

# Candidate 1 evidence

## Higher Care Project

### Section A

Regarding **cognitive development** during the **Early childhood stage** which occurs between age 3-8 years old, they learn to write in long sentences while their ability to memorise and retrieve information improves, alongside their attention span (Morelli, 2022). Their vocabulary becomes more abstract and complex; a contributing factor to language development is their environment. When exposed to new words, they begin recognising the sound structure and the context they're used in, gradually associating the word with its meanings (Wikipedia, 2021).

Poppy, an 8-year-old, has a hearing impairment which causes her difficulty understanding in class. Poppy's cognitive development may be affected by her hearing impairment; according to research her brain may be spending a large amount of focus and energy on processing the little sounds still managed to be heard. This may cause cognitive delays, as the brain; while processing the sound, neglects to focus on memorising what was heard, impacting Poppy's ability to learn, memorise and store new information (Signia, 2020). Due to Poppy's limited auditory experience with the sound structure of words, her vocabulary may be limited compared to her peers (Reading Rockets, 2013). Children learn to read and spell words from their sounds; therefore, her reading skills may be less developed—a common issue related to hearing impaired children (City University of London, 2020).

**The Infancy stage**, occurring between birth and 2 years old, is a critical period for **physical development**, with many milestones. During this stage, infants gradually develop the muscle strength in order to develop gross motor skills; from lifting their head, to sitting up, crawling, and walking. As well as developing their fine motor skills to achieve dexterous movements, i.e., grasping blocks and turning book pages.

The physical development of Casteel, a 2-year-old with muscular dystrophy, may be affected by his condition and cause developmental delays; for instance, research has confirmed that infants with

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muscular dystrophy tire easily from the amount of energy and control required to voluntarily move muscles(Mutlu et al., 2018). This information suggests Casteel may take longer to learn how to make voluntary movements and to develop his fine motor skills. Due to hypotonia-deficiency in muscle tone; a symptom of his condition-his muscles are too relaxed and lack the strength a healthy infant is born with, leading to Casteel having difficulty standing up without support and being unable to walk yet, affecting his development of gross motor skills(Gupta, 2014). Muscle weakness will also be making movements like lifting his head and sitting up, crawling, without support harder for Casteel, leading to motor delay of gross motor skills.

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**Section B**

Alexandria, a 23-year-old, was recently diagnosed with Multiple Sclerosis. Her condition is affecting her ability to do tasks i.e., washing and dressing herself without her mother's help.

Alexandria has an **emotional need for independence**. She's currently dependent on her mums support to do activities she used to do independently which may cause her to feel embarrassed. Lack of independence can affect self-esteem as she may feel useless and ashamed of being reliant on others. This negative outlook can impact on her mental health- which Alexandria's already at risk of as according to research, 50% of individuals with MS will experience depression(L.Beier, 2019). As we age and increase our experiences, we become more self-reliant; by doing so, our confidence in ourselves and our abilities increases. Regaining her independence would increase her self-esteem and achieve a more positive outlook on life after her diagnosis. In relation to my brief, Alexandria's needs may be best met with care at home with a reablement worker. They would teach Alexandria how to use assistive aids and new methods for performing activities of daily living - clothing, washing, cooking, etc - independently, without requiring so much of her mother's support(SCIE, 2020b).

Jonathan, an 81-year-old with Alzheimer's, now lives alone after his husband recently died.

Jonathan has a **Social Need for Interaction**, as while grieving his recent loss, he may have not had many face-to-face interactions with people. Coupled with him living alone, he may be feeling lonely. The need for social interaction is important, as it can provide him with joy and a sense of purpose- which he may not have felt since losing his husband. Lack off social interaction can impact upon mental health by increasing his risk of depression while his mind is already in a vulnerable state from grieving. Also, according to research, lack of interaction can increase the rate of cognitive decline caused by his Alzheimer's(nih, 2019).

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In relation to my brief, in order to have his need for social interaction fulfilled, Jonathan car may be best provided outside his home in the form of Adult Day care as it provides many opportunities for interaction through group social activities like bingo. This would give Jonathan the chance to form friendships outside his home, without frequent reminders of his recent loss-which may happen if care was received in what was once both their home.

At 17-years-old, Roslyn has been struggling with anorexia for 2 years. She has difficulty eating anything over 500 calories without resorting to purging.

Roslyn has a **Physical Need for nutrition**, as she's purposely restricting her food intake, which means she's not getting the vitamins and minerals her body needs to function efficiently. Nutrients are essential as they provide the energy to do daily activities, help the body fight off illness while also improving your overall mood(Mental Health Foundation, 2018). Insufficient amount of nutrients can lead to malnourishment and affect her immune system, making her more vulnerable to viruses. Research suggests that for those with anorexia, there is a higher risk of developing osteoporosis due to lack of nutrients causing low bone mass(Anand and Mehler, 2019).

In relation to my brief, Roslyn's care may be best met in an in-patient eating disorder facility. She would be placed on an eating disorder treatment plan tailor to her, focusing on both her mental and physical health. Her treatment team would include a registered dietician who would provide her education on nutrition, monitor her weight and structure a meal plan aimed towards increasing her nutritional intake and help her gain weight.

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### Section C

Alexander has Alzheimer's and is receiving care at a residential care home.

**The Health and Care Standards** has five key principles; 'be included, dignity and respect, wellbeing, responsive care and support, and compassion'. The principles help promote positive care practice in a residential care home setting by providing the organisation with a framework for how care should be conducted, and the standard individuals can expect while receiving care (NewCareStandards, 2019).

An evaluation of the standards suggests the principle '**Responsive Care and Support**' can positively impact by ensuring Alexander receives the right type of care for him and his needs while also receiving accurate, up-to-date information communicated in a way Alexander can understand. The principal '**Be Included**' promotes service users' involvement in the care planning process; an advantage of this is that by personalising the care towards the individual and their needs and wishes, it ensures Alexander will have better outcomes in terms of his care and quality of life. Being included can promote service users' independence and help to increase their self-esteem (Omeni et al., 2014).

A feature that links to the standards is **person-centred care**; an approach that provides flexible, compassionate care that's tailored to the individual and their needs, preferences, and goals, while promoting independence and involvement. It focuses on the individual as a whole, not just their condition, and what they want to achieve from the care (NHS, 2017). An advantage of this is that when people are treated as an individual and not their condition, it helps in developing a safe and honest relationship between service users and carers. A weakness of the person-centred approach is that by placing importance on being compassionate; over time, carers may experience compassion fatigue. This can cause negligence and signs of Alexander's health deteriorating being missed; overall resulting in a low standard of care.

Lillia is a 23-year-old with a hearing impairment and receiving treatment in a hospital.

**The Equality Act, 2010**, is a piece of legislation that replaced and simplified previous laws about discrimination. The legislation protects individuals from discrimination by making it illegal to discriminate against those who have protected characteristics under the Act, which are; age, sex, race, disability, marriage and civil partnership, gender reassignment, sexual orientation, and religion/belief(SCIE, 2020a). The Act makes it a legal requirement for reasonable adjustments to be made to ensure individuals with protected characteristics have equal access to services(UK Government, 2010).

An evaluation of this Act suggests that the legislation can have a positive impact on care provided in the hospital by Safeguarding patients' and service providers' human rights by protecting them from harassment and discrimination. This helps to provide a safe, secure, and judgement-free environment for everyone. Lillia's hearing impairment is classed as a disability; therefore, the Act prevents her from being disadvantaged by promoting equal access and equality of opportunity by making the hospital legally required to make reasonable adjustments, including providing an interpreter or an auxiliary aid i.e., an induction loop(HearingLoop, 2018). This provides an inclusive environment for Lillia by ensuring she has access to information and her need for communication is met.

**Anti-discriminatory practice** Links to the Equality Act, 2010 as it aims to promote equality and diversity by breaking down the barriers in society that block people from receiving and accessing services, while also working against all forms of oppression and discrimination. Complaint procedures are an effective method used in anti-discriminatory practice. When efficiently handled,

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complaints can highlight any issues that need to be resolved and improved upon. This can be beneficial for the hospital by providing it with an opportunity to improve the quality of care being provided.

#### **Section D**

Persephone, an 18-year-old with schizophrenia who's receiving support from penumbra-a mental health service, may be influenced by the mass media.

**Mass media** is a secondary socialising agent with a large impact in today's world as society is surrounded by many forms of media, such as newspapers, radio, advertisements, TV shows, films, social media. Media can be used to teach norms, including correcting ones they've previously learned through previous experiences in socialisation. Media also influences society by encouraging stereotypes and discriminatory behaviour by spreading misinformation.

Mentally ill characters, especially those with symptoms of psychosis like schizophrenia; are often portrayed in movies and tv shows as dangerous, unstable, and having violent behaviour-often being murders(Saleh, 2017). This frequent negative portrayal may influence the behaviour of others around her, causing them to fear and marginalise her due to the stigma attached to her mental illness. Marginalisation can then in turn impact upon Persephone's life chances, as she may struggle to find employment(Holm et al., 2020). According to research, compared to the general public, those with severe mental illness have 6-7 times more likely to be unemployed(nice, 2022). The negative portrayal in movies and TV Shows of schizophrenia can also affect how she regards herself and her mental illness. Persephone may believe her mental illness is something to be ashamed of and hidden (Keen et al., 2017), which can affect her self-esteem and cause her to be reluctant about seeking out support when needed.

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**Religion** is a secondary social influence, and the expectations that can carry on from this socialising agent can have a large impact on many aspects of an individual's life, such as how they are to behave, their decisions, clothing, and diet(HealthStream, 2021). Religion can also shape our attitudes to certain things such as sexuality or marriage, therefore it also influences personal values and beliefs(Juhi Vajpayee, 2016). This can lead to individuals having prejudiced or discriminatory beliefs. Religion can also reinforce social norms and prevent dysfunction from occurring in society by inducing fear of punishments such as going to hell, receiving karma, or reincarnation(UIB, 2009).

Sarah is a 24-year-old Jehovah's Witness receiving treatment at a hospital after being diagnosed with sickle cell disease. Recently she was informed she requires a blood transfusion.

Religion may influence Sarah's decisions regarding her treatment, as blood transfusions are against her religious beliefs lest they never attain their god's eternal salvation, and therefore by accepting it, she may see her decision as going against her values, and faith. When Jehovah Witness receives a blood transfusion they are ostracised and become an outcast in their religious community(medical protection, 2021). The possibility of this happening to her, as well as the fear of not reaching eternal salvation, may pressure her into refusing a blood transfusion, in fear of becoming an outcast in her community. The belief surrounding blood transfusions is so strong, that there are an estimated 1,000 Jehovah's witnesses that die each year due to refusing them(Zeybek et al., 2016). This fact demonstrates how large an influence religion can have, and how its influence can reduce Sarah's life chances, as her physical health will be at risk of further deteriorating while in the hospital if she refuses the blood transfusion.

**Peers** are a secondary socialising agent, and their impact can increase during adolescence, which is a period when teens may withdraw from their families to focus on discovering their personal identity. As a result, peers' opinions-which can be negative or positive - can have a large influence on how we feel about others, as well as how we see and feel about ourselves, therefore shaping our personal



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identity(Pehar, Čorkalo Biruški and Pavin Ivanec, 2020). Peers can influence our personal beliefs, appearance, likes and dislikes, diet, what we value- i.e., friendship and loyalty(Reach Out, 2019). Peers can also lead to developing new social skills and learning new norms while influencing the roles an individual takes on in society.

Clarissa is a 15-year-old who has a hearing impairment and she's currently attending a social support group for those with hearing loss. Clarissa may be influenced by her peers at school, as they may lack understanding of hearing impairments which can lead to them judging and discriminating against her which can influence their behaviour and cause them to bully her.

Clarissa's peers' behaviour towards her can impact upon her life chances as their bullying can affect Clarissa's educational attainment, by causing her enjoyment and interest in learning at school to decrease due to being in a discriminatory environment. This may also lead to her avoiding lessons by taking sick absences, thereby affecting her grades(Barrington, 2016). Their opinions towards her can also influence how she sees herself and can lead to her developing low self-esteem and low self-worth(Parfitt, 2016). Coupled with the distress and anxiety that experiencing bullying can cause, it can increase her risk of experiencing mental illness, such as depression and anxiety (Alexander, 2013).

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### Section E

**Symbolic interactionism** is a sociological theory that adopts a micro-level approach. According to the theory, society is filled with symbols and these symbols have meanings that are formed through an individual's interpretation of the symbol and through shared interactions (Nickerson, 2021).

Meanings can also change through with a person's experiences. Through social interaction, labels - which can be negative or positive - can be attached to people/groups in society and lead to individuals being stigmatised (Facing History & Ourselves, 2022). The theory states that when an individual is labelled they may internalise this label, resulting in them exhibiting behaviours associated with it, essentially becoming what society expects of them and stripping them of their sense of self.

Marcel is 40 years old and has schizophrenia, which causes hallucinations and delusions. He recently moved homes and hasn't told anyone about his mental illness to prevent his new community labelling him. Schizophrenia is often labelled in society as dangerous and unpredictable. This is relevant to my brief, as the theory would suggest that as labels can influence society's behaviour towards individuals, Marcel may be negatively labelled as mentally ill if he receives care outside the home - such as in a mental health facility. It can result in him being stigmatised and discriminated against by society. Discrimination and stigma can - according to research, trigger or worsen negative symptoms of schizophrenia i.e., social withdrawal and apathy; therefore, impacting on his mental health (Living With Schizophrenia, 2016). To divert Marcel from being medically labelled and help him have better outcomes, having carer at home would be the best option. This would allow a community mental health nurse who has training and experience with mental illness, to help support him. This ensures he will receive care from people who do not judge or label him.

**Functionalism** is a theory first created by Emile Durkheim, who viewed society as a complex system made up of inter-connected and dependent parts - referred to as social institutions - all with their own distinct functions designed to meet society's needs. Institutions combine to create and

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maintain the predictability and stability society requires in order to function(Thompson, 2017). A key feature of functionalism is **dysfunctionality**; dysfunction can occur when a group or person are deviant; which is behaviour that is non-normative, it doesn't conform to society's norms.

Dysfunctionality also occurs when an institution in society - like the family, which provides primary socialisation - deviates from its original purpose and threatens to disrupts society's equilibrium with instability and change(Lumen Learning, 2011).

Pennell is a 9-year-old girl grew up with abusive and neglectful parents. The police were recently involved after neighbours heard her screams while being beaten. She's currently in emergency foster care.

In relation to my brief, her care may be best continued outside the home in a children's care home where she would be safe and removed from the influence of her dysfunctional family unit. Pennell's family would be classed as dysfunctional due to the family unit being abusive- dysfunctional behaviour, and by not fulfilling its purpose of primary socialisation. Functionalist would suggest Pennell was disadvantaged by being raised in a dysfunctional family. Research states that children who are abused or neglected have a higher risk of substance misuse, crime and mental illness-all of which are classed as deviant behaviour(NSPCC, 2019).

Therefore, from a functionalist perspective, removing her from her dysfunctional family may prevent Pennell from developing future deviant behaviour. The children's care home would also provide an opportunity to re-educate Pennell on society's norms, and mould Pennell into a productive and well-functioning member of society.

**Conflict theory** was created by Karl Marx, who believed society is in a state of ongoing conflict as a result of competition between the social classes for limited resources. A key feature of this theory is **power differentials in social structures**. Conflict theory regards society as being structured in a way that it benefits those with power and wealth- referred to as the minority class, as they rule the means of production, meanwhile those with little power or wealth- the majority class, physically labour to produce society's goods(Crossman, 2019). This societal structure perpetuates inequality as the minorities wealth and power derive from suppressing and dominating the majority, setting them at a disadvantage, and causing conflict between the classes.

Timothee is 26 years old and has Multiple Sclerosis. He lives in a high poverty area and his needs have been increasing. Timothee's mother- his informal carer, is now finding it difficult to care for him on her own.

Those of high socio-economic status have the power and wealth to access private health care services- which provides them the opportunity to receive a higher quality of care at a faster rate by paying for it. This is relevant to my brief, as due to Timothee's low socio-economic status, he may be unable to afford the cost associated with private healthcare, and therefore he may experience health inequality in terms of limited access to opportunities and services. In relation to my brief, care may be best met at home with domiciliary care. This would ensure carer provides person-centred care that is provided only when needed. This would provide him affordable care while also ensuring he doesn't have the risk of paying for care provided outside the home that may not fully meet all his need while being financially burdensome.

## Section F

Achilles is a 24-year-old living with his brother. Being unemployed and constantly mocked by his brother for this, he started to drink in order to cope and became an alcoholic.

**Person-centred theory:** created by Carl Rogers, includes 3 core conditions: unconditional positive regard(acceptance), congruence (genuineness) and empathy(understanding). Rogers believed that without these conditions, therapy would not be effective(Tutor, 2016). By providing empathy, acceptance, and genuineness, it promotes a safe, therapeutic environment that allows the individual to be able to look at themselves and make changes in order to develop a healthy personality and reach their full potential(Mcleod, 2014).

The 3 core conditions are essential for making an environment for empowering Achilles to work on forgiving himself for his addiction and grow as a person. His current environment may be contributing to his use of alcohol as a coping mechanism. This is relevant to my brief, as based on Roger's theory, Achilles would best be cared for in a rehabilitation facility. A therapist at the facility can deliver the core conditions by listening to him and providing empathetic understanding, as well as acceptance and genuine support. By displaying these conditions during therapy sessions, it would allow the therapist to develop a supportive relationship with Achilles. A supportive environment and relationship that provides unconditional positive regard can help him to work on forgiving himself and to focus on his rehabilitation. According to the theory, this can involve encouraging Achilles to focus on areas of his life he wants to change, such as his dependency on alcohol and to create personal goals, that when achieved, would provide a sense of accomplishment, improve his self-esteem and help him work on reaching his full potential.

Albert Bandura developed **social learning theory**, which focuses on the theory that individuals learn behaviour and information through observing those in their external environment and the

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consequences of the behaviour (Valamis, 2021). Bandura also theorised that the internal environment- the mind, plays a part in whether they will learn a behaviour, as well as their motivation to learn it. As an individual must pay attention and be able to retain this information. After observing and cognitively processing what they have learned, individuals may imitate the observed behaviour - if they have the ability and motivation to do so (Taylor and MacKenney, 2008, pp.61–65).

Lisa, a 16-year-old, grew up in a household being physically abused by her mother and sisters. She's recently been getting into fights during school.

Bandura's theory would be beneficial for the staff of children's homes in providing an understanding of how they-as role models, can influence the development of new behaviours in their residents. In relation to my brief, the theory would suggest that Lisa's care would be best provided in a children's home, as in her home environment, she has been exposed to negative role models. She is already shown to have been recently fighting at school, which, according to the theory, can be attributed to having observed and imitated this behaviour from her current role models - her mother and sisters. Therefore, a different environment - a children's home, would provide her with a new set of positive role models-the staff, who would provide her advice and support on how to manage and change her behaviours into more healthy ones. Also, by providing her new role models, it would allow Lisa to observe and imitate the positive behaviours displayed by staff members, such as being warm and accepting of everyone there.

**Operant conditioning** is psychological theory developed by B.F. Skinner, based on the theory that individuals learn behaviours through punishment and reinforcement. The theory uses positive and negative reinforcement to strengthen a desired behaviour and punishment to weaken a behaviour. Positive reinforcement involves when a positive, desirable stimuli such as a reward, follows after a behaviour is performed. This provides an incentive for the individual to repeat the behaviour to

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continue receiving a reward. Negative reinforcement strengthens behaviour by removing an undesirable stimulus. Punishment is used by removing a desirable stimulus, i.e., hugs, or by providing an undesirable stimulus.

Poppy, a 15-year-old, has been running away from home and drinking alcohol. Her mother- who's usually distant towards poppy, felt responsible and has been occasionally trying to give poppy more attention and affection.

According to the theory, Poppy's negative behaviours of underage drinking and running away may have been strengthened by her mother; instead of punishing the behaviour, her mother reinforced it by giving the reward of her affection as a consequence of Poppy's behaviours. This is relevant to my brief, as the theory suggests it would be best for Poppy to receive care outside the home, in a children's care home. This new environment would provide structure and stability through the use of the home's rules set out and explained by the staff for her safety and to guide behaviour. The use of positive reinforcement through reward charts are an effective method used to nurture the learning of new positive behaviours. Reward charts would provide Poppy a motivator to follow the rules and reinforce positive behaviours as she would be aware she will be rewarded if she does. Use of punishment by removing Poppy's privileges would help weaken undesired behaviours that are against the home's rules.

**In conclusion to my brief,** I believe it does not allow for as simple an answer as yes it is better, or no it's not. This is because there are many areas to consider when questioning what care is best, as each individual that requires care is exactly that-an individual. Therefore, what care is best for them is unique to the individual and their circumstances, including their needs and personal preferences. While delivering care at home may be beneficial for one individual, that doesn't mean it would work for others. There are times when care may not be the best place for delivering care as their home environment may not be safe to do so. For individuals with mental illness, such as eating disorders or depression, the home environment may be where they are experiencing triggers or have

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caused/contributed to their need for support. Therefore, for certain individuals, removing them from a triggering environment may be the best option for them as it would allow the individuals to be in a place they are physically, mentally, and emotionally comfortable, which can have a positive impact in terms of recovery speed.

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