higher education & training

Department:
Higher Education and Training
REPUBLIC OF SOUTH AFRICA

MARKING GUIDELINE

NATIONAL CERTIFICATE

EDUCATIONAL PSYCHOLOGY N5

11 JUNE 2018

This marking guideline consists of 8 pages.

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SECTION A

QUESTION 1

1.1 True
1.2 False
1.3 False
1.4 False
1.5 False
1.6 False
1.7 True
1.8 False
1.9 True
1.10 False

(10 × 2) **[20]**

QUESTION 2

2.1 B
2.2 D
2.3 C
2.4 A
2.5 B
2.6 B
2.7 B
2.8 D
2.9 B
2.10 C

(10 × 2) **[20]**

QUESTION 3

3.1 D
3.2 A
3.3 E
3.4 B
3.5 C

(5 × 2) **[10]**

TOTAL SECTION A: 50

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SECTION B

QUESTION 4

4.1
- The control and handling of biological needs such as toilet training
- The development of language ability
- The development of a conscience
- The development of an understanding of the social world
- The development of autonomy and initiative
- The learning of sex appropriate behaviour (Any 5 × 2) (10)

4.2
- Parents must know the content of the programs their children watch
- Pro-social programs should be encouraged
- Anti-social programs should be avoided
- Children should be taught to be selective in the programs they watch
- Programs should be discussed with them and it should be pointed out that violence is harmful (Any 3 × 2) (6)

4.3
- Teachers need to encourage physical play as children are gaining better control over their bodies
- They need to be encouraged to take the initiative and to believe in their abilities to succeed
- Mistakes they make at this stage are good opportunities for learning
- Too much guilt at this stage can inhibit the child's creativity and free interaction with others (Any 3 × 2) (6)

4.4
4.4.1 C
4.4.2 E
4.4.3 D
4.4.4 B
(4 × 2) (8)

4.5 Stage 1 Pre-conventional morality (5–9 years)
- Concern about the self
- The child learns what is wrong based on his punishment
- The child obeys the rules to avoid punishment
- Right and wrong behaviour depends on the type of punishment involved
(3 × 2) (6)

4.6
- Instinct for self-preservation
- Sexual instinct (biological reproduction (2 × 2) (4)

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4.7
- It is a common form of testing used to assess the child's personality
- The researcher does not ask questions directly
- The child is given an ambiguous picture, task or situation and must then:
- Make up a story;
- Or interpret the picture;
- Or guess the outcome of the situation
- There are no right or wrong answers
- It is assumed the child will project their own feelings, attitudes, anxieties and needs into the situation (Any 6 × 1) (6)

4.8
- Subjectivity
- Uncontrolled variables
- Relate to one specific individual
- Cause-effect relationship cannot be established
- Cannot make generalisations (Any 2 × 2) (4)

[50]

QUESTION 5

5.1
- crying
- gestures
- babbling
- cooing
- emotional expressions (5 × 1) (5)

5.2 5.2.1
- the child learns the language spoken in his environment
- the child's language reflects in his environment
- is the child exposed to a number of books?
- Does he have adequate opportunities for play, exploration and discovery?
- Is there an adult who spends enough time with the child;
- Reading or telling him stories
- Paying attention to him
- Talking to him listening to him (Any 4 × 1) (4)

5.2.2
- The intelligent child starts talking at an earlier age than the less intelligent child
- However one cannot generalise as other factors also play a role
- Be careful to draw conclusions about the child's IQ on the basis of the age at which he begins to talk (3 × 1) (3)

5.3 5.3.1 Normal Stuttering

- Is temporary
- Occurs when the child is learning to speak
- Common between the ages 2–6 years
- Disappears on it's own within a few weeks or months

(Any 2 × 1)

Persistent Stuttering

- The child has become aware of what he is doing and attempts to correct the speech by deliberate effort
- He makes writhing movements of his face and tongue and his whole body becomes contorted
- The stuttering persists after the age of six and warrants intervention (Any 2 × 1)

(2 × 2) (4)

5.3.2 Help for the child who stutters.

- Tension-relieving activities can be provided at the ECD centre to help the child over a difficult situation.
- Do not correct child's speech.
- Do not criticise the child, listen attentively.
- Do not show him/her you are ashamed of him/her.
- Help the child to become more independent.
- Expand his/her vocabulary.
- Dramatic play, water play and other aggression-relieving activities.
- The parents should be referred for further help if they seem to be reacting strongly to the behaviour. The psychologist or speech therapist may be of help.
- Infantile speech patterns such as lisp or slight stutter are acceptable up to the age of six, but persistent and marked indistinct speech should be treated by a speech therapist.
- The child's hearing can also be tested. (Any 5 × 2) (10)

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5.4
- it is important that the needs of the child whose first language is not English is understood and met in the day care centre
- the staff must understand, build on and value the child's first language capabilities
- many children who do not speak English fluently will be very capable in their first
- do not label children who speak little or no English as having language problems or language delay
- their lack of competence is in English, not language
- a child may be able to conceptualise in their mother tongue, but not in their second language
- the non-verbal language in English (the intonation, rhythm, gestures, eye contact) may be different from that of the child's first language
- a bilingual or multi-lingual child will thrive in an atmosphere where language diversity is valued
- speaking more than one language is a positive attribute and should be regarded as such
- a child unable to communicate in the language of the child of the day care centre will be disadvantaged
- they should be given the right kind of support and understanding from the ECD practitioner so that they can acquire the necessary skills

(Any 5 × 2) (10)

5.5 5.5.1
- is an emotional handicap✓
- the autistic child cannot communicate normally, he uses repetition and has the wrong conception of language✓

5.5.2 is a condition caused by a brain dysfunction✓ which results in poor language comprehension or language use✓

5.5.3 a sever mental disorder✓ in which a child's contact with reality becomes distorted✓

5

5.5.4 describes the behaviour of children who are silent among all but a small circle of friends✓✓

(4 × 2) (8)

5.6
- deprivation
- overly anxious parents
- dominant mother and submissive father
- poor mother child relationship
- adjustment problems
- emotional problems or disturbances (Any 3 × 2) (6)

[50]

QUESTION 6

6.1
- Status 1 Identity achievement✓ – the child has passed through the crisis period and has a strong commitment to a career and value system✓
- Status 2 Identity moratorium✓ – the adolescent is still in the crisis period but is actively investigating various alternatives✓
- Status 3 Identity foreclosure✓ – there has been no crisis, the adolescent has committed himself to goals and values possibly as a result of parental influence✓
- Status 4 Identity diffusion✓ – the adolescent either experiences or does not experience a crisis but either way he is not committed to anything and does not attempt to develop any commitment✓ (4 × 2) (8)

6.2
- In his relationship with a friend, the adolescent can express his anxiety, doubt and resentment against society without fear of being rejected or mocked
- A loyal and reliable friend offers support and security during emotional crisis
- Friends can criticise one another without rejecting one another
- Friendship permits soul searching and the sharing of experiences, plans, ambitions and intimate secrets (4 × 2) (8)

6.3
- Some lack the qualities to be a leader
- Some followers contribute little to the group and are happy to go along with the group
- Some followers are constructive members of the group
- Other are destructive (4 × 2) (8)

6.4 6.4.1 Stress can be defined as the body's physiological✓ and psychological✓ response to environmental events✓ (3 × 1) (3)

6.4.2
- Physical demands – noise, vibration, temperature, and the work environment can be stressful
- Task demands – shift work, workload, working conditions, new technology, can cause stress
- Role stress – the role played by the worker in the work environment can lead to stress (3 × 2) (6)

6.4.3
- Overall pessimism
- Loneliness
- Depression
- Moodiness
- Tearfulness
- Lack of enthusiasm for activities you used to enjoy
- Difficulty making decisions
- Feelings of helplessness
- Extreme irritation over small things
- Inability to communicate
- Anti-social behaviour
- Poor self-image (Any 5 × 1) (5)

6.5
- In early childhood it can be traumatic, child becomes insecure and feels his word is falling apart
- Child may become dependent on the remaining parent and this can result in immature behaviour
- If the break-up comes after school age the child's focus will shift to his peers and school work
- The child may feel different in the eyes of his peers, will feel embarrassment and shame
- The child may feel guilty spending time away from the parent who is taking care of him
- The child may become a source of manipulation between his parents and this may result in feeling confused and unhappy (Any 3 × 2) (6)

6.6
- Racism affects people's psychological well-being
- A child must reconcile their own self-image with unpleasant stereotypes
- It can affect their behaviour, social achievement and relationship with others
- Cause conflict, anger and anxiety
- People tend to live or down to the expectations of others
- The child does not understand why being a member of a group results in social discrimination
- He learns that his differentness is held against him (Any 3 × 2) (6)

[50]

TOTAL SECTION B: 150
GRAND TOTAL 200

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