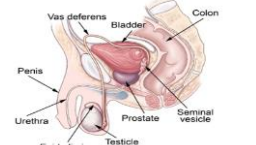
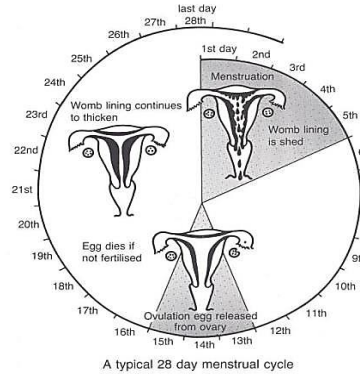


Child Development OCR Knowledge Organiser LO1

THEMES

THEMES	Factors affecting pre-conception	Relationship between partners – have the couple been together for long enough to form a happy, stable and caring relationship based on love and trust. Finance – Raising a child is expensive, this includes equipment, feeding, and childcare. Age – as the mother ages her ability to conceive declines. Younger parents may be healthier and fitter, but older parents may be more mature, relaxed and financially secure. Peer pressure/social expectations – Friends having babies, and social expectation from friends and family can add pressure. Genetic counselling – Parents at risk of having a child with a genetic disorder will be offered tests to check. Some can only be passed on by the mother, and some by the father. E.G – cystic fibrosis.	Methods of contraception	Reproductive system	Menstrual cycle
	Pre-conception Health	Addressing health concerns before trying for a baby, gives the child the healthiest start possible. Diet – A healthy well-balanced diet as the baby relies on the mother for all the nutrients to grow and develop. Exercise – Being fit and healthy helps the body cope with pregnancy and birth. Healthy weight – being overweight or underweight can affect ovulation and fertility, and lead to health issues in pregnancy. Dangers of smoking/alcohol/recreational drugs – impacts the baby's growth and development, risk of premature birth, miscarriage, stillbirth and foetal abnormalities, affect the nutrients received via the placenta. Up to date immunisations – Contribute to a woman's health before and during pregnancy and has benefits to the baby. Folic Acid – Reasons to take the supplement before pregnancy			
	Stages of reproduction	Ovulation – when the egg is released from one of the ovaries and travels along the fallopian tube around day 14 of the menstrual cycle. Conception/fertilisation – occurs when the sperm penetrates the egg and fuse together as one cell and continues along the fallopian tubes. Implantation – around 7 days later the fertilised egg reaches the uterus and implants itself in the enriched lining. The egg is now an embryo. Identical twins - are the result of one fertilised egg dividing into two cells. Non-identical twins - are the result of two separate eggs being released and fertilised by two different sperm.			
		Barrier methods – device or preparation prevents the sperm reaching the egg. Male condom – put onto erect penis before it comes into contact with vagina. 98% effective if used correctly. Also helps protect against STI's. widely available. Can come off or split if not used correctly. Female condom – Put inside vagina before it comes into contact with the penis. 95% effective if used correctly. Also helps protect against STI's. widely available. Can be pushed too far and is more expensive than male condoms. Diaphragm or cap – dome shaped latex that covers the cervix, inserted before sex (can be done a few hours before) with spermicidal gel. Reusable. 92% effective if used correctly. Also helps protect against STI's. Can experience difficulty in learning to use them and can cause cystitis.		Female reproductive system Ovaries (2) – produces eggs and hormones Fallopian tubes - cilia in the lining of the tube waft the egg from the ovary to the uterus Uterus - muscular wall protects the foetus, lining enables exchange of materials Cervix - neck of the uterus, dilates during labour Vagina - receives sperm and baby leaves here. 	
		Hormonal methods – hormones prevent eggs being released from the ovaries, thicken cervical mucus to prevent sperm entering and thin the lining of the uterus to prevent implantation. Contraceptive pill (combined pill) – pill taken for 21 days, followed by 7-day break within which the woman has a period. Needs to be taken at the same time of day. 99% effective if used correctly. Side effects can include weight gain and mood swings. Contraceptive pill (progestogen-only pill) – pill taken every day. 99% effective if used correctly. Side effects can include spot prone skin, irregular periods and tender breasts.		Male Reproductive System Urethra - tube in penis which carries the semen Testes - produces sperm and hormones Sperm duct or epididymis - carries sperm from testes to urethra Penis – transfers semen (sperm plus seminal fluid) from male to female Seminal vesicle - The seminal vesicles are a pair of glands found in the male pelvis, which function to produce many of the constituent ingredients of semen. Vas deferens - the vas deferens is responsible for directing and propelling sperm into the urethra, after the sperm has passed through the epididymis. 	
		Intrauterine device/system (IUD or IUS) – small t shaped plastic device inserted into the uterus. 99% effective for five years or three years. Does not protect against STI's, insertion can be uncomfortable. But can make periods lighter/shorter/stop and be used by women who cannot take the combined pill. Contraceptive injection – Injected every few weeks (often 12). 99% effective. Side effects can include weight gain, headaches and irregular periods and after stopping can take a year for fertility levels to return to normal. Contraceptive patch – worn on the skin. 99% effective. Patch must be changed each week for three weeks, then there is a week off. Side effects can include headaches and raised blood pressure. Contraceptive implant – small flexible tube inserted into upper arm. 99% effective for three years. Does not protect against STI's and some medicines can make it ineffective. Emergency contraceptive pill – Prevents pregnancy after unprotected sex or if contraception has failed. Must be taken within 72 hours, if taken within 24 hours it is 98% effective, after 72 hours it is 52% effective. It is free of charge.		signs/ symptoms of pregnancy Breast changes – becoming larger and tender Missed period – Often the first sign of pregnancy Nausea – Feeling sick/and or vomiting Passing urine frequently Tiredness	 A typical 28 day menstrual cycle