

CHILD DEVELOPMENT

Examiners' report

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Introduction

Our examiners' reports are produced to offer constructive feedback on candidates' performance in the examinations. They provide useful guidance for future candidates.

The reports will include a general commentary on candidates' performance, identify technical aspects examined in the questions and highlight good performance and where performance could be improved. A selection of candidate answers is also provided. The reports will also explain aspects which caused difficulty and why the difficulties arose, whether through a lack of knowledge, poor examination technique, or any other identifiable and explainable reason.

Where overall performance on a question/question part was considered good, with no particular areas to highlight, these questions have not been included in the report.

A full copy of the question paper and the mark scheme can be downloaded from [Teach Cambridge](#).

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R057 series overview

For the externally assessed Unit R057 most candidates answered all the questions, achieving a wide range of marks. Where candidates had been taught all the Topic Areas, they successfully applied their knowledge and understanding to each question. There were very few 'no response' answers; often these were for single word, factual responses indicating a gap in the candidate's knowledge. Time appears to have been used effectively as all questions were attempted by most candidates, suggesting that they had sufficient time to produce their responses to all questions.

When answering Level of Response questions, many candidates were able to get Level 2 but were unable to get to Level 3. Candidates who were more successful avoided listing content and demonstrated their subject knowledge by producing well developed responses, meeting the requirements of the command word, and using appropriate terminology consistently.

Most candidates completed all questions on the examination paper, and where they had used the extra pages at the back of the script, these were well signposted.

Handwriting was legible overall and there were very few scripts that were challenging to decipher and mark.

Candidates who did well on this paper generally:	Candidates who did less well on this paper generally:
<ul style="list-style-type: none"> • made sure that their responses to Section A questions fully related to the scenario provided • produced well developed and detailed responses to Level of Response questions 2 (a) and 4 (a) • demonstrated accurate knowledge of: <ul style="list-style-type: none"> ○ Question 1(a) (i) and (ii) - pre-conception health ○ Question 1 (b) - Folic acid ○ Question 2 (b) (i) and (ii) - checks during the physical examination ○ Question 3 – mumps ○ Question 5 (b) (i) and (ii) – Intrauterine system (IUS). 	<ul style="list-style-type: none"> • did not address the question's command word, e.g. explain, describe, or discuss • lacked specific knowledge, e.g.: <ul style="list-style-type: none"> ○ Question 1 (a) (ii) pre-conception health ○ Question 1 (b) - Folic acid ○ Question 1 (c) - role of the midwife ○ Question 2 (b) (i) and (ii) - checks during the physical examination ○ Question 4 (b) - methods of assisted birth ○ Question 5 (b) (i) and (ii) - Intrauterine system (IUS) • demonstrated misconceptions in their responses, e.g. Question 3 (a) confusing the signs and symptoms of mumps with measles; Question 4 (a) describing what happens in the first stage of labour yet writing about the signs that labour has started.

Section A overview

Section A of the paper consists of three questions based in different contexts. For this paper the three scenarios are Rosa and her husband Rishi who want to try for a baby, Jamila who has just given birth to her third child in hospital, and Alex who suspects her daughter has mumps. Candidates are required to apply their knowledge of the four Topic Areas of the R057 specification to produce responses that are relevant to the scenarios.

Question 1 (a) (i)

1

(a) Rosa and her husband Rishi want to try for their first baby. Their doctor tells them that pre-conception health for both of them is important. The doctor advises Rishi to lose some weight before they try for a baby.

(i) State **one** reason why Rishi is advised by the doctor to lose weight before they try for a baby.

.....
..... [1]

Most candidates were able to gain the mark, identifying correct responses such as low sperm count and harder to conceive.
Incorrect responses focused on the baby will not be healthy, or that the baby would be overweight.
Some candidates misread the question and applied their response to Rosa or thought that Rishi was female.

Question 1 (a) (ii)

(ii) Identify **three** factors, other than weight, that can affect pre-conception health for men and women.

1
2
3 [3]

Many candidates gained two marks for this question. Common correct responses were smoking, age, and drinking alcohol.
Drinking and drugs on their own were not accepted as they are vague responses.
Some candidates also identified weight which was in the question.

Question 1 (b)

(b) The doctor tells Rosa to take folic acid before she becomes pregnant.

Explain why it is important for Rosa to take folic acid before she becomes pregnant.

.....

.....

.....

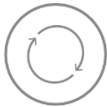
..... [2]

Candidates were less successful when answering this question. Incorrect responses included ensuring a healthy baby, providing vitamins and minerals, and preventing Downs syndrome.

A few candidates gained two marks mentioning birth defects and spina bifida.

Some candidates gained one mark by stating it prevents spina bifida.

Assessment for learning



Candidates need to be taught the importance of taking folic acid before becoming pregnant.

Question 1 (c)

(c) Rosa becomes pregnant with her first child. She goes to her first antenatal clinic where she meets the midwife.

Describe the role of the midwife in supporting Rosa and her unborn baby.

.....

.....

.....

.....

..... [3]

Many candidates provided good responses gaining two out of the three marks. The most common correct responses included being able to answer questions, checks on blood pressure, monitoring weight, checking baby's heartbeat, providing ante-natal care, and reference to feeding and bathing the baby. A few candidates included responses such as 'how to look after the baby', this would be seen as too vague and would not be credited any marks.

A few candidates included that a midwife carries out scans, which would not be credited any marks.

Question 1 (d)

(d) When Rosa is 20 weeks pregnant, she goes to the hospital for an ultrasound anomaly scan.

Identify if these statements about an ultrasound anomaly scan are true or false.

Tick (✓) the correct answer.

Statement	True (✓)	False (✓)
An ultrasound anomaly scan checks for major physical abnormalities in the baby.		
An ultrasound anomaly scan checks how far along Rosa's pregnancy is.		
An ultrasound anomaly scan checks the baby's spinal cord.		
An ultrasound anomaly scan is a screening test.		

[4]

This question was answered well, with many candidates gaining three or four marks. Where they did not achieve full marks, candidates thought that an ultrasound anomaly scan checks how far along the pregnancy is.

Question 2 (a)

2

(a) Jamila has just given birth to her third child in hospital.

Discuss the advantages and disadvantages of Jamila giving birth in hospital.

.....

.....

.....

.....

.....

.....

.....

..... **[8]**

This question was well attempted with many candidates gaining at least three or four marks. Responses considered both the advantages and disadvantages of Jamila giving birth in hospital.

Candidates who were more successful in answering this question, achieving Level 2 or Level 3, had a well-developed response showing a clear and detailed understanding of the advantages and disadvantages. They used appropriate terminology consistently and focused on the advantages and disadvantages of giving birth in hospital.

Common correct responses included advantages such as: highly trained health professionals, for example an obstetrician being available if there are complications; caesarean/forceps/ventouse deliveries and a wider selection of pain relief such as epidural.

Common correct responses for disadvantages included: noisy and unfamiliar environment; more stressful experience; limited number of visitors as visiting hours were short; would not be looked after by the midwife she is familiar with; and consideration for looking after the other children in the family.

Candidates who were less successful had provided vague responses such as 'she will be more comfortable'.

Some candidates focused on giving birth at home when discussing the disadvantages of giving birth in the hospital or had made distinct comparisons between birth in a hospital or at home throughout their response, which was not part of the question.

Exemplar 1

There are many advantages and disadvantages to Jamila giving birth in hospital. The main advantage is that Jamila can seek emergency medical care if needed, perhaps if she fears during birth or the medical team decide an emergency caesarean section is the best option for Jamila. Additionally, Jamila will have the best pain relief options, as an epidural and a pethidine injection can only be performed in a hospital by an obstetrician. Whilst giving birth in hospital, Jamila is ensuring she is in the most sanitary place offered, and can make new friends whilst she is there, learning about other people's experiences and reassuring others with hers. However, by giving birth in a hospital, Jamila has to spend a longer period of time away from her other two children, which could result in them worrying about Jamila, depending on their age. If Jamila's two other children were young, she would need to find childcare for them whilst she goes through the three stages of labour, or, avoid having her partner in the delivery room with her if she decides her partner should stay with the children instead. Additionally, giving birth away from home could increase Jamila's nerves as she is not in a familiar environment and is instead in a loud environment of [8]

This extract demonstrates the candidate applying their knowledge appropriately to respond to Question 2 (a). The response focuses on both the advantages and disadvantages of giving birth in hospital. Reference is made to the scenario and Jamila throughout. The candidate has discussed several advantages to Jamila giving birth in hospital and has used appropriate terminology, such as availability of a caesarean section and pain relief such as epidural.

The candidate also includes several disadvantages and in this extract, discusses childcare issues for her other children and hospitals being unfamiliar environments and loud.

Question 2 (b) (i)

(b) Within 1 to 5 days after the birth the midwife will physically examine Jamila’s baby. One check the midwife will do is a heel prick test (blood spot test).

(i) State **one** condition the heel prick test can identify.

..... [1]

There were very few correct responses to this question. Where candidates did gain the mark, the most common correct responses were Cystic Fibrosis, and Sickle Cell disease.

Misconception



Many candidates incorrectly thought that the heel prick test could identify conditions such as Anaemia, Diabetes and Downs Syndrome.

Candidates need to be clear about the checks that are carried out on the baby within one to five days of birth as listed on the specification.

Question 2 (b) (ii)

(ii) Identify **five** other checks the midwife will do during the physical examination.

1

2

3

4

5

[5]

Many candidates were unable to identify other checks that the midwife would do during the physical examination within 1 to 5 days after the birth. Common incorrect responses related to APGAR, hands, head circumference, length, weight and mouth.

Question 3 (a)

3 Alex suspects her daughter has mumps because her face is swollen, particularly the jaw in front of the ears. The doctor confirms it is mumps.

(a) Identify **three** other signs and symptoms of mumps.

- 1
- 2
- 3

[3]

Generally, this question was answered well with candidates gaining one or two marks. Common correct responses referred to, headache, tiredness and fever. Vague responses included temperature, and many candidates confused the signs and symptoms of mumps with measles and included redness and spots.

Question 3 (b) (i)

(b) The doctor tells Alex to apply a warm compress to her daughter's face.

(i) State **two** reasons why applying a warm compress to the face will help her daughter.

- 1
- 2

[2]

Many candidates gained both marks for this question, the most common responses were reduces swelling, helps reduce pain and soothes the area.
Incorrect responses referred to reducing itching or lowering temperature.

Question 3 (b) (ii)

(ii) State **two** other ways of treating mumps.

- 1
- 2

[2]

This question was not well answered. Many candidates gave responses that were vague or incorrect therefore could not be credited any marks, e.g. medicine, antibiotics and vaccination as ways to treat mumps. More successful candidates gave specific ways such as lots of rest, drink fluids and painkillers.

Question 3 (c) (i)

(c) Describe how Alex can meet **one** intellectual need and **one** emotional need of her daughter while she is suffering from mumps.

(i) Intellectual need
.....
.....
.....
..... [3]

Many candidates understood the term intellectual and described ways that Alex could meet her daughter's intellectual need to distract her and avoid her getting bored. Ways included reading books, colouring, puzzles and schoolwork. Candidates who did not gain full marks talked about 'games' and 'toys' without being specific.. Where candidates did not understand the term intellectual, they described ways of meeting physical, social or emotional needs.

Question 3 (c) (ii)

(ii) Emotional need
.....
.....
.....
..... [3]

Generally, this question was well answered with many candidates gaining two marks. More successful responses described how Alex could 'reassure her by giving her lots of hugs and kisses and also explain the symptoms of mumps in a way she can understand'.

Section B overview

Section B of the paper consists of three questions that are fact and knowledge based. Candidate responses do not have to relate to a particular situation or scenario.

Question 4 (a)

4

(a) There are three stages of labour, stage 1, stage 2 and stage 3.

Describe what happens during the first stage of labour (stage 1).

.....

.....

.....

.....

.....

.....

..... [6]

A complete range of responses were given for this question, although mainly Level 1 and Level 2. Very few candidates provided well developed response and were able to gain marks in Level 3.

Many candidates wrote about the signs that could indicate labour has started, e.g. a show and waters breaking rather than what happens during Stage 1 of labour.

Candidates that were more successful described the cervix opening, contractions, pain relief may be required as contractions get closer together and stronger, and the cervix dilating 8 to 10 centimetres. However, many responses were muddled with brief descriptions. Some candidates described the actual birth, referring to aspects of Stage 2 and Stage 3.

Exemplar 2

During stage one of labour, the mother will begin to see signs and symptoms of labour, however, these signs and symptoms are not seen by every mother. The earliest sign a mother is going into labour is when she has her show. This occurs when the mucus plug falls out due to the cervix dilating, and a mother's mucus begins to leak. This mucus should only ever be blood-stained, not fresh blood, this is a concern and the mother should call her midwife. Secondly, a mother's waters may break. This happens when the amniotic sac bursts, and the amniotic fluid begins to leak out. Mothers are advised to go to the hospital / prepare for a home birth at this stage as the baby now lacks protection and is at risk of infection. Throughout stage one of labour, a mother may also experience slow contractions, however these [6]

Exemplar two shows a response that describes the signs that labour has started. The candidate has given a very detailed description which cannot be credited.

Exemplar 3

During the first stage of labour, the contractions start and the neck of the uterus opens. This means the baby is ready to come out and that labour has started. Contractions become closer together and more painful, meaning pain relief may be administered. Contractions continue and the baby begins to make its way down the birth canal. Once the mother is fully dilated at 8-10 cm, the baby is born (stage 2).

Exemplar three is a Level 2 response which is well developed.. The candidate has given an adequate description showing sound knowledge and has made some relevant points. Appropriate terminology is used.

To gain Level 3 candidates should include a thorough description showing detailed knowledge and understanding of the first stage of labour.

Question 4 (b)

(b) Identify **three** methods of assisted birth.

- 1
- 2
- 3

[3]

This question was well answered with many candidates gaining three marks. Credit was given too for responses that were spelt incorrectly but were decipherable.

Assessment for learning



Candidates should be encouraged to learn and spell key terminology such as ventouse and forceps.

Question 4 (c)

(c) Describe how the birth partner can provide emotional support to the pregnant woman throughout the birth.

.....

.....

.....

..... [2]

Many candidates gained full marks for this question describing how the birth partner can provide emotional support. The most common response referred to the birth partner 'holding her hand to reassure her'.

A few incorrect responses were seen where candidates had not read the question correctly and described the support the partner could provide at home rather than throughout the birth.

Question 5 (a)

5
 (a) Identify **three** key signs and symptoms in the table below that mean a child will need emergency medical help.

Key signs and symptoms	Tick (✓) if emergency medical help will be needed
Breathing difficulties	
Headache	
High fever/temperature that cannot be lowered	
Reduced appetite	
Seizures/fitting	

[3]

A well answered question with most candidates gaining full marks.

Question 5 (b) (i)

(b) State **two** advantages and **two** disadvantages of using the Intrauterine system (IUS) as a method of contraception.

(i) Advantages

1

.....

2

.....

[2]

Many candidates gained at least one mark. Common correct responses included: don't have to think about daily contraception, lasts between three to five years, does not interrupt sex and periods become lighter or stop.

Less successful responses stated incorrect effectiveness of 98% and that the IUS could remain in place for ten years.

There were also vague responses from some candidates, for example, 'lasts a long time' and 'stops you getting pregnant'.

Question 5 (b) (ii)

(ii) Disadvantages

1

.....

2

.....

[2]

Candidates performed well on this question with many achieving full marks. No protection against STIs, must be fitted by a doctor, headaches, and discomfort when being inserted were the most common correct responses.

Less successful responses included incorrect answers such as does not stop you from getting pregnant, cannot get pregnant for a year and is only 98% effective.

Question 5 (c)

(c) Explain **one** function of the umbilical cord in the development of the embryo and foetus.

.....
.....
.....
..... [2]

Many candidates gained full marks for this question. They were able to explain that the umbilical cord carries nutrients to the foetus which helps the foetus to develop and grow, or that it helps with breathing and transporting oxygen. Very few candidates mentioned excretion and passing antibodies.

To pass/carry food or feed the baby were the most common incorrect responses.

Question 6 (a) (i)

6
(a)
(i) Entonox (gas and air) is one method of pain relief that can be given to the mother during labour.

State **three** reasons why Entonox would be used for pain relief during labour.

1
.....
2
.....
3
..... [3]

Most candidates gained at least one or two marks on this question. Common responses included: easy to use, works straight away, can be controlled by the mother and calms the mother down.

References to relieving pain did not gain a mark as this was in the question.

Question 6 (a) (ii)

(ii) Identify **two** methods of pain relief, other than Entonox, that can be given to the mother during labour.

1

2

[2]

Well answered with epidural, pethidine and TENS as common responses.

Question 6 (b)

(b) Below are words that are often used in child development.

- ante-natal
- conception
- contraction
- hazard
- health visitor
- lanugo
- menstruation
- obstetrician
- post-natal
- vernix

Fill in the table to match the words with the correct definition.

Use the words in the box above. Use each word once or not at all.

Definition	Word
A health professional that specialises in all aspects of pregnancy and childcare.	
A white, waxy, greasy substance that covers the baby's skin when it is born.	
Something that can cause harm to others.	
The medical care which is given to a woman after giving birth.	
This occurs when the egg is fertilised by a sperm.	

[5]

Most candidates scored full marks on this question.

For the first definition the mark scheme allowed health visitor and/or obstetrician as a correct response.

Some candidates gave an incorrect response for the second definition stating lanugo rather than vernix.

An incorrect response was also given by some candidates for the fourth definition where they had used the word ante-natal rather than post-natal.

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