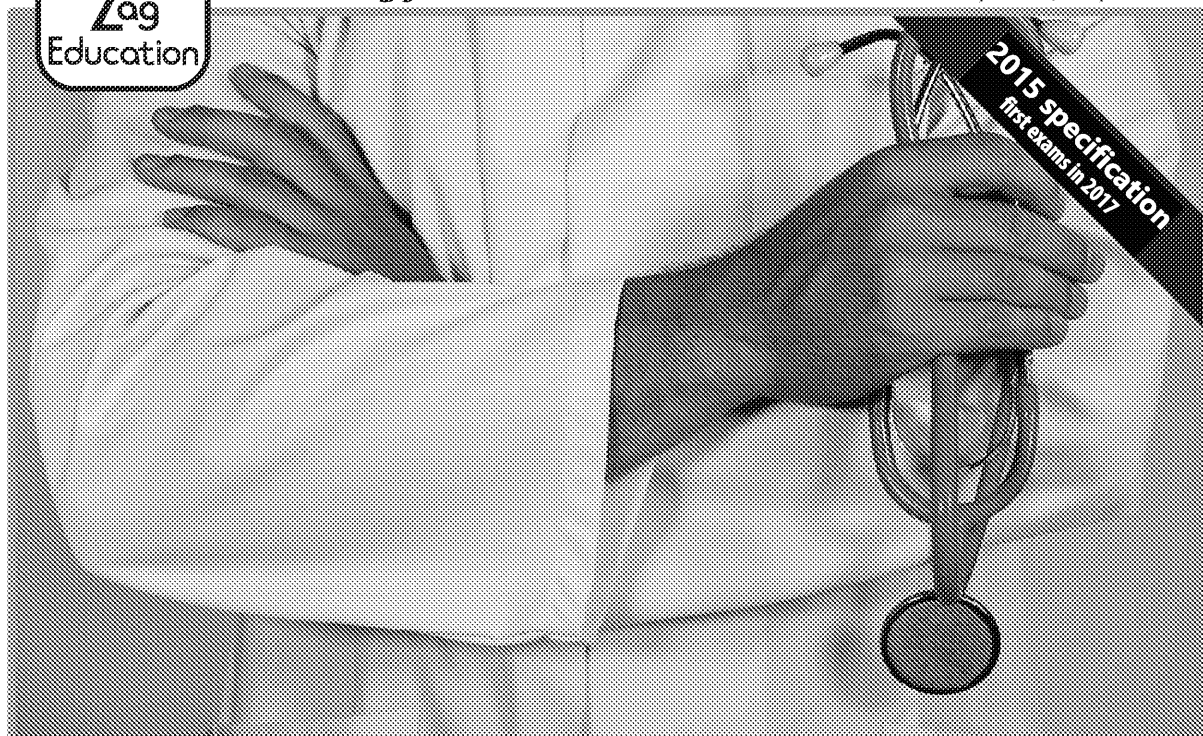




Sociology

A Level | AQA | 7192



# Practice Papers for A Level AQA Sociology

Paper 2 Section A:  
3. Health

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# Contents

Product Support from ZigZag Education .....	ii
Terms and Conditions of Use .....	iii
Teacher's Introduction.....	1
<b>Write-on Practice Papers .....</b>	<b>2</b>
Practice Paper 2A .....	2
Practice Paper 2B .....	6
Practice Paper 2C .....	10
Practice Paper 2D.....	14
<b>Non-write-on Practice Papers .....</b>	<b>18</b>
Practice Paper 2A .....	18
Practice Paper 2B .....	19
Practice Paper 2C .....	20
Practice Paper 2D.....	21
<b>Mark Schemes.....</b>	<b>22</b>
Practice Paper 2A .....	22
Practice Paper 2B .....	24
Practice Paper 2C .....	26
Practice Paper 2D.....	28

# Teacher's Introduction

This resource has been created as a supplement to your delivery of the **A Level AQA Sociology specification (7192) for Paper 2: Section A: Option 3 – Health**. There are four complete practice examination papers.

The mark schemes have been written in as straightforward a manner as possible in order for students to be able to understand what will be required of them in the real examination. All areas of the specification for Health have been covered across the four papers.

The practice exam papers can be used in a number of ways. You may wish to use these 1-hour Section A papers for practice and to reinforce the learning of topic content, or you may want to combine them with an additional Section B resource and set a full 2-hour Paper 2 mock examinations for your pupils.

Each paper is provided in a write-on format, just like the final AQA exam, and a non-write-on format to reduce photocopying should you wish your students to answer on separate sheets of paper or in a workbook.

## Remember!

Always check the exam board website for new information, including changes to the specification and sample assessment material.

*March 2021*

ZigZag Practice Exam  
Supporting A Level AQA Sociology

**Sociology**

**Paper 2: Health**

**Practice Paper 2A**

**Time allowed**

1 hour

**Instructions**

Answer all of the questions.

**Information**

The total number of marks available for this paper is **40**.

The number of marks available for each question is shown in brackets.

Questions should be answered in continuous prose.

Marks will be awarded for:

- good use of English
- clearly organised information
- appropriate use of specialist terminology

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03 Read **Item B** and answer the question that follows.

**Item B**

Some sociologists claim that the distribution of healthcare provision in Britain is unequal. Furthermore, access to healthcare may be limited as NHS funding is not allocated equally. Some sociologists claim that governments have introduced policies to reduce this inequality.

Applying material from **Item B** and your knowledge, evaluate the view that access to healthcare is not equal across Britain today.



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## Practice Paper 2A

- 01 Outline and explain two conflict approaches to the role of globalisation and
- 02 Read **Item A** and answer the question that follows.

### Item A

People living in the North of England and Scotland are more likely to die early than people living in the South of England. Some sociologists claim this may be due to social class differences.

Applying material from **Item A**, analyse two different approaches to mortality rates for different geographical locations.

- 03 Read **Item B** and answer the question that follows.

### Item B

Some sociologists claim that the distribution of healthcare provision in Britain is not equal. Furthermore, access to healthcare may be limited as NHS funding is not allocated equally. Some sociologists claim that governments have introduced policies to reduce this inequality.

Applying material from **Item B** and your knowledge, evaluate the view that policies to improve access to healthcare are not equal across Britain today.

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## **Preview of Questions Ends Here**

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This is a limited inspection copy. Sample of questions ends here to avoid students previewing questions before they are set. See contents page for details of the rest of the resource.

# Practice Paper 2D

	A01	A02	A03
1 – 10 marks	5	3	2
2 – 10 marks	3	4	3
3 – 20 marks	8	6	6

01

Marks	Description
8–10	<ul style="list-style-type: none"> <li>Answers show excellent knowledge and understanding of two genders and mortality.</li> <li>Relevant evaluation and analysis of two gender differences in health access and mortality.</li> </ul>
4–7	<ul style="list-style-type: none"> <li>Answers show suitable knowledge and understanding of two genders and mortality.</li> <li>Some relevant evaluation and analysis.</li> </ul>
1–3	<ul style="list-style-type: none"> <li>Answers show inadequate knowledge and understanding of two genders access and mortality.</li> <li>Limited or no evaluation and analysis.</li> </ul>
0	No relevant understanding.

**Possible Content:** mortality and morbidity, lung cancer, biology, screening, maternal health.  
**Possible Sources:** NHS, Scrambler (2008), Luck et al. (2000), O'Brien et al. (2005), Cr

02

Marks	Description
8–10	<ul style="list-style-type: none"> <li>Answers show excellent knowledge and understanding of two explanations to realists.</li> <li>Two developed applications of the item.</li> <li>Relevant evaluation and analysis of two explanations of mental health.</li> </ul>
4–7	<ul style="list-style-type: none"> <li>Answers show suitable knowledge and understanding of two explanations to realists.</li> <li>One or two applications of the item.</li> <li>Some relevant evaluation and analysis.</li> </ul>
1–3	<ul style="list-style-type: none"> <li>Answers show inadequate knowledge and understanding of two explanations according to realists.</li> <li>Limited application from the item provided.</li> <li>Limited or no evaluation and analysis.</li> </ul>
0	No relevant understanding.

**Possible Content:** social realism, social construction, labelling, biological processes.  
**Possible Sources:** Pilgrim and Rogers (1999), Gov (1997), Barry and Yuill.

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Marks	Description
17–20	<ul style="list-style-type: none"> <li>Answers show excellent, detailed and correct knowledge and under the main factor for differences between health chances in the UK.</li> <li>Clear and relevant links to the item and a developed understanding and sociological research are applied throughout the essay.</li> <li>Explicit evaluation and clear analysis which is developed. Suitable</li> </ul>
13–16	<ul style="list-style-type: none"> <li>Answers show good, comprehensive but partially incomplete know view that region is the main factor for differences between health</li> <li>Strong links to the item and an established understanding of the q</li> <li>Accurate content and sociological research are applied, but some o</li> <li>Some explicit evaluation and clear analysis which is developed.</li> </ul>
9–12	<ul style="list-style-type: none"> <li>Answers show broadly correct material but may lack focus and con</li> <li>Unfocused links to the item and a shallow understanding of the que</li> <li>Application is somewhat narrow and list-like.</li> <li>Limited evaluation and analysis with a focus on knowledge.</li> </ul>
5–8	<ul style="list-style-type: none"> <li>Answers show one-dimensional and incomplete knowledge.</li> <li>No links to the item and a shallow understanding of the question.</li> <li>Narrow application that is generalised, or veering away from the r</li> <li>Very limited or no evaluation and analysis.</li> </ul>
1–4	<ul style="list-style-type: none"> <li>Answers show one-dimensional and incomplete knowledge.</li> <li>No links to the item and a shallow understanding of the question.</li> <li>Application is applied incorrectly, if at all.</li> <li>No evaluation and analysis.</li> </ul>
0	No relevant understanding.

**Possible Content:** NHS, region, mortality ratio, materialist explanation, role of poverty, social class, gender, ethnicity, racial harassment may lead to poorer health, health p

**Possible Sources:**

- Shaw et al. – poverty-stricken areas experience higher mortality rates.
- Shaw and Dorling (2000) – mortality rate in children could be reduced if poverty
- ONS – unequal division of wealth between the rich and the poor.
- Resolution Foundation – health gap caused by wealth gap.
- Wilkinson and Pickett (2010) – stress and anxiety cause higher rates of mortality
- Marmot and Shipley (1996) – health inequality not related to wealth divide.
- Barker and Clarke (1997) – childhood influences health.

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## **Preview of Answers Ends Here**

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This is a limited inspection copy. Sample of answers ends here to stop students looking up answers to their assessments. See contents page for details of the rest of the resource.