



**General Certificate of Education**

**Psychology 2181**

*Specification A*

**Unit 4 (PSYA4)    Psychopathology,  
Psychology in Action  
and Research Methods**

**Mark Scheme**

*2010 examination - January series*

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## PSYA4: Psychopathology, Psychology in Action and Research Methods

### SECTION A: PSYCHOPATHOLOGY

1

Total for this question: 25 marks

'Therapies can be time-consuming and, in some cases, uncomfortable for the client. It is, therefore, very important to offer the most appropriate and effective type of treatment.'

Outline and evaluate **two or more** therapies used in the treatment of schizophrenia.

*(9 marks + 16 marks)*

**AO1 = 9 marks** Outline of **two or more** appropriate therapies.

The question does not specify biological or psychological therapies so either or both are acceptable. However, there is a plurality requirement so partial performance criteria will apply if only one therapy is offered. The most likely therapy to be described is drug therapy, but various others are acceptable. Examiners should be mindful of a depth/breadth trade-off here.

The important point is that therapies must be described in the context of schizophrenia. Descriptions of therapies which are not appropriate for schizophrenia such as systematic desensitisation are not creditworthy. However, discussion of unsuitable treatments could be made relevant as commentary.

There are some treatments which were used for schizophrenia in the past but are no longer considered suitable in most cases, eg ECT. Descriptions of such treatments are creditworthy but top band answers should make this clear as part of the description.

Answers which offer two different forms of drug therapy are acceptable if they have different modes of action.

Description of therapies where there is no clear relevance to the treatment of schizophrenia cannot gain more than basic marks.

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**AO1 Mark bands**

<b>9-8 marks Sound</b> Knowledge and understanding are accurate and well detailed. A good range of relevant material has been selected. There is substantial evidence of breadth/depth. Organisation and structure of the answer are coherent.
<b>7-5 marks Reasonable</b> Knowledge and understanding are generally accurate and reasonably detailed. A range of relevant material has been selected. There is evidence of breadth and/or depth. Organisation and structure of the answer are reasonably coherent.
<b>4-3 marks Basic</b> Knowledge and understanding are basic/relatively superficial. A restricted range of material has been presented. Organisation and structure of the answer are basic.
<b>2-1 marks Rudimentary</b> Knowledge and understanding are rudimentary and may be muddled and/or inaccurate. The material presented may be very brief or largely irrelevant. Lacks organisation and structure.
<b>0 marks</b> No creditworthy material.

**AO2/3 = 16 marks** Discussion of therapies and methodological evaluation of evidence.

Candidates are likely to evaluate therapies in terms of the issues raised in the quotation, but the wording allows discussion of a wider range. Evaluation must be relevant to therapies suited to schizophrenia. Material on other therapies will only be creditworthy if it is explicitly used to offer relevant commentary.

Issues of appropriateness could include:

- the nature of the disorder means that some therapies are more appropriate than others
- factors affecting the choice of treatment, eg financial constraints, availability of appropriate therapist, accuracy of original diagnosis
- ethical issues, eg possible harmful side-effects, issues of informed consent, dehumanising effects of some treatments.

Issues of effectiveness could include:

- problems of measuring effectiveness, eg when to measure, how to measure, what criteria to choose.
- Wide range of symptoms – treatments might be effective for some but not others
- Placebo effects.

There is an expectation that at least two therapies will be offered for AO1 credit. However, some evaluation points are likely to cover more than one type of therapy and so partial performance criteria will not apply to AO2/3.

Credit could be for evaluation of research in terms of methodological issues, reliability, validity and the extent to which generalisations can be made, eg treatment outcome research often has problems of operational definition and issues concerning the allocation of participants to treatment groups. Other material relevant to How Science Works might include analysis and interpretation of data, accurate communication of ideas; applications and implications of scientific findings in relation to the chosen therapy.

**AO2/3 Mark bands****16-13 marks Effective**

Evaluation/commentary demonstrates sound analysis and understanding and interpretation. The answer is well focused and shows coherent elaboration and/or a clear line of argument. Ideas are well structured and expressed clearly and fluently. Consistently effective use of psychological terminology. Appropriate use of grammar, punctuation and spelling.

**12-9 marks Reasonable**

Evaluation/commentary demonstrates reasonable analysis and understanding and interpretation. The answer is generally focused and shows reasonable elaboration and/or a line of argument is evident. Most ideas appropriately structured and expressed clearly. Appropriate use of psychological terminology. Minor errors of grammar, punctuation and spelling only occasionally compromise meaning.  
*Partial Performance - Effective.*

**8-5 marks Basic**

Evaluation/commentary demonstrates basic, superficial understanding. The answer is sometimes focused and shows some evidence of elaboration. Expression of ideas lacks clarity. Limited use of psychological terminology. Errors of grammar, punctuation and spelling are intrusive.  
*Partial Performance – Reasonable*

**4-1 marks Rudimentary**

Evaluation/commentary is rudimentary, demonstrating little understanding. The answer is weak, muddled and incomplete. Material is not used effectively and may be mainly irrelevant. Deficiency in expression of ideas results in confusion and ambiguity. The answer lacks structure, often merely a series of unconnected assertions. Errors of grammar, punctuation and spelling are frequent and intrusive.  
*Partial Performance – Basic*

**0 marks**

No creditworthy material is presented.

**2****Total for this question: 25 marks****(a)** Outline clinical characteristics of depression.**(5 marks)****AO1 = 5 marks** Outline of some of the defining characteristics of depression. The outline might include:

- physiological, behavioural, emotional and cognitive signs/symptoms
- incidence and prevalence
- course and prognosis.
- criteria for diagnosis.

Examiners should be mindful that this part of the question is only worth 5 marks and so candidates are not expected to cover all these points to access the top marks. However, they do have to refer to diagnostic criteria, specifically some reference to the core symptom of low mood/sadness. It is acceptable to refer to types of depression such as endogenous or reactive but these distinctions on their own are not creditworthy – they must be accompanied by a description of the characteristics of each type.

**AO1 Mark bands**

<b>5 – 4 marks</b>	Outline is reasonably thorough, accurate and coherent.
<b>3 – 2 marks</b>	Outline is limited, generally accurate and reasonably coherent.
<b>1 mark</b>	Outline is weak and muddled or very limited.
<b>0 marks</b>	No creditworthy material.

**(b)** Explain issues associated with the classification **and/or** diagnosis of depression.**(10 marks)****AO2/3 = 10 marks** Identification and explanation of two or more issues.

Identification of the issues is the product of analysis and so can attract credit but more detailed explanation is required for top marks. There is a requirement for an explanation of at least two issues. Examiners should be mindful of a depth/breadth trade-off here. Likely issues could include:

- classification systems are based on the medical model – leads to pathologising of psychological disorders
- different classification systems have different criteria
- validity of diagnostic categories
- reliability of diagnosis across clinicians
- biases in diagnosis (e.g. gender, cultural)
- overlap with other disorders
- labelling and stigmatising

The question requires candidates to consider issues in the context of depression. So answers that make no reference to depression could not be regarded as well-focused.

**AO2/3 Mark Bands****10-9 marks Effective**

Explanation demonstrates sound analysis and understanding.  
The answer is well focused and shows coherent elaboration and/or a clear line of argument. Ideas are well structured and expressed clearly and fluently. Consistently effective use of psychological terminology. Appropriate use of grammar, punctuation and spelling.

**8-6 marks Reasonable**

Explanation demonstrates reasonable analysis and understanding.  
The answer is generally focused and shows reasonable elaboration and/or a line of argument is evident.  
Most ideas appropriately structured and expressed clearly. Appropriate use of psychological terminology. Minor errors of grammar, punctuation and spelling only occasionally compromise meaning.

**5-3 marks Basic**

Explanation demonstrates basic, superficial understanding.  
The answer is sometimes focused and shows some evidence of elaboration.  
Expression of ideas lacks clarity. Limited use of psychological terminology. Errors of grammar, punctuation and spelling are intrusive.

**2-1 marks Rudimentary**

Explanation is rudimentary demonstrating little understanding.  
The answer is weak, muddled and incomplete. Material is not used effectively and may be mainly irrelevant.  
Deficiency in expression of ideas results in confusion and ambiguity. The answer lacks structure, often merely a series of unconnected assertions. Errors of grammar, punctuation and spelling are frequent and intrusive.

**0 marks**

No creditworthy material is presented.

(c) Outline and evaluate **one** biological therapy used in the treatment of depression.

*(4 marks + 6 marks)*

**AO1 = 4 marks** Description of the key features of one biological therapy.

Candidates are likely to describe drug therapy or ECT as these are the most appropriate treatments for depression. Candidates who choose to describe psychosurgery must make the material relevant and accurate in the context of treatment of depression. It is also possible to attract full marks with an outline of a biological treatment used for a particular type of depression, eg light therapy for SAD. It is likely that the outline of drug therapies will be described in terms of their mode of action.

**AO1 Mark bands**

<b>4 marks</b>	Outline is reasonably thorough, accurate and coherent.
<b>3 – 2 marks</b>	Outline is limited, generally accurate and reasonably coherent.
<b>1 mark</b>	Outline is weak and muddled or very limited.
<b>0 marks</b>	No creditworthy material.

**AO2/3 = 6 marks** Evaluation of one biological therapy used in the treatment of depression.

Analysis and evaluation of the chosen therapy in terms of appropriateness and effectiveness is creditworthy. Candidates can gain credit for appropriate use of research evidence and methodological evaluation of research evidence; other material relevant to How Science Works might include analysis and interpretation of data; applications and implications of scientific findings in relation to the chosen therapy.

Issues of appropriateness could include:

- compliance.
- factors affecting the choice of treatment, eg financial constraints, availability of appropriate therapist, accuracy of original diagnosis
- ethical issues, eg possible harmful side-effects, issues of informed consent, dehumanising effects of some treatments.

Issues of effectiveness could include:

- problems of measuring effectiveness, eg when to measure, how to measure, what criteria to choose.
- Wide range of symptoms – treatments might be effective for some but not others
- Placebo effects.

**AO2/3 Mark Bands (6 marks)**

**6 marks Effective**

Evaluation/commentary demonstrates sound analysis and understanding and interpretation. Application of knowledge is effective and shows coherent elaboration. Ideas are well structured and expressed clearly and fluently. Consistently effective use of psychological terminology. Appropriate use of grammar, punctuation and spelling.

**5-4 marks Reasonable**

Evaluation/commentary demonstrates reasonable analysis and understanding and interpretation. Application of knowledge is reasonably effective and shows some elaboration. Most ideas appropriately structured and expressed clearly. Appropriate use of psychological terminology. Minor errors of grammar, punctuation and spelling only occasionally compromise meaning.

**3-2 marks Basic**

Evaluation/commentary demonstrate basic, superficial understanding. Application of knowledge is basic. Expression of ideas lacks clarity. Limited use of psychological terminology. Errors of grammar, punctuation and spelling are intrusive.

**1 mark Rudimentary**

Evaluation/commentary is rudimentary, demonstrating little understanding. Application of knowledge is weak, muddled and may be mainly irrelevant. Deficiency in expression of ideas results in confusion and ambiguity. The answer lacks structure, often merely a series of unconnected assertions. Errors of grammar, punctuation and spelling are frequent and intrusive.

**0 marks** No creditworthy material is presented.

3

**Total for this question: 25 marks**

- |  |
|--|
| (a) Outline <b>one</b> psychological explanation and <b>one</b> biological explanation for <b>either</b> phobic disorders <b>or</b> obsessive compulsive disorder. <span style="float: right;"><i>(9 marks)</i></span> |
|--|

**AO1 = 9 marks**

Phobic disorder is an umbrella term covering specific phobias, social phobias and agoraphobia and it is legitimate for candidates to offer explanations for just one or all three. However, where candidates offer explanations for both phobic disorders and obsessive-compulsive disorder, examiners should consider both and credit the material which attracts the highest mark.

There should be a reasonable but not necessarily equal balance between the two explanations

In part (a) candidates are required to outline key features of one biological and one psychological explanation of their chosen anxiety disorder. Candidates can take a broad approach here and describe, for example 'the biological explanation' or 'the behavioural explanation' or take a narrower focus, eg 'the genetic explanation' or the 'explanation based on classical/operant conditioning'. Examiners need to be mindful of a breadth/depth trade-off here. The learned preparedness model could count as either a biological or a behavioural explanation depending on how candidates present it.

Candidates who offer just one psychological explanation or just one biological explanation are meeting the criteria for partial performance.

**AO1 Mark Bands**

<p><b>9-8 marks Sound</b>          Knowledge and understanding are accurate and well detailed.          A good range of relevant material has been selected. There is substantial evidence of breadth/depth. Organisation and structure of the answer are coherent.</p>
<p><b>7-5 marks Reasonable</b>          Knowledge and understanding are generally accurate and reasonably detailed.          A range of relevant material has been selected. There is evidence of breadth and/or depth. Organisation and structure of the answer are reasonably coherent.  <i>Partial Performance – Sound</i></p>
<p><b>4-3 marks Basic</b>          Knowledge and understanding are basic/relatively superficial.          A restricted range of material has been presented.          Organisation and structure of the answer are basic.  <i>Partial Performance – Reasonable</i></p>
<p><b>2-1 marks Rudimentary</b>          Knowledge and understanding are rudimentary and may be muddled and/or inaccurate.          The material presented may be very brief or largely irrelevant.          Lacks organisation and structure.  <i>Partial Performance – Basic</i></p>
<p><b>0 marks</b>          No creditworthy material.</p>

(b) Evaluate explanations for **either** phobic disorders **or** obsessive compulsive disorder.  
(16 marks)

**AO2/3 = 16 marks** Evaluation of explanations for phobic/obsessive compulsive disorders.

Candidates are likely to evaluate the explanations in terms of their effectiveness and the extent to which they are supported by evidence. Other explanations can be introduced but only if they are used as sustained commentary or used in comparison.

Methodological evaluation of relevant research evidence would be creditworthy as would relevant How Science Works material such as analysis and interpretation of findings, issues of reliability/validity and sampling; applications and implications of research.

Given that much of the commentary is generic, there is no partial performance.

### AO2/3 Mark Bands

#### 16-13 marks Effective

Evaluation/commentary demonstrates sound analysis and understanding and interpretation. The answer is well focused and shows coherent elaboration and/or a clear line of argument. Ideas are well structured and expressed clearly and fluently. Consistently effective use of psychological terminology. Appropriate use of grammar, punctuation and spelling.

#### 12-9 marks Reasonable

Evaluation/commentary demonstrates reasonable analysis and understanding and interpretation. The answer is generally focused and shows reasonable elaboration and/or a line of argument is evident. Most ideas appropriately structured and expressed clearly. Appropriate use of psychological terminology. Minor errors of grammar, punctuation and spelling only occasionally compromise meaning.

#### 8-5 marks Basic

Evaluation/commentary demonstrates basic, superficial understanding. The answer is sometimes focused and shows some evidence of elaboration. Expression of ideas lacks clarity. Limited use of psychological terminology. Errors of grammar, punctuation and spelling are intrusive.

#### 4-1 marks Rudimentary

Evaluation/commentary is rudimentary, demonstrating little understanding. The answer is weak, muddled and incomplete. Material is not used effectively and may be mainly irrelevant. Deficiency in expression of ideas results in confusion and ambiguity. The answer lacks structure, often merely a series of unconnected assertions. Errors of grammar, punctuation and spelling are frequent and intrusive.

#### 0 marks

No creditworthy material is presented.

**SECTION B: PSYCHOLOGY IN ACTION****4****Total for this question: 25 marks**

- (a) 'Content analysis has shown that many video games have violent themes. Many of these games are aimed at adolescents. There is a growing concern that such games encourage violent behaviour in the young people who play them.'
- (i) Explain some of the difficulties of conducting research into the effects of playing video games. *(5 marks)*

**AO2/3 = 5 marks** Explanation of some of the methodological/ethical difficulties associated with this kind of research.

This might include

- problems of measuring subsequent behaviour
- sampling
- possible confounding variables, eg previous experience of playing games, other social, cultural and personality factors
- ethical considerations.

Candidates who simply list difficulties cannot gain marks above basic.

**AO2/3 Mark Bands (5 marks)****5 marks Effective**

Explanation demonstrates sound analysis and understanding. The answer is well focused and shows coherent elaboration. Ideas are well structured and expressed clearly and fluently. Consistently effective use of psychological terminology. Appropriate use of grammar, punctuation and spelling.

**4-3 marks Reasonable**

Explanation demonstrates reasonable analysis and understanding. The answer is generally focused and shows reasonable elaboration. Most ideas appropriately structured and expressed clearly. Appropriate use of psychological terminology. Minor errors of grammar, punctuation and spelling only occasionally compromise meaning.

**2 marks Basic**

Explanation demonstrates basic, superficial understanding. The answer is sometimes focused and shows some evidence of elaboration. Expression of ideas lacks clarity. Limited use of psychological terminology. Errors of grammar, punctuation and spelling are intrusive.

**1 mark Rudimentary**

Explanation is rudimentary demonstrating little understanding. The answer is weak, muddled and may be mainly irrelevant. Deficiency in expression of ideas results in confusion and ambiguity. The answer lacks structure, often merely a series of unconnected assertions. Errors of grammar, punctuation and spelling are frequent and intrusive.

**0 marks**

No creditworthy material is presented.

(ii)	Discuss what psychological research has told us about some of the effects of video games on young people.	<i>(5 marks + 5 marks)</i>
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**AO1 = 5 marks** Description of relevant research findings/the effects of video games on young people.

These might include:

- physiological arousal
- decreasing/increasing helping behaviours
- increasing aggressive behaviours, feelings and cognitions
- desensitisation to violence
- social/interpersonal effects.

Candidates may achieve this through relevant research findings.

**AO1 Mark bands (5 marks)**

<b>5 – 4 marks</b>	Outline is reasonably thorough, accurate and coherent.
<b>3 – 2 marks</b>	Outline is limited, generally accurate and reasonably coherent.
<b>1 mark</b>	Outline is weak and muddled or very limited.
<b>0 marks</b>	No creditworthy material.

**AO2/3 = 5 marks** Analysis and commentary on research into the effects of video/computer games on young people.

Candidates may focus on the distinction between short and long-term effects. Methodological evaluation could include discussion of correlational studies, problems of manipulating the IV and controlling extraneous variables. Quality of research. Implications for policy and practice.

Any appropriate material is creditworthy.

Possible issues/debates/approaches could include gender and culture issues; ethical/methodological issues.

**AO2 Mark Bands (5 marks)**

**5 marks Effective**

Commentary demonstrates sound analysis and understanding and interpretation. The answer is well focused and shows coherent elaboration. Issues/debates/approaches are used effectively. Ideas are well structured and expressed clearly and fluently. Consistently effective use of psychological terminology. Appropriate use of grammar, punctuation and spelling.

**4-3 marks Reasonable**

Commentary demonstrates reasonable analysis and understanding and interpretation. The answer is generally focused and shows reasonable elaboration. Issues/debates/approaches are used in a reasonably effective manner. Most ideas appropriately structured and expressed clearly. Appropriate use of psychological terminology. Minor errors of grammar, punctuation and spelling only occasionally compromise meaning.

**2 marks Basic**

Commentary demonstrates basic, superficial understanding. The answer is sometimes focused and shows some evidence of elaboration. Superficial reference may be made to issues/debates/approaches. Expression of ideas lacks clarity. Limited use of psychological terminology. Errors of grammar, punctuation and spelling are intrusive.

**1 mark Rudimentary**

Commentary is rudimentary demonstrating little understanding. The answer is weak, muddled and may be mainly irrelevant. If reference is made to issues/debates/approaches, it is muddled and inaccurate. Deficiency in expression of ideas results in confusion and ambiguity. The answer lacks structure, often merely a series of unconnected assertions. Errors of grammar, punctuation and spelling are frequent and intrusive.

**0 marks**

No creditworthy material is presented.

(b) Discuss how social psychology explains the attraction of celebrity. (4 marks + 6 marks)

**AO1 = 4 marks** Description of some psychological factors/explanations of the attraction of celebrity.

These might include:

- parasocial interaction
- absorption-addiction
- religiosity
- social comparison
- prestige
- attachment theory.

**AO1 Mark Bands (4 marks)**

<b>4 marks</b>	Outline is reasonably thorough, accurate and coherent.
<b>3 – 2 marks</b>	Outline is limited, generally accurate and reasonably coherent.
<b>1 mark</b>	Outline is weak and muddled or very limited.
<b>0 marks</b>	No creditworthy material.

**AO2/3 =6 marks** Evaluation of/commentary on psychological explanations of celebrity.

These might include:

- an analysis/evaluation of research studies which underpin the various explanations
- discussion of some of the problems associated with measuring attraction, eg use of Likert Scales
- discussion of the different levels of parasocial relationship which might require different explanations.
- Contrast and comparison of other explanations eg evolutionary.

**AO2/3 Mark bands (6 marks)**

**6 marks Effective**

Evaluation/commentary demonstrates sound analysis and understanding and interpretation. Application of knowledge is effective and shows coherent elaboration. Issues/debates/approaches are used effectively. Ideas are well structured and expressed clearly and fluently. Consistently effective use of psychological terminology. Appropriate use of grammar, punctuation and spelling.

**5-4 marks Reasonable**

Evaluation/commentary demonstrates reasonable analysis and understanding and interpretation. Application of knowledge is reasonably effective and shows some elaboration. Issues/debates/approaches are used in a reasonably effective manner. Most ideas appropriately structured and expressed clearly. Appropriate use of psychological terminology. Minor errors of grammar, punctuation and spelling only occasionally compromise meaning.

**3-2 marks Basic**

Evaluation/commentary demonstrates basic, superficial understanding. Application of knowledge is basic. Superficial reference may be made to issues/debates/approaches. Expression of ideas lacks clarity. Limited use of psychological terminology. Errors of grammar, punctuation and spelling are intrusive.

**1 mark Rudimentary**

Evaluation/commentary is rudimentary demonstrating little understanding. Application of knowledge is weak, muddled and may be mainly irrelevant. If reference is made to issues/debates/approaches, it is muddled and inaccurate. Deficiency in expression of ideas results in confusion and ambiguity. The answer lacks structure, often merely a series of unconnected assertions. Errors of grammar, punctuation and spelling are frequent and intrusive.

**0 marks**

No creditworthy material is presented.

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**5****Total for this question: 25 marks**

(a) A recent large survey on behalf of the Gambling Commission provided a number of interesting findings about gambling behaviour in Great Britain. For example, 57% of the population had gambled on the National Lottery Draw in 2007, although the rate of problem gambling in the adult population was only about 0.6%.

(i) Explain some of the difficulties of gathering data about problem gambling. (5 marks)

**AO2/3 = 5 marks** Knowledge of some of the likely methods of data gathering.

Methods might include eg surveys, questionnaires and explanation of strengths and limitations of such methods in the context of gambling research.

Explanations of difficulties could include:

- Social desirability – people not wishing to admit to the full extent of their gambling or to be seen as an addict.
- Unreliability of data – problem gamblers are often in denial and might not be realistic in their responses.
- Compliance – problem gamblers might be unwilling to complete questionnaires or return them.
- Sampling – researchers might find it difficult to find ‘problem gamblers’ who fit their definition.

Any appropriate answer is creditworthy. Answers which identify problems of obtaining data with no reference to gambling are basic and can earn a maximum of 2 marks.

**AO2/3 Mark Bands****5 marks Effective**

Explanation/commentary demonstrates sound analysis and understanding and interpretation. The answer is well focused and shows coherent elaboration. Ideas are well structured and expressed clearly and fluently. Consistently effective use of psychological terminology. Appropriate use of grammar, punctuation and spelling.

**4-3 marks Reasonable**

Explanation/commentary demonstrates reasonable analysis and understanding and interpretation. The answer is generally focused and shows reasonable elaboration. Most ideas appropriately structured and expressed clearly. Appropriate use of psychological terminology. Minor errors of grammar, punctuation and spelling only occasionally compromise meaning.

**2 marks Basic**

Explanation/commentary demonstrates basic, superficial understanding. The answer is sometimes focused and shows some evidence of elaboration. Expression of ideas lacks clarity. Limited use of psychological terminology. Errors of grammar, punctuation and spelling are intrusive.

**1 mark Rudimentary**

Explanation/commentary is rudimentary demonstrating little understanding. The answer is weak, muddled and may be mainly irrelevant. Deficiency in expression of ideas results in confusion and ambiguity. The answer lacks structure, often merely a series of unconnected assertions. Errors of grammar, punctuation and spelling are frequent and intrusive.

**0 marks**

No creditworthy material is presented.

(ii) Outline and evaluate <b>one</b> explanation of gambling addiction. (4 marks + 6 marks)
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**AO1 = 4 marks** Outline of one explanation of gambling addiction.

The outline might address explanations of initiation, maintenance or relapse.

There are various explanations of gambling addiction which could include:

- Irrational cognitive biases.
- Personal vulnerability factors (eg sensation-seeking personality).
- Classical and operant conditioning.
- Situational factors (eg accessibility to gambling activities).
- Structural characteristics (eg features of slot machines).
- Biological predisposition.

'One' explanation can be interpreted broadly eg classical and operant conditioning or narrowly eg one particular underlying personality factor.

The outline might address explanations for initiation or maintenance or relapse.

Any appropriate explanation is creditworthy.

**AO1 Mark Bands (4 marks)**

<b>4marks</b>	Outline is reasonably thorough, accurate and coherent.
<b>3 – 2 marks</b>	Outline is limited, generally accurate and reasonably coherent.
<b>1 mark</b>	Outline is weak and muddled or very limited.
<b>0 marks</b>	No creditworthy material.

**AO2/3 = 6 marks** Evaluation of the effectiveness of the explanation.

Evaluation obviously depends on the chosen explanation. Candidates might refer to the effectiveness of the explanation. They might also refer to research studies which support the various explanations. They could also gain AO2/3 credit by discussing different types of gambling eg lottery, slot machines, betting on the horses etc – some explanations are better suited to one type of gambling rather than another. Candidates can also consider the multi-faceted nature of gambling and whether it is possible to explain it in terms of a single theoretical approach. Contrast/comparison with other explanations is also creditworthy as it is a consideration of the implications for policy and practice.

Possible issues/debates/approaches include nature/nurture; reductionism; reliability/validity; ethical issues; contrasting approaches.

**AO2/3 Mark Bands (6 marks)****6 marks Effective**

Evaluation/commentary demonstrates sound analysis and understanding and interpretation. Application of knowledge is effective and shows coherent elaboration. Issues/debates/approaches are used effectively. Ideas are well structured and expressed clearly and fluently. Consistently effective use of psychological terminology. Appropriate use of grammar, punctuation and spelling.

**5-4 marks Reasonable**

Evaluation/commentary demonstrates reasonable analysis and understanding and interpretation. Application of knowledge is reasonably effective and shows some elaboration. Issues/debates/approaches are used in a reasonably effective manner. Most ideas appropriately structured and expressed clearly. Appropriate use of psychological terminology. Minor errors of grammar, punctuation and spelling only occasionally compromise meaning.

**3-2 marks Basic**

Evaluation/commentary demonstrate basic, superficial understanding. Application of knowledge is basic. Superficial references may be made to issues/debates/approaches. Expression of ideas lacks clarity. Limited use of psychological terminology. Errors of grammar, punctuation and spelling are intrusive.

**1 mark Rudimentary**

Evaluation/commentary is rudimentary demonstrating little understanding. Application of knowledge is weak, muddled and may be mainly irrelevant. If reference is made to issues/debates/approaches, it is muddled and inaccurate. Deficiency in expression of ideas results in confusion and ambiguity. The answer lacks structure, often merely a series of unconnected assertions. Errors of grammar, punctuation and spelling are frequent and intrusive.

**0 marks**

No creditworthy material is presented.

- (b) 'The relapse rate for smokers in the first three months after trying to give up is estimated at 70%.'

Discuss reasons why relapse occurs in people with addictive behaviour. (5 marks +5 marks)

**AO1 = 5 marks** Description of some reasons of relapse (at least two).

This question is framed in the context of smoking but candidates can access the full range of marks by discussing relapse in any type of addictive behaviour. It is acceptable to credit reasons extrapolated from explanations of relapse or vulnerability factors, influence of peers, parents attribution style etc. Reasons for relapse are related to the underlying explanation of addiction. For example, according to the biological model smokers become physically dependent on nicotine. Stopping the behaviour causes withdrawal symptoms which can be very severe. To avoid these unpleasant consequences, the addict often relapses.

The learning model predicts that addicts will relapse if they are presented with cues associated with their habit (eg seeing an ashtray, seeing scratch cards in a shop). The cognitive model explains relapse in terms of coping, expectancy and self-efficacy.

Any appropriate reason is creditworthy.

**AO1 Mark Bands (5marks)**

<b>5 – 4 marks</b>	Outline is reasonably thorough, accurate and coherent.
<b>3 – 2 marks</b>	Outline is limited, generally accurate and reasonably coherent.
<b>1 mark</b>	Outline is weak and muddled or very limited.
<b>0 marks</b>	No creditworthy material.

**AO2/3 = 5 marks** Evaluation of/commentary on explanations for relapse.

Evaluation/commentary will depend on the reasons chosen.

Candidates can gain credit by referring to research studies which support or refute the relapse explanations. They might refer to individual differences and that people relapse for different reasons or for a combination of reasons. A consideration of practical implications is also creditworthy eg methods of preventing relapse by using, for example, agonist substitution, CBT etc.

Possible issues/debates/approaches include nature/nurture; reductionism; free will/determinism; contrasting approaches.

**AO2/3 Mark Bands (5 marks)**

**5 marks Effective**

Discussion demonstrates sound analysis and understanding and interpretation. The answer is well focused and shows coherent elaboration. Issues/debates/approaches are used effectively. Ideas are well structured and expressed clearly and fluently. Consistently effective use of psychological terminology. Appropriate use of grammar, punctuation and spelling.

**4-3 marks Reasonable**

Discussion demonstrates reasonable analysis and understanding and interpretation. The answer is generally focused and shows reasonable elaboration. Issues/debates/approaches are used in a reasonably effective manner. Most ideas appropriately structured and expressed clearly. Appropriate use of psychological terminology. Minor errors of grammar, punctuation and spelling only occasionally compromise meaning.

**2 marks Basic**

Discussion demonstrates basic, superficial understanding. The answer is sometimes focused and shows some evidence of elaboration. Superficial reference is made to issues/debates/approaches. Expression of ideas lacks clarity. Limited use of psychological terminology. Errors of grammar, punctuation and spelling are intrusive.

**1 mark Rudimentary**

Discussion is rudimentary demonstrating little understanding. The answer is weak, muddled and may be mainly irrelevant. If reference is made to issues/debates/approaches, it is muddled and inaccurate. Deficiency in expression of ideas results in confusion and ambiguity. The answer lacks structure, often merely a series of unconnected assertions. Errors of grammar, punctuation and spelling are frequent and intrusive.

**0 marks**

No creditworthy material is presented.

**6****Total for this question: 25 marks**

- (a) A researcher wanted to test the ability of a known 'psychic healer'. Ten volunteers suffering from chronic back pain were selected through newspaper adverts. The volunteers were all given a questionnaire which rated their belief in psychic healing and another questionnaire which rated their levels of pain. They were then randomly assigned to either a treatment group or a control group.

Afterwards, all the volunteers filled in the pain questionnaire again. The researcher found that there was no significant effect on pain relief as a result of psychic healing.

Answer the following questions, using your knowledge about research into psychic healing.

- (i) The researcher wanted to know whether there was a correlation between belief in psychic healing and improvement in pain ratings. What statistical test could the researcher use? Justify your answer. *(2 marks)*

**AO2/3 = 2 marks**

The appropriate statistical test is the Spearman's Rho. One mark for identifying the appropriate test. One further mark for an appropriate justification. It is appropriate because the data are ordinal and the test measures relationship between 2 variables rather than differences.

- (ii) Outline **one** ethical issue in this study and suggest how the researcher could have dealt with it. *(3 marks)*

**AO2/3 = 3 marks**

Ethical issues could include informed consent, confidentiality, deceit (if they were not informed which group they were in). The method of dealing with the issue will depend on which issue has been chosen.

- (iii) 'It is interesting why, even today in the modern age of science and technology, some people still believe in psychic healing.'

Discuss factors underlying belief in psychic healing. *(5 marks + 5 marks)*

**AO1 = 5 marks, AO2/3 = 5 marks**

**AO1** An outline of factors underlying belief in psychic healing.

These might include factors such as personality attributes, intelligence, critical thinking, probability misjudgement and reasoning, fantasy proneness and the tendency to find correspondences in distantly related material.

**AO1 Mark Bands (5marks)**

<b>5 – 4 marks</b>	Outline is reasonably thorough, accurate and coherent.
<b>3 – 2 marks</b>	Outline is limited, generally accurate and reasonably coherent.
<b>1 mark</b>	Outline is weak and muddled or very limited.
<b>0 marks</b>	No creditworthy material.

**AO2/3** Evaluation of/commentary on factors underlying belief in psychic healing.

Candidates should use research evidence to show evidence for the importance of various factors or to present contradictory evidence. There is no requirement to address the quotation but candidates could gain marks by considering issues such as the incompatibility of paranormal beliefs with scientific method or cultural differences in attitudes to paranormal phenomena. They can also gain credit by assessing the quality of the research.

**AO2/3 Mark Bands (5 marks)****5 marks Effective**

Discussion demonstrates sound analysis and understanding and interpretation. The answer is well focused and shows coherent elaboration. Issues/debates/approaches are used effectively. Ideas are well structured and expressed clearly and fluently. Consistently effective use of psychological terminology. Appropriate use of grammar, punctuation and spelling.

**4-3 marks Reasonable**

Discussion demonstrates reasonable analysis and understanding and interpretation. The answer is generally focused and shows reasonable elaboration. Issues/debates/approaches are used in a reasonably effective manner. Most ideas appropriately structured and expressed clearly. Appropriate use of psychological terminology. Minor errors of grammar, punctuation and spelling only occasionally compromise meaning.

**2 marks Basic**

Discussion demonstrates basic, superficial understanding. The answer is sometimes focused and shows some evidence of elaboration. Superficial reference is made to issues/debates/approaches. Expression of ideas lacks clarity. Limited use of psychological terminology. Errors of grammar, punctuation and spelling are intrusive.

**1 mark Rudimentary**

Discussion is rudimentary demonstrating little understanding. The answer is weak, muddled and may be mainly irrelevant. If reference is made to issues/debates/approaches, it is muddled and inaccurate. Deficiency in expression of ideas results in confusion and ambiguity. The answer lacks structure, often merely a series of unconnected assertions. Errors of grammar, punctuation and spelling are frequent and intrusive.

**0 marks**

No creditworthy material is presented.

(b) Outline and evaluate psychological research into belief in out-of-body experiences <b>and/or</b> near-death experiences. <span style="float: right;"><i>(4 marks + 6 marks)</i></span>
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**AO1 = 4 marks, AO2/3 = 6 marks**

Candidates can consider either OBEs or NDEs or both. Examiners should be aware of a breadth/depth trade-off. Research refers to theories and/or studies.

**AO1** Outline of research into out-of-body and/or near death experiences.

There are paranormal, psychological and neurological explanations. Candidates can gain AO1 credit by describing any of these or by describing studies. For example, Blackmore has looked at the relationship between dream control skills and OBE experiences. Ehrsson has used virtual reality technology to induce OBEs and Blanke has artificially produced OBEs with direct cortical stimulation.

**AO1 – Mark Bands (4 marks)**

<b>4 marks</b>	Outline is reasonably thorough, accurate and coherent.
<b>3 – 2 marks</b>	Outline is limited, generally accurate and reasonably coherent.
<b>1 mark</b>	Outline is weak and muddled or very limited.
<b>0 marks</b>	No creditworthy material.

**AO2/3** Evaluation/analysis of research into out-of-body and/or near death experiences.

Evaluation/analysis depends largely on the material chosen for AO1 credit.

Candidates can gain credit by evaluating strengths and weaknesses of the models are well supported with empirical data whereas the paranormal explanations are based mainly on anecdote. Candidates can also gain credit for considering issues such as non-falsifiability and the nature of scientific investigation eg generating testable hypotheses. Consideration of the strengths/weaknesses of methods (including case studies) is creditworthy. Candidates might also discuss the fact that some models account for individual components of NDEs but not others.

Possible issues/debates/approaches include cultural issues; reliability/validity; reductionism.

**AO2/3 Mark Bands (6 marks)****6 marks Effective**

Evaluation/commentary demonstrates sound analysis and understanding and interpretation. Application of knowledge is effective and shows coherent elaboration. Issues/debates/approaches are used effectively. Ideas are well structured and expressed clearly and fluently. Consistently effective use of psychological terminology. Appropriate use of grammar, punctuation and spelling.

**5-4 marks Reasonable**

Evaluation/commentary demonstrates reasonable analysis and understanding and interpretation. Application of knowledge is reasonably effective and shows some elaboration. Issues/debates/approaches are used in a reasonably effective manner. Most ideas appropriately structured and expressed clearly. Appropriate use of psychological terminology. Minor errors of grammar, punctuation and spelling only occasionally compromise meaning.

**3-2 marks Basic**

Evaluation/commentary demonstrates basic, superficial understanding. Application of knowledge is basic. Superficial reference is made to issues/debates/approaches. Expression of ideas lacks clarity. Limited use of psychological terminology. Errors of grammar, punctuation and spelling are intrusive.

**1 mark Rudimentary**

Evaluation/commentary is rudimentary demonstrating little understanding. Application of knowledge is weak, muddled and may be mainly irrelevant. If reference is made to issues/debates/approaches, it is muddled and inaccurate. Deficiency in expression of ideas results in confusion and ambiguity. The answer lacks structure, often merely a series of unconnected assertions. Errors of grammar, punctuation and spelling are frequent and intrusive.

**0 marks**

No creditworthy material is presented.

**SECTION C: PSYCHOLOGICAL RESEARCH AND SCIENTIFIC METHOD****7****Total for this question: 35 marks**

- (a) With reference to the data in **Table 1**, outline what the findings of this investigation seem to show about the effectiveness of the treatment. *(2 marks)*

**AO2/3 = 2 marks**

One mark for one brief finding and a further mark for appropriate elaboration or for two brief findings or one mark for a slightly muddled answer.

On average, the treatment group showed greater improvement after the treatment than the no-treatment group. The average improvement score for the no-treatment group was very low suggesting that the treatment gains for the treatment group were not simply a result of the passage of time.

There was some variation in both groups as shown by the ranges but it was wider in the treatment group. The low range in the no-treatment group suggests that most people in this group had similar low improvement scores.

- (b) The psychologist used a statistical test to find out if there was a significant difference in improvement between the 'treatment' and 'no-treatment' groups. She found a significant difference at the 5% level for a one-tailed test ( $p \leq 0.05$ ).

Identify an appropriate statistical test for analysing the participants' scores. Explain why it would be a suitable test to use in this study. *(4 marks)*

**AO1 = 1 mark, AO2/3 = 3 marks**

One mark for identification of a suitable test and 3 further marks for an appropriate justification. The specification only requires knowledge of non-parametric tests. However, if a candidate names an independent t-test and justifies its use, this is perfectly acceptable. It is likely that most candidates will identify a non-parametric test. The most appropriate test is the Mann-Whitney and the justifications for its use are:

- independent groups design
- at least ordinal data
- differences.

- (c) What is the likelihood of the psychologist having made a Type 1 error in this study? Explain your answer. *(2 marks)*

**AO2/3 = 2 marks**

One mark for correctly identifying the likelihood and one further mark for an appropriate explanation or one mark for a slightly muddled answer.

The likelihood of making a Type 1 error is 5%. A Type 1 error occurs when a researcher claims support for the research hypothesis with a significant statistical test, but in fact, the variations in the scores are due to chance variables. If the level of significance is set at 5%, there will always be a one in twenty chance or less that the results are due to chance rather than to the influence of the independent variable or some other factors.

- (d) The psychologist assumed that improvements in the treatment group were a direct result of the new type of treatment. Suggest **two** other reasons why people in the treatment group might have improved. (4 marks)

**AO2/3 = 4 marks**

Two marks for each reason. One mark for a basic identification and one further mark for elaboration.

Possible reasons include:

Expectations – the patients might expect the treatment to do them some good and it becomes a self-fulfilling prophesy.

Biased sample – even though the participants were randomly assigned to groups, the treatment group might, by chance have included more people with milder symptoms that were more likely to respond to treatment.

Other support – we do not know what other support/ treatment that the participants might have had over the 8 week therapy period.

- (e) The psychologist could have used self-report questionnaires to assess the participants instead of using interviews with the therapist. Explain **one** advantage and **one** disadvantage of using self-report questionnaires in this study rather than interviews. (4 marks)

**AO2/3 = 4 marks**

Two marks for the advantage and two marks for the disadvantage. One mark for simply identifying an advantage/disadvantage and the further mark for elaboration in the context of the study. Answers which are not set in context cannot achieve full marks.

Advantage: Much quicker to administer and to score – could all have been given out at the same time whereas the therapist has to conduct 30 time-consuming interviews; cheaper than interviews, ie in terms of the therapist's time; people might be more comfortable, and, therefore, more honest, if they have to write responses rather than face an interviewer (could work the other way as well – see disadvantages).

Disadvantage: Self-report questionnaires might not yield as accurate data as an interview – questions can limit range of answers and there are no additional cues, eg body language, participants might be less honest on a questionnaire than in a face-to-face interview.

Marks can be awarded for any appropriate advantages/disadvantages.

- (f) The psychologist needed to obtain informed consent from her participants. Write a brief consent form which would be suitable for this study. You should include some details of what participants can expect to happen in the study and how they will be protected.

(5 marks)

**AO2/3 = 5 marks**

Candidates should demonstrate understanding of some of the requirements of a good consent form. For full marks, it should be succinct, clear and informative.

It is likely to include some of the following information: treatment programme that is non-invasive; requirement to be assessed on current level of functioning; use of a trained therapist to conduct interviews; duration of the programme; requirement for re-assessment at the end of the programme; random allocation to a treatment or no-treatment group.

It should show awareness of ethical considerations, eg

- no pressure to consent – it will not affect any other aspects of their treatment if they choose not to take part
- they can withdraw at any time
- they can withdraw their data from the study
- their data will be kept confidential and anonymous
- they should feel free to ask the researcher any questions at any time
- they will receive a full debrief at the end of the programme.

For full marks, candidates must include a range of both procedural and ethical points.

**AO2/3 – Mark Bands (5 marks)**

<b>5 marks Effective</b> Consent form demonstrates sound knowledge and understanding of research ethics.
<b>4 – 3 marks Reasonable</b> Consent form demonstrates reasonable knowledge and understanding of research ethics.
<b>2 marks Basic</b> Consent form demonstrates basic, superficial knowledge and understanding of research ethics.
<b>1 mark Rudimentary</b> Consent form is rudimentary demonstrating very limited understanding of research ethics.
<b>0 marks</b> No creditworthy material is presented.

- (g) What is meant by reliability? Explain how the reliability of the scores in this study could be checked.

(4 marks)

**AO1 = 2 marks, AO2/3 = 2 marks**

**AO1:** One mark for brief description, eg 'consistency' and one further mark for elaboration. Reliability refers to consistency over time. If a test, questionnaire, etc, is reliable, people tend to score the same on the test if they take it again soon afterwards.

**AO2/3:** One mark for a very brief answer, eg 'do another test' or 'test them again' or 'use another interviewer to check'. Two marks for some elaboration.

Reliability could have been checked by administering a valid and reliable questionnaire to the participants as well as interviewing them and then comparing the scores on the two measures. If the interview score was reliable, there would be strong positive correlation between the scores.

The interviews could have been filmed and given to another trained therapist to assess. A strong correlation between the scores given by each therapist would demonstrate reliability.

(h) The psychologist noticed that female and male participants seemed to have responded rather differently to the treatment.

She decided to test the following hypothesis:

Female patients with an eating disorder will show greater improvement in their symptoms after treatment with the new therapy than male patients.

She used a new set of participants and, this time, used self-report questionnaires instead of interviews with a therapist.

Imagine that you are the psychologist and are writing up the report of the study. Write an appropriate methods section which includes reasonable detail of design, participants, materials and procedure. Make sure that there is enough detail to allow another researcher to carry out this study in the future. (10 marks)

**AO2/3 = 10 marks**

For full marks, the method section should be written clearly, succinctly and in such a way that the study would be replicable. It should be set out in a conventional reporting style, possibly under appropriate headings. Examiners should be mindful that there are now different, but equally acceptable reporting styles. For example, candidates should not be penalised for writing in the first person. The important factor here is whether the study could be replicated.

There should be reasonable detail with regard to:

- design
- participants
- materials
- procedures.

**AO2/3 Mark Bands (10 marks)****10-9 marks Effective**

Effective method section that demonstrates sound knowledge and understanding of investigation design.

The design decisions are appropriate and the description provides accurate detail of the design, participants, materials and procedure of the study.

Effective and appropriate report style.

**8-6 marks Reasonable**

The method section demonstrates reasonable knowledge and understanding of investigation design.

The design decisions are generally appropriate and the description provides reasonable detail of the design, participants, materials and procedure of the study.

Generally appropriate report style.

**5-3 marks Basic**

The method section demonstrates basic knowledge and understanding of investigation design.

Some aspects of the design are appropriate. The description provides basic detail of some features of the study or rudimentary outline of the main features.

Expression lacks clarity.

**2-1 marks Rudimentary**

The method section demonstrates rudimentary knowledge or understanding of research. The report is weak, muddled or incomplete.

Deficiency in expression results in confusion and ambiguity.

**0 marks**

No creditworthy material is presented.

**ASSESSMENT GRID: PSYA4**

<b>Question</b>	<b>AO1</b>	<b>AO2</b>	<b>AO3</b>	<b>Total</b>
1	9	12	4	
<b>Total Q1</b>	<b>9</b>	<b>12</b>	<b>4</b>	<b>25</b>
2 (a)	5			
2 (b)		10		
2 (c)	4	2	4	
<b>Total Q2</b>	<b>9</b>	<b>12</b>	<b>4</b>	<b>25</b>
3 (a)	9			
3 (b)		12	4	
<b>Total Q3</b>	<b>9</b>	<b>12</b>	<b>4</b>	<b>25</b>
4 (a) (i)		1	4	
4 (a) (ii)	5	5		
4 (b)	4	6		
<b>Total Q4</b>	<b>9</b>	<b>12</b>	<b>4</b>	<b>25</b>
5 (a) (i)		1	4	
5 (a) (ii)	4	6		
5 (b)	5	5		
<b>Total Q5</b>	<b>9</b>	<b>12</b>	<b>4</b>	<b>25</b>
6 (a) (i)			2	
6 (a) (ii)		1	2	
6 (a) (iii)	5	5		
6 (b)	4	6		
<b>Total Q6</b>	<b>9</b>	<b>12</b>	<b>4</b>	<b>25</b>
7 (a)			2	
7 (b)	1		3	
7 (c)			2	
7 (d)				
7 (e)		4	4	
7 (f)			5	
7 (g)	2		2	
7 (h)			10	
<b>Total Q7</b>	<b>3</b>	<b>4</b>	<b>28</b>	<b>35</b>