UNIVERSITY OF CAMBRIDGE INTERNATIONAL EXAMINATIONS International General Certificate of Secondary Education

www.papacambridge.com MARK SCHEME for the October/November 2009 question paper

for the guidance of teachers

0637 CHILD DEVELOPMENT

0637/01

Paper 1 (Theory Paper), maximum raw mark 100

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

Mark schemes must be read in conjunction with the question papers and the report on the examination.

CIE will not enter into discussions or correspondence in connection with these mark schemes.

CIE is publishing the mark schemes for the October/November 2009 question papers for most IGCSE, GCE Advanced Level and Advanced Subsidiary Level syllabuses and some Ordinary Level syllabuses.

				Mary Mary	
	Page 2 M		Mark Scheme: Teachers' version	Syllabus 🔗 e	r
		IGCSE – October/November 2009 0637			
			Section A	-al	36
1	Page 2 Mark Scheme: Teachers' version Syllabus IGCSE - October/November 2009 0637 Section A Section A Can put mother's life at risk/harms baby (i) Fallopian tube - takes eggs from ovary to uterus where factilization takes place [2]				1age
2	(i)	Fallopian tube	 – takes eggs from ovary to uterus – where fertilisation takes place 		[2]
	(ii)	Uterus	 where baby develops wall is muscular and enlarges during pre 	egnancy as baby grows	[2]
	(iii)	Ovary	 where eggs are made/female hormones 	produced	[1]
	(iv)	Vagina	 place where sperm are deposited during 	g intercourse	[1]
3	 Separation anxiety If they cannot see parents they do not understand that they still exist and will be withdr Over/under eats Emotionally upset and distressed 			ll exist and will be withdrav	vn [2]
4	(i)	When babies	change from an all milk diet to milk and solic	ls diet	[2]
	(ii)	Approximately	4 months		[1]

5

Method	How it works	Advantages	Disadvantages
Male condom	Sperm prevented from entering vagina	Free from some places Widely available Protects from STIs	May split Put on correctly etc.
Diaphragm	Prevents sperm meeting egg	No side effects Wide variety of choice	Must stay in place for 6 hours Fitted by Doctor etc.
Intra-uterine device	Prevents implantation of a fertilised egg	Works immediately Can stay in place for 3–10 years	May cause heavy bleeding Not suitable for all Must be fitted by Doctor etc.
Contraceptive implant	Prevents egg and sperm meeting and/or implantation	Effective for 3 years Fertility returns immediately	Can be difficult to remove Can have side effects

[12]

- 6 Safety points
 - Bars 45–65 mm apart
 - Reason to prevent baby's head being caught between them
 Mattress should fit tightly no more than 4 cm anywhere
 - Reason to prevent baby's head, arms or legs being trapped
 Cots have one side which drops down with a catch
 - Reason catch must be too difficult for baby to undo, etc.

[6]

Page 3		Syllabus er
	IGCSE – October/November 2009	0637
	Section B	camb.
	Swallowing and sucking reflexes When anything put in mouth baby immediately sucks and	Syllabus 0637 d swallows.
• •	Rooting reflex Baby turns head as if in search of nipple when gently tou	ched on cheek.
• •	Grasp reflex Baby automatically grasps an object when put into their h	nand.
• •	Walking reflex Baby will make walking movements with feet touching a f	firm surface.
· · ·	Startle reflex Fist clench, elbows bent to bring the forearms in, when st	tartled by a sudden loud noise.
Any	Falling reflex (Moro reflex) Any feeling a baby gets that they are falling – they fling b bringing them together as if trying to catch something.	back their arms and open hands [18
Hunger Boredon Noise Discom Pain Tiredne	edom se comfort n	

 (c) Any three ways described: Rocking the baby Baby massage Making soothing noises e.g. like adult heartbeat Audio tapes of "whooshing" noises

[3]

Page 4	Mark Scheme: Teachers' version	Syllabus Syllabus	
	IGCSE – October/November 2009	0637 732	
(a) (i) Poor	r diet/not enough nutrients	81	26.
(ii) Stun	nts growth/can effect brain development		Tio
(b) Balanced	d diet	Syllabus 0637 Phycen	
	amount of nutrients for the age of child to stay heap output etc.	althy/energy input is same	e as [2]
(c) Any four:			
	ods – too strong for taste buds ods – lead to obesity		
Nuts – cł High in s	hoking sugar – tooth decay etc.		
	d wheat based cereals – to avoid celiac disease etc.		[12]
	')		['-]
(d) Vitamin [
Calcium	For healthy teeth and bones		[2]
(e) Two reas	sons required.		
	dren need energy for growth, and whole milk contains e smaller stomachs and cannot take in a great quantity		[2]
		,	ι— 1
• • • •	required.		
•	Advertised and marketed to appeal Favourite characters on packaging		
•	Taste good etc.		
``	ee with reasons. High in: Fat		[2]
•	High in: Sugar		
	High in: Salt Few nutrients		
	'Fills up' child, so unable to eat nourishing food May contain additives and preservatives		[3]
A			1.01

		2.	
Page 5	Mark Scheme: Teachers' version	Syllabus	er
	IGCSE – October/November 2009	0637	200
Enter part (a) or	part (b)		Cambric
13–20 marks	High response – each section answered fully.		Sec.
7–12 marks	Medium response – each part attempted or parts answere	ed in detail.	117

Section C

0–6 marks Low level response - answers lack detail or brief responses.

9 (a) Reasons: Male

- Blocked tubes connecting testicles to seminal vesicles (where sperm is stored).
- Could be caused by sexually-transmitted disease. Ejaculation failure.
- Very low sperm count, could be the man working with pesticides or metals such as lead, • mercury etc. Tight underwear and overheating are two other causes.
- Testicular failure, a rare condition when the semen contains no sperm. A poor or unhealthy diet can result in a low sperm count.

Reasons: Female

- Hormonal imbalance causing egg not to be produced.
- Fibroids, totally benign growths in wall of uterus, usually in women over 35 years.
- Blocked fallopian tubes, due to STD, miscarriage or a terminated pregnancy.
- Endometriosis, where patches of uterus lining are found in ovaries, pelvis, fallopian tubes etc.

Treatment includes:

- Drugs for infections
- Counselling
- Good diet plus plenty of exercise, sleep etc.
- Fertility drugs
- Surgery
- IVF (in vitro fertilisation)
- Donor insemination
- Surrogacy etc.

[20]

		2	
Page 6	Mark Scheme: Teachers' version	Syllabus	er er
	IGCSE – October/November 2009	0637	Da

OR

(b) Blood tests

- Anaemia lack of iron makes mother feel tired and weak.
- Blood group in case a blood transfusion should be needed in emergency.
- Cambridge.com Rhesus factor, most people have this factor in the blood, and the blood is termed Rhesus positive. Those who do not have it are Rhesus negative. This is inherited. Problems arise where father is positive and mother is negative. It usually causes problems when a second baby is positive the baby may have anaemia and jaundice, may be mentally handicapped, or may even die. Mothers can be given an injection at 28 weeks pregnant again after birth to prevent build-up of harmful substances in her blood which could damage her babies.
- Immunity to rubella if the mother is not immunised she can have a vaccination after the baby is born.
- Hepatitis B baby would have to have special care to prevent infection.
- HIV so that baby can be born in a special way to reduce risk of infection. So mother can receive treatment.

Three required.

Blood pressure check -

To see if rest is necessary perhaps even in hospital if very high. Could be a sign of pre-eclampsia.

Urine test –

To test for sugar – may be diabetic.

To test for protein - could indicate infection of kidneys or bladder, or early sign of pre-eclampsia.

Weight check –

If too much weight is gained, she will be advised to adjust diet to prevent high blood pressure.

Only routine tests acceptable, (now includes ultra sound scan). [20]

[Total: 20]