higher education & training

Department:
Higher Education and Training
REPUBLIC OF SOUTH AFRICA

MARKING GUIDELINE

NATIONAL CERTIFICATE

EDUCATIONAL PSYCHOLOGY N6

16 November 2023

This marking guideline consists of 14 pages.

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SECTION A

QUESTION 1

1.1	1.1.1	D
	1.1.2	H
	1.1.3	I
	1.1.4	N
	1.1.5	E
	1.1.6	B
	1.1.7	O
	1.1.8	K
	1.1.9	J
	1.1.10	M

(10 × 1) (10)

1.2	1.2.1	True
	1.2.2	True
	1.2.3	False – School maturity deals with a child's physical and mental development.✓✓
	1.2.4	False – Outcomes Based Education (OBE) was introduced in South Africa in 1997.✓✓
	1.2.5	False – It is normal for children to experience tantrums between 1 and 3 years of age.✓✓
	1.2.6	True
	1.2.7	True

(7 + 3) (10)

1.3	1.3.1	C
	1.3.2	A
	1.3.3	C
	1.3.4	B
	1.3.5	D
	1.3.6	C
	1.3.7	C
	1.3.8	A
	1.3.9	C
	1.3.10	B

(10 × 2) (20)

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1.4 1.4.1 Eye-hand coordination
OR
Fine motor skills development
OR
Shape recognition (Any ONE)

1.4.2 Active language development
OR
Auditory perception (Any ONE)

1.4.3 Fine motor skills development
OR
Eye-hand coordination (Any ONE)

1.4.4 Large muscle development
OR
Gross motor skills development (Any ONE)

1.4.5 Large muscle development/Gross motor skills development
OR
Eye-foot coordination [*consider relevant responses*] (Any ONE)
(5 × 2) (10)
[50]

TOTAL SECTION A: 50

SECTION B

QUESTION 2

2.1
- Developmental level:
  - Moral and social behaviour has an important influence on the child's behaviour, e.g. it is normal for a 2-year-old to throw a tantrum, but this is not appropriate for a 5-year-old.
  - It is normal for a 1-year-old to touch everything, but not a 6-year-old.

- The Environment:
  - Acceptable and unacceptable behaviour is learned by children.
  - They react to their environment and the people in it. While interacting with peers and other people, children learn ways of reacting in social situations.
  - They adapt to behaviour that seems to be acceptable to others.
  - In this way, unacceptable behaviour can be acquired.

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- Unrealistic Expectations of children:
  - Parents sometimes set standards that are too high for their child to achieve.
  - Being aware of a child's development level is important.
  - This will prevent parents from having unrealistic expectations.
  - Often children are compared to other children in their age group, but they do not have the same potential.
  - Disobedience can occur if the expectations are too high or too low.

- Health problems:
  - A child's health influences his behaviour.
  - Children cannot verbally explain how they feel.
  - Medication will also influence the behaviour of a child, e.g., it can make the child hyperactive or sleepy, which can result in him/her being irritable.
  - Educators must be aware of medication that a child may be taking and also be sensitive towards the child's health.

- Allergies:
  - Food can have a negative effect on a child e.g., Coca-Cola and colourants in other cool drinks make children hyperactive.
  - Too much sweets and sugar causes the child to be overactive and difficult to handle.

- Attention:
  - Adults tend to react when children do something wrong and the child receives the message that to gain attention, he must misbehave.
  - Adults should pay attention to a child's positive behaviour too, so that it will not be necessary for them to be disobedient to get attention.

- Confusing guidelines:
  - Children must know what is expected of them therefore rules need to be simple and clear.
  - People often overestimate children's ability to understand their expectations.

- Inconsistent messages:
  - Inconsistent rules regarding discipline (home/daycare centre), should be avoided because it will confuse the child, e.g. If swearing is allowed at home, but the child receives punishment for it at the daycare centre.
  - Rules should not change daily.

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- Physical environment:
  - A bored child is a naughty child therefore the environment is important and should be interesting and stimulating.
  - There should be sufficient space. If there is insufficient space, fighting will occur more often.

- Wrong diet:
  - What a child eats will affect his/her behaviour.
  - It is important that a child should get the necessary balanced diet.

- Sensory deficiencies:
  - Behavioural problems can also be caused by sensory problems, e.g., a visually impaired child may feel frustrated and uncertain.
  - These children may be too afraid to follow instructions because they are afraid of doing things.
  - A hearing-impaired child might seem to be noisy.

- Over sensitivity to stimulation:
  - A good daily programme is busy, constructive, active, and colourful.
  - Most children will be happy in such an environment, but for some children, the noise may be overwhelming.
  - It is necessary to have a quiet, calm area (in the playroom) where the over-stimulated child can get away from everything for a while.

- Stress in the family:
  - A change in routine can be the cause of behavioural problems as the child may not understand what is happening.
  - Stress can be caused by the following factors: death of a family member, finances, divorce, unemployment, relocation, diseases, alcoholism, or drug abuse.

(Any ONE mark for technique and ONE mark for explanation) (5 × 2) (10)

2.2 2.2.1

- Younger children cannot distinguish between right and wrong.
- In the case of stealing food, the child may be hungry.
- If the child does not have something at home, he/she may steal it, e.g., stealing crayons at the daycare centre.
- The child may be used to getting everything. He thinks it is his right to take whatever he/she likes/wants.
- A bad role model can be the cause, e.g., a parent may bring home envelopes from work because the business will not go bankrupt.
- The child may be seeking attention.
- He/she may want to impress his/her friends with his/her belongings.
- Very young children may not realise that items need to be paid for as they do not understand the concept of ownership.

- This may be an outcry for emotional or physical abuse they're enduring.
- Lack of impulse control – the child cannot restrain himself/herself from taking something that doesn't belong to him/her. (Any 5 × 1) (5)

2.2.2
- Consider the age of the child – young children do not understand the concept of stealing.
- Do not get angry with the child.
- Remain calm. Deal with the situation straightforwardly.
- Talk to the child privately.
- Ensure that the child experiences a consequence of his/her actions, e.g., apologising, or replacing the item.
- If not sure about who took the item – provide an opportunity for the 'taker' to return it and save face.
- Do not label the child as 'bad' or a 'thief'.
- Take time to ask yourself why the behaviour occurred.
- Read a story that links to the topic. Discuss the moral effect of the actions and the consequences thereof. Allow for further discussion.
- Make rules outlining bringing personal belongings like toys to the crèche.
- It is important to react immediately when something is taken/stolen.
- Subtly confront younger children.
- Can be used as an attention-seeking strategy - so analyse the situation carefully.
- A bad role model may be the cause - investigate carefully.
- Only see it as stealing when it's done consciously and it happens regularly – investigate thoroughly.
- If it continues, especially as the child gets older, professional help should be sought. (Any 5 × 2) (10)

2.2.3 **Markers to use their discretion:**
- Her parents are going through a divorce. She is unhappy about this.
- She is seeking attention because of the divorce situation.
- She is angry with her parents because of the divorce situation.
- She feels like an outcast with her peers at school. They all come from 'normal' families. (Any 3 × 1) (3)

2.3 2.3.1 A medical practitioner who deals with emotional problems, but who can also prescribe medication for the problem.

2.3.2 A short period when a child must sit quietly as punishment for behaving badly.
OR
Time-out is taking a child away from what he is doing wrong and putting him in a certain place for a short while.
OR
Isolating the child from the current situation that is contributing to the misbehaviour. (Any ONE)

2.3.3 A phobia is an irrational fear. The fear is specific.
OR
When somebody is fearful and reacts intensely.
OR
A type of anxiety. It is an irrational, unreasonable fear of an object or situation.
OR
A phobia differs from a normal fear, in that the anxiety felt is only when presented with a specific situation or thing. (Any ONE)
(3 × 2) (6)

2.4 2.4.1 (a) A serious physical and emotional illness in which an abnormal fear of being fat leads to very poor eating habits and dangerous weight loss.
OR
When the child is very thin and keeps on losing weight, he is not interested in eating and vomits after eating. He sees himself as being fat, although he is very thin.
(b) A condition in children whereby the child has extra or excess fat.✓✓
(c) An eating disorder associated when a child eating strange objects.✓✓
(d) A condition in children whereby the child is finicky and fussy and only eats certain foods.✓✓
(4 × 2) (8)

2.4.2 (a) Anorexia: Immediate medical care should be administered.
(b) Obesity:
- Follow a balanced diet.
- As it is also linked to emotional problems and boredom – these should also be addressed before the problem of obesity is addressed.
- Parents should be good role models. (Any ONE)

(c) Pica:
- Discourage the child from eating such objects.
- Refer him/her for medical tests.
- Reinforce positive behaviour - through praise or rewards.
- Talk to the child about the problem - explain the necessity of a proper, healthy and balanced diet. (Any ONE)

(d) Finicky eaters:
- Discourage the child from eating such objects.
- Stop the habit as soon as possible.
- Refer him/her for medical tests.
- Reinforce positive behaviour – through praise or rewards.
- Talk to the child about the problem- explain the necessity of a proper, healthy, and balanced diet.
- Parents must be explained that there are specific menus for
- the daycare centre and specific needs cannot be catered for. (Any ONE)

(4 × 2) (8)

[50]

QUESTION 3

3.1 3.1.1
- To reach as many 0–8-year-old children and their families as possible with programs designed to their needs.✓✓
- To reach as many parents as possible and other members of adult communities as possible with programs that will empower them to establish, implement and manage. appropriate preschool educare programs.✓✓
- To reach the policymakers, authorities, unions, and sponsors with compelling evidence of the need to support the provision of ECD sites.✓✓ (3 × 2) (6)

3.1.2
- To provide an integrated system for ECD.✓✓
- To develop leadership and organising qualities, so that communities will be able to develop their own projects.✓✓
- Provide training for adults, especially in the early childhood development field.✓✓
- Develop suitable programs and curricula for the children and their families.✓✓
- Provide parent training programs to equip the parents with the necessary skills.✓✓
- Change the teaching system. (Any 5 × 2) (10)

3.1.3
- Field services
- National Program
- Program development and training
- Research and evaluation
- Media and material development
- Library services
- Anti-waste program
- The Adventure Bus
- Fund-raising and finances (Any 6 × 1) (6)

3.2
- Do not just teach the child but prepare the child for life.
- Work in harmony with the program.
- Put the child's needs first before all else.
- Motivate the child, to enhance their inner guidance at specified times in their early lives, which leads to self-directed learning.
- Observe the child, determine his/her needs, and make activities available to him/her.
- Assist in self-development.
- Observe the child: listen to and watch the child carefully to note changes in his/her interests.
- Facilitate: demonstrate to the child, how to do an activity.
- Prepare the environment: set up your home or child's space with his interests in mind.
- Respect: give the child freedom to choose the activity he wants to do.
- Role model: live the values and behaviours you want your child to learn, this is teaching by example. (Any 5 × 2) (10)

3.3
- Accredited training programmes for those working in the ECD field.
- Training in integrating diversity, anti-bias and non-violence in educational settings.
- Post-training advisory and support for implementation.
- Facilitated stakeholder dialogue for establishing development initiatives that provide ECD services in communities.
- Makes access possible for caregivers to the Family and Community Motivators (FCM) programme which focuses on children and their parents in their homes. (Any 4 × 2) (8)

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3.4
- The classroom is arranged in such a way that the child can work, move and develop freely.✓✓
- The design and flow accommodate the student's choice and must allow the child freedom.✓✓
- Spaces are suited for both group and individual work.✓✓
- There are no customary desks, worktables, or roll-out mats to define a child's workspace.✓✓
- The furniture must be proportioned to the child's size.✓✓
- The walls consist of work done and displayed by the children.
- There are well-defined spaces for each part of the curriculum.
- There is an area devoted to peace and reflection.
- Some spaces allow children to read or be read to.
- Aesthetic appeal:
  - The materials are well-made and well-maintained.
  - All materials are neatly arranged on shelves.
  - The materials are inviting and awaken the child's interest in learning.There are beautiful, attractive pictures on the walls.
  - Humorous books are available to the child.
  - Structure and order
  - Reality and nature
  - Equipment
  - Beauty and aesthetic awareness
  - Development of community life

(Any 5 × 2) (10)
[50]

QUESTION 4

4.1 4.1.1
- Lacks confidence
- Is dependent
- Is home-bound
- Poor coordination
- Poor perception of time
- Low perseverance
- Short attention span
- Crude or immature toilet habits
- Infantile speech
- Infantile behaviour

(Any 6 × 1) (6)

4.1.2
- The child should stand up straight,
- Keep his/her head up (not backwards or forwards)
- Stretch his right arm across his head.
- Touch his left ear with his right hand. (4)

4.2 4.2.1 An imaginary line that divides the left side from the right side of the body.
OR
A medical line, especially the medical line of the body.
OR
The Medical line (Plane) of the body, divides the body into halves that are mirror images of each other. (Any ONE)

4.2.2 Being able to discriminate differences. This includes differences in size, shape, colour, and orientation.
OR
It is the ability to distinguish between similarities (what is the same) and differences (what is different) of objects through the eyes. Classification and concept formation take place during this process. (Any ONE)

4.2.3 The ability of the brain to receive information through the ears (sound).
OR
The interpretation of information that is heard. (Any ONE)

4.2.4 Passive language development: This occurs when the child's language develops through listening and watching.

4.2.5 Gustatory perception: The ability of the brain to receive and interpret information via the sense of taste (tongue).
OR
The observation and interpretation of information that is received through the tongue (taste) and sent to the brain. (Any ONE)
(5 × 2) (10)

4.3 4.3.1
- Counting activities
- Quantity
- Volume
- Size
- Position
- Sequence
- Orientation of time
- Speed
- Measurement
- Data handling
- Patterns (Any 3 × 1) (3)

4.3.2

- Counting activities
  - Allow the child to count (0–5) and even further.✓
  - Count numbers, while clapping hands.✓
  - Place objects in front of the child – ask him/her to count.
  - Put blocks in front of the child and ask him/her to pick a specific number of blocks.
  - Ask questions related to numbers.

- Quantity
  - Include an activity to take many/few blocks.✓
  - Ask questions relating to the quantity of blocks in a container.✓
  - Pack away all the blocks – counting the number of blocks

- Volume
  - Fill a bottle with buttons✓
  - Empty the bottle of buttons✓
  - Make the bottle of buttons half-full
  - Fill the bottle with sand

- Size
  - Identifying objects that are biggest/smallest.
  - Identifying objects which are tallest/shortest.
  - Identifying objects: taller than/shorter than
  - Who is tallest/shortest?
  - Are you big/small?
  - Who is the smallest in your family?

- Position
  - Standing next to a table.
  - Standing on top of a rope.
  - Walk to the left/right
  - Crawl under the table.
  - Identifying positions of objects: inside or outside
  - Which one is in the middle/last/second?

- Sequence
  - Sorting objects from big to small
  - Sorting sticks from short to long
  - Grouping objects: small ones together, big ones together.
  - Sorting objects in order of sequence: tall, taller, tallest/short, shorter, shortest.

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- Orientation of time
  - Ask questions related to the concept of time: How old are you now? How old will you be on your next birthday?
  - Identify the time of day: morning, midday, afternoon – give a reason.
  - What day is it? Today? Yesterday? Tomorrow?
  - Name the days of the week.
  - What season is it now?: Summer OR Winter
  - Concepts: a long time, a short time, early, late, etc.

- Speed
  - Walk slowly/fast to the tree.
  - Who runs the fastest: the rabbit or tortoise?
  - Which is faster/slower: bicycle or motorcycle?
  - Look at a clock: which hand moves faster?

- Measurement
  - Measure time using the clock.
  - Measure temperature using the thermometer.
  - Measure length using a measuring tape.
  - Measure mass using a scale.

- Data handling
  - Conduct graphing activities.
  - Collate data on choice of cereals, favourite colour, etc.

- Patterns
  - Drawing activities showing pattern formation
  - Sticking pictures showing pattern formation

(Any THREE concepts indicated in Q 4.3.1 must be included)
(Any TWO activities per concept will be acceptable) (Any 3 × 2) (6)

4.4 4.4.1 **Markers to use their discretion:**

- Use opportunities to point out shapes to the child, e.g., round tyres on a car.
- Conduct comparative exercises, e.g., who's shoes are biggest/smallest?
- Conduct clean-up activities, e.g., store specific blocks according to their sizes or shapes.
- Use of a shape ball: the child has to fit different shapes into the correct openings.
- Play a Domino game with shapes. (Any 4 × 2) (8)

4.4.2
- Circle
- Square
- Triangle
- Rectangle
- Oval
- Parallelogram
- Trapezoid
- Pentagon
- Hexagon
- Octagon (Any 3 × 1) (3)

4.5
- His head is smaller and in proportion to the body than it used to be.
- His arms are longer and slimmer.
- He has fewer layers of fat and his muscles can be seen more clearly.
- He is healthy.
- He can coordinate his hand and eye movements, e.g., copy and draw a pattern.
- He shows dominance, i.e., he is either left-handed or right-handed.
- He can touch his left ear by putting his right hand over his head.
- He has a normally developed brain. (Any 5 × 2) (10)

[50]

TOTAL SECTION B: 150
GRAND TOTAL: 200

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