



EXAMINER'S REPORT

LEVEL 2

**HEALTH AND SOCIAL CARE:
PRINCIPLES AND CONTEXTS**

JANUARY 2021



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HEALTH AND SOCIAL CARE: PRINCIPLES AND CONTEXTS

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UNIT 1: PROMOTING HEALTH AND WELL-BEING THROUGHOUT THE LIFE STAGES

General Comments

Firstly, centres should be commended for preparing the candidates well in such unprecedented circumstances. Most candidates attempted all questions and demonstrated understanding of the content of this unit.

All candidates completed the paper, suggesting the paper allowed sufficient time for candidates to write detailed responses.

Some candidates misread questions and some candidates would benefit from increased focus on the command words of the questions. It is recommended that candidates re-read and check their responses, time permitting.

In the higher value questions, candidates who showed a clear thought process in their approach to the structure of their responses achieved the highest band marks. Evidence of mnemonics were used to support recall; for example, PIES. Candidates generally benefited from this aid to memory.

Candidates generally offered developed responses to all questions that required more than identification or a statement, with brief points or bullet points not regularly seen. There were very few one-word answers or brief sentences, suggesting candidates were engaging with the questions.

The candidate's knowledge of the specification was good; the content areas addressed in the questions appeared to show good, all-round understanding. Candidates' ability to apply knowledge to the specific situations posed in the scenarios varied, depending on the scenario. The application of knowledge needs to be practised in a wide range of contexts. Spelling and grammar were a positive for most candidates, with handwriting legible in most cases.

Comments on individual questions

Q.1 Most candidates were able to correctly identify the life stages, which was pleasing to see.

Q.2 (a) Responses showed good knowledge of centile charts, identifying that measurements of length/height, age, and head circumference would feature on a centile chart.

(b) A variety of suggestions were given for baby Vikram being underweight. Candidates correctly suggested premature birth, neglect, illness. Some candidates lost marks for repetitive answers focussed on insufficient feeding and poor diet.

Q.2 (c) This question appeared challenging, limiting the marks awarded. Few responses correctly answered that the purpose of a schedule of growing skills is to measure development and not growth.

Q.3 Some candidates answered this question on self-concept well, achieving top marks. Many candidates' responses were vague. The factors that shape self-concept is an important area of the specification (topic area 1.3) and it is recommended that sufficient learning hours are focused on this topic.

Q.4 (a) & (b)

Most candidates accurately defined a role model and were able to give an emotional aspect of development for the adolescence life stage.

(c) Responses demonstrated good knowledge and assessment of the benefit of physical activity and membership of a team for an adolescent. Higher marks were awarded to candidates for good quality, detailed answers assessing the outcomes on physical and social development.

Q.5 (a) The effects of an unbalanced diet were correctly identified by most candidates. Popular responses included obesity, heart disease, diabetes and tiredness.

(b) There was evidence of basic understanding of the purpose of calculating BMI; however, some candidates did not recognise the weight/height relationship being a more accurate tool than weight alone.

(c) Candidates explained lifestyle changes for improving health and well-being, with examples including healthy eating, meal planning and exercise. Credit was given for detailed responses that were specific to the scenario, for example, a family membership at the local leisure centre.

Q.6 (a) This question appeared challenging, with limited marks awarded for explaining active participation (topic area 1.3 of the specification).

(b) Candidates were able to outline the information included in a care and support plan, and credit was awarded for personal details and service provision.

(c) This question required candidates to assess the importance of a care and support plan. Candidates who described a care plan were awarded lower band marks. To achieve higher band marks, candidates were required to assess the importance of the plan and draw conclusions for Arthur's health and well-being.

Q.7 (a) & (b)

Responses to this question were positive, identifying that the Thomas children lived in an extended family. Responses explaining positive and negative effects of this family structure achieved the top mark bands.

- Q.7 (c)** There was some evidence of candidates misreading the question, describing the benefits of the weekend activity on the well-being of the children rather than the grandparents, as required by the question.
- Q.8 (a)** Many candidates were unable to define the term ‘stigma’ and did not attempt this question.
- (b)** This question was answered well by most candidates, explaining in detail the services that CAMHS may provide to support Seren. Popular responses included: teaching techniques and coping strategies; referrals to other relevant professionals; and opportunities to talk to others in similar situations.
- (c)** A variety of responses was given for this question. To award full marks, candidates were required to explain the purpose of raising mental health awareness in Wales. Current health and well-being campaigns and promotions are an important topic area (1.4) of the specification that should be addressed in future learning.
- (d)** The requirement for this question was to compare the use of television and social media. Often, responses were limited to the age of the anticipated target audience with little other comparison made. Candidates who format an answer as a bullet point list will not gain the higher band marks unless the answers are qualified or explained. The use of bullet point answers should be discouraged.

Summary of key points

- In unprecedented circumstances overall, candidates were well prepared for this examination.
- There was no evidence of time restriction.
- Candidates should be encouraged to carefully read the questions and respond to the command words. Proof-reading of work is recommended.
- It is important that candidates can understand factors that shape self-concept and how active participation, inclusion, resilience and self-concept support individuals in coping and reacting to life events (topic area 1.3 of the specification).
- Current health and well-being campaigns and promotions are an important topic area that should be addressed in future learning (topic area 1.4 of the specification).
- Candidates scored lower marks if they made lists rather than giving more detailed answers.
- Every attempt is made to provide sufficient space for candidates to write their responses to each question. In future series, candidates should be reminded to clearly identify the question number and sub-section when answers continue onto extension pages.
- Sample assessment materials are available on the WJEC website for candidates to see how the questions are phrased and what may be examined. WJEC’s online resources, including revision techniques, are also a useful source of information and, for further guidance, CPD materials are available on WJEC’s secure website.



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