CAMBRIDGE INTERNATIONAL EXAMINATIONS

Cambridge International General Certificate of Secondary Education

MARK SCHEME for the October/November 2015 series

0453 DEVELOPMENT STUDIES

0453/02 Paper 2, maximum raw mark 80

This mark scheme is published as an aid to teachers and candidates, to indicate the requirements of the examination. It shows the basis on which Examiners were instructed to award marks. It does not indicate the details of the discussions that took place at an Examiners' meeting before marking began, which would have considered the acceptability of alternative answers.

Mark schemes should be read in conjunction with the question paper and the Principal Examiner Report for Teachers.

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1 (a) (i) Kenya

India

Argentina

Russia

2 marks for all correct

1 mark for 2/3 correct

0 marks for 0/1 correct

[2]

(ii) Ideas such as:

Growth rates are higher in Africa/lower in Europe or growth rates are high in Africa and low in Europe or there is an increase in Africa and decrease in Europe;

Comparative statistics;

There is more variation in Africa/less variation in Europe;

Comparative statistics;

NB: Answer needs to compare.

3 @ 1 mark [3]

(b) Birth rate – Death rate/20.6 – 7.4 (1) 13.2 (per 1000) (1)

2 @ 1 mark [2]

(c) (i) Birth rate is higher than death rate;

Comparative statistics;

Death rate reduces more quickly than birth rate (up to 1971)/death rate falls but birth rate rises (up to 1961);

Comparative statistics;

NB: Statistics need years and figures.

The following answers are incomplete: Natural growth statistics on their own

3 @ 1 mark [3]

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(ii) Level 1 (1–2 marks)

Reasons suggested for changes in birth rate or death rate using simple statements.

Level 2 (3-4 marks)

Reasons suggested for changes in birth rate or death rate using developed statements.

Level 3 (5-6 marks)

A comprehensive answer using developed statements which suggests reasons for changes in both birth **and** death rates.

Reference is likely to be made to factors such as:

Health care, Economic change, Contraception, Abortion, Water supply Sanitation etc.

NB: The focus is on reasons for decreasing BR and DR. Not about reasons for high BR and DR.

The following answers = incomplete: Lack of education Because the country is more developed Because the country is richer

The following answer = 0: One Child Policy

[6]

[Total = 16]

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2 (a) Lucknow Siddharthnagar

 $2 \times 1 \text{ mark}$ [2]

- (b) (i) Number of <u>babies/infants/children</u> which die in their <u>first year</u> per <u>1000 live births.</u> [1]
 - (ii) Death rates are higher in rural areas/lower in urban areas.

 NB: Needs to compare. [1]
 - (iii) Ideas such as:

Poor/lack of or cannot afford health care/hospitals/medical care/clinics;

Lack of doctors/nurses/midwives;

Difficult to obtain/cannot afford medicine/drugs;

Lack of vaccination/cannot afford vaccination;

Poor sanitation:

Lack of a safe/pure/clean water supply/waterborne diseases;

Inadequate food supply/malnutrition/starvation/cannot afford food;

Lack of education about childcare/diet/hygiene;

Long distance to clinics/hospitals/many home births;

Women have to work hard during pregnancy;

The following answer = 0:

Named diseases

The following answer = incomplete:

- Poverty
- Lack of education
- Disease
- Housing/shelter
- Poor living conditions
- Teenage pregnancies

4 @ 1 mark [4]

(iv) Lower in Varanasi in urban areas/higher in Mahoba in urban areas;

Comparative statistics (25.6 and 17.6/by 8)

Lower in Varanasi in rural areas/higher in Mahoba in rural areas:

Comparative statistics (25.7 and 21.7/by 4);

Similar in urban and rural in Mahoba but different in urban and rural in Varanasi;

Comparative statistics (25.6 and 25.7 in Mahoba and 17.6 and 21.7 in Varanasi);

NB: MAX 1 on statistics. Alternative to Line 1 and 3 of ms = birth rates are higher in Mahoba. Needs to compare. No need for "per 1000".

The following answer = 0:

A comparison between urban and rural

2 @ 1 mark [2]

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(c) (i) Completion of scatter graph.

[1]

(ii) Drawing of best fit line. 2 and 2 or 3 and 2 either side of the line. No negative correlation. No need to label.

1 mark [1]

(iii) higher percentage in rural area and higher birth rate

Use of appropriate statistics to illustrate positive relationship:

Example: 45% of Lucknow's population live in rural areas and birth rate is 18.5 per 1000 96% of Siddharthnagar's population live in rural areas and birth rate is 35 per 1000 (1 mark for sets of figures for 2 places which illustrate the positive relationship)

2 @ 1 mark [2]

(iv) Ideas such as:

cannot afford/little/do not use availability of contraception/birth control/or examples; not educated re: contraception/not educated about impacts of large families;

not likely to be able to afford contraception/birth control/family planning;

likely to want children to work on the land/on farms;

likely to want children to send out to earn money/work;

likely to want children to help around the house/look after younger children/collect water;

likely to want children to look after parents in old age/sick relatives;

not likely to be affected by government policy to reduce family size;

likely to have large families due to tradition/to get a son/polygamy;

likely to have large families due to religious influences/religion does not allow contraception/children are seen as a gift of God;

no access to abortion:

high infant mortality rates/people have more children in the hope that some will survive; women stay in the home/don't work/women lack education/low literacy rates for females; early marriage/teenage pregnancy etc.

The following answers = incomplete:

- Religion
- Tradition
- Education

4 @ 1 mark [4]

(d) (i) Level 1 (1–2 marks)

Reason(s) suggested for one or both options chosen using simple statements.

Level 2 (3-4 marks)

Reason(s) suggested for one option or both options chosen using developed statement(s).

Level 3 (5-6 marks)

A comprehensive answer using developed statements which suggest reasons for **both** options chosen.

NB: Disadvantages of other schemes = IR

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(ii) Ideas such as:

each method deals with a different cause of increase in population growth; dealing with one cause alone will not solve the problem/the methods are complementary; e.g. it is no good giving out contraceptives free if people still want children to help grow food etc.

The following answers = incomplete:

- One method on its own won't work
- More efficient
- One method will only slow birth rates a little
- Gives people a choice

NB: If candidate writes about all four options, mark the first two options given.

2 @ 1 mark

[2]

[Total = 26]

3 (a) (i) Ideas such as:

Small houses;

Shop:

Litter/rubbish/waste/garbage;

Polluted atmosphere;

Densely packed/people living close together/overcrowded/congested;

Two storey housing;

Brick houses/concrete/cement/stone;

Built on hillside;

Stream passing through/open sewer/polluted water/sewage;

Corrugated iron roofs/plastic sheets;

Electricity supply;

Small/not many windows;

Observations must be evident from photographs. Do not accept value judgements.

The following answers = 0:

- Shanty town/squatter settlement
- It is an urban area
- Self-built
- There is no sanitation
- Unpaved
- Space to play

The following answers = incomplete:

- Built out of different materials
- Not clean
- Polluted
- Dirty
- Satellite dishes
- Disease
- Greenery

4 @ 1 mark [4]

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(ii) Ideas such as:

<u>water borne</u> diseases from stream/open sewer/polluted water/unclean water; atmospheric pollution could cause chest/lung problems; litter/rubbish could spread disease/flies/insects/rats spread disease; disease easily spread as people living close to each other etc.

The following answer = 0:

- Poor health care
- Houses collapse
- No toilets

3 @ 1 mark [3]

(b) (i) First-hand information/data collected personally by the researcher/face to face

1 mark [1]

(ii) Ideas such as:

so they knew what the investigation was about;

know what questions will be asked

to let people know who the investigation was being carried out by;

so people would realise that it was genuine/trust the researchers;

to provide contact details;

letter guarantees privacy/anonymity/they know their identity will be protected etc.

3 @ 1 mark [3]

(iii) Qualitative data can be observed but not measured.

Quantitative data is numerical/based on statistics;

The following answers = 0:

- Large amount
- Good quality
- Official
- A reference to how the data is collected

2 @ 1 mark [2]

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(iv) Any type of sample:

Stratified/quota/systematic sample/random

1 + 1 for name of sample and description

One further mark for justification of why it is representative:

E.g. stratified sample would be more representative as the same balance is chosen as make up the total population

The following answer = incomplete:

People chosen at random

The following answer = 0:

- Snowball sampling
- Cheap/easy/fast

NB: Credit appropriate ideas even if placed incorrectly.

3 @ 1 mark [3]

(v) Level 1 (1-2 marks)

Advantages and/or disadvantages stated using simple statements.

Level 2 (3-4 marks)

Advantages or disadvantages explained using developed statements.

Level 3 (5-6 marks)

A comprehensive answer explaining **both** advantages and disadvantages using developed statements.

References are likely to be made to advantages and disadvantages such as:

Advantages

- information can be obtained from people directly involved/first hand;
- flexibility in questions being asked/can respond to a remark made with a further question/get clarification;
- Interviews can be carried out with people who are unable to read and write;
- Information obtained instantly/do not have to wait for return of questionnaires etc.

Disadvantages

- people may have limited knowledge/give wrong information;
- people could make remarks which are biased;
- statements from different interviewees may be conflicting;
- some information may not be relevant to the investigation/need to be selective;
- people will not understand English/will only speak local language;
- people may not answer honestly;
- people may not have time to complete interview etc.

The following answer = incomplete:

- cheap
- saves time
- not biased (unless clarified)

[6]

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(c) Level 1 (1–2 marks)

An attempt to make conclusions without statistics or statistics without analysis.

Level 2 (3-4 marks)

A clear conclusion (with analysis) referring to statistics.

Level 3 (5-6 marks)

A comprehensive conclusion which refers to statistics.

Comprehensive means reference to all three graphs.

[6]

(d) (i) Completion of pie chart.

Correct dividing line at 63 (1 mark)

Correct shading (1 mark)

NB: Do not accept line at 28%. Tolerance 62%–64%.

2 @ 1 mark [2]

(ii) 85% (no tolerance)

1 mark [1]

(e) (i) Completion of bar at 22% (no tolerance)

1 mark [1]

(ii) <u>Level 1 (1–2 marks)</u>

Ways suggested to increase the number of people treated.

Level 2 (3-4 marks)

Ways suggested to increase the number of people treated with some justification using simple statements.

Level 3 (5-6 marks)

Ways suggested to increase the number of people treated with clear justification using developed statements.

Candidates are likely to refer to ideas such as:

Building of more clinics,

Employment of more healthcare professionals;

Free health care,

Education about importance of treatment,

Use of mobile clinics:

Better medicines/invention of treatments;

Research [6]

[Total = 38]