourage healthy habits and to help to avoid eating problems such as food refusal. ✓ **(max 8 marks)**

Topic 3.3 Food-related problems

1. Examples of diet-related conditions that can affect young children: diabetes ✓ obesity ✓ rickets ✓ constipation ✓ anaemia. ✓ **(max 2 marks)**
2. Food intolerance is a reaction ✓ to certain foods or ingredients ✓ (food allergies are a type of intolerance). ✓ Foods that can cause intolerance: cows' milk ✓ wheat ✓ eggs ✓ shellfish ✓ nuts. ✓ **(max 6 marks)**
3. Reasons why Helena may be refusing food:
- ▶ She may be starting to practice her independence by saying 'no'. ✓
 - ▶ Food may not be the most important thing on her mind; she would rather be playing. ✓
 - ▶ Her appetite will vary depending on how active she has been during the day. ✓
 - ▶ She may enjoy the attention she gets from her parents when she refuses food. ✓ **(max 3 marks)**
4. Advice to Helena's mother to help improve the food refusal situation:
- ▶ Both parents should try to be patient. ✓
 - ▶ Continue to offer attractive, nutritious meals ✓ and stick to regular mealtimes. ✓
 - ▶ Do not offer sweets and snacks between meals ✓ as children will eat when they are hungry. ✓
 - ▶ If parents are really concerned, ask the health visitor for advice. ✓ **(max 4 marks)**
5. Children with ADHD: have difficulty concentrating ✓ and their behaviour is often hyperactive. ✓ Foods commonly associated with ADHD: additives ✓ (e.g. colourings, artificial flavourings and preservatives ✓ fizzy drinks ✓ processed foods). ✓ **(max 4 marks)**
6. Tooth decay happens when bacteria in the mouth react with the sugar ✓ in foods to form acid. ✓ This attacks the tooth enamel and causes decay. ✓ Foods that cause tooth decay include sweets ✓ chocolate ✓ sweet biscuits ✓ tinned fruit in syrup ✓ sweet fizzy drinks ✓ flavoured jellies. ✓ **(max 6 marks)**

Topic 3.4 Childcare

1. The importance of cleanliness: to prevent infections or cross-infection ✓ to protect the skin. ✓ **(max 2 marks)**
2. 'Topping and tailing' involves: washing baby's face, bottom and genitals. ✓ **(max 1 mark)**




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3. Tasks involved in bathing a baby:

- ▶ Collect and arrange all the necessary equipment, toiletries and towels. ✓
- ▶ Before undressing the baby, run the water and test that it is not too hot (it should be about 37 °C) by using a thermometer or the elbow. ✓
- ▶ Undress the baby (except for the nappy) and wrap in a towel near the bath. ✓
- ▶ Before bathing the baby, wipe its face with damp cotton wool, avoiding the use of soap on the skin. Wipe each eye with fresh, damp cotton wool to prevent the spread of infection. ✓
- ▶ Wash the baby's scalp with water and a mild shampoo, rinse and then gently pat dry. ✓
- ▶ Unwrap the baby from the towel, remove the nappy, and clean up any mess. Dispose of the nappy hygienically. ✓
- ▶ Lower the baby into the water, holding and supporting the head at the back of the neck. Wash the baby gently. ✓
- ▶ Lift the baby from the water and pat dry all over, ensuring that all the 'creases' in the skin (behind ears, joints, skin folds, etc.) are completely dry. ✓ **(max 8 marks)**

4. Clothing or footwear should be:

- ▶ hard wearing, washable and easy to dry ✓
- ▶ easy to get on and off (for the child and parent!) ✓
- ▶ comfortable and loose enough for movement ✓
- ▶ the right size to allow for growth ✓
- ▶ suitable for the time of year and local weather conditions ✓
- ▶ safe and free of hazards such as long ties, ribbons and buttons that could be swallowed or choke a baby or young child. ✓ **(max 4 marks)**

5. Nightwear suggestions (accept other suitable suggestions):

- ▶ made from non-flammable materials ✓
- ▶ cool in summer, warm in winter ✓
- ▶ loose enough to allow movement, and should allow access for you to change the nappy or for the child to use the toilet ✓
- ▶ soft and comfortable, to promote sleep ✓
- ▶ free of ribbons or ties around the neck, for safety reasons. ✓ **(max 3 marks)**

 6. A young child should have his or her feet measured regularly: to ensure that shoes fit correctly ✓ to promote foot growth and protect feet ✓ to identify any problems in development. ✓ **(max 3 marks)**

 7. A new pair of shoes should: have enough width ✓ room for growth ✓ protect ✓ support the child's foot ✓ be hard wearing. ✓ **(max 3 marks)**

8. Good footwear should:

- ▶ allow the child's feet to develop and grow naturally ✓
- ▶ not give pain (e.g. tight, small ill-fitting shoes) ✓
- ▶ enable the child to play, run or climb effectively ✓
- ▶ protect the child from accidents or injury to feet. ✓ **(max 3 marks)**




GCSE Home Economics (Child Development) for AQA Student Workbook Activity Answers
Topic 3.5 Child health

1. Answer should include physical and mental health factors to keep young children healthy (any five): eating a nutritious ✓ well-balanced diet ✓ being out in the fresh air ✓ plenty of exercise ✓ plenty of sleep ✓ good hygiene ✓ encouraging hand washing ✓ covering the mouth when coughing or sneezing ✓ using tissues ✓ routine immunisations ✓ playing (inside and outside) ✓ enjoying time with friends and family ✓ appropriate clothing for weather conditions ✓ appropriate living conditions ✓ a safe home. ✓ **(max 5 marks)**
2. Table to show causes and symptoms

Condition	Cause	Symptom
Asthma	Allergic condition ✓ Triggers can be pollen, dust, animal fur ✓	Difficulty breathing ✓ Coughing, (especially at night) ✓
Chicken pox	Virus ✓ Spread by direct contact ✓	High temperature ✓ Raised, red, itchy spots (which blister and scab over) ✓
Meningitis	Virus ✓ Bacteria ✓	Fever ✓ Stiff neck ✓ Blotchy rash ✓

(max 12 marks)

3. Signs of illness in a child (any five): poor appetite ✓ no energy ✓ change in behaviour (unusually quiet, not sleeping well, crying more than usual) ✓ constipation ✓ diarrhoea ✓ vomiting ✓ skin rash ✓ raised body temperature ✓
a cough ✓ headache ✓ stomach ache ✓ earache ✓ runny nose ✓ not gaining weight. ✓ **(max 5 marks)**
4. Explanations should show understanding of the spread of infection, for example:
- ▶ Infection can be spread in the air, between children coughing and sneezing ✓ or by direct contact between children playing together and touching one another. ✓
 - ▶ Infection can be spread from toys and other shared equipment in a group situation. ✓
 - ▶ The spread of infection between young children can happen due to poor hygiene habits ✓ (e.g. not washing hands after using the toilet ✓ handling pets ✓ not using tissues or handkerchiefs). ✓
 - ▶ Some conditions are infectious before any symptoms appear, (the incubation period) ✓ so children can pass on an infection before becoming ill themselves. ✓
 - ▶ Young children may not have been exposed to much infection, so do not have much immunity to infectious conditions. ✓ **(max 6 marks)**
5. Immunity is our natural resistance to infection ✓ the body's defence against infection ✓ the body's immune system fights off infection. ✓ Immunity can be developed by: immunisation in childhood ✓ (e.g. against measles, mumps, rubella) ✓ being infected with a disease, which causes the body to produce antibodies, ✓ which then act to protect the body against further infection. ✓ **(max 6 marks)**




GCSE Home Economics (Child Development) for AQA Student Workbook Activity Answers

6. Routine childhood immunisations

Age given	Immunisation against (vaccine given)
2 months	Diphtheria, tetanus, pertussis (whooping cough) (DTaP) polio (IPV) and Haemophilus influenzae type b (Hib) , which can cause meningitis Pneumococcal infection (PCV)
3 months ✓	Diphtheria, tetanus, pertussis (whooping cough) (DTaP) polio (IPV) and Haemophilus influenzae type b (Hib) Meningitis C (Men C)
4 months ✓	Diphtheria, tetanus, pertussis (whooping cough) (DTaP) polio (IPV) and Haemophilus influenzae type b (Hib) Meningitis C (Men C) Pneumococcal infection (PCV)
Around 12 months	Haemophilus influenzae type b (Hib) ✓ Meningitis C (Men C) ✓
Around 13 months ✓	Measles, mumps and rubella (MMR) Pneumococcal infection (PCV)
3 years and 4 months (or soon after)	Diphtheria, tetanus, pertussis (whooping cough) (DTaP) and polio (IPV) Measles, mumps and rubella (MMR) ✓

(max 6 marks)

7. Answer should show an understanding of children's fears about going into hospital, listening to these fears, the importance of play in preparing children, being truthful when talking to them about the experience.

For example:

- ▶ Visit the hospital beforehand ✓ so that Jamil can see for himself what it is like. ✓
- ▶ Share books, stories or DVDs with Jamil about going to hospital. ✓
- ▶ Talk to him about what will happen ✓ and take time to listen to and answer his questions. ✓ He may be very worried about being away from home and his mum. ✓
- ▶ Reassure Jamil ✓ with small-world play or role-play about going into hospital and/or playing 'doctors and nurses' ✓
- ▶ Encourage Jamil to pack his own overnight bag ✓ to make him feel independent. ✓ Remember to include his favourite toys or special comfort object ✓ to make him feel more secure. ✓ **(max 8 marks)**

8. How Jamil might be affected by going to hospital should show an understanding of: the effects of separation ✓ (from home, friends, family and familiar routines) ✓ the effects of his illness ✓ (physical discomfort or pain, tests, treatment, investigations) ✓ the impact of the unfamiliar hospital environment ✓ (strange surroundings, bed, people, etc.). ✓ **(max 6 marks)**

9. Examples of toys with reasons for choosing them (any four): medical kit for role-play ✓ to practice 'medical check-ups' and being the 'doctor' or 'nurse' ✓ small-world hospital play ✓ to role-play different medical scenarios ✓
books or stories about going into hospital ✓ to reassure, inform, familiarise ✓ soft toys or comfort objects ✓ for reassurance and comfort. ✓ **(max 8 marks)**

10. Ways to take a child's temperature: A forehead strip thermometer ✓ changes colour to give the body temperature reading. ✓ A digital thermometer ✓ shows the temperature clearly on the display ✓ and is placed under a baby's arm or in a child's mouth. ✓ An ear thermometer ✓ is used directly in the child's ear ✓ and provides an accurate reading on the digital display. ✓ **(max 4 marks)**

Note: Answer should not include a clinical, or mercury, thermometer, as it is not suitable for children.



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11. A febrile convulsion happens when the child's body temperature rises to 39 °C or above ✓ and can lead to the child having a convulsion, fit or seizure. ✓

Any three of the following: sponging or bathing in lukewarm water ✓ removing clothing and any blankets or other bedding ✓ using a fan to cool the room temperature ✓ giving the child plenty of drinks of water ✓ giving the recommended, measured dose of liquid paracetamol. ✓ **(max 5 marks)**

12. Important symptoms in a sick child, which indicate that medical help should be called: a high temperature of 39 °C or above ✓ breathing difficulties ✓ a convulsion or fit ✓ child becomes unconscious ✓ very severe or constant diarrhoea and/or vomiting ✓ a purple or red rash that does not fade ✓ if the child has swallowed anything dangerous such as medicine or bleach. ✓ **(max 4 marks)**





4 Development of the child

Topic 4.1 Growth and development

1. Difference between the terms 'growth' and 'development'

- ▶ Growth: relates to the child increasing in size ✓ and changing physically. ✓
- ▶ Development: relates to the child gaining control over his or her body ✓ and learning how to do things. ✓
(max 4 marks)

2. Reasons why babies and toddlers need so much sleep:

- ▶ Children need sleep to help them grow and develop. ✓
- ▶ Rest and sleep allow for recuperation of energy. ✓
- ▶ Babies and children who don't get enough sleep become irritable and upset. ✓ **(max 3 marks)**

3. Examples of what Annika could say about centile charts: Centile charts are graphs ✓ that are used to check children's growth ✓ and monitor progress in height and weight. ✓ Different charts are used for boys and girls ✓ and should be completed regularly during the first year of life. ✓ Using centile charts can help to detect growth problems, ✓ so they are important records for parents to keep. ✓ **(max 4 marks)**

4. Five factors that can influence the development of children (accept other suitable suggestions):

- ▶ factors during pregnancy (e.g. alcohol, drugs, medicines, infections, nutrition) ✓
- ▶ factors during labour and birth (e.g. difficult labour, prematurity) ✓
- ▶ genetic conditions (e.g. Down's syndrome) ✓
- ▶ encouragement and care (e.g. stimulation from parents) ✓
- ▶ environment (e.g. housing, living conditions). ✓ **(max 5 marks)**

5. Importance of conditions for children's development (three each).

Housing environment: Living conditions should be safe, warm and comfortable. ✓ Damp or overcrowded conditions can lead to ill health ✓ and may affect a child's development. ✓ Lack of home safety can lead to accidents ✓ and abusive situations. ✓

Exercise: It is important for children to develop and practice their physical skills. ✓ It improves their appetite ✓ and helps them sleep. ✓ Exercise helps to prevent obesity ✓ and associated problems (e.g. diabetes). ✓
(max 6 marks)




GCSE Home Economics (Child Development) for AQA Student Workbook Activity Answers
Topic 4.2 Physical development

1. a) Gross motor skills: the development of large movements, balance and body coordination (e.g. running, skipping and kicking a ball). ✓
- b) Fine motor skills: the development of hand movements (e.g. grasping, fastening buttons and using scissors). ✓ **(max 2 marks)**

2. Completed table (Accept other appropriate answers.)

Age	Gross motor skills	Fine motor skills
3 months	i) Some head control ✓ ii) Lifts head and chest off the floor (prone position) ✓	Plays with hands Holds an object for a short time
6 months	Sits with some support Rolls over	i) Reaches out and grasps objects ✓ ii) Uses the palmer grasp (whole hand) ✓
1 year	i) May crawl or bottom shuffle ✓ ii) May walk with hands held or using furniture for support ✓	Points with index finger Claps hands together
18 months	i) Walks steadily alone ✓ ii) May walk up or down stairs with help ✓	Feeds self with a spoon Builds a tower of three blocks
2-3 years	Throws and kicks a ball Run Walk upstairs	i) Uses a fine pincer grasp ✓ ii) Starting to use preferred hand ✓
5 years	i) Hops and balances on one foot ✓ ii) Skips ✓	Uses a knife and fork Fastens and unfastens buttons

(max 12 marks)

3. Ways to encourage Annika's gross motor skills (accept other appropriate activities; any two):

- ▶ playing outside, walking, running and climbing ✓ to encourage muscle strength and body coordination and confidence ✓
- ▶ kicking a football ✓ to encourage body coordination and balance ✓
- ▶ playing with, pushing along, sitting on and riding on toys ✓ to encourage confidence in walking ✓
- ▶ dancing or moving to music ✓ to encourage body coordination ✓
- ▶ tumble tots ✓ to encourage muscle strength, balance, body coordination and confidence. ✓

(max 4 marks)

4. Ways to encourage Annika's fine motor skills (accept other appropriate activities):

- ▶ painting with finger paints and a chunky paint brush ✓ to encourage manipulative skills and hand-eye coordination ✓
- ▶ play-dough ✓ to encourage fine muscle strength and manipulative skills ✓
- ▶ playing with shape sorters, simple jigsaw puzzles, wooden blocks ✓ to encourage hand-eye coordination ✓
- ▶ opportunities to feed herself, using a spoon and her fingers ✓ to encourage manipulative skills, grasping and hand-eye coordination ✓
- ▶ encouraging her to help to dress herself ✓ to encourage hand and finger movements and coordination. ✓

(max 4 marks)





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5. Playing outside to develop physical skills, with reasons (at least two examples):
- ▶ opportunities for exercise outdoors ✓ to develop muscle strength and stamina ✓
 - ▶ plenty of space for practising physical skills ✓ such as running and climbing ✓
 - ▶ different environment ✓ to challenge physical skills and encourage risk taking ✓
 - ▶ fresh air ✓ important for physical body functioning ✓
 - ▶ sensory stimulation ✓ (different sights, sounds, smells, things to touch). ✓ **(max 5 marks)**
6. Activities to encourage fine motor skills, with reasons (accept other appropriate activities; any three):
- ▶ threading beads, constructing toys, building blocks and jigsaws ✓ to encourage manipulative skill and hand-eye coordination ✓
 - ▶ drawing or colouring with a pencil or crayons ✓ to encourage tripod grasp and hand-eye coordination ✓
 - ▶ using a computer mouse and keyboard ✓ to encourage manipulative skills and hand-eye coordination ✓
 - ▶ baking or cooking ✓ to encourage using utensils and manipulative skills ✓
 - ▶ dressing or undressing self or toys ✓ to encourage skills with fastenings, zips, buttons and hand-eye coordination. ✓ **(max 6 marks)**
7. Activities to encourage the vision and hearing of a 3-month-old, with reasons (any three):
- ▶ playing peek-a-boo or similar activity with an adult ✓ to encourage focusing, following with the eyes and listening to voices ✓
 - ▶ musical mobile or similar ✓ to encourage focusing on objects and listening to different sounds ✓
 - ▶ being outside or going out and about ✓ providing stimulation from different sights (trees, buildings) and sounds (traffic noise, wind, music) ✓
 - ▶ sharing interactive books with an adult ✓ providing stimulation from pictures, sounds and the adult voice. ✓ **(max 6 marks)**
8. Signs of teething (any three): red cheeks ✓ chewing on fist or hard objects ✓ producing excess saliva and dribbling ✓ sore gums ✓ excessive crying and fretfulness. ✓ **(max 2 marks)**
9. Parents should encourage good dental health: to prevent tooth decay or gum disease ✓ to establish good habits for the future ✓ to encourage healthier eating. ✓
- Ways to encourage good dental health: Encourage regular teeth brushing (after meals and at bedtime). ✓ Help children with teeth brushing. ✓ Praise children and, if desired, give stickers or other rewards for brushing teeth properly. ✓ Provide novelty or character toothbrushes and toothpaste. ✓ Teach children to avoid sweets, sweet foods and fizzy drinks. ✓ Encourage foods that are high in calcium, e.g. milk and cheese ✓ and foods that encourage chewing, e.g. apples and carrot sticks. ✓ Arrange regular visits to the dentist. ✓ **(max 8 marks)**

Topic 4.3 Intellectual and language development

1. Abilities that improve as a result of intellectual development (any two): thinking ✓ language and speech ✓ memory ✓ numeracy. ✓ **(max 2 marks)**
2. Ways babies explore and learn about their environment: sight, to identify and look at objects ✓ taste, to test and try to understand edible and inedible objects ✓ touch, to explore, stroke and hold objects ✓ hearing, to develop awareness and knowledge of people and things around them ✓ smell, to identify the mother. ✓ **(max 3 marks)**
3. Examples of conditions or factors that promote children's learning and intellectual development (any three): genes ✓ a secure, loving, trusting attachment relationship ✓ confidence that basic needs will be met ✓ opportunities to talk or communicate with adults ✓ toys, books, activities to stimulate exploration, problem-solve and try out new activities. ✓ **(max 3 marks)**
4. Nature: biologically-based factors or influences ✓ such as genes. ✓
- Nurture: factors or influences based in person's external environment ✓ (e.g. education and play opportunities). ✓ **(max 4 marks)**




GCSE Home Economics (Child Development) for AQA Student Workbook Activity Answers

5. Examples of toys to stimulate Daniel's learning and intellectual development: rattles ✓ mobiles ✓ soft toys ✓ teddies ✓ plastic rings ✓ keys ✓ musical toys ✓ plastic ware. ✓ **(max 4 marks)**
6. Examples should explain the link between copying or imitative behaviour and learning:
- ▶ Young children can learn sounds, words and language ✓ by imitating parents. ✓
 - ▶ Young children can learn social roles ✓ by imitating the behaviour of adults (e.g. eating at the table). ✓
 - ▶ Young people can learn social behaviours ✓ by imitating adults in games (e.g. 'Let's pretend'). ✓
- (max 4 marks)**
7. Examples of how looking at books and being read stories help a child's intellectual development: promotes language development ✓ helps the child to learn concepts ✓ develops thinking ✓ develops imagination ✓ other examples acceptable. ✓ **(max 4 marks)**
8. Completed table

Care role	Example: What could I do to promote early learning?
Parent	Read books ✓ Provide play opportunities ✓
Childminder	Play games ✓ Read stories ✓
Playgroup worker	Promote learning through play ✓ art ✓ crafts ✓ physical activity ✓
Pre-school teacher	Develop basic reading ✓ writing ✓ numeracy skills ✓

(max 4 marks)

9. Examples of intellectual development norm expected of each child are as follows.
- a) Yasmin: uses basic sounds to say simple words ('mama'). ✓
 - b) Bella: uses two-word sentences ('dog gone'). ✓
 - c) Dean: Can describe events accurately and hold short conversation. ✓ **(max 3 marks)**
10. Numeracy skills that Dean might have by the age of 4: should be able to match numbers to objects ✓ know that numbers have an order ✓ count to 20. ✓ **(max 4 marks)**
11. Ways to encourage babies to develop language skills (any three): Talk to them. ✓ Listen carefully to them. ✓ Play music and sing to them. ✓ Encourage babies to mimic and use sounds. ✓ Read stories to them. ✓ **(max 3 marks)**
12. a) True ✓
b) False ✓
c) True ✓
d) True ✓
e) True ✓ **(max 5 marks)**
13. Language development 'milestones' during the first six months:
- Birth: communicates through physical movement ✓ such as moving arms and legs, by crying and through eye-contact. ✓
- One month: begins to make gargling sounds ✓ will look at people to get their attention ✓ interacts by making 'cooing' sounds. ✓
- Three months: smiles and makes noises to communicate with familiar people ✓ cries loudly to express discomfort or hunger. ✓
- Six months: can make a number of speech-like sounds such as 'goo', 'der', 'dhah' and 'ka', ✓ will 'talk' to themselves by babbling ✓ and looks for the sources of sounds heard. ✓ **(max 4 marks)**





GCSE Home Economics (Child Development) for AQA Student Workbook Activity Answers

14. Language development 'milestones' reached before second birthday (any two):
- Nine months: can use basic sounds ✓ to say simple words such as 'da da' and 'ma ma'. ✓
 - 12 months: can follow simple instructions ✓ can use simple words such as 'bye bye'. ✓
 - 15 months: has enough vocabulary to join in during nursery rhymes and songs ✓ and enjoys listening to someone reading stories. ✓
 - 18 months: babbles simple sentences and can respond to simple questions and more complex requests and instructions. ✓
 - Two years: can make two-word sentences ('dog gone'), understands many words ✓ and can name familiar, everyday objects. ✓ **(max 4 marks)**
15. Can use sentences to describe feelings: 4 years of age. ✓ **(max 1 mark)**
16. Factors that affect the pace of language development include:
- Gender – boys' language development tends to be slower than girls'. ✓
 - Developmental focus – for example, if a child is concentrating on learning to walk, his or her speech may be delayed. ✓
 - Lack of opportunity – this can occur where a sibling 'talks for' the child, giving them less chance to practice their own speech. ✓
 - Lack of stimulation – this can occur in families where people do not talk to one another very much. ✓
 - Disabilities – a child with a hearing impairment, ✓ learning disability ✓ or a physical ability that affects cognitive development may experience slower and more limited language development. ✓ **(max 6 marks)**

Topic 4.4 Social and emotional development

1. Bonding refers to: a strong feeling of connection or an emotional link ✓ between a parent or carer and a baby. ✓ **(max 2 marks)**
2. Bonding is important because: It is the basis of emotional security and trust. ✓ It is needed to develop a relationship. ✓ Failure to bond leads to 'failure to thrive' physically, and emotional problems. ✓ **(max 2 marks)**
3. An attachment relationship: refers to close personal relationship between parent or carer and child ✓ provides a blueprint for future personal relationships ✓ gives a sense of emotional security and self-esteem. ✓ **(max 3 marks)**
4. Examples of factors that affect the quality of the attachment relationship (any three):
- ▶ how sensitively the parent understands and responds to the baby's needs ✓
 - ▶ the personality of the parent or carer ✓
 - ▶ the consistency of the care that the baby receives ✓
 - ▶ the baby's temperament. ✓ **(max 3 marks)**
5. Explanation of why Miriam acts as she does could mention: separation anxiety ✓ lack of confidence ✓ doesn't trust other people ✓ feels frightened without mum ✓ age-related sign of attachment. ✓ **(max 3 marks)**
6. Miriam's parents can help her to overcome her worries, by (any two): sending her to play groups to increase her exposure to other children ✓ using babysitters ✓ inviting parents and children to play at home. ✓ **(max 2 marks)**
7. A child is able to develop emotionally when he or she (any four):
- ▶ feels loved and experiences affection from parents and carers ✓
 - ▶ is given opportunities to learn and receive support to become more independent ✓
 - ▶ is valued as an individual ✓
 - ▶ is praised for acceptable behaviour ✓
 - ▶ receives reassurance and support to become self-confident ✓
 - ▶ feels secure in relationships with other people. ✓ **(max 4 marks)**




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8. Regression: involves returning to a former emotional state ✓ and when the child uses 'baby' or more infant-like language or behaviour (e.g. bed wetting). ✓ **(max 2 marks)**
9. To help a child overcome regression problems (any two): Be calm and patient. ✓ Be supportive. ✓ Talk about the child's worries. ✓ Try different ways of dealing with the child's worries. ✓ **(max 2 marks)**
10. Emotional development between birth and third birthday

Age	Development milestone
Birth	Uses simple body movements, cooing sounds and facial expression to express pleasure ✓ cries when uncomfortable, frustrated or in need of attention (such as when wet or hungry) ✓
1–2 months	Begins to express personality, using sounds and non-verbal communication to show when, for example, feeling calm, excited or content ✓
3 months	May show enjoyment of routines such as bath time, by giggling, squealing and kicking legs; often makes cooing sounds and 'shouting' noises to show happiness ✓
4–5 months	May smile at other people and is learning new facial expressions to express own emotions ✓
6 months	May be shy with strangers and is likely to cling to a parent or carer for security ✓ is able to smile, laugh, cry, coo, use body language and squeal to express growing range of emotions ✓
9 months	Able to express anger ✓ may use comfort toys ✓ may develop a fear of strangers and sometimes 'separation anxiety' when the mother or carer is not there or leaves the room ✓ begins to express likes and dislikes, e.g. in choice of food, clothing, TV programmes ✓
12 months	Seeks attention, reassurance and shows affection for familiar adults ✓ cuddles up to parents, can become fearful (e.g. of a vacuum cleaner or loud noises) ✓ or angry if toys are taken away or if frustrated by something or someone ✓
15 months	Likely to be more co-operative but also has temper tantrums ✓ mood swings can occur rapidly and often ✓
18 months	Shows greater independence and expresses emotions more strongly ✓ displays of rage and frustration, and temper tantrums, can seem quite alarming and powerful! ✓
2 years	May still have frequent temper tantrums but is becoming more inquisitive about the environment around them and other people ✓ language development helps the child to express his or her feelings ✓
2½ years	May become fearful (e.g. of the dark or of strangers) ✓ may express strong emotions because of frustration and insecurity but tantrums usually lessen as speech improves ✓ may be irritable due to tiredness, hunger and boredom ✓
3 years	Able to be caring towards others ✓ is more independent and emotionally stable ✓ though some children may have calmed down, others may still struggle with strong emotions ✓ some children may become very confident, while others may still be fearful and insecure ✓

(max 10 marks)

11. Socialisation refers to: the process of learning ✓ the behaviours, attitudes, values and ways of life of a society. ✓ **(max 2 marks)**
12. Egocentric refers to: self-centredness ✓ or a person who doesn't take other's needs into account. ✓ **(max 2 marks)**




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13. Kathryn's mum can help to develop her social skills by:

- ▶ creating and maintaining a secure and loving relationship with her ✓
- ▶ providing Kathryn with lots of play opportunities ✓
- ▶ introducing her to other people and the wider social world (e.g. via trips and other activities of interest) ✓
- ▶ establishing clear behaviour boundaries and enforcing these firmly and fairly ✓
- ▶ encouraging and rewarding Kathryn to share and co-operate with other children ✓
- ▶ communicating with her whenever there is an opportunity (e.g. at meal, play and bath times) ✓
- ▶ rewarding and reinforcing acceptable and socially desirable behaviour (e.g. politeness, hand washing and sharing) with attention and positive comments. ✓ **(max 4 marks)**

14. Responses should draw on the following range of milestones.

Age	Development milestone
Birth	Will cry when he or she feels lonely ✓ can be comforted by being cuddled and gently rocked ✓
1 month	Can recognise his or her mother's face ✓ and responds to communication from familiar adults using sounds, eye-contact and body language ✓
3 months	Enjoys company, ✓ smiles a lot to get attention, ✓ communicates pleasure and happiness ✓ and generally enjoy events such as being fed and bath time ✓
6 months	Offers toys to others ✓ and may become shy and anxious in the company of strangers ✓
9 months	Notices and smiles at his or her own reflection, ✓ can join in and enjoy peek-a-boo games ✓ and has much greater ability to respond to others ✓
12 months	Enjoys hugging people he or she knows well ✓ and will join in social activities ✓
15 months	Becomes more physically capable, ✓ more self-confident ✓ and will learn to mimic the behaviours, sounds and mannerisms made by others ✓
18 months	May be much more sociable with other family members ✓ and may approach and socialise others in a more independent way ✓
2 years	May be independent and confident some of the time but insecure and clingy at other times ✓ usually knows and can refer to him- or herself by own name ✓
2½ years	Able to play alongside (parallel play) other children comfortably, ✓ can go to the toilet with help ✓ and is able to develop better feeding skills (e.g. using a spoon) ✓
3 years	Can learn to dress and feed him- or herself with minimal help from parents ✓ likes to take part in and helps with adult activities ✓ and is able to play more directly with other children (joining-in play) ✓

(max 12 marks)

15. To teach good discipline to young children, adults should, for example:

- ▶ demonstrate a good example by the way they behave and talk to their children ✓
- ▶ be consistent in the way they approach issues such as telling the truth and how to deal with negative behaviour ✓
- ▶ give children immediate and clear praise for the positive aspects of their behaviour ✓
- ▶ avoid getting into a 'battle of wills' over behaviour issues with their children ✓
- ▶ try to divert a child's attention into positive behaviour when they start to slip into negative behaviours. ✓ **(max 5 marks)**




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16. Children need to learn acceptable patterns of behaviour: to develop self-control ✓ to receive praise and positive feedback from others ✓ to learn acceptable social behaviour ✓ to form social relationships with others ✓ to fit in with family and other social groups. ✓ to avoid getting into trouble or being punished ✓ to avoid rejection or social isolation ✓ to feel secure and safe within relationships ✓ to feel happy and part of social groups ✓ to obtain work in future. ✓ **(max 10 marks)**
17. Examples of ways Sean's mum could respond to his aggressive behaviour (any two): Use 'time out'. ✓ Disapprove of behaviour without rejecting the child. ✓ Withdraw attention. ✓ Explain why behaviour is not acceptable. ✓ **(max 2 marks)**
18. Reasons why smacking children for negative behaviour is controversial (any two): It doesn't teach children how to behave. ✓ It gives children the message that hitting or violence is an acceptable response. ✓ **(max 2 marks)**

Topic 4.5 Learning and play

1. Examples of early years settings in which pre-school children can participate in play activities: solitary or solo play ✓ parallel play ✓ looking-on play ✓ joining-in play ✓ co-operative play. ✓ **(max 5 marks)**
2. Examples of types of children's play that Rashida might see at the nursery (any four): physical play ✓ creative play ✓ imaginative play ✓ exploratory play ✓ manipulative play ✓ social play. ✓ **(max 4 marks)**
3. Parallel play: when children play alongside ✓ but not directly with one another. ✓ **(max 2 marks)**
4. Examples of ways to use play to promote learning and development:
- ▶ Physical activities ✓ such as jumping, riding scooters, climbing ✓ to develop physical skills and body strength. ✓
 - ▶ Creative play ✓ such as making music or painting ✓ to develop imagination and creativity. ✓
 - ▶ Imaginative play ✓ such as 'Let's pretend' games or dressing up ✓ to develop language skills and imagination. ✓
 - ▶ Exploratory play ✓ using noisy toys or sensory objects ✓ to promote use of senses and problem-solving skills. ✓
 - ▶ Social play ✓ using games such as 'hide and seek' or pretend picnics ✓ to promote sharing and co-operation between children. ✓ **(max 6 marks)**
5. The children are engaging in: imaginative play. ✓ **(max 1 mark)**
6. For example, children learn: language skills ✓ to be imaginative ✓ about social roles ✓ about other people's feelings ✓ to co-operate and interact with others. ✓ **(max 5 marks)**
7. Safety hazards to look for when choosing toys (any four): sharp edges ✓ staples ✓ pins ✓ spikes ✓ loose or ill-fitting parts ✓ lead-based paint ✓ toxic glues. ✓ **(max 4 marks)**
8. Completed table

Child	Suitable toy	Abilities promoted
a) 6-month-old child	Push or pull toy ✓ basic construction toy ✓	Holding ✓ basic manipulation of objects ✓
b) 18-month-old child	Simple jigsaw ✓ play 'house' or 'tent' ✓	Fine motor skills ✓ thinking or problem-solving ✓ imagination ✓
c) 3-year-old child	Scooter ✓ bicycle ✓	Gross motor skills ✓ balance ✓
d) 5-year-old child	Shop till ✓ clock ✓ kitchen utensils ✓	Concentration ✓ numeracy ✓ imagination ✓

(1 mark per suitable toy, 1 mark per ability promoted - max 8 marks)





5 Support for the parent and child

Topic 5.1 Types of support for parents and children

1. Organisations that provide most statutory care services for children and families: NHS Trusts ✓
local authorities. ✓ **(max 2 marks)**
2. Examples of statutory services provided for children and families: GP services ✓ housing ✓ education ✓
community safeguarding. ✓ **(max 2 marks)**
3. i) Self-referral: service user ✓
ii) Professional referral: practitioner ✓
iii) Third-party referral: friend or relative of service user ✓ **(max 3 marks)**
4. Types of referral being used to obtain statutory services in each scenario:
 - a) Self ✓
 - b) Professional ✓
 - c) Third party ✓ **(max 3 marks)**
5. Role of a social worker in a children and families team – answer should refer to: assessment of client needs ✓
referral to specialist services ✓ advocacy role for family in court or at meetings ✓ carrying out 'risk
assessments' ✓ assistance to claim benefits. ✓ **(max 4 marks)**
6. Examples of the role of health visitors in caring for the mother and baby after the birth (accept other
suggestions): visit mothers and babies at home soon after birth ✓ provide information and advice on child
development and behaviour ✓ offer guidance and information on immunisation ✓ provide help with feeding,
sleeping or other childcare issues ✓ organise baby clinics to monitor babies and infants ✓ run support groups
for parents. ✓ **(max 6 marks)**
7. Examples of sources of financial support that are available from statutory services (any three): child benefit ✓
statutory maternity pay ✓ statutory paternity pay ✓ maternity allowance ✓ child tax credits ✓ free dental
treatment and prescription charges. ✓ **(max 3 marks)**
8. Examples of services offered by integrated children's services in the UK (any three):
 - ▶ receiving referrals from health visitors and GPs for family and child support ✓
 - ▶ making referrals to specialist health, social care and early education services ✓
 - ▶ assessing and identifying vulnerable children ✓
 - ▶ providing information and advice to families ✓
 - ▶ compiling and managing information about children and families ✓
 - ▶ providing health, educational and support staff and interventions to help children and families in need. ✓**(max 6 marks)**
9. The Red Balloon Nursery company is: a private sector provider. ✓ **(max 1 mark)**
10. Examples of characteristics of a voluntary sector provider of services for children and families: run on not-for-
profit basis ✓ independent of government ✓ often run by volunteers ✓ service users. ✓ **(max 2 marks)**
11. Examples of characteristics of a private sector provider of services for children and families: charge users fees ✓
independent of government ✓ profit-making. ✓ **(max 2 marks)**
12. Examples of services provided by local voluntary sector organisations for pre-school children and families:
pre-school nurseries ✓ family support services ✓ play groups ✓ child protection services ✓ toy libraries. ✓
(max 2 marks)
13. Award 6 marks for research ✓✓✓✓✓✓ and remaining 9 marks for accurate and well-expressed summary
of findings. ✓✓✓✓✓✓✓✓✓✓ **(max 15 marks)**
14. Private sector organisations that provide services for pre-school children and families (any four): playgroups ✓
childminders ✓ crèches ✓ nurseries ✓ babysitters ✓ play centres. ✓ **(max 4 marks)**




GCSE Home Economics (Child Development) for AQA Student Workbook Activity Answers
Topic 5.2 Childcare provision

1. Examples of day care provision available for pre-school children in the UK (any four): day nurseries ✓ play groups ✓ childminders ✓ workplace crèches ✓ kindergartens ✓ nursery schools. ✓ **(max 4 marks)**
 2. Examples of reasons why the demand for day care provision has risen steadily over the last 25 years in the UK: increase in number of women in paid work ✓ recognition of benefits of early education and play for children ✓ increase in availability of pre-school provision ✓ increase in funding from employers and government ✓ special needs provision now widely available. ✓ **(max 4 marks)**
 3. Andrea uses day care provision for her daughters because it enables her to work away from home. ✓ **(max 1 mark)**
 4. Examples of how job-sharing can be beneficial for working parents: enables job-sharers to combine work and childcare ✓ reduces pressure on parents ✓ increases family income ✓ enables job sharers to maintain a career. ✓ **(max 2 marks)**
 5. Two other ways Andrea's employer could provide Andrea with flexible working arrangements: offer flexible hours ✓ allow her to work from home. ✓ **(max 2 marks)**
 6. Areas of early learning, covered by the EYFS curriculum: personal, social and emotional development ✓ communication, language and literacy ✓ problem solving ✓ reasoning and numeracy ✓ knowledge and understanding of the world ✓ physical development ✓ creative development. ✓ **(max 3 marks)**
 7. Student responses should be based on accurate information about services in the local area. Ideally students should name each example of local service and obtain information about their services from a website, poster or leaflet. ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ **(max 8 marks)**
 8. Student responses should be based on investigation of the Ofsted website or another government or local authority site that provides reliable information on the role of Ofsted in relation to early years and childcare provision. ✓ ✓ ✓ ✓ **(max 4 marks)**
 9. Student responses should be based on research into the role of private sector childminders. Ofsted, local authority and early years websites provide relevant information on this. (Award 6 marks for research and investigation ✓ ✓ ✓ ✓ ✓ ✓ and 9 marks for accurate, informative summary. ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓)
- Responses may also include points such as:
- ▶ Childminders provide care for other people's preschool children in the childminder's home environment.
 - ▶ Childminders care for much smaller groups of children than nursery schools or day nurseries.
 - ▶ The group of children being cared for may include one or more of a child minder's own children.
 - ▶ All childminders must be registered with their local authority, they must implement the EYFS curriculum and are inspected by Ofsted to ensure that the care and early education provision they offer meets the required standard. **(max 15 marks)**
10. Parents may choose to use a childminder because:
 - ▶ They may offer flexible hours, starting earlier and finishing later than other service providers. ✓
 - ▶ They may prefer a more homely environment for their children, and see it as being less threatening than a school or day care nursery environment – an important consideration for some parents when the child is very young. ✓
 - ▶ The childminder may charge lower fees than day nurseries. ✓
 - ▶ The childminder may provide children with opportunities to socialise with and get to know other children in a smaller, more supportive group and in a family environment. ✓ **(max 3 marks)**
 11. Informal care: childcare provided by parents and other relatives ✓ at in the child's own home on a voluntary, unpaid basis. ✓ **(max 2 marks)**
 12. Examples of forms of informal care for pre-school children in the UK: basic education ✓ safeguarding ✓ feeding ✓ washing ✓ stimulation through play ✓ interaction and communication ✓ transport ✓ babysitting. ✓ **(max 6 marks)**





Topic 5.3 Educational provision and the Early Years Foundation Stage (EYFS)

- EYFS curriculum: the learning and development standards for the providers of education and care for children aged 0–5 years ✓ ✓
One mark for each theme: A Unique Child ✓ Positive Relationships ✓ Enabling Environments ✓ Learning and Development ✓ **(max 6 marks)**
- Areas of early learning, covered by the EYFS curriculum (any three): personal, social and emotional development ✓ communication, language and literacy ✓ problem solving ✓ reasoning and numeracy ✓ knowledge and understanding of the world ✓ physical development ✓ creative development. ✓ **(max 3 marks)**
- Answer to describe a play activity that Geraldine might plan for the pre-school children in her class, which would help to develop their problem solving, reasoning and numeracy skills, should focus on an activity that involves children figuring things out ✓ using mathematical skills ✓ (e.g. shape, size, counting, measuring, weighing, comparing). ✓ Examples are:
 - ▶ construction activities ✓ with different materials (junk modelling) ✓
 - ▶ role-play activities ✓ (e.g. 'shoe shop') ✓
 - ▶ making large dens outside ✓
 - ▶ floating and sinking activities in water. ✓ **(max 8 marks)**
- Answer to a play activity that Geraldine might plan for the pre-school children in her class, which would help to develop their knowledge and understanding of the world, should focus on an activity involving children learning ✓ about the world around them ✓ (e.g. science, nature, different countries or cultures). ✓
Examples are: gardening ✓ planting and growing things ✓ cooking or baking ✓ tasting fruits from different countries ✓ role-play with costumes from various parts of the world ✓ nature walks, ✓ **(max 8 marks)**
- Advantages and disadvantages of the EYFS curriculum (two each).
Advantages:
 - ▶ establishes clear national standards for learning and development in the pre-school years ✓
 - ▶ ensures that all children have equal opportunities to develop their knowledge and learning skills before they start school ✓
 - ▶ provides a way of monitoring performance of early years providers ✓
 - ▶ improves opportunities and raises standards for pre-school children. ✓
 Disadvantages:
 - ▶ pushes children into learning literacy and numeracy too early ✓
 - ▶ prevents children from enjoying and experimenting with learning through play ✓
 - ▶ imposes stressful demands on very young children ✓
 - ▶ causes some children difficulties because they have an early experience of failure. ✓ **(max 4 marks)**

Topic 5.4 Support for families of children with special needs

- Reasons why a child may have special needs (any three): disability ✓ learning difficulty or developmental delay ✓ health or emotional problem. ✓ **(max 3 marks)**
- The effects of foetal alcohol syndrome include: abnormal facial features ✓ reduced growth ✓ central nervous system abnormalities ✓ impaired learning and memory skills ✓ behaviour problems such as hyperactivity. ✓ **(max 4 marks)**
- Children with Down's syndrome may have: learning difficulties ✓ heart defects ✓ hearing problems ✓ sight problems ✓ difficulties managing own safety ✓ increased risk of developing infections ✓ difficulties with everyday living tasks (e.g. washing, dressing, eating independently). ✓ **(max 5 marks)**



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4. Possible effects a child with special needs could have on other children in the family (accept other examples):
- ▶ Positive effects: may enrich family relationships ✓ source of love and affection ✓ may give the other child or children insight into the needs of people who are vulnerable. ✓
 - ▶ Negative effects: may feel they get less attention than the sibling with special needs ✓ may find social or holiday opportunities restricted by the needs of the sibling with special needs ✓ may get less time and support from parents in comparison to sibling with special needs. ✓ **(max 6 marks)**
5. Ways relatives can support and assist a family who have a child with special needs (accept other examples; any three): provide childcare ✓ or respite ✓ provide practical support ✓ provide emotional and social support. ✓ **(max 3 marks)**
6. Examples of support services: respite services ✓ voluntary organisations providing specialist advice and support (e.g. Mencap) ✓ help in adapting housing ✓ special schools ✓ day centres ✓ disability and carer support welfare benefits. ✓ **(max 6 marks)**
7. Respite care is a form of support that allows families to take a short, temporary break from caring for a child with special needs. ✓ **(max 1 mark)**
8. Main benefits of respite care: enables parents and siblings to have a break from caring responsibilities ✓ relieves pressure or stress ✓ provides child with special needs with the opportunity to meet others and have a break from home ✓ enables assessments of need to be carried out during respite period. ✓ **(max 4 marks)**
9. Advantages or benefits of attending a special school for children with special needs (accept other examples):
- ▶ specialist equipment ✓ and facilities available ✓
 - ▶ school focuses specifically on children's special needs ✓ adapts to children rather than children having to adapt to mainstream curriculum and facilities ✓
 - ▶ children can learn at own pace ✓
 - ▶ child can receive specialist support or care ✓ at the same time as education. ✓ **(max 4 marks)**
10. Mainstream schooling for children with special needs (accept other suggestions):
- ▶ Advantages: children become integrated into mainstream society ✓ can achieve mainstream qualifications ✓ learn to co-operate and compete with non-disabled peers ✓ mainstream schools focus on child's ability rather than disabilities. ✓
 - ▶ Disadvantages: may not be able to adapt to environment or pressure of mainstream school ✓ may experience failure because of lack of suitable support ✓ may not be accepted or may be bullied by other children because of special needs ✓ may not receive appropriate care or support. ✓ **(max 4 marks)**

