

General Certificate of Education

Sociology 5191

SCY1 Families and Households; Health; Mass Media

Mark Scheme

2008 examination - January series

Mark schemes are prepared by the Principal Examiner and considered, together with the relevant questions, by a panel of subject teachers. This mark scheme includes any amendments made at the standardisation meeting attended by all examiners and is the scheme which was used by them in this examination. The standardisation meeting ensures that the mark scheme covers the candidates' responses to questions and that every examiner understands and applies it in the same correct way. As preparation for the standardisation meeting each examiner analyses a number of candidates' scripts: alternative answers not already covered by the mark scheme are discussed at the meeting and legislated for. If, after this meeting, examiners encounter unusual answers which have not been discussed at the meeting they are required to refer these to the Principal Examiner.

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Dr Michael Cresswell, Director General.

QUALITY OF WRITTEN COMMUNICATION

Where candidates are required to produce extended written material in English, the scheme of assessment must make specific reference to the assessment of the quality of written communication. Candidates must be required to:

- select and use a form and style of writing appropriate to purpose and complex subject matter;
- organise relevant information clearly and coherently, using specialist vocabulary when appropriate;
- ensure text is legible, and spelling, punctuation and grammar are accurate, so that meaning is clear.

The assessment criteria for quality of written communication apply only to the assessment of parts (e) and (f) of the questions. The following criteria should be applied in conjunction with the mark scheme.

The quality of written communication bands must be regarded as integral to the appropriate mark scheme band even though they are listed separately in the mark scheme. Examiners should note that, in the assessment of candidates' sociological knowledge and skills, the assessment of the Quality of Written Communication will be judged through the assessment of the clarity and appropriateness of the sociological material presented.

In the 1-7 band, candidates' answers are likely to be characterised by the poor logical expression of ideas and the use of a limited range of conceptual terms, perhaps often used imprecisely and/or inaccurately. Spelling, punctuation and grammar may show serious deficiencies and frequent errors, perhaps impairing the intelligibility of significant parts of the answer.

In the 8-15 band, candidates' answers are likely to be characterised by the fair to good logical expression of ideas and the competent use of a reasonable range of conceptual terms. Spelling, punctuation and grammar will be of a reasonable standard. Commonly used words and sociological terms will generally be spelt correctly. There may be minor errors of punctuation and grammar, but these will not seriously impair the intelligibility of the answer.

In the 16 - 20 band, candidates' answers are likely to be characterised by the very good to excellent logical expression of ideas and the precise use of a broad range of conceptual terms. Spelling, punctuation and grammar will be of a very good to excellent standard. Commonly and less commonly used words and sociological terms will almost always be spelt correctly. Punctuation and grammar will be used correctly throughout to facilitate the intelligibility of the answer.

Choose **one** Section and answer **all** parts of the question from that Section.

SECTION A: FAMILIES AND HOUSEHOLDS

1 Total for this section: 60 marks

(a) Explain what is meant by the 'dual burden' (Item 1A, line 4).

(2 marks)

Two marks for an appropriate explanation or definition, such as: paid work plus unpaid domestic labour.

One mark for answers where only one element is correct, eg paid work. No marks for emotional labour.

(b) Suggest **two** reasons for changes in the patterns of marriage in England and Wales (Item 1A, lines 5-8). (4 marks)

Two marks for each of two appropriate reasons suggested, such as:

- fear of divorce
- more divorce
- more people entering higher education
- women's career opportunities
- secularisation
- greater acceptability of alternatives to marriage.

Note: two alternatives to marriage are allowable so long as they could each be a reason for a different pattern.

(c) Identify **three** changes in patterns of child-bearing and/or child-rearing since the 1970s, **apart from** that identified in **Item 1A**. (6 marks)

Two marks for each of three appropriate changes identified, such as:

- women giving birth later in life
- fewer women giving birth
- fewer births
- more step-families
- more lone-parent families
- greater use of IVF/assisted reproduction
- more child-centred families.

Note: not the growing proportion of children who are born to unmarried parents (Item 1A).

(d) Identify and briefly explain **two** possible reasons for the rise of the symmetrical family (**Item 1A**, line 2). (8 marks)

Two marks for each of two appropriate reasons identified, such as:

- more women working
- women now have greater earning power
- new technology in the home
- geographical mobility/new housing developments
- improved living standards
- the impact of feminist ideas
- greater use of contraception
- changing ideas of masculinity.

A further two marks for each of these satisfactorily explained, such as:

- More women working: this has meant that men have had to take on more domestic labour.
- Women now have greater earning power: and thus more say in decision-making.
- New technology in the home: labour-saving devices have encouraged men to do more housework (or: home entertainment technology has made home a more attractive place for couples to spend their leisure in together).
- Geographical mobility/new housing developments: these have helped to break up traditional networks of extended kin and workmates, thus promoting the privatised nuclear family.
- Changing ideas of masculinity: the emergence of the 'new man' as a cultural norm has meant men are now more willing to perform domestic labour/childcare.

(e) Examine the relationship between family structure and industrialisation.

(20 marks)

- **0** No relevant points.
- 1-7 Answers in this band will show only a limited knowledge and understanding.

Lower in the band, this may be one or two quasi-commonsensical points, eg about family types, with little understanding of relevant issues.

Higher in the band, answers will show a limited, undeveloped sociological knowledge, for example two or three insubstantial points about extended families. Interpretation of material may be simplistic or at a tangent to the question. Analysis will be very limited or non-existent.

8-15 Answers in this band will show a reasonable knowledge and understanding.

Lower in the band, this may be confined to a competent if basic account, for example of Parsons' views on the rise of the nuclear family. Interpretation may not be linked explicitly to the demands of the question; for instance, answers may indiscriminately list material on the family.

Higher in the band, knowledge will be broader and/or deeper, and will begin to identify a wider range of views of the relationship. Material will be interpreted accurately, but its relevance may not always be made explicit. There may be some limited analysis and/or evaluation, for instance of the 'functional fit' thesis. However, this is **not** a requirement, even to reach the top of the band.

16 – 20 Answers in this band will show a sound, conceptually detailed knowledge and understanding of sociological material on family structure and industrialisation. This will be accurately and sensitively interpreted to meet the demands of the question. The answer will show the ability to organise material and to analyse and/or evaluate it explicitly so as to produce a coherent and relevant answer.

Answers will consider a range of views on the relationship between family and industrialisation. Concepts and issues may include the following: functional fit, ascribed and achieved status, geographical and social mobility, exchange theory, household composition and family structure, class differences in the impact of industrialisation on family structure, migration, pre-industrial family structures etc. Evaluation/analysis may be developed eg through debate between functionalist and other approaches, appropriate use of historical evidence etc.

Lower in the band, answers may examine a more limited range of material.

Higher in the band, answers may be more detailed and complete, and/or may show a clear rationale in the organisation of material leading to a distinct conclusion.

- (f) Using material from **Item 1B** and elsewhere, assess the impact of state policies and laws on family life. (20 marks)
- **0** No relevant points.
- 1-7 In this band, analysis/evaluation will be very limited or non-existent, and answers will show only a limited knowledge and understanding.

Lower in the band, this may be one or two quasi-commonsensical points about family life or material ineffectually recycled from Item 1B with little understanding of relevant issues.

Higher in the band, answers will show a limited, undeveloped sociological knowledge, for example two or three insubstantial points about a particular policy. Interpretation of material may be simplistic or at a tangent to the question.

8-15 In this band there will be some limited analysis and/or evaluation (though lower in the band this will be implicit), and answers will show a reasonable knowledge and understanding.

Lower in the band, some suitable material will be correctly identified and a broadly accurate if basic account offered, for example of New Right views on lone-parent families, though interpretation to meet the demands of the question may remain implicit.

Higher in the band, knowledge and understanding of material will be broader and/or deeper, and the answer will begin to deal explicitly with one or more sociological views and may make limited use of Item 1B (eg to discuss the relationship between patriarchy and policy). Material will be accurately interpreted but its relevance may not always be made explicit. There will be some limited analysis and/or evaluation, for instance of feminist views of policy.

16 – 20 In this band, analysis and evaluation will be explicit and relevant, and answers will show a sound, conceptually detailed knowledge and understanding of sociological material on the impact of law/policy on family life, drawn from Item 1B and elsewhere. This will be accurately and sensitively interpreted to meet the demands of the question.

Issues such as cohabitation, marriage, divorce, domestic violence, marital rape, sexuality, abortion, contraception, reproductive technology, infanticide, adoption, child support, child protection, childcare, schooling, taxation, welfare state/benefits, inheritance etc may appear, as may concepts such as patriarchy, age patriarchy, familism, welfare dependency, surveillance, the underclass, reserve army of labour, gender regimes etc. Evaluation/analysis may be developed eg through a comparative approach or by debates between perspectives (eg New Right, feminist, postmodernist, functionalist etc). Sources may include Althusser, Donzelot, Drew, Fletcher, Gittens, Hood-Williams, Land, Leonard, Murray, Pilcher, Wilson, etc.

Lower in the band, interpretation may be less selective or evaluation less developed and more list-like.

Higher in the band, interpretation will be more focused and evaluation more thorough, and answers may show a clear rationale in the organisation of material leading to a distinct conclusion.

SECTION B: HEALTH

2 Total for this section: 60 marks

(a) Explain what is meant by a 'social construct' (Item 2A, line 6).

(2 marks)

Two marks for an appropriate explanation or definition, such as: something created or defined by society.

One mark for an example only of health or illness as a social construct.

(b) Suggest **two** reasons why men make less use than women of health care provision (**Item 2A**, lines 3 – 5). (4 marks)

Two marks for each of two appropriate reasons suggested, such as:

- men are less likely to be able to attend appointments because of work commitments
- men are more likely to see health care as a feminised space
- women are more likely to admit to weakness/illness
- women are more likely to talk about their feelings, so more likely to consult over emotional/psychological problems
- men are less likely to accompany children to the doctor's, so have less opportunity for consultations about their own health.
 - (c) Suggest **three** reasons why 'women on average live longer than men' **apart from** more frequent visits to the GP's surgery (**Item 2A**, lines 2-3). (6 marks)

Two marks for each of three appropriate reasons suggested, such as that women have lower rates of:

- smoking
- alcohol consumption
- driving/fatal road accidents
- deaths from violence
- work-related fatalities.

Note: **not** more frequent visits to the GP's surgery.

(d) Identify and briefly explain **two** reasons why there are 'class differences in the uptake of health care services' (**Item 2A**, lines 7-8). (8 marks)

Two marks for each of two appropriate reasons identified, such as class differences in:

- knowledge of medicine or the health care system
- the inverse care law
- paid leave from work
- access to private transport
- ability to afford childcare
- beliefs about ability to control one's health
- linguistic skills.

A further two marks for each of these satisfactorily explained, such as:

- Knowledge of medicine or the health care system: middle-class patients are better educated, so more knowledgeable about what they can get from the services.
- The inverse care law: there is less provision of services in working-class areas, which have greatest need, so uptake is lower.
- Paid leave from work: manual workers are less likely to get paid time off work, so can't afford to attend appointments.
- Access to private transport: manual workers have less access to private transport, so it is harder for them to attend appointments.

- (e) Examine the reasons for differences in the health chances and health care of different ethnic groups. (20 marks)
- **0** No relevant points.
- 1-7 Answers in this band will show only a limited knowledge and understanding.

Lower in the band, this may be one or two quasi-commonsensical points about ethnic minorities, with little understanding of relevant issues.

Higher in the band, answers will show a limited, undeveloped sociological knowledge, for example two or three insubstantial points about diet. Interpretation of material may be simplistic or at a tangent to the question, for example drifting into a weak account of class and health. Analysis will be very limited or non-existent.

8-15 Answers in this band will show a reasonable knowledge and understanding.

Lower in the band, this may be confined to a competent if basic account, for example of aspects of cultural causes of illness. Interpretation may not be linked explicitly to the demands of the question; for instance, answers may indiscriminately list material on class as a proxy for ethnicity, with only tenuous links to the latter. Some may deal only with chances, or conflate chances and care.

Higher in the band, knowledge will be broader and/or deeper. Answers will begin to consider both chances and care and/or to identify a wider range of reasons, or of different ethnic groups. Material will be interpreted accurately, but its relevance may not always be made explicit. There may be some limited analysis and/or evaluation, for instance of the role of material versus cultural factors. However, this is **not** a requirement, even to reach the top of the band.

16 – 20 Answers in this band will show a sound, conceptually detailed knowledge and understanding of sociological material on ethnicity and health chances and health care. This will be accurately and sensitively interpreted to meet the demands of the question. The answer will show the ability to organise material and to analyse and/or evaluate it explicitly so as to produce a coherent and relevant answer.

Candidates will consider a range of reasons and will deal with both chances and care in relation to specific ethnic groups. Concepts and issues such as discrimination, institutional racism, ethnocentrism among health workers, mental health and psychiatric services, lack of access to interpreters/female doctors, housing, work and unemployment, poverty, income, family size, cultural factors (eg diet, attitudes to women, language, knowledge of the NHS), genetic factors etc. Evaluation/analysis may consider methodological issues (eg definitions of ethnicity, health statistics) or questions about how far ethnic differences are really class differences.

Lower in the band, answers may examine a more limited range of reasons, or give limited treatment of either care or chances.

Higher in the band, answers may be more detailed and complete, and/or may show a clear rationale in the organisation of material leading to a distinct conclusion.

- (f) Using material from **Item 2B** and elsewhere, assess sociological explanations of the role of medicine and the medical profession. (20 marks)
- **0** No relevant points.
- 1-7 In this band, analysis/evaluation will be very limited or non-existent, and answers will show only a limited knowledge and understanding.

Lower in the band, this may be one or two quasi-commonsensical points about medicine or material ineffectually recycled from Item 2B with little understanding of relevant issues.

Higher in the band, answers will show a limited, undeveloped sociological knowledge, for example two or three insubstantial points about the role of doctors. Interpretation of material may be simplistic or at a tangent to the question.

8 – 15 In this band there will be some limited analysis and/or evaluation (though lower in the band this will be implicit), and answers will show a reasonable knowledge and understanding.

Lower in the band, some suitable material will be correctly identified and a broadly accurate if basic account offered, for example of Parsons on the sick role, though interpretation to meet the demands of the question may remain implicit.

Higher in the band, knowledge and understanding of material will be broader and/or deeper, and the answer will begin to deal explicitly with both medicine and the medical profession, and may make limited use of Item 2B (eg to discuss the role of pharmaceutical companies). Material will be accurately interpreted but its relevance may not always be made explicit. There will be some limited analysis and/or evaluation, for instance of the functionalist view of the medical profession.

16 – 20 In this band, analysis and evaluation will be explicit and relevant, and answers will show a sound, conceptually detailed knowledge and understanding of sociological material on medicine and the medical profession, drawn from Item 2B and elsewhere. This will be accurately and sensitively interpreted to meet the demands of the question.

Concepts and issues such as the following may appear: medical versus social models of health, the rise of hospital medicine, patriarchy, capitalism, iatrogenesis, social control, the sick role, ideology, professionalism, de-professionalisation, white eye, male gaze, labelling, surveillance, social closure. Evaluation may be developed through debates between different perspectives (eg functionalist, Marxist, Weberian, feminist), examination of historical or cross-cultural evidence etc. Sources may include Donzelot, Freidson, Foucault, Graham, Illich, Jamous & Peloille, Jewson, McKeown, Navarro, Oakley, Parry & Parry, Parsons, Turner, Witz, etc.

Lower in the band, interpretation may be less selective or evaluation less developed and more list-like.

Higher in the band, interpretation will be more focused and evaluation more thorough, and answers may show a clear rationale in the organisation of material leading to a distinct conclusion.

SECTION C: MASS MEDIA

Total for this section: 60 marks

(a) Explain what is meant by 'symbolic annihilation' (Item 3A, line 9).

(2 marks)

Two marks for an appropriate explanation or definition, such as: where a group is ignored/not mentioned, trivialised or represented negatively by the media.

One mark for an example only, eg women are portrayed in limited roles.

(b) Suggest **two** reasons why mass media portrayals of gay and lesbian characters have become more positive in recent decades (**Item 3A**, lines 10-11). (4 marks)

Two marks for each of two appropriate reasons suggested, such as by:

- the influence of the gay rights movement
- greater social acceptance of homosexuality
- market forces spending power of gays and lesbians
- the setting up of specifically gay media, eg Gay Times.
 - (c) Identify **three** ways in which the state is able to 'influence what we see, hear and read' (**Item 3A**, line 7). (6 marks)

Two marks for each of three appropriate ways identified, such as by:

- censorship/D-notices
- official secrets legislation
- embedding of journalists with armed forces
- official press conferences/the work of 'spin doctors'
- off the record briefings to favoured journalists/the 'lobby' system
- regulatory bodies/broadcasting charters
- promise of rewards eg honours to publishers etc.
 - (d) Identify and briefly explain **two** criticisms that other sociologists might make of the post-modernist view of the mass media, **apart from** the one referred to in **Item 3A**.

(8 marks)

Two marks for each of two appropriate criticisms identified, such as that post-modernism:

- ignores unequal access to media messages
- ignores the power of capitalists
- ignores the power of media professionals
- ignores audience effects
- is itself a meta-narrative
- fails to distinguish between media image and reality.

A further two marks for each of these satisfactorily explained, such as that post-modernism:

- ignores unequal access to media messages: eg not everyone can afford or chooses to have satellite
- ignores the power of capitalists: eg to shape messages, set agendas, restrict audience's access to information.

- ignores audience effects: post-modernism wrongly assumes audiences always use media output 'playfully'/ironically, yet some do believe the messages.
- is itself a meta-narrative: post-modernism implicitly claims to have 'the truth' about the role of the media, yet it also rejects claims to know the truth, so why should we believe it?
- fails to distinguish between media image and reality: its denial that objective reality exists means we cannot challenge (or even identify) media distortions, ideologies and stereotypes as false.

Note: **no** marks for post-modernism ignores the power of the state to influence what we see, hear and read (referred to in **Item 3A**).

(e) Examine the relationship between the mass media and their audiences.

(20 marks)

- **0** No relevant points.
- 1-7 Answers in this band will show only a limited knowledge and understanding.

Lower in the band, this may be one or two quasi-commonsensical points eg about brainwashing, with little understanding of relevant issues.

Higher in the band, answers will show a limited, undeveloped sociological knowledge, for example two or three insubstantial points about copycat violence. Interpretation of material may be simplistic or at a tangent to the question. Analysis will be very limited or non-existent.

8-15 Answers in this band will show a reasonable knowledge and understanding.

Lower in the band, this may be confined to a competent if basic account, for example of aspects of one or two studies or models of audience effects. Interpretation may not be linked explicitly to the demands of the question; for instance, answers may indiscriminately list material on stereotyping, general models of the media etc.

Higher in the band, knowledge will be broader and/or deeper, and will begin to deal with a range of views of the relationship or of types of media effects. Material will be interpreted accurately, but its relevance may not always be made explicit. There may be some limited analysis and/or evaluation, for instance of the hypodermic syringe model. However, this is **not** a requirement, even to reach the top of the band.

16 – 20 Answers in this band will show a sound, conceptually detailed knowledge and understanding of sociological material on the relationship between media and audiences. This will be accurately and sensitively interpreted to meet the demands of the question. The answer will show the ability to organise material and to analyse and/or evaluate it explicitly so as to produce a coherent and relevant answer.

Concepts and issues may include the following: various models (hypodermic syringe, two-step flow, uses and gratifications, interpretative, reception analysis/structured interpretation, postmodernism etc); active versus passive audiences; factors affecting access to/interpretation of messages (eg opinion leaders, peer groups, income, patriarchy, class/group membership); ideology/hegemony; mass society; choice/needs; media literacy; polysemic messages; media saturated society/hyper-reality etc. Analysis/evaluation may be developed eg through debate between different models, consideration of methodological issues, different audiences, media or genres etc.

Sources may include Ang, Bandura et al, Baudrillard, Blumler & Katz, Buckingham, S Cohen, Fiske, Katz & Lazarsfeld, Livingstone & Bovill, Hall et al, Halloran, Lyotard, Marcuse, McQuail, Morley, Packard, Provenzo.

Lower in the band, answers may examine a more limited range of material.

Higher in the band, answers may be more detailed and complete, and/or may show a clear rationale in the organisation of material leading to a distinct conclusion.

- (f) Using material from **Item 3B** and elsewhere, assess the view that 'the role of the news is to reproduce and spread the ideology of the capitalist class' (**Item 3B**, lines 1-2). (20 marks)
- **0** No relevant points.
- 1-7 In this band, analysis/evaluation will be very limited or non-existent, and answers will show only a limited knowledge and understanding.

Lower in the band, this may be one or two quasi-commonsensical points about news reporting, or material ineffectually recycled from Item 3B with little understanding of relevant issues.

Higher in the band, answers will show a limited, undeveloped sociological knowledge, for example two or three insubstantial points about bias in the media. Interpretation of material may be simplistic or at a tangent to the question.

8-15 In this band there will be some limited analysis and/or evaluation (though lower in the band this will be implicit), and answers will show a reasonable knowledge and understanding.

Lower in the band, some suitable material will be correctly identified and a broadly accurate if basic account offered, for example of a GMG study, though interpretation to meet the demands of the question may remain implicit. For example, the answer may focus on bias in the media in general, rather than news in particular.

Higher in the band, knowledge and understanding of material will be broader and/or deeper, and the answer will begin to deal explicitly with the ideological role of the media and may make limited use of Item 3B (eg to discuss the language of news reports). Material will be accurately interpreted but its relevance may not always be made explicit. There will be some limited analysis and/or evaluation, for instance from a pluralist perspective.

16 − 20 In this band, analysis and evaluation will be explicit and relevant, and answers will show a sound, conceptually detailed knowledge and understanding of sociological material on the role of the news, drawn from Item 3B and elsewhere. This will be accurately and sensitively interpreted to meet the demands of the question.

Concepts and issues such as the following may appear: hegemony; ideology; agenda setting; gatekeeping; news values; connotative codes; social construction of news; stereotyping; cultural, bureaucratic and financial factors; the role of owners, journalists, advertisers and state in news production; allocative and operational control; news as pastiche, different kinds of news (eg political, industrial, crime, etc) or news organisation, etc. Evaluation may be developed, eg by locating the discussion within a debate between perspectives or models (eg pluralism, classical and neo-Marxism, postmodernism, feminism). Sources may include Althusser, Chibnall, Cohen & Young, Galtung & Ruge, GMG, Gramsci, Hall, Harrison, Nicholas Jones, Kitzinger & Skidmore, Marx, Rock, Weber, etc.

Lower in the band, interpretation may be less selective or evaluation less developed and more list-like.

Higher in the band, interpretation will be more focused and evaluation more thorough, and answers may show a clear rationale in the organisation of material leading to a distinct conclusion

ASSESSMENT GRIDS FOR UNIT 1 (SCY1)

Families and Households

	ASSESSMENT OBJECTIVES		
Questions	AO1	AO2	Total
1 a	2	0	2
1 b	2	2	4
1 c	2	4	6
1 d	4	4	8
1 e	14	6	20
1 f	6	14	20
Total	30	30	60

Health

Questions	ASSESSMENT OBJECTIVES			
	AO1	AO2	Total	
2 a	2	0	2	
2 b	2	2	4	
2 c	2	4	6	
2 d	4	4	8	
2 e	14	6	20	
2 f	6	14	20	
Total	30	30	60	

Mass Media

	ASSESSMENT OBJECTIVES		
Questions	AO1	AO2	Total
3 a	2	0	2
3 b	2	2	4
3 c	2	4	6
3 d	4	4	8
3 e	14	6	20
3 f	6	14	20
Total	30	30	60