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Mark Scheme (Results)

November 2021

Pearson Edexcel GCSE
In History (1HIA)

Paper 1: Thematic study and historic environment (1HIA/11)

Option 11: Medicine in Britain, c1250–present and
The British sector of the Western Front, 1914–18: injuries, treatment and the trenches

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General Marking Guidance

- All candidates must receive the same treatment. Examiners must mark the first candidate in exactly the same way as they mark the last.
- Mark schemes should be applied positively. Candidates must be rewarded for what they have shown they can do rather than penalised for omissions.
- Examiners should mark according to the mark scheme not according to their perception of where the grade boundaries may lie.
- There is no ceiling on achievement. All marks on the mark scheme should be used appropriately.
- All the marks on the mark scheme are designed to be awarded. Examiners should always award full marks if deserved, i.e. if the answer matches the mark scheme. Examiners should also be prepared to award zero marks if the candidate's response is not worthy of credit according to the mark scheme.
- Where some judgement is required, mark schemes will provide the principles by which marks will be awarded and exemplification may be limited.
- When examiners are in doubt regarding the application of the mark scheme to a candidate's response, the team leader must be consulted.
- Crossed out work should be marked UNLESS the candidate has replaced it with an alternative response.

How to award marks when level descriptions are used

1. Finding the right level

The first stage is to decide which level the answer should be placed in. To do this, use a 'best-fit' approach, deciding which level most closely describes the quality of the answer. Answers can display characteristics from more than one level, and where this happens markers must use the guidance below and their professional judgement to decide which level is most appropriate.

For example, one stronger passage at L4 would not by itself merit a L4 mark, but it might be evidence to support a high L3 mark, unless there are substantial weaknesses in other areas. Similarly, an answer that fits best in L3 but which has some characteristics of L2 might be placed at the bottom of L3. An answer displaying some characteristics of L3 and some of L1 might be placed in L2.

2. Finding a mark within a level

After a level has been decided on, the next stage is to decide on the mark within the level. The instructions below tell you how to reward responses within a level. However, where a level has specific guidance about how to place an answer within a level, always follow that guidance.

Levels containing two marks only

Start with the presumption that the work will be at the top of the level. Move down to the lower mark if the work only just meets the requirements of the level.

Levels containing three or more marks

Markers should be prepared to use the full range of marks available in a level and not restrict marks to the middle. Markers should start at the middle of the level (or the upper-middle mark if there is an even number of marks) and then move the mark up or down to find the best mark. To do this, they should take into account how far the answer meets the requirements of the level:

- If it meets the requirements *fully*, markers should be prepared to award full marks within the level. The top mark in the level is used for answers that are as good as can realistically be expected within that level
- If it only *barely* meets the requirements of the level, markers should consider awarding marks at the bottom of the level. The bottom mark in the level is used for answers that are the weakest that can be expected within that level
- The middle marks of the level are used for answers that have a *reasonable* match to the descriptor. This might represent a balance between some characteristics of the level that are fully met and others that are only barely met.

Indicative content

Examiners are reminded that indicative content is provided as an illustration to markers of some of the material that may be offered by students. It does not show required content and alternatives should be credited where valid.

The British sector of the Western Front, 1914–18: injuries, treatment and the trenches

Question	
1	Describe **two** features of the dressing stations where injured soldiers might be taken to receive treatment. **Target**: knowledge of key features and characteristics of the period. **AO1**: 4 marks.
Marking instructions	
Award 1 mark for each valid feature identified up to a maximum of two features. The second mark should be awarded for supporting information. e.g. • *Dressing Stations were usually a short distance behind the trenches **(1).** They were often based in abandoned buildings but sometimes they were just in tents **(1).*** • *Staff at the Dressing Stations would treat minor injuries so that the soldier could return to the fighting as soon as possible **(1)**. Those with more severe injuries would be passed further down the evacuation chain where there were better facilities. **(1)**.* • *They would be staffed by medical officers, together with male medical orderlies and stretcher bearers **(1)**. After 1915, some Dressing Stations also included nurses **(1)**.* Accept other appropriate features and supporting information.	

Question		
2 (a)		How useful are Sources A and B for an enquiry into the use of blood transfusions on the Western Front? Explain your answer, using Sources A and B and your knowledge of the historical context. **Target**: Analysis and evaluation of source utility. **AO3**: 8 marks.
Level	**Mark**	**Descriptor**
	0	No rewardable material.
1	**1–2**	• A simple judgement on utility is given, and supported by undeveloped comment on the content of the sources and/or their provenance[1]. Simple comprehension of the source material is shown by the extraction or paraphrase of some content. Limited contextual knowledge is deployed with links to the sources.
2	**3–5**	• Judgements on source utility for the specified enquiry are given, using valid criteria. Judgements are supported by developed comment related to the content of the sources and/or their provenance[1]. Comprehension and some analysis of the sources is shown by the selection and use of material to support comments on their utility. Contextual knowledge is used directly to support comments on the usefulness of the content of the sources and/or their provenance.
3	**6–8**	• Judgements on source utility for the specified enquiry are given, applying valid criteria with developed reasoning which takes into account how the provenance[1] affects the usefulness of the source content. The sources are analysed to support reasoning about their utility. Contextual knowledge is used in the process of interpreting the sources and applying criteria for judgements on their utility.

Notes

1. Provenance = nature, origin, purpose.

Marking instructions

Markers must apply the descriptors above in line with the general marking guidance (page 3).

No credit may be given for contextual knowledge unless it is linked to evaluation of the sources.

No credit may be given for generic comments on provenance which are not used to evaluate source content.

Indicative content guidance

Answers must be credited according to candidates' deployment of material in relation to the qualities outlined in the mark scheme. While specific references are made in the indicative content below, this does not imply that these must be included; other relevant material must also be credited. The grouping of points below does not imply that this is how candidates are expected to structure their answers.

Source A

The usefulness could be identified in terms of the following points which could be drawn from the source:

- Source A is useful because it gives details about how blood transfusions were carried out.
- Source A is useful because the language in the source clearly suggests the importance of blood transfusions in saving lives.
- Source A is useful because it demonstrates how quickly a blood transfusion could have an effect.

The following points could be made about the authorship, nature or purpose of the source and applied to ascribe usefulness to material drawn from it:

- Charlie Shepherd was writing about his own experience and his first-hand account is useful evidence of the successful use of blood transfusions.
- Charlie Shepherd seems to want to inform other people about the success of a blood transfusion.
- He was writing about his experience in 1915, which shows that blood transfusions were used early in the war.

Knowledge of the historical context should be deployed to support inferences and/or to assess the usefulness of information. Relevant points may include:

- Many soldiers died from loss of blood rather than a fatal injury, so transfusions were an important development in the treatment of the wounded.
- Blood clotted very quickly and therefore it was difficult to store blood, meaning that early transfusions were carried out person-to-person.

Source B

The usefulness could be identified in terms of the following points which could be drawn from the source:

- The content of Source B is useful as it shows the urgency of dealing with the problem of blood loss.
- Source B is useful because it explains different ways that the procedure was carried out.
- The source stresses the positive aspects of the procedure, for example the fact that the surgeon is in control.

The following points could be made about the authorship, nature or purpose of the source and applied to ascribe usefulness to material drawn from it:

- The source was written by a surgeon who had worked on the Western Front and was writing from his own experience, which gives the article credibility.
- The article was published in *The Lancet,* with the intention of reporting the benefits of this procedure to other surgeons.
- The article was written in 1918 and reflects the development of different methods of blood transfusion during the war.

Knowledge of the historical context should be deployed to support inferences and/or to assess the usefulness of information. Relevant points may include:

- Transfusions had been made possible after the discovery of blood groups by Landsteiner in 1901 but the donor-to-patient process was not very practical in a war situation, meaning that new techniques were urgently needed.
- The discoveries during the war of Lewisohn, Rous and Turner of ways to preserve blood made transfusions more practical than the donor-to-patient method and allowed a blood depot to be created before the Battle of Cambrai in 1917.

Question	
2 (b)	How could you follow up Source A to find out more about the use of blood transfusions on the Western Front? In your answer, you must give the question you would ask and the type of source you could use. **Target**: Source analysis and use (the ability to frame historical questions). **AO3**: 4 marks.

Marking instructions

Award 1 mark for selecting a detail in Source A that could form the basis of a follow-up enquiry and 1 mark for a question which is linked to it.

e.g.

- *Detail in Source A that I would follow up: 'they wanted a volunteer for 'a blood transfusion.'* ***(1)***
- *Question I would ask: What would happen to the patient if a volunteer could not be found to give blood?* ***(1)***

(No mark for a question that is **not** linked to following up Source B, e.g. '*because it would be an interesting question to ask*'.)

Award 1 mark for identification of an appropriate source and 1 mark for an answer that shows how it might help answer the chosen follow-up question.

e.g.

- *What type of source I would look for: RAMC records for hospitals carrying out blood transfusions.* ***(1)***
- *How this might help answer my question: The records would show how many injured soldiers died from blood loss or shock rather than from a fatal injury.* ***(1)***

Accept other appropriate alternatives.

Medicine in Britain, c1250–present

Question		
3		Explain **one** way in which surgery in the years c1700-c1800 was different from surgery in the years c1900-present. **Target**: Analysis of second order concepts: difference [AO2]; Knowledge and understanding of features and characteristics of the period [AO1]. **AO2:** 2 marks. **AO1:** 2 marks.
Level	**Mark**	**Descriptor**
	0	No rewardable material.
1	**1–2**	• Simple or generalised comment is offered about a difference. [AO2] • Generalised information about the topic is included, showing limited knowledge and understanding of the periods. [AO1]
2	**3–4**	• Features of the period are analysed to explain a difference. [AO2] • Specific information about the topic is added to support the comparison, showing good knowledge and understanding of the periods. [AO1]

Marking instructions

Markers must apply the descriptors above in line with the general marking guidance (page 3).

Performance in AO1 and AO2 is interdependent. An answer displaying **no** qualities of AO2 cannot be awarded more than the top of Level 1, no matter how strong performance is in AO1; markers should note that the expectation for AO1 is that candidates demonstrate both knowledge *and* understanding.

Indicative content guidance

Answers must be credited according to candidates' deployment of material in relation to the qualities outlined in the mark scheme. While specific references are made in the indicative content below, this does not imply that these must be included; other relevant material must also be credited.

Relevant points may include:

- Surgery is less painful in the modern period than it was before 1800. Before 1800, there was no form of pain relief but in the modern period, anaesthetics are used to prevent the patient feeling pain.
- Before 1800, operations were basic, for example amputations or cutting for the stone. However, in the modern period, complex operations can be carried out, using new technology, for example transplants, keyhole or robotic surgery.

Question		
4		Explain why there were changes in the prevention of illness in the years c1700-c1900. You may use the following in your answer: • Edward Jenner • Public Health Act 1875 You **must** also use information of your own. **Target**: Analysis of second order concepts: causation/change [AO2]; Knowledge and understanding of features and characteristics [AO1]. **AO2**: 6 marks. **AO1**: 6 marks.
Level	**Mark**	**Descriptor**
	0	No rewardable material.
1	**1–3**	• A simple or generalised answer is given, lacking development and organisation. [AO2] • Limited knowledge and understanding of the topic is shown. [AO1]
2	**4–6**	• An explanation is given, showing limited analysis and with implicit or unsustained links to the conceptual focus of the question. It shows some development and organisation of material, but a line of reasoning is not sustained. [AO2] • Accurate and relevant information is included, showing some knowledge and understanding of the period. [AO1] *Maximum 5 marks for Level 2 answers that do not go beyond aspects prompted by the stimulus points.*
3	**7–9**	• An explanation is given, showing some analysis, which is mainly directed at the conceptual focus of the question. It shows a line of reasoning that is generally sustained, although some passages may lack coherence and organisation. [AO2] • Accurate and relevant information is included, showing good knowledge and understanding of the required features or characteristics of the period studied. [AO1] *Maximum 8 marks for Level 3 answers that do not go beyond aspects prompted by the stimulus points.*
4	**10–12**	• An analytical explanation is given which is directed consistently at the conceptual focus of the question, showing a line of reasoning that is coherent, sustained and logically structured. [AO2] • Accurate and relevant information is precisely selected to address the question directly, showing wide-ranging knowledge and understanding of the required features or characteristics of the period studied. [AO1] *No access to Level 4 for answers which do not go beyond aspects prompted by the stimulus points.*

Marking instructions

Markers must apply the descriptors above in line with the general marking guidance (page 3).

Performance in AO1 and AO2 is interdependent. An answer displaying **no** qualities of AO2 cannot be awarded more than the top of Level 1, no matter how strong performance is in AO1; markers should note that the expectation for AO1 is that candidates demonstrate both knowledge *and* understanding.

The middle mark in each level may be achieved by stronger performance in either AO1 or AO2.

Indicative content guidance

Answers must be credited according to candidates' deployment of material in relation to the qualities outlined in the mark scheme. While specific references are made in the indicative content below, this does not imply that these must be included; other relevant material must also be credited.

Relevant points may include:

- A method of vaccination was developed by Jenner, which made it possible to prevent people getting smallpox.
- The Royal Jennerian Society made smallpox vaccination freely available and the government later made smallpox vaccination compulsory, so that prevention took place on a wide scale.
- The spread of disease was reduced when government legislation led to improved standards of hygiene, for example the 1875 Public Health Act made it compulsory for local government to provide access to clean water and to deal with sewage and rubbish.
- The involvement of central government meant that it was possible for nationwide policies to be implemented and enforced.
- Snow's work on cholera showed the link between polluted water and disease, with the result that new sewers were built for London, which drastically reduced cholera epidemics.
- New vaccinations were developed, increasing the amount of illnesses that could be prevented.

Question		
5		'The role of the Church was the main reason why there was little change in care and treatment in the years c1250-c1500.' How far do you agree? Explain your answer. You may use the following in your answer. • medical training • herbal remedies You **must** also use information of your own. **Target**: Analysis and evaluation of second order concepts: causation; change and continuity [AO2]; Knowledge and understanding of features and characteristics [AO1]. **AO2**: 10 marks. **AO1**: 6 marks.
Level	**Mark**	**Descriptor**
	0	No rewardable material.
1	**1–4**	• A simple or generalised answer is given, lacking development and organisation. [AO2] • Limited knowledge and understanding of the topic is shown. [AO1] • The overall judgement is missing or asserted. [AO2]
2	**5–8**	• An explanation is given showing limited analysis and with implicit or unsustained links to the conceptual focus of the question. It shows some development and organisation of material, but a line of reasoning is not sustained. [AO2] • Accurate and relevant information is included, showing some knowledge and understanding of the period. [AO1] • The overall judgement is given but its justification is asserted or insecure. [AO2] *Maximum 7 marks for Level 2 answers that do not go beyond aspects prompted by the stimulus points.*
3	**9–12**	• An explanation is given, showing some analysis, which is mainly directed at the conceptual focus of the question. It shows a line of reasoning that is generally sustained, although some passages may lack coherence and organisation. [AO2] • Accurate and relevant information is included, showing good knowledge and understanding of the required features or characteristics of the period studied. [AO1] • The overall judgement is given with some justification, but some criteria selected for the required judgement are left implicit or not validly applied. [AO2] *Maximum 11 marks for Level 3 answers that do not go beyond aspects prompted by the stimulus points.*
4	**13–16**	• An analytical explanation is given which is directed consistently at the conceptual focus of the question, showing a line of reasoning that is coherent, sustained and logically structured. [AO2] • Accurate and relevant information is precisely selected to address the question directly, showing wide-ranging knowledge and understanding of the required features or characteristics of the period studied. [AO1] • Criteria for the required judgement are justified and applied in the process of reaching the overall judgement. [AO2] *No access to Level 4 for answers that do not go beyond aspects prompted by the stimulus points.*

Marking instructions

Markers must apply the descriptors above in line with the general marking guidance (page 3).

Performance in AO1 and AO2 is interdependent. An answer displaying **no** qualities of AO2 cannot be awarded more than the top of Level 1, no matter how strong performance is in AO1; markers should note that the expectation for AO1 is that candidates demonstrate both knowledge *and* understanding.

The first two bullet points *[AO1 and AO2]* account for 3 of the 4 marks in the level and are equally weighted; the third bullet point *[AO2]* accounts for the remaining mark. Once the level has been found, there are two steps to follow to determine the mark within the level:

- Markers should consider bullet points 1 and 2 together. Strong performance (for the level) in both would be awarded all 3 marks, while 2 marks may be achieved by stronger performance in either bullet point; weak performance would be awarded 1 mark.
- The fourth mark in each level is allocated to the bullet point 3 and should be considered independently of the award of the other marks.

Indicative content guidance

Answers must be credited according to candidates' deployment of material in relation to the qualities outlined in the mark scheme. While specific references are made in the indicative content below, this does not imply that these must be included; other relevant material must also be credited. The grouping of points below does not imply that this is how candidates are expected to structure their answers.

Relevant points that support the statement may include:

- The Church controlled medical training, which remained based on the ideas of Galen throughout the medieval period.
- Since the physician's treatment was based on his Church-controlled training, treatment remained based on bleeding, purging, and the Theory of Opposites because those were Galen's ideas.
- The Church encouraged people to think that illness was sent by God and so did not encourage people to improve their understanding of the cause of illness.
- The Church offered care in hospitals but the focus was care, not cure; there was little change in the care being offered.

Relevant points to counter the statement may include:

- For most people, illness continued to be treated by women in the family, based on herbal remedies or traditional ideas; this was not linked to religion or the Church.
- Some herbal remedies were effective in the treatment of minor illnesses and therefore people continued to use them.
- During the medieval period, technology was not developed enough to allow progress in understanding the cause of illness and therefore there was little progress in treatment or surgery.
- Remedies offered by the apothecary were usually based on the ideas used by the physician and therefore did not change until medical training changed.

Question		
6		'The printing press led to significant progress in medical knowledge and treatment in the years c1500-c1700.' How far do you agree? Explain your answer. You may use the following in your answer: • Vesalius' book, *The Fabric of the Human Body* • herbal remedies You **must** also use information of your own. **Target**: Analysis and evaluation of second order concepts: consequence; change and continuity [AO2]; Knowledge and understanding of features and characteristics [AO1]. **AO2**: 10 marks. **AO1**: 6 marks. **Spelling, punctuation, grammar and the use of specialist terminology (SPaG)**: up to 4 additional marks.
Level	**Mark**	**Descriptor**
	0	No rewardable material.
1	**1–4**	• A simple or generalised answer is given, lacking development and organisation. [AO2] • Limited knowledge and understanding of the topic is shown. [AO1] • The overall judgement is missing or asserted. [AO2]
2	**5–8**	• An explanation is given showing limited analysis and with implicit or unsustained links to the conceptual focus of the question. It shows some development and organisation of material, but a line of reasoning is not sustained. [AO2] • Accurate and relevant information is included, showing some knowledge and understanding of the period. [AO1] • The overall judgement is given but its justification is asserted or insecure. [AO2] *Maximum 7 marks for Level 2 answers that do not go beyond aspects prompted by the stimulus points.*
3	**9–12**	• An explanation is given, showing some analysis, which is mainly directed at the conceptual focus of the question. It shows a line of reasoning that is generally sustained, although some passages may lack coherence and organisation. [AO2] • Accurate and relevant information is included, showing good knowledge and understanding of the required features or characteristics of the period studied. [AO1] • The overall judgement is given with some justification, but some criteria selected for the required judgement are left implicit or not validly applied. [AO2] *Maximum 11 marks for Level 3 answers that do not go beyond aspects prompted by the stimulus points.*
4	**13–16**	• An analytical explanation is given which is directed consistently at the conceptual focus of the question, showing a line of reasoning that is coherent, sustained and logically structured. [AO2] • Accurate and relevant information is precisely selected to address the question directly, showing wide-ranging knowledge and understanding of the required features or characteristics of the period studied. [AO1] • Criteria for the required judgement are justified and applied in the process of reaching the overall judgement. [AO2] *No access to Level 4 for answers that do not go beyond aspects prompted by the stimulus points.*

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Relevant points that support the statement may include:

- The printing of Vesalius' *The Fabric of the Human Body* included accurate drawings, which meant that more people began to question Galen's works, leading to progress in medical knowledge.
- Harvey's book included diagrams of his experiments; this meant others could repeat his experiments and led to improved medical knowledge.
- Sydenham's book *Observationes Medicae* became the basis of medical training and provided a new understanding of the difference between measles and scarlet fever, and of the condition of gout.
- Books of herbal remedies were printed, for example *Culpeper's Complete Herbal*, and medical books were translated so that medical knowledge began to spread beyond trained physicians.

Relevant points to counter the statement may include:

- Most treatment continued to be carried out in the home by the women of the family; this treatment remained based on herbal remedies and folk remedies, so there was little improvement.
- Since medical training continued to be based on Galen's ideas, treatment did not improve, as can be seen in the treatments given to Charles II.
- New ideas were slow to be accepted, therefore there was limited progress in knowledge and treatment.
- Much of the progress that did occur was the result of other factors, such as the use of scientific methods, encouraged by the Royal Society; new technology, such as the microscope; or individuals, such as Harvey.

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