



Examiners' Report June 2022

GCE Psychology 9PS0 02

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Introduction

The most popular option was criminological psychology followed by child psychology and then health psychology. A wide range of responses from candidates was seen across all the options as well as in the clinical psychology section. Application for AO2 responses was an area that remained difficult for candidates with answers often being generic. Long answer questions remain difficult with candidates often lacking detail either in their knowledge and understanding or with their ability to develop their arguments for the AO3 element which often limited the marks to the lower-level mark bands.

Question 1 (a)

Most candidates gained this AO1 mark, clearly defining dysfunction and applying it to the context.

- 1 Lena cannot go to work due to her anxiety. She has also stopped going out with her friends once a week and does not like people visiting her at home. She has recently seen a psychiatrist who has diagnosed her with a mental disorder.

(a) Define the term 'dysfunction' as it is used to diagnose Lena's mental disorder.

(1)

dysfunction is when Lena would have trouble
carrying out everyday tasks e.g. going to work or
having speech problems



This gains a mark for clearly defining dysfunction and linking it to specific details from the mark scheme.

Question 1 (b)

This question required candidates to identify two weaknesses in relation to the scenario, AO2, and then justify those weaknesses. The very best answers were able to do this. Some answers did identify the weaknesses but then failed to justify those weaknesses. However, many answers did not apply their weaknesses to the context, giving generic answers.

(b) Explain **two** weaknesses of using 'dysfunction' to diagnose Lena's mental disorder.

(4)

1 one weakness of using dysfunction is that it can be considered very subjective as to what is considered dysfunctional. Every psychiatrist may have a different interpretation and therefore makes her diagnosis less reliable.

2 Another weakness of using dysfunction is that there may be cultural differences and Lena's behaviours may be normal in her culture but for the psychiatrist it is abnormal, making her diagnose Lena with a mental disorder.



This scores 0 marks as it is generic. The name Lena is not enough.



When the question requires application candidates should take details from the context given.

(b) Explain two weaknesses of using 'dysfunction' to diagnose Lena's mental disorder.

(4)

- 1 people can have different perceptions of what they deem to be dysfunctional, for example someone who is retired not going to work is not dysfunctional behaviour compared to Lena, who is also not going to work and is claimed as dysfunctional, this is a weakness.
- 2 Another weakness is that her behaviour may not relate to her mental illness, she could stop visiting her friends simply because Lena is busy and nothing to do with her mental disorder.



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Examiner Comments

This gets 3 marks. It gets 2 marks for the first weakness. 1 mark for identifying that people have different perceptions of what they deem dysfunctional and a further mark for justifying this with the point about retired people not seeing not going to work as dysfunctional but for Lena it could be seen as dysfunctional. 1 mark for the second weakness for identifying that her behaviour may not be due to her mental illness such as not going out with her friend may be because she is too busy.



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Examiner Tip

Candidates should justify their strengths or weaknesses to gain the A03 mark on explain questions.

Question 2 (a)

The best answers were able to describe how a meta-analysis would be carried out in relation to the context. Many answers did not apply all their descriptive points to the context so limiting their marks as there were generic points. A lot of answers failed to apply to the context at all. Some answers either wrote about a different research method or were left blank.

- 2** Vihaan wanted to conduct a meta-analysis to investigate the effectiveness of a psychological therapy on a range of mental disorders. He aimed to investigate how effective a psychological therapy was compared to a biological therapy. Vihaan collected his data from one country.

(a) Describe how Vihaan may have carried out his meta-analysis.

(3)

Vihaan would have to look into previously carried out research and look at the aim of the studies to find ones that match what he's looking for, the effectiveness of psychological therapy compared to a biological therapy. He then would pool together all the relevant data based on effectiveness of each method and then looked at the conclusions made by the other researchers. Vihaan would then analyse the data and come to an overall conclusion himself on the effectiveness of psychological therapy on a range of mental disorders.



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Examiner Comments

This gets 3 marks.

1 mark for finding previous research that looked at the effectiveness of biological and psychological therapies.

1 mark for pool all the data together about the effectiveness of each method and the conclusions made by the researchers.

1 mark for he would analyse the data himself on the effectiveness of the therapies and come to an overall conclusion.

2 Vihaan wanted to conduct a meta-analysis to investigate the effectiveness of a psychological therapy on a range of mental disorders. He aimed to investigate how effective a psychological therapy was compared to a biological therapy. Vihaan collected his data from one country.

(a) Describe how Vihaan may have carried out his meta-analysis.

(3)

Vihaan may have carried out his meta analysis by collecting data from patients who had received either a biological or psychological therapy from a range of mental institutions across the country. Once Vihaan had collected the data and results he could compare the success rates of the therapy and how effective it was in treating their mental disorder.



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Examiner Comments

This gets 0 marks as it is not a meta-analysis.



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Examiner Tip

Candidates should read the question carefully and ensure they answer the question that is asked.

Question 2 (b)

Only the best answers were able to gain marks for a comparison of the two types of data as they are used in clinical psychology. Most answers that gained a mark wrote about a difference between the two types of data. Very few answers gained both marks for a similarity and a difference. A lot of answers failed to compare primary data and secondary data as they are used in clinical psychology. Some answers failed to make a comparison, just describing what primary data was and then describing what secondary data was.

(b) Vihaan collected secondary data.

Compare primary and secondary data as used in clinical psychology.

(2)

Primary data is when you collect data yourself and is useful as you can get direct data about your hypothesis, however ^{it can be time consuming} secondary data is when you get data from someone else e.g results from a study and is useful as it is very quick and easy but it may be hard to find data applicable to your hypothesis about mental health disorders.

(Total for Question 2 = 5 marks)



This gets 1 mark for the difference which is linked to mental health disorders at the end of the answer. There is no similarity so no further marks.



Candidates would benefit from knowing what is required for each term by being familiar with the taxonomy of terms. Compare should include similarities **and** differences.

(b) Vihaan collected secondary data.

Compare primary and secondary data as used in clinical psychology.

(2)

Primary data is the researchers own research and results etc. They have a better understanding of the experiment as they carried it out. On the other hand, secondary data is other researchers research. It is useful to see and understand others perspectives however it isn't always useful as not all information could be presented.



ResultsPlus
Examiner Comments

This scores 0 marks as it is not related to clinical psychology.



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Examiner Tip

When the question asks 'as used in clinical psychology' candidates must refer to clinical psychology in their answer.

Question 3 (a)

Most answers showed some knowledge of Rosenhan's results, with the very best answers being accurate and giving four descriptive points allowing access to all the marks. Many answers failed to gain all four marks due to lack of detail or inaccuracies about the results. Some answers did not focus on the questions and described the procedure which was not creditworthy.

3 You will have learned about the classic study by Rosenhan (1973).

(a) Describe the results of Rosenhan (1973).

(4)

Rosenhan found that 11 out of 12 psychiatric hospitals have submitted patients to having schizophrenia, suggesting that reliability of classification systems is high due to agreement of diagnosis for the same symptoms.

R. Hospital staff were not able to tell that the pseudo patients were faking their symptoms but other patients could. And Rosenhan found that in 4/12 hospitals staff would not answer to patient's questions with 71% of doctors and 88% of nurses ignoring patients completely. Also found that staff would misinterpret behaviours such as pacing up and down the room as ~~anxiety~~ nervousness when in fact they were just bored. Pseudo patients were just bored.



This gets 4 marks. It gets 1 mark for 11 out of 12 hospitals admitted them with schizophrenia. It gets another mark for hospital staff could not tell they were faking it but other patients could. 1 mark for 71% of doctors and 88% of nurses ignored the pseudopatients question. The final mark is for misinterpreting behaviour such as pacing up and down as nervousness when it was boredom.

Question 3 (b)

Most answers were able to identify a strength of the study and make it clear that it was Rosenhan's study that was being written about. The most popular strength was do to with the validity of the study. Few answers went on to justify why this was a strength for the AO3 mark. The weakest answers often gave a generic strength that could have applied to several studies and was not specific to Rosenhan's study.

(b) Explain **one** strength of Rosenhan (1973).

(2)

A strength is that it has high ecological validity. It was a field experiment and used 12 ~~real~~ real hospitals in the USA and real staff which suggests findings are truthful and accurately demonstrate ability of psychiatrist making a diagnosis.



This gets 2 marks. It gets 1 mark for identifying the strength that it has ecological validity as it used 12 real hospitals so was a real life setting. This point is clearly linked to details of Rosenhan's study. It then gets 1 mark for the justification that the findings accurately and truthfully show the ability of psychiatrists to make a diagnosis.

Question 3 (c)

The very best answers were able to identify an improvement that could be made to the study which was clearly linked to this study and not generic. The most popular improvement was carrying it out in other countries. Very few answers were able to then justify why this would improve the study. Instead, they often focused on weaknesses of the original study. Some answers were generic with no reference to Rosenhan's study. Some answers thought that the pseudopatients were the participants.

(c) Explain **one** improvement that could be made to Rosenhan (1973).

(2)

One improvement to Rosenhan's study could be to use hospitals in more than just America e.g. England, Spain and France. This would be an improvement as the study would be less ethnocentric and the findings could be generalised beyond American culture.



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Examiner Comments

This gets 2 marks. It gets 1 mark for identifying that he could have used more hospitals from other cultures and naming some alternative cultures. It gets the second mark for the justification that it would have made it less ethnocentric so the findings could be generalised beyond America.



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Examiner Tip

When writing about an improvement candidates need to focus on how/why the improvement improves the study.

Question 4

There were a range of key questions written about, with the most popular ones being the impact of mental health on the workforce, whether anorexia is a learnt disorder and the effectiveness of drugs as a treatment for disorders. The best answers were able to show accurate knowledge about why it was a key issue to society (AO1) and then applied scientific ideas, processes, techniques and procedures to the key issue (AO2). Weaker answers often did not apply scientific ideas, processes, techniques and procedures to the key question. The weakest answers often made no mention of the key question within their essays.

4 In your studies of clinical psychology, you will have learned about a key question of relevance to today's society.

Discuss the key question for society you have studied using concepts, theories and/or research from clinical psychology.

(8)

Key question

What are the issues surrounding mental health issues in the work place

This is an issue because 1 in 6-8 people in the UK will ~~be~~ experience a mental health issue each year. 12.7% of days off are attributable to mental health issues of the workers and heavy workload, job insecurity and monitoring from superiors can increase ~~the~~ ^{feelings} of stress and anxiety. ~~£~~ 12.5 million days off for mental health issues have been recorded and this lack of productivity costs the UK economy ~~£~~ approximately £8 billion every year. This can increase ^{ca} suicide rates of workers due to inability to cope with the high pressure of the workplace.

Achor (2010) suggests that the workplace sets success related goals such as getting promoted. If these goals are unrealistic, it may lead to employees developing a deprivogenic schema ^{due to failure to} ~~associated~~ achieve goals increasing risk of depression. Constant low pay may lead to a lack of positive reinforcement, causing workers

to give up on their job and withdraw socially. This may lead to learned helplessness and anxiety and depression. Perpetual monitoring and evaluation may lead to workers developing a maladaptive attributional bias due to holding themselves accountable, ^{increasing the risk of} ~~and forcing on workers~~ stress and depression. Cognitive distortion may also be caused by high pressure in the workplace ^{where} and workers may focus on their weaknesses to improve performance ^{which is} and develop selective abstraction, increasing risk of depression.



This is level 4, 8 marks. The AO1 is level 4, it is accurate and shows thorough knowledge and understanding about the issues surrounding mental health in the work place, including days off, lost production and the effects on workers. The AO2 is level 4 with the psychological effects of unrealistic goals, low pay linked to reinforcement and mental health and maladaptive attributional bias.

Question 5

This essay on longitudinal research within clinical psychology was not answered well. The best answers were able to offer accurate knowledge and understanding on the longitudinal research method as it is used in clinical psychology (AO1) and offer developed evaluation points in relation to the research method as it is used in clinical psychology (AO3). The AO1 was often limited with very few going beyond 'they take place over a long period of time'. The AO3 was often partially developed and not developed in terms of how the research method is used in clinical psychology. There were a noticeable number of blank answers for this question.

5 Evaluate the use of the longitudinal research method as used in clinical psychology.

(8)

Longitudinal research in clinical psychology will involve using the same set of patients and tracking them over time, this will be done to see developmental change for example whether a treatment is effective or not for treating S_2 . This can be measured by first seeing the severity of the patient's symptoms e.g. how many delusions and track this over time to see if it changes so if it reduces or stays the same all done to see whether treatment is effective or not. A variety of research methods can be used within this such as interviews (gather information about how the patient feels about the treatment, if they feel it is working etc. They may use observations see any changes in behaviour over time of the patients maybe they get less anxious over time showing treatment is effective. ~~A s~~

A strength of using longitudinal studies is that it controls individual differences in patients as the same set of patients are used they will have the same participant variables that may influence or effect the research or how effective a treatment is ~~the only~~ so they effectively cancel out, meaning they can be more sure in their conclusions if the treatment is effective or

not.

However this is in theory if the process goes perfectly without any interruption.

In reality participants may drop out they may die or maybe^{*} the research just may be invalid because of how long it takes to gather usable data clinical psychology is always developing at a fast rate so quicker research conducted may invalidate the research as longitudinal method was ~~never~~ ~~measuring~~.

* The research conclusions will be affected by how if they drop out reduces validity.

To conclude longitudinal research methods is a good RM in theory however many practical limitations that may mean it's not so useful.



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Examiners Comments

This is level 3, 6 marks. The AO1 is level 3 as it goes beyond limited, and is accurate as it has the point about time period, then the two points about different methods all linked to clinical psychology. The AO3 is level 3: the arguments are developed and linked to clinical psychology.

Question 6

This essay required candidates to demonstrate their knowledge and understanding, AO1, apply that to the context, AO2, and offer arguments that lead to judgements (AO3). Many answers showed accurate knowledge and understanding of the classification systems or reliability and validity in terms of diagnosis. The best answers were able to apply this throughout to relevant evidence from the context. The best answers were able to offer well-developed logical chains of reasoning throughout. However, the AO3 was often only partially developed.

- 6 Alba has recently been diagnosed with a mental health disorder using a classification system. She has presented with a number of symptoms including losing interest in everyday life, altered sleep patterns and an inability to express her emotions. She also occasionally has angry outbursts.

Test retest
Pharma

Alba's psychiatrist has diagnosed her with schizophrenia. Her mother disagrees and thinks Alba has a different mental health disorder and wants her to see another psychiatrist who is from the same culture as Alba.

DSM 5
ICD 10

To what extent are classification systems a reliable and valid way of diagnosing mental health disorders?

You must make reference to the context in your answer.

(20)

One classification system that can be used to diagnose mental health disorders is the DSM 5. The DSM 5 is developed by the American Psychiatric Association and focuses only on diagnosing mental health disorders. Alba's psychiatrist may have used the DSM 5 to diagnose her with schizophrenia by looking in the manual to find a condition which involves losing interest, insomnia, and an inability to express emotions. One strength of the DSM 5 in diagnosing mental health disorders is that it accounts for cross cultural differences. This is a strength because it ensures that Alba is from a different culture and culture can greatly affect the meanings of symptoms therefore because the DSM-5 accounts for cross cultural differences it will avoid misdiagnosis and is thus a valid way of diagnosing mental health disorders. However a weakness is that the DSM-5 is developed largely by white, American men. This is a weakness because it lowers the validity of the DSM 5 as a diagnostic tool because as the criteria may not suit symptoms associated

by a culture and therefore it is limited to the extent it can be used to diagnose Alba's mental health condition as she is from a different culture.

The DSM 5 is produced in English and is sold as physical copies in the form of a book/manual. It does not just include pre-existing conditions as it is almost constantly updated with emerging conditions and has an entire section dedicated to newly discovered conditions such as Gaming Disorders. Psychiatrists may use this to diagnose Alba as she may be exhibiting symptoms of one of these new disorders which could refute her psychiatrist's original diagnosis of schizophrenia. Another strength of the DSM 5 as a diagnostic tool is that it undergoes test, retest reliability checks before it is published. This is a strength because it ensures that diagnoses are consistent and reliable which therefore increases the reliability of the DSM 5 as a diagnostic tool for Alba as is the DSM 5 was used to diagnose her original diagnosis of schizophrenia then it suggests that this diagnosis is true and reliable. However an additional weakness of using the DSM 5 as a diagnostic tool is that the APA who create it are heavily involved in the pharmaceutical industry. ~~and therefore~~ This is a weakness because it challenges the validity of the DSM 5 as the psychiatrists may profit off of medication being sold to those who

they diagnose and therefore the validity of the manual may be limited as the criteria may be created to diagnose as many people as possible in order to profit off of ~~as~~ treatments ~~as~~ as is demonstrated in the case of Alba who may have been incorrectly diagnosed with schizophrenia as ~~and~~ she will purchase treatments for it ~~and~~ which will generate profit for those in the pharmaceutical industry therefore limiting the validity of her diagnosis.

Another classification system used to diagnose mental health disorders is the ICD-10. The ICD is produced by the World Health Organisation and despite being used for all ~~dis~~ medical disorders, it does have a specific section dedicated to ~~diagnosing~~ mental health disorders.

Alba's mother may take her to a psychiatrist who uses the ICD-10 as it is created using data from all over the world and therefore may include any differences Alba has due to her culture. One strength of using the ICD-10 as a diagnostic tool is that there is supporting evidence from Hiller who said that it has an 80% agreement rate with ~~the~~ ~~ICD-10~~ ~~when~~ ~~diagnosing~~ ^{other classification systems} when diagnosing mental health conditions. This is a strength because it suggests that the ICD has high ^{reliability} ~~validity~~ as a diagnostic tool and therefore can be accurately used to diagnose mental health conditions as Alba's diagnosis will more than likely match the one given to her by another.

classification system. However a weakness is that the ICD-10 only has a 68% agreement rate with the DSM. This is a weakness because it questions how reliable the ICD-10 is as it may give a completely different diagnosis to the DSM potentially leading to a harmful misdiagnosis such as in the case of Alba who although being originally diagnosed with schizophrenia, may be diagnosed with depression by the ICD 10 therefore leaving psychiatrists unsure what medication to prescribe.

The ICD-10 is available free online for anyone who wishes to use it and is also available in many different languages meaning that if Alba ~~and her mother~~ had different languages they would still be able to understand the criteria for diagnosis. Another strength of using the ICD 10 as a diagnostic tool is that it bases its criteria off of data gathered from over 40 countries. This is a strength because the large amount of data ensures the accuracy of Alba's diagnosis as her symptoms would be consistent across all these countries thus increasing the validity of the diagnosis. However a weakness is that the ICD-10 is highly codified and many of these codes are extremely complex. This is a weakness because if Alba's psychiatrist could not understand the codes then it could lead

to her mental health conditions being misdiagnosed as schizophrenia.

In conclusion, the classifications are definitely useful for diagnosing mental health conditions as another strength of the DSMs is that it had greater ~~reliability~~ consistency in diagnosing gambling disorders compared to the DSM 4.

This is a strength because it demonstrates that these classifications keep improving their reliability over time.

However a weakness is that these classifications receive a level of subjectivity and therefore patients such as Alba with vague symptoms may be misdiagnosed as their conditions are wrongly interpreted as schizophrenia.



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Examiner Comments

This is level 5, 18 marks. The AO1 is level 4, it is accurate and thorough in terms of the classification systems. The AO2 is level 5. There is sustained application of relevant evidence throughout the essay. The AO3 is level 5. There is a well-developed logical argument, a full awareness of competing arguments with judgements throughout, though the final conclusion is not linked to reliability or validity explicitly.

Question 7 (a)

The best answers were able to accurately identify a strength and a weakness in relation to the scenario and then justify why they were a strength and a weakness. Some answers were able to gain the identification mark but failed to go on to justify why they are a strength or a weakness. The weakness tended to be answered better than the strength. Some answers were generic with no reference to the context.

- 7 Alexei conducted an investigation into whether appearance of the defendant can affect the decisions made by a jury. Alexei used an opportunity sampling technique to recruit participants for his investigation from a local business.

The participants watched a video of a mock trial where the defendant was found guilty. Half the participants saw the defendant in a smart suit (condition A) and the other half of the participants saw the defendant in casual clothes (condition B). The participants had to say how long the defendant should be in prison for, in months.

- (a) Explain **one** strength and **one** weakness of the sampling technique used by Alexei for his investigation about jury decision making.

(4)

Strength

As there is an age requirement to be an actual juror recruiting from a local business is good because people will reflect the ages of real jurors. There is unlikely to be minors working at the local business and a jury consists of adults like the local business, so the sample is representative of a jury, meaning the findings can be generalised to a real jury.

Weakness

They are all from one business which is a limited sample, there could be a participant variable that would affect as they all work for the same business there could be a particular trait that the business wanted in its workers. This could be a participant variable that affects their decisions as jurors that doesn't apply to others' potential jurors.



This gets 4 marks. It gets 2 marks for the strength, 1 mark for identifying that means it is representative of a jury so the results are generalisable, 1 mark for the justification, that is this because they are all from a local business (they are likely to reflect the age requirements for a jury). It also gets 2 marks for the weakness. 1 mark for identifying that it is a limited sample and the local business could look for a particular trait in its workers. 1 mark for the justification that it means participant variables could affect their decision so it can't apply to other potential juries.

- 7 Alexei conducted an investigation into whether appearance of the defendant can affect the decisions made by a jury. Alexei used an opportunity sampling technique to recruit participants for his investigation from a local business.

The participants watched a video of a mock trial where the defendant was found guilty. Half the participants saw the defendant in a smart suit (condition A) and the other half of the participants saw the defendant in casual clothes (condition B). The participants had to say how long the defendant should be in prison for, in months.

- (a) Explain **one** strength and **one** weakness of the sampling technique used by Alexei for his investigation about jury decision making.

(4)

Strength

One strength of Alexei using an opportunity sample is that it is the most efficient and easy approach to gather participants. This meant he could easily go into a local business and see who was available and ~~not~~ ^{could} participate. This is a strength because it allows for a quick assembly of participants.

Weakness

One weakness is that an opportunity sample may be biased. Some people from the local business may not have wanted to take part which means it reduces the generalisability of results, leaving him with people who would actually join in - not so biased the aim of ~~identifying~~ being in a mock jury. This is a weakness because it means that demand characteristics are an issue.



This gets 1 mark for identifying the strength that is quick and easy to get the participants with the link to the local business in the next sentence. Nothing for the last sentence of the strength as it is a repeat of what they have already said. Nothing for the weakness as people not wanting to take part is a problem with all types of sampling methods. It is not a specific problem with opportunity sample.



Candidates should provide a justification of strengths and weaknesses to gain the AO3 mark in explain questions.

Question 7 (b)

Most candidates were able to accurately calculate the mean.

Question 7 (c)

Most candidates were able to accurately calculate the median.

Question 7 (d)

Most candidates were able to use the calculated value and critical value to accurately determine if the results were significant or not.

(d) Alexei carried out a Mann–Whitney U test on his data. His calculated/observed value was 4.5.

Determine whether Alexei's results were significant or not at $p \leq 0.05$ for a two-tailed (non-directional) hypothesis.

(1)

The critical value was 5 and his calculated value was 4.5 which is ^{smaller} ~~total~~ therefore Alexei can accept his two tailed hypothesis.



This gets 1 mark for accurately identifying that the results are significant as the calculated value is less than the critical value.

Question 7 (e)

This question required candidates to identify an improvement to the study in relation to the scenario (AO2) and then justify why this would improve the study. The very best answers were to do this. Very few answers were able to then justify why this would improve the study. Instead, they often focused on weaknesses of the original study. Some answers were generic with no reference to the context.

(e) Explain one improvement that Alexei could make to his investigation.

(2)

one improvement Alexei could make would be having them decide on a guilty, ~~not guilty~~ innocent verdict as this would be more ecologically valid as juries don't decide the sentence just the verdict.



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Examiner Comments

This gets 1 mark for identifying that he could have made them decide on a guilty or innocent verdict. Nothing for the elaboration as it does not make it more ecologically valid, it makes it more task valid.



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Examiner Tip

When candidates use terms they should ensure that they are using the correct terms.

Question 8

The most popular theory was Eysenck's theory of personality. The best candidates were able to give three descriptive points in relation to explaining criminal or anti-social behaviour. Some answers described three aspects of the theory but did not describe how it could cause criminal or anti-social behaviour. Some answers listed the three aspects of personality but offered no description.

- 8 Describe **one** theory of personality as an explanation of crime and anti-social behaviour.

Eysenck's personality theory suggests Extroverted-Neuroticists is the ideal personality type for criminal and anti-social behaviour. This is because Extroverts seek pleasure from outside influences which is why they tend to engage in dangerous and risk-taking behaviour, increasing the chances of being involved in crime.



This gets 1 mark for the point about extroversion clearly linked to crime.



Candidates would benefit from knowing that describe questions require candidates to give an account of something and that statements in the response need to be developed.

Question 9

The best answers were able to demonstrate accurate and thorough knowledge and understanding of how the amygdala could cause the criminal and anti-social behaviour (AO1) and apply that knowledge and understanding in well-developed logical chains of reasoning. Weaker answers showed limited knowledge and understanding often focusing on the impact of brain damage in a generic manner rather than focusing on the amygdala. Some of the AO2 had little reference to relevant evidence from the context.

- 9 Jekaterina has recently had an accident which resulted in damage to her amygdala. Since the accident she has lost her temper a lot more. She has had frequent arguments with her parents.

Jekaterina's old friends do not like to go out with her any more, as she often starts fighting with strangers. She is now going out with some new friends. Jekaterina has just been arrested by the police for hitting someone whilst she was out with her new friends. Jekaterina thinks her aggression is due to the damage to her amygdala.

Discuss how damage to Jekaterina's amygdala may account for her aggression.

You must make reference to the context in your answer. AO2s

PO1s + AO2s

(8)

The amygdala is responsible for emotions and creating emotional responses. Damage or alterations to its function have been linked to aggressive and violent behaviour. Jekaterina's amygdala struggles to create appropriate emotional responses to situations. So when she would normally find something irritating or annoying, Jekaterina now acts in an argumentative way.

Damage to the amygdala is thought to affect the way the amygdala interacts with the environment. So overly aggressive reactions are made as a result of fearful situations. When Jekaterina was out with her new friends ~~se~~ she may have been approached and felt threatened. Instead of ~~walked~~ walking away, ~~Jekaterina~~ Jekaterina's amygdala engages in 'fight' mode, and so she hits the individual.

Charles Whitman shot and killed 13 people at

Texas University after killing his wife and mother. He was shot dead by police and a post mortem revealed a tumour pressing against his amygdala. Tekahenna may have developed a tumour on her amygdala which was triggered after her car accident. This would ~~explains~~ explain why she loses her temper more.

King implanted electrodes into the head of a schizophrenic woman. When the amygdala ~~was~~ amygdala was stimulated the woman ~~became~~ became physically and verbally aggressive until the electrical current was switched off. Tekahenna's argumentative nature may be a result of overactive neurons around her amygdala, which results in repeated neuron firing.



This is level 3, 6 marks. The AO1 is level 3, it is accurate. The use of studies can show knowledge and understanding and count towards the AO1 as long as they are not written in an evaluative manner, which these are not, and they add new knowledge and understanding and are not a repeat of what has already been written. The AO2 is level 3: the arguments are developed using mostly coherent chains of reasoning and the competing arguments come from the application to the different AO1 points.

Question 10

This essay required candidates to demonstrate their knowledge and understanding, AO1, apply that to the context, AO2, and offer arguments that lead to judgements (AO3). The best answers were able to show accurate knowledge and understanding of factors affecting eye witness testimony and apply relevant evidence from the context. They were also able to offer developed evaluation points and demonstrate a grasp of competing arguments. They often used evidence effectively to support or refute the point they were making. Weaker answers demonstrated limited knowledge and understanding, or often gave evaluative comments with some development of form.

10 Denis and Angela recently witnessed a robbery at a bank. The robber was waving a gun at the bank staff as he demanded the money. Denis had to give the police a statement about what he saw and heard during the robbery. He gave detailed accounts of the gun used. He failed to pick the robber out of a selection of photographs.

Two weeks after the robbery, Angela, who enjoys watching police dramas, also gave a statement to the police. She accurately identified the robber, but she said the robber had a knife rather than a gun. Another witness who had discussed the robbery with Angela also said a knife was used by the robber.

Evaluate factors influencing the eye-witness testimony given by Denis and Angela.

You must make reference to the context in your answer.

(16)

Weapon focus is a factor that influences eye witness testimonies. Weapons are said to be our main focus in times of high stress. The inverted-U theory of arousal claims in times of high anxiety - like when a gun is in our face our cognitive processes are typically worse, this leads to people not being able to remember what the person robbed like.

Denis may have been in a state of high anxiety when the robber showed the knife, he was scared and his ability to think straight and take conscious effort to remember his surroundings was not there so that is why he failed to pick the robber out in a line of photographs.

It is also said when there is a weapon held to us or close to us that we focus more on the weapon than anything else, due to fear for ourselves we focus on what is directly endangering ourselves, this means we may struggle to remember

the heat of the stressful moment ahead of us
to remember the face of the person holding
the dangerous weapon.

Denis's detailed account of the gun but severely
lacking memory of the actual robber clearly shows
weapon focus in action, he had detailed accounts
of the gun because that's all he focused on due
to the fear and anxiety in that situation which
meant he couldn't pick the robber's picture out.

Cognitive interviews can be a way to help
eye witnesses remember information potentially
lost from weapon focus. Changing order and
placement of yourselves can potentially make people
remember things they didn't in the moment of
questioning.

Post event information also ^a affects eye
witness testimonies. Some large scale crimes, like
robbery and murder, are often on television,
news tabloids and all around for potential
witnesses to see this means that witnesses own
schema for events may go through assimilation
and change and not be accurate to what
they remember.

Also, talking to other witnesses after a crime
has been committed as they're usually together
and talking helps reduce each of their own

anxiety surrounding their situations at hand, however this may change the schema at hand potentially making their own account not accurate to what they saw as someone else may have an incorrect schema about robberies that affect everybody else.

Angela may believe the witness that said the robber had a knife, Angela may have focused on his face and not the weapon so when confronted with a witness who has a schema for robberies with knives her memory was changed to accommodate gaps in knowledge.

Leading questions also impact the recalling of past events. These questions subtly hint at an ~~event~~^{thing} without actually saying it - for example "crash" makes people think of high speed cars ~~potentially~~ going fast but if cars "bumped" it seems less harsh. These change in words can evoke different recall of events.

Angela while interviewed may have been asked "Did the robber thrust his weapon?" which suggests the weapon was a knife rather than a gun. Due to her own shaky knowledge of the weapon used it was able to make her believe a knife was used.

Loftus showed the influence of leading questions when she interviewed students about a video of a car crash - she asked a question where she changed the key verb from "crash" to "smash" to "bump" etc. And those with the harsher words "crash", "smash" estimated higher speed travelling. This shows leading questions altering what we expect and what we believe showing depending on what was asked by the police Angela and Danie~~s~~ may have been influenced.

Loftus also did a study where a man at a restaurant in a picture held either a gun or a cheque book - if he held a gun participants wouldn't identify his face. This shows we focus on the weapon instead of the person at hand meaning the information on crime extracted from people like Danie's memory is limited and unhelpful.

But a study where a waiter held a rubber chicken performed similarly to the gun in weapon focus. The dangerous scissors wasn't focused on as much as the chicken. This means that ~~was~~ it's not the danger of the weapon rather the unusual, the gun was unusual so Danie focused on it however it was not because of the danger he was put in.



This is level 4, 13 marks. The AO1 is level 4, it is accurate and thorough. The AO2 is level 3, the application supports lines of argument. The AO3 is level 3, the arguments developed there have a grasp of competing arguments and conclusions throughout.

Question 11 (a)

The best answers were able to accurately identify a strength and a weakness in relation to the scenario and then justify why they were a strength and a weakness. Some answers were able to gain the identification mark but failed to go on to justify why they are a strength or a weakness. The weakness tended to be answered better than the strength. Some answers were generic with no reference to the context.

11 Alexei wanted to investigate whether being in day care influenced how much children would share their toys. He used an opportunity sampling technique to recruit children for his observation from families he knew in the local area.

Alexei wanted to observe how often children would share their toys with other people. He videoed a group of children, who did not go to day care, playing in their own homes (condition A). Alexei also visited a local day care centre and videoed a different group of children playing (condition B). He tallied how many times each child shared their toys with other people.

(a) Explain **one** strength and **one** weakness of the sampling technique used by Alexei in his observation about sharing toys.

(4)

Strength

opportunity sampling is fast, easy and economical as Alexei used people he knew therefore wouldn't require money & resources going into finding ps.

Weakness

Un generalisable using opportunity sampling of families he knew likely meant they all have a similar life styles ^(cohort) making ungeneralisable. He also only went to 1 day care center therefore his results are likely ungeneralisable and can not be used for the wider population.



This gets 1 mark. It gets nothing for the strength that it was quick and economical as he used people he knew, as it is not linked to the scenario. It gets 1 mark for the weakness for identifying that as they all came from the local area they may all have a similar lifestyle. There is no further justification of this weakness.



Candidates should ensure each strength and weakness is specifically linked to details from the scenario.

11 Alexei wanted to investigate whether being in day care influenced how much children would share their toys. He used an opportunity sampling technique to recruit children for his observation from families he knew in the local area.

Alexei wanted to observe how often children would share their toys with other people. He videoed a group of children, who did not go to day care, playing in their own homes (condition A). Alexei also visited a local day care centre and videoed a different group of children playing (condition B). He tallied how many times each child shared their toys with other people.

(a) Explain **one** strength and **one** weakness of the sampling technique used by Alexei in his observation about sharing toys.

(4)

Strength

one strength of using an opportunity sample is that it is a quick and easy way of gathering enough participants for the study investigating whether being in day care influenced how much children would share their toys.

Weakness

one weakness of using an opportunity sample in child research is that the children are all from the same area so they are likely to know other people / other children that are taking part. ~~As children are observed~~ the children ^{may} ~~will~~ be more likely to share the toys with others because they are friends with them / know them, so the results may not be valid in testing whether day care affects whether a child shares its toys.



This gets 3 marks. It gets 1 mark for identifying the strength that it is a quick and easy way of gaining a sample with a clear link. There is no justification about why/how this is a strength. It gets marks for the weakness. 1 mark for identifying that they are all from the same area so they are more likely to know each other and 1 mark for the justification that this means they may be more likely to share toys with each other because they are friends so the results may not be valid.

Question 11 (b)

Most candidates were able to accurately calculate the mean.

Question 11 (c)

Most candidates were able to accurately calculate the median.

Question 11 (d)

Most candidates were able to use the calculated value and critical value to accurately determine if the results were significant or not.

(d) Alexei carried out a Mann–Whitney U test on his data. His calculated/observed value was 4.5.

Determine whether Alexei's results were significant or not at $p \leq 0.05$ for a two-tailed (non-directional) hypothesis. = 1-

(1)

the critical value is 5, as 4.5 is
~~less than~~ less than 5 Alexei's results were
significant



ResultsPlus
Examiner Comments

This gets 1 mark for accurately identifying that the results were significant as the calculated value is less than the critical value.

Question 11 (e)

This question required candidates to identify an improvement to the study in relation to the scenario (AO2) and then justify why this would improve the study. The very best answers were able to do this. Very few answers were able to then justify why this would improve the study. Instead, they often focused on weaknesses of the original study. Some answers were generic with no reference to the context

(e) Explain **one** improvement that Alexei could make to his investigation.

(2)

alexai should check whether the children have siblings or not as this could massively interfere with the results. as children with siblings may be more likely to share and people with no siblings



ResultsPlus
Examiner Comments

This gets 1 mark: he should have checked if the children had siblings with the link to sharing toys coming later. There is no further justification about how or why this would improve the study.



ResultsPlus
Examiner Tip

When writing about an improvement candidates should focus on how or why it would be an improvement, rather than a possible weakness of the study.

Question 12

The most popular answer was the extreme male brain. The best candidates were able to give three descriptive points in relation to autism. Some answers listed how male brains were different to female brains but did not relate this to how this explains the causes of autism.

12 Describe **one** biological explanation for autism.

~~A biological explanation is the extreme male brain.
Because this explanation is considered a male brain it goes to prove that boys are the ones 5x more likely to have ASD (autism)~~
* Amygdala dysfunction can be a biological explanation for Autism (ASD). The amygdala is 6.9% larger in those diagnosed with autism. As well as this the boys brain grows faster than a womans which could be considered a cause as to why boys are 3x more likely to have ASD.



This gets 1 mark for the amygdala is bigger in those with autism. The point about the boy's brain growing quicker is not creditworthy as it is not linked to autism.

12 Describe **one** biological explanation for autism.

A biological explanation for Autism is the Amygdala dysfunction explanation. There is an Amygdala in each hemisphere of the brain, and it is believed that this is faulty with individuals living with autism. This is because the amygdala controls social processing and this is what is impaired with people living with ASD. The explanation offers support about how the amygdala is key in autistic people and their deficits.

(Total for Question 12 = 3 marks)



This gets 2 marks. It gets 1 mark for the amygdala in each hemisphere is faulty and 1 mark for the amygdala controls social functioning and this is what is impaired in those living with autism.



For describe questions look at the number of marks available.

Question 13

The best answers were able to demonstrate accurate and thorough knowledge and understanding of Bowlby (AO1) and apply that knowledge and understanding in well-developed logical chains of reasoning. Weaker answers showed limited knowledge and understanding. Some of the AO2 had little reference to relevant evidence from the context. A few answers focused on Bowlby's research rather than his theory.

13 Jekaterina works as a child psychologist in a local health centre. She observes that most of the children she works with form an emotional bond with their parents. Most of the children are happy to explore the toys in Jekaterina's practice room, but they get upset if they cannot see their parent.

Jekaterina is concerned about a five-year-old child she works with who often hits other children. The child's mother went back to full-time work when the child was three months old.

Discuss Bowlby's work on attachment with reference to Jekaterina and the children.

You must make reference to the context in your answer.

(8)

Bowlby suggested we have evolved to attach to ~~our~~ those who respond to proximity promoting behaviors such as crying. Whoever responds most sensitively to this ~~is~~ will become the main caregiver, acting as a secure base to the child. This is the monotropic bond which is the most important, strongest bond between the child and the caregiver. This will most likely be the ^{one or the} parents to the children in Jekaterina's local health centre.

Bowlby suggested that this bond must be formed within the first two years of life and requires the continuous presence of the caregiver. Failure to form this bond or disruption to it can lead to effects on the child's social, emotional and intellectual development. This is according to Bowlby, this can lead to 2 consequences of attachment: psychopathy and developmental retardation. This is proposed to be permanent and irreversible. This was called Bowlby's maternal deprivation hypothesis.

Arguably, most of the children that have an emotional bond with their parents have formed a monotropic bond with one of the parents within their first 2 years. This is because they do not appear to display attachment psychopathy or developmental retardation. It is likely this bond has

not been disrupted. They have a safe base with a parent which explains why they get upset when they cannot see their parent or they return to their safe base to seek comfort as they are sensitive to their proximity promoting behaviours.

Arguably, the 5 year old who often hits other children may be experiencing Attentional psychopathy as this is where they have difficulty experiencing guilt or ^{deep} feelings for others. Therefore, the critical period ~~had~~ must have been disrupted within the critical period. This is shown as the child's mother went back to full time work within this period as she was 3 months old. If the cause of disruption, her behaviour could be explained by Attentional psychopathy.



ResultsPlus
Examiners Comments

This is level 3, 6 marks. The AO1 is level 4: it is accurate and thorough given the time candidates have to write the essay. The AO2 is level 2: there is occasional support from the context at the end of the essay. This puts it in level 3.

Question 14

This essay required candidates to demonstrate their knowledge and understanding, AO1, apply that to the context, AO2, and offer arguments that lead to judgements (AO3). The best answers were able to show accurate knowledge and understanding of Ainsworth's theory and applied relevant evidence from the context. They were also able to offer developed evaluation points and demonstrate a grasp of competing arguments. They often used evidence effectively to support or refute the point they were making. Weaker answers demonstrated limited knowledge and understanding, or often gave evaluative comments with some development of form. They often focused on Ainsworth's research rather than her theory.

14 Mrs Smythe is in charge of a local nursery that looks after children aged from six months old to five years old. She has witnessed that a few of the children get very upset when their parent leaves them at the nursery.

Mrs Smythe has also noticed that different children have varied reactions to their mother or father when they are picked up from the nursery to go home. She has observed that some children are happy to see their parent at the end of the day, whilst other children are not bothered about seeing their parent at home time. Mrs Smythe has also noticed how the mothers or fathers interact with their children differs.

Evaluate Ainsworth's types of attachment with reference to the children at the nursery.

You must make reference to the context in your answer.

(16)

Ainsworth states that secure attachment is characterized by a child's willingness to explore and easily soothed after reuniting with the parent. Mrs Smythe has observed that some children are happy to see their parent at the end of the day and they would be children with secure attachment. Ainsworth's strange situation study supports this as it found that 70% of children with secure attachments were happy when reuniting with their parents and easily soothed.

Ainsworth's theory includes insecure avoidant attachment which is categorised by being indifferent about the parent and not caring when they're reunited. Mrs Smythe has noticed that some children aren't bothered about seeing their parents at home which

would've been children with insecure avoidant attachment. Maen and Solomon found that there's 4th type of attachment "insecure disorganised" which wasn't mentioned by Ainsworth which shows that his types of attachments may be incomplete.

3rd type of attachment is insecure ambivalent which is characterised by a child being hard to soothe when a parent ~~is~~ reunited with a parent, being anxious and scared to explore.

In Mrs Smyth's local nursery some children get very upset when a parent leaves them showing that they might be ~~showing~~ signs of insecure ambivalent attachment. Maen and ~~Neuman~~^{Worstan} found that children behave differently with different parents so they might be more easily soothed by their mother than father or vice versa. This shows that Ainsworth has opposing evidence and may be inaccurate.

Ainsworth also states that children who are securely attached have parents who are more loving and are sensitive to the needs of their child. Mrs Smyth noticed that ~~now~~ different parents interact with their children differently so those with secure

attachment would have parents who are more affectionate and hug more. Ainsworth's research has built a solid & and simple explanation for different types of attachments which has helped with understanding children better and understanding why they behave the way they do.

Children with ~~an~~ insecure avoidant attachments are more likely to have parents who are cold and detached from their child and their needs. de Wolff and van IJzendoorn has conducted meta analyses on different studies of attachment and found similar results to Ainsworth which shows that Ainsworth is valid, and reliable as them.

Children with ~~an~~ insecure resistant attachment have parents who may be hot and cold, try to be affectionate to their child but not understand them. Ainsworth's study is reliable as it followed straight forward procedure and used a lot of controls so it can be replicated in the future.

In conclusion, Ainsworth's attachments

can be good way of explaining children's behaviour in nursery.



ResultsPlus
Examiner Comments

This is level 3, 12 marks. The AO1 is level 4: there is accurate and though knowledge and understanding of Ainsworth's attachment types. The AO2 is level 3, lines of argument are supported by relevant details from the context. The AO3 is level 3: there are coherent chains of reasoning with a grasp of competing arguments and conclusions throughout. As there is more emphasis on AO3 in the marks this puts it in level 3.



ResultsPlus
Examiner Tip

Candidates would benefit from knowing the balance of marks for each assessment objective and structure their essay accordingly.

Question 15 (a)

The best answers were able to accurately identify a strength and a weakness in relation to the scenario and then justify why they were a strength and a weakness. Some answers were able to gain the identification mark but failed to go on to justify why they are a strength or a weakness. The weakness tended to be answered better than the strength. Some answers were generic with no reference to the context.

15 Alexei conducted an investigation into whether the use of high fear tactics influenced the amount of drugs that addicts took. Alexei used an opportunity sampling technique to recruit his participants for his investigation from a local alcohol addiction centre.

Half the participants saw a video on the minor short-term effects of taking drugs (condition A) and the other half of the participants saw a video showing the severe health effects of taking drugs (condition B). One week later, the participants had to record the amount of alcohol they had consumed (in units) in the past week.

(a) Explain **one** strength and **one** weakness of the sampling technique used by Alexei in his investigation on the use of high fear tactics on drug taking.

(4)

Strength

opportunity sampling is a very quick ^{and easy} method, this is a strength because it saves ~~the researcher's~~ ^{Alexei} time during the study as all participants are "local" to Alexei.

Weakness

Opportunity sampling may produce a biased sample that can't be generalised due to the participants all being from the same "local" alcohol addiction centre, this is a weakness because the results Alexei gets can't be generalised to the wider public.



This gets 2 marks. It gets 1 mark for identifying that it will not take him much time to get his local sample. Local is the link. There is no further justification. It gets another mark for identifying that the sample may be biased as they are all from the same local addiction centre. There is no further justification.



Candidates need to justify each strength and weakness to get the AO3 marks in explain questions.

15 Alexei conducted an investigation into whether the use of high fear tactics influenced the amount of drugs that addicts took. Alexei used an opportunity sampling technique to recruit his participants for his investigation from a local alcohol addiction centre.

Half the participants saw a video on the minor short-term effects of taking drugs (condition A) and the other half of the participants saw a video showing the severe health effects of taking drugs (condition B). One week later, the participants had to record the amount of alcohol they had consumed (in units) in the past week.

(a) Explain one strength and one weakness of the sampling technique used by Alexei in his investigation on the use of high fear tactics on drug taking.

(4)

Strength

one strength of opportunity sampling is that it is a quick and easy way for Alexei to recruit participants from a local alcohol addiction centre as he is selecting individuals that are available at the time. This is a strength as opportunity sampling enables Alexei to gather participants quickly and effectively.

Weakness

one weakness of Alexei using opportunity sampling is that he is only gathering participants who are present at the time at a local alcohol addiction centre. This is a weakness as the participants that he has gathered from the local addiction centre are mostly addicts who are seeking help therefore Alexei's participants are not representative of the target population.



This gets 3 marks. It gets 1 mark for the strength for identifying that it is quick and efficient, with the link coming in the next sentence. It gets 2 marks for the weakness. 1 mark for identifying that he is only gathering participants who are available at the time so it is not representative. 1 mark for the justification that they were mostly addicts who were seeking help.

Question 15 (b)

Most candidates were able to accurately calculate the mean.

Question 15 (c)

Most candidates were able to accurately calculate the median.

Question 15 (d)

Most candidates were able to use the calculated value and critical value to accurately determine if the results were significant or not.

(d) Alexei carried out a Mann–Whitney U test on his data. His calculated/observed value was 4.5.

Determine whether Alexei's results were significant or not at $p \leq 0.05$ for a two-tailed (non-directional) hypothesis.

(1)

Alexei's calculated value of 4.5 is less than the critical value of 5 at $P \leq 0.05$ for a two tailed hypothesis therefore Alexei's results are significant.



This gets 1 mark for accurately identifying the results are significant as the calculated value is less than the critical value.

Question 15 (e)

This question required candidates to identify an improvement to the study in relation to the scenario (AO2) and then justify why this would improve the study. The very best answers were to do this. Very few answers were able to then justify why this would improve the study. Instead, they often focused on weaknesses of the original study. Some answers were generic with no reference to the context

(e) Explain **one** improvement that Alexei could make to his investigation.

(2)

Alexei could use a stratified sample which matches the participants to a study based on their characteristics. For example, he could recruit participants that are addicted to heroin or nicotine or alcohol and those who aren't addicted to anything, as a control group, thus increasing the validity of the experiment.

(Total for Question 15 = 9 marks)



ResultsPlus
Examiner Comments

This gets 1 mark. 1 mark for identifying he could use a stratified sample which would increase had he could looked at categories of drugs with drugs named.



ResultsPlus
Examiner Tip

When writing about an improvement candidates should focus on how or why it would be an improvement, rather than a possible weakness of the study.

Question 16

The most popular answer was the operant conditioning followed by social learning theory. The best candidates were able to give three descriptive points in relation to heroin. Some answers listed the terms used in the theory but did not describe how this could explain heroin addiction.

16 Describe **one** learning explanation for heroin addiction.

One learning explanation for heroin addiction is reinforcement, which is where the heroin users are getting positively reinforced when they take heroin by getting feelings of euphoria. This then makes them want to continue using heroin as they want to feel the same way again, this is motivation to use heroin again.



This gets 1 mark for the point about positive reinforcement.



Candidates should look at the number of marks available for describe questions and ensure they have written enough descriptive points to access all the marks.

reinforcement — Pos/NEG / models / friends / status

16 Describe one learning explanation for heroin addiction

One learning explanation for heroin addiction would be reinforcement, specifically positive and negative. A person may start using heroin as they are positively reinforced by friends ~~to seem 'cool'~~ to seem 'cool' and become part of their friendship group. They may continue the use of heroin ~~due to~~ the euphoric side effects making them feel ecstasy, therefore positively reinforcing them to continue. However the withdrawal symptoms of the drug, headaches

(Total for Question 16 = 3 marks)

and shakiness, may negatively reinforce them to continue the use of heroin as they do not want to feel the withdrawal symptoms* again, as they cause physical and ~~emotional~~ psychological harm.

*when stopping the abuse of the drug



This scores 3 marks. It gets 1 mark for the sentence on positive reinforcement from friends seeing it as cool. It gets another mark for the sentence on positive reinforcement from the euphoria, the final mark for the sentence on negative reinforcement and the removal of withdrawal symptoms.

Question 17

The best answers were able to demonstrate accurate and thorough knowledge and understanding the issues (AO1), often focusing on tolerances, dependency and withdrawal, and applied that knowledge and understanding in well-developed logical chains of reasoning. Weaker answers showed limited knowledge and understanding. Some of the AO2 had little reference to relevant evidence from the context.

17 Jekaterina takes an illegal drug. At first, she only took the drug a couple of times a week, but she now takes the drug daily. She finds that she needs to take twice as much of the illegal drug compared to when she first took it in order to feel the same effects.

When she does not take the drug Jekaterina often gets severe headaches. She now thinks that she cannot cope with her stressful job if she does not take the illegal drug.

Discuss issues around drug taking with reference to Jekaterina's drug use.

You must make reference to the context in your answer.

(8)

One issue around drug taking is tolerance. Tolerance refers to the amount of a drug an individual needs to feel the same effects as when first used. Jekaterina's tolerance will have increased over time as she continues to use the drug, which is why she now needs to take twice as much of the illegal drug to feel the same effects as when she first took it.

Another issue around drug taking is withdrawal, which refers to the unpleasant effects an individual experiences when they have not taken the drug in a while. This is why Jekaterina develops severe headaches when she does not take the drug.

A further issue around drug taking is psychological dependency, referring to the belief that they need it to cope with everyday life and cannot live without the drug, which is why she believes she cannot cope with her stressful job if she does not take the illegal drug.

Physical dependency is also an issue around drug-taking

and refers to the increased useage of a drug as the body adapts to become physically dependent on it. This explains why Jekatrina went from using the drug a couple of times a week to on a daily basis.



ResultsPlus
Examiner Comments

This is level 3, 6 marks. The AO1 is accurate but not thorough so it is level 3. The AO2 is applied throughout but this is not well developed, so this is level 3.

Question 18

This essay required candidates to demonstrate their knowledge and understanding, AO1, apply that to the context, AO2, and offer arguments that lead to judgements (AO3). The best answers were able to show accurate knowledge and understanding of aversion therapy and applied relevant evidence from the context. They were also able to offer developed evaluation points and demonstrate a grasp of competing arguments. They often used evidence effectively to support or refute the point they were making. Weaker answers demonstrated limited knowledge and understanding, or often gave evaluative comments with some development of form.

18 Mrs Smythe works at a local doctor's surgery as a community nurse. One of her responsibilities is to reduce the number of people in the local area who are addicted to nicotine. In order to do this, she offers help and advice to those addicted to nicotine as well as treatments. She has also set up a support group for the nicotine addicts.

+ -

+ -

+ -

Mrs Smythe has recently hired a therapist who is qualified to administer aversion therapy. She has decided to offer this to a small group of people who are addicted to nicotine. To see if the aversion therapy is effective Mrs Smythe will monitor the nicotine use of the group over a six-month period.

+ -

Evaluate aversion therapy as it is used for the group of nicotine addicts.

+ - detox meth.

You must make reference to the context in your answer.

(16)

Aversion therapy is based on the principles of classical conditioning. It involves creating an association between the stimulus and an aversion response - namely nausea and vomiting. This is commonly prescribed for addiction, including nicotine addiction. Mrs Smythe will need to decide which patients will be part of the small group to trial aversion therapy with the new therapist. It is likely that extra support will be needed to help these patients at the doctor's surgery undergo the process of detoxification before treatment can begin. One strength of using aversion therapy is that it has been proven to have better abstinence rates in the short term than techniques such as nicotine replacement therapy or hypotherapy. Partially, this is because a quarter of people cannot be hypnotised. Furthermore, aversion therapy is more effective for the vast majority of addicts. This means that they are more likely to overcome their nicotine addiction. However, aversion therapy does not tackle the underlying cause of a person's addiction. It simply removes the physical symptoms. This makes it palliative not curative.

It is likely that for nicotine, the therapist will opt to have the patient smoke the cigarettes continuously until they are sick. This is similar to aversion therapy for alcohol where alcohol is used in conjunction to an emetic drug and vomiting occurs. Mrs Smythe will have to instruct the patients, after they have undergone detoxification, to smoke cigarettes continuously. Support from Mrs Smythe, the new therapist and other members of staff will be necessary during this challenging stage of the process. Another strength of aversion therapy is that it is supported by the undeniable evidence from Watson and Rayner where a fear response was created in a 9 month old baby through association. This supports how a desired response can be conditioned in a human using classical conditioning. Furthermore, this could be used by Mrs Smythe at the local doctors to treat more than just nicotine addiction as aversion therapy is so effective as it is based on classical conditioning. However, the process of detoxification that is required for aversion therapy is unethical. It puts the individuals withdrawal symptoms at raging highs and means they are under a lot of distress and perhaps even pain. This violates the ethical guideline of protection. However, it is necessary discomfort in order to fully overcome the nicotine addiction.

Aversion therapy sessions may be done weekly or every two weeks to allow the patient to recover. sessions typically

last an hour. ~~so~~ Counselling is commonly used alongside aversion therapy to monitor the patient's well-being and stress as well as their usage of the particular drug. It is likely that Mrs Smythe would need to utilise lots of staff members at the doctors to give adequate mental support to the aversion therapy patients. This would mean a large time commitment from her and her staff to carry out the actual 1 hour sessions and the counselling sessions too. Another ~~strength~~ ^{weakness} is that it may not be enough to just do counselling sessions. For maximum effectiveness, ~~something~~ a treatment like psychoanalysis may need to be used where the patient is encouraged to keep a thought-diary. If this was used in conjunction to aversion therapy, effectiveness would be dramatically increased. Furthermore, this is positive for society as it will increase the chances of long term abstinence.

Overall, aversion therapy has developed as a treatment to now have covert sensitisation as an option where the patient simply imagined being sick rather than actually having to be sick. This is good as it is more ethical as it limits the physical pain and distress the patient would have to undergo for this treatment. However, the effectiveness of this may be challenged as not everyone is capable of imagining things to the same degree so this will only work for some patients. However, aversion therapy is said to

give the patient little choices in regards to their free-will. This means that aversion therapy as a treatment has very high social control ~~and~~ as the therapists may pressure the patients into treatment because nicotine addiction, or any addiction, is not socially acceptable. This means it is unethical and has negative, added stress for the addicts.



ResultsPlus
Examiner Comments

This is level 3, 11 marks. The AO1 is level 3: it is accurate, some of it is merged with the AO2. The AO2 is level 3, lines of argument are supported with relevant evidence from the context, but this is not sustained throughout the essay. The AO3 is level 3 overall: it is developed and has a grasp of competing arguments with a conclusion.

Paper Summary

Based on their performance on this paper candidates are offered the following advice:

- Candidates would benefit from reviewing the taxonomy of terms so that they can understand what is required for different types of questions, such as what is required for explain questions.
- Candidates would benefit from practicing application questions to ensure they clearly link to details from the scenario to show understanding of the context. Giving the name is not enough to apply their answer to the context.
- When justifying or exemplifying strengths or weaknesses candidates should make sure they do not just use a term from GRAVE but explain that term in relation to their given strength or weakness.
- When writing extended open response questions candidates should demonstrate their knowledge and understanding for the AO1 marks rather than just write terms with no knowledge and understanding demonstrated of what those terms are.

Grade boundaries

Grade boundaries for this, and all other papers, can be found on the website on this link:

<https://qualifications.pearson.com/en/support/support-topics/results-certification/grade-boundaries.html>

