



**General Certificate of Education (A-level)
January 2011**

Psychology A

PSYA4

(Specification 2180)

**Unit 4: Psychopathology, Psychology in Action
and Research Methods**

Report on the Examination

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

General

There was evidence again in this series that candidates need to be reminded of the importance of reading questions carefully, answering the question set and expressing their ideas clearly and coherently. Each question is marked independently. This means no credit can be given for potentially relevant material which is included in a different answer. It is therefore really important that candidates answer each question as it is set. This was particularly relevant in questions 02 and 03 in this series. Candidates should check the maximum marks available for each question when deciding how much to write.

On PSYA4, there is a specific requirement to refer to approaches, issues and debates only in Section B: Psychology in Action, and even there the rubric contains the phrase 'where appropriate'. In Section A, there is no specific requirement to address approaches, issues and debates, although the nature of most of the questions invites their consideration. Candidates should focus on answering the question that has been set and introduce discussion of approaches, issues and debates only where it is sensible to do so and where such references will contribute to effective evaluation/commentary.

Candidates this series often demonstrated understanding of various approaches and were able to use this knowledge to enhance commentary and evaluation. However, the same could not be said about issues and debates. Frequently these were misunderstood and were not used to provide meaningful commentary.

It would be worth reminding candidates that they need to have an understanding of research methods from the AS specification as well as A2 to be fully prepared for this paper.

Section A Psychopathology

Topic Schizophrenia

This was a popular topic area. Candidates generally find psychological explanations of schizophrenia more difficult than biological explanations and this series was no exception.

Question 01

A straightforward question, but many candidates wasted time scene setting, instead of outlining the clinical characteristics. Candidates should also be aware that evaluation was not creditworthy. When a maximum of 5 marks is available writing lengthy paragraphs is not a good strategy. However, in order to gain top marks, some degree of coherence is required and candidates should avoid merely writing a list of the characteristics.

Question 02

The difficulty here for many candidates was keeping their answer to a length appropriate to a 4 mark question and remaining focused on one explanation. Many candidates were unable to prevent themselves from evaluating everything they wrote. The question only required an outline, so evaluation was not creditworthy here and merely wasted time. Better answers could, for example, outline the double bind theory and provide a clear example of what this involves; or they could outline the cognitive model focusing on cognitive deficit theories.

Question 03

The main difficulty for candidates in this question was that there was no credit for describing explanations. Many candidates seemed to feel it was necessary to outline (or in some cases give detailed description of) the explanation before evaluating it. This was not required, and credit was only given for evaluation. Candidates could legitimately use biological explanations, but only if they were clearly used as evaluation of psychological explanations.

Topic Depression

Question 04

This was an accessible question and most candidates were able to offer at least two psychological therapies. The difficulty seemed to be in explaining how the therapies were used to treat depression, as opposed to disorders in general. The same problem was also seen in the evaluation, which was often very generic and not always made explicitly relevant to depression. Biological therapies were only creditworthy if they were used as part of sustained commentary on psychological therapies.

Topic Anxiety Disorders

Question 05

Candidates were well prepared for this question and there were some excellent, accurate answers. Most candidates were able to include the obvious characteristic of anxiety and how it is an essential part of these disorders.

Question 06

Candidates seem to find classification/diagnosis of any disorder more difficult than other topics. Most candidates could use the issues of reliability and validity, since they are named on the specification, but they did not always link them specifically to their chosen anxiety disorder. Instead they gave generic accounts of the difficulty of classification of any disorder, or how there are problems with validity of diagnosis. Some candidates described Rosenhan's study at great length, without any attempt to make it relevant to the question. There was also considerable confusion between bias and difference. Many candidates identified gender-bias and culture-bias as an issue, but then proceeded to describe gender differences or cultural differences, which are not the same.

Question 07

This was another question that candidates were very well-prepared for and they produced some coherent and accurate answers. Few candidates made the mistake of writing about more than one explanation and the balance between AO1 and AO2/3 was appropriate to the mark allocation.

Section B Psychology in Action

Topic Media Psychology

Question 08

This part of the question was usually done well. The most common answer was social learning theory, which was generally outlined accurately. A few candidates forgot that they were supposed to be considering pro-social behaviour and veered into anti-social behaviour, especially those who used Bobo dolls as an example. Better answers used directly relevant supporting evidence eg Sprafkin. Some candidates simply described research studies without identifying an explanation.

Question 09

Some candidates could identify a relevant methodological and ethical issue, but did not explain how or why the issues were relevant to the study described. They could say that protection from harm was an ethical issue, but did not link it to this research.

Question 10

There were some excellent answers, which were informed, accurate and coherent. However many answers described the Hovland-Yale model, or the central-peripheral route, without any attempt to link it to the effectiveness of television in persuasion. In this question the link to television needed to be made explicit in order to gain many marks.

Topic The Psychology of Addictive behaviour

This was the most popular topic in Section B.

Question 11

This was a challenging question because it required candidates to select material. They had to consider the *biological model*, in relation to *maintenance*, of *one addictive behaviour*. Many candidates seemed to be unable to address all three requirements. They seemed to find it necessary to explain initiation before going on to describe maintenance, and then their account of maintenance was often superficial. Some candidates failed to identify a specific addiction, preventing them from accessing the top mark bands. Other candidates switched between different addictions, but could gain credit only for material relevant to one addiction. The advice to candidates is that they should read the question carefully and make sure that they address all the requirements of the question.

Question 12

Candidates seemed to ignore the requirement to use research in their answer to this question, so produced very generic and sometimes almost common sense answers. The other problem was ignoring the requirement to focus on smoking, as opposed to other addictive behaviours. Better answers used specific studies or considered the role of social learning to explain why such films might encourage young people to start smoking.

Question 13

The answers to this question were very centre-specific. There were some excellent and informed answers at the top end but also some that demonstrated little more than a rudimentary knowledge of any intervention. Some candidates appeared to treat public health and legislation as if they were the same type of intervention. This is not the case and in such answers, only one would gain credit. No credit was given for models of prevention. The commentary depended on the type of intervention chosen, but many candidates considered effectiveness and used relevant studies to support their point.

Topic Anomalistic Psychology

Question 14

Candidates were often able to describe the findings of research into personality factors underlying anomalous experience. However many just described the factor, such as an external locus of control, without explaining why this type of personality was more likely to have an anomalous encounter.

Question 15

This question was generally well answered although weaker answers did not include any reference to relevant research.

Question 16

Most candidates gained marks for explaining what a reliable and well validated scale means but were not able to explain why it was important. Tautological answers were prevalent here and candidates would simply state the reason is to have a reliable and well validated scale.

Question 17

The most frequent response here was fantasy proneness.

Question 18

Candidates clearly had difficulty in developing commentary on methodological issues in the study of psychokinesis. It was often very hard to find any credit-worthy AO2/3. Some just described what psychokinesis was, and the types of psychokinesis without engaging with the question.

Section C Psychological Research and Scientific Method

Topic Psychological Research and Scientific Method

Question 19

A challenging question because candidates needed to apply their knowledge. They often knew about what makes something scientific (objectivity, replicability, etc) but seemed unable to engage with the stem. There were lots of answers involving paradigm shift, which were not relevant to this question.

Question 20

Most candidates had some idea about how a random sample could be obtained, but often failed to explain the methods fully. They could suggest all the names should be put in a hat, but did not make it clear that the names were then selected “without looking” or “without bias”. There was some confusion with systematic sampling.

Question 21

Many answers displayed some confusion here, eg saying that a limitation was that it was not representative of the whole population, when the point is that it might not be representative of the target population of 400. Some answers referred to problems of allocation to conditions, rather than random sampling. A good point was made by those who said that if some parents did not give consent, the psychologist would have to select again, and that would not be random.

Question 22

This question was not answered well. Most candidates seemed very unclear about why it is important to operationalise variables. How to actually operationalise the two variables was beyond many candidates. Some effective answers referred to food content eg fat, sugar etc.

Question 23

Most candidates answered this correctly.

Question 24

There was some serious confusion about what exactly matched pairs design is. Few could go beyond “it’s time consuming” or “difficult to match on all variables”. Some referred back to the random sample and said it would not be possible; others felt that at five-years-old children are either too similar to match or too different.

Question 25

Most could identify an ethical issue such as confidentiality, the right to withdraw and protection from harm (those who did not get any breakfast or who were embarrassed at their poor reading). Some seemed to forget that they also had to explain how the issue would be dealt with, or they simply repeated that the right to withdraw could be dealt with by giving the right to withdraw.

Question 26

This question was not answered well. Many candidates failed to read the question carefully before they attempted it. They were given the information that they were using the same group of children (ie the 5-year olds in the previous study). Despite the fact that the ethical issues and sampling had already been addressed in the plan for the original study many wrote at great length about sampling and ethics. The majority of candidates were unable to write a fully operationalised hypothesis, and often simply restated the aim. Many seemed to think the IV was breakfast versus no breakfast, rather than healthy versus unhealthy breakfast. Some of their ideas were totally impractical, especially given that the children were only 5 years old. In many answers lack of detail would have made any kind of replication very difficult. However, some candidates did understand the need for some sort of training for the observers, the need for clearly identified behaviour categories to record, and the importance of being able to distinguish the two groups in the playground. Designing a study is clearly a difficult task for candidates, and one that they need to practice.

Mark Ranges and Award of Grades

Grade boundaries and cumulative percentage grades are available on the [Results statistics](#) page of the AQA Website.