



Rewarding Learning

ADVANCED SUBSIDIARY (AS)

General Certificate of Education

2014

Health and Social Care

Assessment Unit AS 3

assessing

Unit 3: Health and Well-being

[A3H31]

TUESDAY 13 MAY, AFTERNOON

**MARK
SCHEME**

General Marking Instructions

Introduction

Mark schemes are published to assist teachers and students in their preparation for examinations. Through the mark schemes teachers and students will be able to see what examiners are looking for in response to questions and exactly where the marks have been awarded. The publishing of the mark schemes may help to show that examiners are not concerned about finding out what a student does not know but rather with rewarding students for what they do know.

The Purpose of Mark Schemes

Examination papers are set and revised by teams of examiners and revisers appointed by the Council. The teams of examiners and revisers include experienced teachers who are familiar with the level and standards expected of students in schools and colleges.

The job of the examiners is to set the questions and the mark schemes; and the job of the revisers is to review the questions and mark schemes commenting on a large range of issues about which they must be satisfied before the question papers and mark schemes are finalised.

The questions and the mark schemes are developed in association with each other so that the issues of differentiation and positive achievement can be addressed right from the start. Mark schemes, therefore, are regarded as part of an integral process which begins with the setting of questions and ends with the marking of the examination.

The main purpose of the mark scheme is to provide a uniform basis for the marking process so that all the markers are following exactly the same instructions and making the same judgements in so far as this is possible. Before marking begins a standardising meeting is held where all the markers are briefed using the mark scheme and samples of the students' work in the form of scripts. Consideration is also given at this stage to any comments on the operational papers received from teachers and their organisations. During this meeting, and up to and including the end of the marking, there is provision for amendments to be made to the mark scheme. What is published represents this final form of the mark scheme.

It is important to recognise that in some cases there may well be other correct responses which are equally acceptable to those published: the mark scheme can only cover those responses which emerged in the examination. There may also be instances where certain judgements may have to be left to the experience of the examiner, for example, where there is no absolute correct response – all teachers will be familiar with making such judgements.

1 (a) Define the following terms. (AO1)

Health

Answers may address some of the following points

- Health is a positive concept that suggests well-being as opposed to illness or disease
- It is generally agreed that there is more than one dimension to health – physical, social, emotional, mental, spiritual, environmental well-being (any 3 of these will gain two marks)
- Health is the absence of disease/not just the absence of disease
- Health can be influenced by lifestyle factors

[1] mark for use of key phrase/s, [2] marks for definition

Mental health

Answers may address some of the following points

- Not just the absence of mental illness, but a form of subjective psychological well-being
- An individual's sense of being able to cope, being in control of his/her life, being able to face challenges and take on responsibility
- A state of successful performance of mental function, resulting in productive activities, fulfilling relationships with other people, and the ability to adapt to change and to cope with adversity
- A person's ability to organise their thoughts in a coherent pattern and act accordingly

[1] mark for use of key phrase/s, [2] marks for definition

(2 × [2])

[4]

(b) Using the headings below, discuss how individuals can take responsibility for their own health and well-being. (AO1, AO2, AO3)

Accessing health and social care services

Answers may address some of the following points

- Attending for regular check-ups, e.g. dental check-ups every six months
- Responding to invitations for screening, e.g. for breast cancer in women over fifty
- Making GP appointments before a health condition deteriorates too much, e.g. seeing GP about a chest infection
- Taking up opportunities for health checks offered at work or through voluntary organisations, e.g. blood pressure checks conducted by occupational nurse or breast screening offered by a cancer charity
- Attending appointments with a social worker, e.g. for help with a family crisis

All other valid points will be given credit

[1] mark for use of key phrase/s, [2] marks for adequate discussion, [3] marks for detailed discussion

Self-advocacy

Answers may address some of the following points

- Asking a GP for a referral to a specialist, e.g. a gynaecologist or neurologist
- Asking a hospital doctor for a second opinion, e.g. referral to another specialist
- Researching one's own condition and possible treatments in libraries or the internet and requesting the most up-to-date treatment

All other valid points will be given credit

[1] mark for use of key phrase/s, [2] marks for adequate discussion,
[3] marks for detailed discussion

(2 × [3]) [6]

- (c) Health promotion is a key role for the Public Health Agency (PHA). Explain two other ways the PHA contributes to health and well-being. (AO1)

Answers may address two of the following points

- Provides information through news bulletins, e.g. on their websites on up-to-date issues relevant to the health of people in Northern Ireland, e.g. recent reports on carbon monoxide poisoning and how risks can be minimised
- Provides statistics on the incidence of disease for health professionals, e.g. regular updates on influenza in N.I.
- Supports research about health in Northern Ireland, e.g. on attitudes to breastfeeding in Northern Ireland
- Produces leaflets relevant to the health and social care workforce in Northern Ireland, e.g. "Don't Infect. Protect" gives carers information on hand washing
- Publishes books giving health advice to the public, e.g. the "Pregnancy Book" which is given out to pregnant women by midwives
- Informs the public about health and care services in Northern Ireland, e.g. gives the number for Lifeline on its website so people in mental distress can access someone to speak to immediately

All other valid points will be given credit

[1] mark for use of key phrase/s, [2] marks for full definition

(2 × [2]) [4]

- (d) (i) Describe the fear arousal approach to health promotion. (AO1, AO2)

This approach attempts to gain the target audience's attention by providing them with frightening images or statistics in an effort to change their health behaviour. A good example is the 'Stop Smoking' campaigns that use images such as clogged arteries and blackened lungs.

[1] mark for use of key phrase/s, [2] for adequate discussion,

[3] for detailed discussion

(1 × [3])

[3]

- (ii) Explain two strengths and two weaknesses of the fear arousal approach to health promotion. (AO4)

Strengths

Answers may address any two of the following points

- Grabs attention of the target group- people tend to take notice of shocking images like blackened lungs
- Use of graphic images helps understanding of negative effects of unhealthy behaviour, e.g. exactly how smoking harms the body
- Memorable images may have a lasting effect – who can forget the fat being squeezed out of the artery on the TV campaign
- Encourages discussion – gets people talking, e.g. advertisement where brain is sliced in half to show clot caused by smoking was a topic of conversation
- Can scare people into taking action, e.g. sight of blackened lung might scare people into stopping smoking

[1] mark for use of key phrase/s [2] marks for explanation

(2 × [2])

[4]

Weaknesses

Answers may address any two of the following points

- May not be long lasting – images can be forgotten
- People become resistant to the message or think it will never happen to them, e.g. clot in brain is shocking the first couple of times one sees it but the shock wears off
- Can cause annoyance and upset for some individuals, e.g. if they had a family member who died of a particular health problem that is graphically portrayed
- Individuals don't like being told what to do and so may respond by saying they aren't going to be persuaded by government propaganda
- Images can have different effects on different people- this approach may work for some people more than others and for some issues more than others
- Images can be too shocking for some people so they refuse

to look at them, e.g. switch over channel on television when shocking images appear

- Often this approach just frightens people, without giving them advice or guidance on how they should be behaving
- Some media for portraying visual images can be very expensive, e.g. television advertisements tend to be very expensive to make and run

[1] mark for use of key phrase/s [2] marks for explanation
(2 × [2])

[4]

- (e) Analyse how a health promotion campaign you have studied attempted to address its objectives. (AO1, AO2, AO3)

Examples of health promotion campaigns studied might address one of the following health issues

- Folic acid/food fortification
- Water fluoridation
- Smoking cessation
- Antibiotic use
- Dietary advice
- Coronary Heart Disease
- Exercise
- Mental health
- Breastfeeding
- Alcohol misuse
- Sexual health
- Hand washing
- Oral hygiene
- Preventing food poisoning
- Vaccinations

Note a campaign can address more than one of these issues, e.g. choose to live better

All other valid examples will be given credit

Objectives should be clearly related to the campaign or issue

Analysis of how the health promotion campaign attempted to address its objectives may address some of the following points

- Conducted talks in schools or roadshows to raise awareness
- Used shocking TV advertisements to frighten the target group, e.g. showing diseased lungs affected by smoking
- Provided information in leaflets, e.g. about negative health effects of a substance or type of food
- Used posters to get across messages about changing behaviour, e.g. showing people out walking
- Had a website giving information, e.g. explaining consequences of behaviour like the social effects of alcohol or drug abuse
- Worked directly with the target group in a relevant setting, e.g. encouraging parents in a playgroup to take responsibility for their children's dental health
- Published a magazine, e.g. giving information on how to get involved in physical activity in Northern Ireland

- Published statistics or research findings, e.g. on health benefits of particular food supplements
- Provided stories/narratives that members of target group can relate to, e.g. young people abusing alcohol on a night out
- Used radio advertising, e.g. on sexual health
- Provided helplines or support groups, e.g. to help people give up smoking
- Provide merchandise to promote campaign

All other valid points will be given credit – answers must be relevant to the campaign/issue identified

[0] is awarded for a response not worthy of credit

Level 1 (1 – 3)

Overall impression: limited

- Displays limited knowledge of how the health promotion campaign studied attempted to address its objectives
- Objectives may be missing
- There is limited discussion
- Quality of written communication is basic. The candidate makes only a limited attempt to select and use an appropriate form and style of writing. The organisation of material may lack clarity and coherence. There is little use of specialist vocabulary. Presentation, spelling, punctuation and grammar may be such that intended meaning is not clear

Level 2 (4– 6)

Overall impression: adequate

- Displays adequate knowledge of how the health promotion campaign studied attempted to address its objectives
- There is at least some reference to objectives
- There is adequate discussion
- Quality of written communication is adequate. The candidate makes a reasonable attempt to select and use an appropriate form and style of writing. Relevant material is organised with some clarity and coherence. There is some use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are sufficiently competent to make meaning evident

Level 3 (7 – 9)

Overall impression: competent

- Displays competent knowledge of how the health promotion campaign studied attempted to address its objectives
- Objectives are clearly explained
- There is competent discussion
- Quality of written communication is competent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is organised with a high degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of a high standard and ensure that the meaning is clear

[9]

34

- 2 (a) Write down two examples of each of the following types of needs. (AO1)

Physical needs

Answers may include any two of the following

- Nutrition
- Shelter/housing/warmth
- Hygiene
- Exercise/movement/mobility
- Medication
- Sleep

Intellectual needs

Answers may include any two of the following

- Stimulation
- Knowledge and understanding
- Learning skills

Emotional needs

Answers may include any two of the following

- Sense of belonging/feeling loved or cared for
- Feeling of stability/security
- Sense of control over one's life/autonomy/empowerment
- Positive self-concept/esteem needs/feeling confident
- Emotional support
- Respected/valued/sense of dignity

(1 × [6])

[6]

- (b) Discuss how the staff could meet the social needs of the service users in the examples below. (AO1, AO2, AO3)

Adults with mental illnesses in a psychiatric hospital

Answers may address some of the following points

- The need for contact with others could be met by staff encouraging interaction between patients, e.g. talking with others at mealtimes
- The need for contact with family and friends and the maintenance of personal relationships could be met by staff facilitating visits by having regular visiting times or by helping to explain a patient's condition to family and friends so they understand how to be supportive
- The need for social interaction outside the family could be met by staff preparing patients to return to the community by taking them out, e.g. to do some shopping

All other valid points will be given credit

[1] mark for use of key phrase/s, [2] marks for adequate discussion, [3] marks for detailed discussion

Children in a playgroup

Answers may address some of the following points

- The need for contact with others could be met by staff encouraging interaction between the children, e.g. by getting them to work together on a craft activity
- The need for interaction with other people could be met by staff helping children to develop their language skills and manners
- The need for social interaction outside the family could be met by staff taking children on outings

All other valid points will be given credit

(2 × [3])

[6]

- (c) Identify one example of a private or commercial organisation and discuss how it contributes to health and well-being. (AO1, AO2, AO3)

Example of a private or commercial organisation

Possible answers include

- Pharmacy
- Supermarket
- Private practitioner, e.g. a homeopath
- A drug company
- A private health club or spa
- A private clinic or hospital
- A private nursing or care home

All other valid points will be given credit

(1 × [1])

[1]

How it contributes to health and well-being

Answers may address some of the following points

- Conducts research, e.g. developing better medication
- Provides products that can help people avoid illness, e.g. St John's Wort
- Provides products that can help people manage stress, e.g. spa products for relaxation
- Advises individuals on managing their health, e.g. through having experts available
- Measures health indicators, e.g. BP
- Provides treatments, e.g. massages
- Provides opportunities for exercise, e.g. gym or swimming pool
- Provides information, e.g. on actions individuals can take
- Provides residential care
- Provides medical care
- Run health promotion campaigns, e.g. Boots Safe in the Sun
- Provide literature, e.g. leaflets providing advice on health issues/ preventing illness

All other valid points will be given credit but marks can only be awarded where the points made are appropriate for the organisation identified

(1 × [3])

[3]

- (d) Discriminatory practice can result from prejudice. Explain what is meant by prejudice. (AO1)

Answers may address the following points

- Attitude/s based on pre-judgements made about others which lead to discrimination
- attitudes, usually negative, which are often based on ignorance
- having stereotyped views, e.g. believing older people are less intelligent than younger people

[1] mark for use of key phrase/s [2] marks for explanation

(1 × [2])

[2]

- (e) Using three examples in health, social care and early years settings, analyse the impact of anti-discriminatory practice on the health and well-being of service users. (AO1, AO2, AO3, AO4)

Examples of anti-discriminatory practice in health, social care and early years services may include some of the following

- A manager in a care home having a complaints policy to encourage patients to complain about anti-discriminatory practice
- A manager in a day centre for people with learning disabilities encouraging staff to use whistle blowing procedures to report other staff who engage in discriminatory practices
- A ward manager in a hospital making sure staff know about and understand policies and procedures relating to anti-discriminatory practice
- Managers in health, social care and early years settings having forums for discussion for staff so that issues around anti-discriminatory practice may be discussed
- Managers in these settings supervising inexperienced staff to help them develop their knowledge and understanding of how to value service users from all backgrounds
- A manager in a residential nursing home promoting the care value base when training new care assistants
- Managers in any of these settings dealing robustly with complaints about discrimination by service users or their families
- A nursery school principal setting a good example in her own practice so that other staff can follow her anti-discriminatory practice
- A ward manager directly challenging staff and patients when incidents of discrimination such as use of inappropriate language occur and use disciplinary procedures when required
- A playgroup leader ensuring that the resources used reflect a variety of cultures and backgrounds
- A manager of a GP practice ensuring information is available in a variety of formats, e.g. in large print or different languages
- A hospital manager promoting advocacy, e.g. encouraging patients with learning disabilities to use the Patients' Advocate

- A manager in a day centre providing specialist aids and adaptations for people with disabilities, e.g. special cutlery for older people with disabilities

It is not necessary for candidates to use three different settings

Impact on the health and well-being of service users

Answers should be clearly linked to the examples used and may address some of the following points

- Service users may feel empowered- that they have control over the situation
- Service users' self-esteem may be high- they may feel good about themselves
- They will feel secure- happy and safe in the care setting
- Service users will feel valued- supported and cared for
- Their self-confidence will increase- they will feel good about themselves
- Rate of recovery may improve- they will be more likely to eat properly and sleep well and may get better quicker as a result
- Service users will feel they can express their opinions and may receive better care as a result as their needs can be met more easily

All other valid points will be given credit

[0] is awarded for a response not worthy of credit

Level 1 (1 – 4)

Overall impression: basic

- Displays a limited knowledge of the impact of anti-discriminatory practice on the health and well-being of service users
- Answers where the impact on service users is missing will not achieve beyond this level
- Limited discussion of impact
- Quality of written communication is basic. The candidate makes only a limited attempt to select and use an appropriate form and style of writing. The organisation of material may lack clarity and coherence. There is little use of specialist vocabulary. Presentation, spelling, punctuation and grammar may be such that intended meaning is not clear

Level 2 (5 – 8)

Overall impression: adequate

- Displays an adequate knowledge of the impact of anti-discriminatory practice on the health and well-being of service users
- Examples are adequate
- Adequate discussion of impact
- Responses which do not give examples but complete a detailed analysis of the impact cannot achieve beyond this level
- Quality of written communication is adequate. The candidate

makes a reasonable attempt to select and use an appropriate form and style of writing. Relevant material is organised with some clarity and coherence. There is some use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are sufficiently competent to make meaning evident

Level 3 (9 – 12)

Overall impression: competent

- Displays competent knowledge of the impact of anti-discriminatory practice on the health and well-being of service users
- Examples are clearly explained
- Competent discussion of impact
- Quality of written communication is competent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is organised with a high degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of a high standard and ensure that the meaning is clear

[12]

30

- 3 (a) Complete the table below to discuss how poor housing can impact on the three aspects of health and well-being. (AO1, AO2, AO3)

Effects on **physical** health and well-being-

Answers may address some of the following points

- Houses that have damp, condensation, and mould growth can contribute to asthma, bronchitis and arthritis.
- Houses that lack adequate heating can cause respiratory illnesses, cardiovascular problems, increased risks of accidents and falls and impaired mental function. In extreme cases death from hypothermia can result
- Poor housing can contribute to poor hygiene due to a lack of facilities – this can lead to an increased risk of illnesses like stomach upsets
- Vermin in houses can spread disease, e.g. rats can be a danger to human health
- Disease also spreads more easily where people live in overcrowded conditions – they can catch illnesses like colds and flu more easily

All other valid points will be given credit

[1] mark for use of key phrase/s, [2] marks for adequate discussion, [3] marks for detailed discussion

Effects on **social** health and well-being-

Answers may address some of the following points

- Living in high rise flats with no gardens may make it more difficult for children to interact with others through play
- People who live in sub-standard housing are less likely to bring friends or family back to the house, this may lead to isolation

All other valid points will be given credit

[1] mark for use of key phrase/s, [2] marks for adequate discussion,
[3] marks for detailed discussion

Effects on **psychological** health and well-being-

Answers may address some of the following points

- Poor housing is linked to high levels of mental health problems
- Living in inadequate housing can have an adverse effect on self esteem as individuals may feel embarrassed or ashamed of their homes
- Living in crowded conditions means that individuals experience stress because of a lack of privacy

All other valid points will be given credit

[1] mark for use of key phrase/s, [2] marks for adequate discussion,
[3] marks for detailed discussion

(3 × [3])

[9]

- (b) Socio-economic factors such as poor housing and low income are associated with poor physical and mental health, including high levels of depression. Use the headings below to discuss the potential social effects on children of a parent's ill-health. (AO1, AO2, AO3)

Effect on children's education

Answers may address some of the following points

- Children may be worried and lose concentration at school, which will have a negative impact on their educational achievement
- Older children may also miss days at school or college as they may be needed to help look after the sick parent
- The parent may be too ill to help the children with their homework
- A child of a parent who is ill could get more help with homework than in the past because the parent is at home and has more time- this could improve the child's attainment at school

All other valid points will be given credit

[1] mark for use of key phrase/s, [2] marks for adequate discussion,
[3] marks for detailed discussion

Effect on children's relationships

Answers may address some of the following points

- Children may experience stress and tension in the family caused by worrying about the person who is ill
- Children may spend less time with their own friends due to the parent's ill-health
- Children may become very close to family friends and extended family members who help the family out due to the parent's ill health

All other valid points will be given credit

[1] mark for use of key phrase/s, [2] marks for adequate discussion,
[3] marks for detailed discussion

Effect on children's leisure activities

Answers may address some of the following points

- Children may have to give up some leisure activities, e.g. one parent may be too ill and the other too busy caring to take children to activities
- Older children may choose to give up some leisure activities to help care for a parent
- If parent has had to give up work due to illness, there may be less money for leisure activities for the family as a whole
- The parent may be too ill to go away from home so the children may miss out on holidays
- Where children do try to maintain leisure activities, they may not be able to spend as much time on them, e.g. may play a sport but not as regularly for a team

All other valid points will be given credit

[1] mark for use of key phrase/s, [2] marks for adequate discussion,
[3] marks for detailed discussion

(3 × [3])

[9]

- (c) Explain one way pollution can impact on an individual's physical health and social well-being. (AO1, AO2)

Physical health

Answers may address any one of the following

- Vehicles and factories releasing toxic fumes into the atmosphere can mean people are at risk of developing respiratory infections such as bronchitis
- In more severe cases the long-term effects of air pollution can include chronic respiratory disease, lung cancer, heart disease, and even damage to the brain, nerves, liver, or kidneys
- Run off from fields in rural areas can pollute drinking water with chemicals causing illnesses like stomach upsets
- Noise pollution, e.g. from air traffic, can disrupt sleep patterns leaving individuals tired and lethargic

All other valid points will be given credit

[1] mark for use of key phrase/s, [2] marks for explanation

Social well-being

- People who are suffering from respiratory illnesses such as asthma or bronchitis living in areas where there is pollution may feel that they can't go out in public very often as the pollution may worsen their illness- their social well-being may thus be adversely affected
- People suffering from respiratory illnesses caused by pollution may not be able to take part in some sporting or leisure activities

as the illness can affect their breathing patterns and they may find that they experience shortness of breath, so they miss out on opportunities to socialise through sport and leisure

- People living in areas with high pollution levels may have to pay money to get good filtration systems in order to reduce the fumes getting in to their homes – this may limit the money they have for social activities

All other valid points will be given credit

[1] mark for use of key phrase/s, [2] marks for explanation

(2 × [2])

[4]

- (d)** Pollution is an example of an environmental factor. Identify two other environmental factors that affect health and well-being. (AO1)

Answers

- Geographical location
- Occupational hazards

(2 × [1])

[2]

- (e)** Analyse how smoking, alcohol and poor diet can impact on an individual's physical health and well-being. (AO1, AO2, AO3, AO4)

Answers may address some of the following points

Smoking

- Smoking can give individuals a smoker's cough and other respiratory problems
- Smoking can negatively affect an individual's sense of smell and taste
- Smoking reduces people's energy and stamina
- Smoking increases the risk of getting cancer, especially lung cancer
- Smoking greatly increases the risk of heart disease
- Smoking makes the skin age quickly, with the earlier appearance of wrinkles and thinning of the skin
- In pregnant women, smoking puts the baby at risk of being small at birth and of suffering from respiratory problems
- Reduces the ability to exercise due to negative effect on respiratory health
- Smoking puts other people's health at risk through passive smoking
- Short term effects include dizziness and nausea as well as dehydration and headaches

Alcohol

- Alcohol abuse can lead to a whole variety of health problems: diabetes, inflammation of the pancreas, internal bleeding, weakening of the heart, high blood pressure and stroke
- In pregnant women, excessive alcohol can damage the developing foetus- in extreme cases it can lead to Foetal Alcohol Syndrome

in which a child has a range of symptoms including a distinctive appearance and learning disability

- Alcohol can also lead to death or injury due to drink driving or accidents in the home and at work – many of these accidents are caused by people who aren't necessarily dependent on alcohol, but are temporarily intoxicated
- Alcohol can lead to deterioration of the nervous system – people who drink heavily can suffer from loss of balance, impotence, numbness of the feet and hands, tremor and blindness
- The organ of the body most at risk from excess alcohol is the liver, which may become progressively damaged through a condition known as cirrhosis, which may lead to liver failure, liver cancer and death

Poor diet

- Lack of calcium and Vitamin D in the diet can cause rickets in children and osteoporosis in adults
- Lack of iron in the diet can lead to anaemia especially in women who lose a lot of iron due to menstruation
- A diet high in fat, sugar and salt can cause high blood pressure, heart disease, obesity, type 2 diabetes and strokes
- High intake of red meats can lead to increased risk of colon cancer
- A diet lacking essential nutrients can cause lethargy and fatigue
- A lack of Vitamin C can lead to scurvy
- A diet lacking in fibre is linked to bowel cancer

All other valid points will be given credit

[0] is awarded for a response not worthy of credit

Level 1 (1 – 4)

Overall impression: basic

- Displays a limited knowledge of how smoking, alcohol and poor diet can impact on an individual's physical health and well-being.
- Answers may address only one behavioural factor (smoking, alcohol or poor diet) or may list points
- Limited discussion
- Quality of written communication is basic. The candidate makes only a limited attempt to select and use an appropriate form and style of writing. The organisation of material may lack clarity and coherence. There is little use of specialist vocabulary. Presentation, spelling, punctuation and grammar may be such that intended meaning is not clear

Level 2 (5 – 8)

Overall impression: adequate

- Displays an adequate knowledge of how smoking, alcohol and poor diet can impact on an individual's physical health and well-being
- Answers must address at least two behavioural factors (smoking, alcohol or poor diet) to achieve at this level
- Adequate discussion

- Quality of written communication is adequate. The candidate makes a reasonable attempt to select and use an appropriate form and style of writing. Relevant material is organised with some clarity and coherence. There is some use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are sufficiently competent to make meaning evident

Level 3 (9 – 12)

Overall impression: competent

- Displays competent knowledge of how smoking, alcohol and poor diet can impact on an individual's physical health and well-being. Examples are clearly explained
- Answers must address all three behavioural factors (smoking, alcohol and poor diet) to achieve at this level
- Competent discussion
- Quality of written communication is competent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is organised with a high degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of a high standard and ensure that the meaning is clear

[12]

Total

AVAILABLE
MARKS

36

100

