# GCE 2004 June Series



# Mark Scheme

# Psychology A (PYA5)

Mark schemes are prepared by the Principal Examiner and considered, together with the relevant questions, by a panel of subject teachers. This mark scheme includes any amendments made at the standardisation meeting attended by all examiners and is the scheme which was used by them in this examination. The standardisation meeting ensures that the mark scheme covers the candidates' responses to questions and that every examiner understands and applies it in the same correct way. As preparation for the standardisation meeting each examiner analyses a number of candidates' scripts: alternative answers not already covered by the mark scheme are discussed at the meeting and legislated for. If, after this meeting, examiners encounter unusual answers which have not been discussed at the meeting they are required to refer these to the Principal Examiner.

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**Mark Allocations for Assessment Objective 1** 

Mark bands	Content	Detail & accuracy	Organisation & structure	Breadth/depth of content and synoptic possibilities
15-13	Substantial	Accurate & well-detailed	Coherent	Substantial evidence
12-10	Slightly limited	Accurate & reasonably detailed	Coherent	Evidence
9-7	Limited	Generally accurate & reasonably detailed	Reasonably constructed	Some evidence
6-4	Basic	Lacking detail	Sometimes focused	Little evidence
3-0	Just discernible	Weak/muddled/ inaccurate	Wholly/mainly irrelevant	Little or no evidence

**Mark Allocations for Assessment Objective 2** 

Mark bands	Evaluation	Selection and elaboration	Use of material and synoptic possibilities
15-13	Thorough	Appropriate selection and coherent	Highly effective
12-10	Slightly limited	Appropriate selection and elaboration	Effective
9-7	Limited	Reasonable elaboration	Reasonably effective
6-4	Basic	Some evidence of elaboration	Restricted
3-0	Weak, muddled and incomplete	Wholly/mainly irrelevant	Not effective

# **Mark Allocations for Approaches Questions**

Approaches part (a)

Mark bands	Content	Accuracy	Engagement
6-5	Reasonably thorough	Accurate	Coherent
4-3	Limited	Generally accurate	Reasonable
2-0	Basic	Sometimes flawed or inaccurate	Muddled or minimal or no
			engagement

Approaches part (b) & (d)

Mark bands	Commentary	Use of material	Engagement
6-5	Reasonably thorough	Effective	Coherent
4-3	Limited	Reasonably effective	Reasonable
2-0	Basic	Restricted	Muddled or minimal or no
			engagement

Approaches part (c)

Mark bands	Commentary	Plausibility	Engagement
6-5	Reasonably thorough	Appropriate	Coherent
4-3	Limited	Reasonably appropriate	Reasonable
2-0	Basic	Largely inappropriate	Muddled or minimal or no
			engagement

In (c) engagement should be with both the method and the stimulus material.

Exporting is possible between (a) & (b) and (c) & (d).

# QUALITY OF WRITTEN COMMUNICATION (QoWC)

Band 3	The work is characterised by a CLEAR expression of	4-3 marks
	ideas, the use of a GOOD range of specialist terms, and	
	<b>FEW</b> errors of grammar, punctuation and spelling.	
Band 2	The work is characterised by a REASONABLE	2-1 marks
	expression of ideas, the use of <b>SOME</b> specialist terms,	
	and <b>REASONABLE</b> grammar, punctuation and spelling.	
Band 1	The work is characterised by a <b>POOR</b> expression of	0 marks
	ideas, the use of a LIMITED range of specialist terms,	
	and <b>POOR</b> grammar, punctuation and spelling.	

# **Synoptic Possibilities**

Unit 5 rewards the demonstration of synopticity.

Synopticity can be defined as 'affording a general view of the whole'.

It is the addressing of psychology-wide matters and concerns.

# Possible routes identified in the specification are:

- Demonstrating different explanations or perspectives.
- Demonstrating different methods used.
- Relating overarching issues and debates.
- Links with other areas of the specification.
- Psychology-wide concerns and issues such as reliability and validity, cultural variation and demand characteristics/participant reactivity (e.g. iatrogenesis).

Each question is synoptic. The above list identifies additional avenues for gaining credit of synopticity.

It is quite acceptable (i.e. will permit access to the full range of marks) for candidates to offer just one of these categories, or to offer several of them.

Synopticity may be demonstrated either within a particular area or across a number of different areas. The former can be thought of as 'vertical' synopticity, the latter as 'horizontal' synopticity.

# For the approaches questions (question 8 and 9) the possibilities for demonstration of synopticity given above are supplemented with the following:

- Biological/medical, behavioural, psychodynamic and cognitive approaches.
- Other psychological approaches, not named in the specification, such as social construction, humanistic psychology, evolutionary psychology.
- Those approaches deriving from other, related disciplines such as sociology, biology and philosophy.

1

#### SECTION A: INDIVIDUAL DIFFERENCES.

# Total for this question: 30 marks

"Research suggests that diagnostic/classificatory systems such as the DSM and the ICD have serious shortcomings, including those relating to reliability and validity".

- (a) Outline the DSM and ICD approaches to the classification of psychological abnormality.

  (15 marks)
- (b) Evaluate the DSM **and/or** the ICD with reference to issues such as those raised in the quotation above. (15 marks)

*Outline* is an **AO1** term which requires the candidate to offer a summary description of the DSM and ICD approaches to the classification of psychological abnormality.

Evaluate is an AO2 term which requires the candidate to present evidence of AO2 relating to issues such as those raised in the quotation above concerning the DSM and/or ICD.

#### (a) Indicative AO1:

The Diagnostic and Statistical Manual of Mental Disorders (DSM) was developed by the APA and is both classificatory and diagnostic. The current version is the DSM-IV-TR, published in 2000. It is organised into five axes with axis 1 comprising the following disorders:

- 1. disorders in infancy (e.g., autism);
- 2. delirium and dementia;
- 3. mental disorder due to a medical condition;
- 4. Substance abuse;
- 5. schizophrenia;
- 6. mood disorders;
- 7. anxiety disorders;
- 8. somatoform disorders;

- 9. factitious disorders;
- 10. dissociative disorders;
- 11. eating disorders;
- 12. sexual disorders;
- 13. sleep disorders;
- 14. impulse control disorders;
- 15. adjustment disorders;
- 16. other conditions.

Diagnosticians then decide whether a client is displaying Axis II disorders, i.e., mental retardation and personality disorders. The diagnostician then looks for Axis III information, such as general medical conditions. Axis IV information includes psycho-social or environmental problems. Finally, Axis V information is a rating of the overall level of functioning (Humphreys et al., 2002).

The International Classification of Diseases and Health Related Problems (ICD) was developed by the WHO and is now in its tenth edition (1993). It has eleven major categories:

- 1. Organic, including symptomatic, mental disorders (e.g., Alzheimer's disease);
- 2. mental and behaviour disorders due to psychoactive substance abuse (e.g., alcohol, cocaine);
- 3. schizophrenia;
- 4. mood disorders (e.g., depression);
- neurotic and stress related disorders (e.g., phobias);

- 6. behavioural syndromes associated with physiological disturbances (e.g., eating disorders);
- 7. disorders of adult personality and behaviour i.e. paranoia.
- 8. mental retardation;
- 9. disorders of psychological development (e.g., dyslexia);
- 10. behavioural and emotional disorders in childhood;
- 11. unspecified conditions.

The ICD is classificatory but not diagnostic. Both schemes are located within the medical/somatic model of abnormality.

Historical accounts may earn full marks. Candidates are required to describe both the DSM and the ICD but a balance coverage is not required. If only one is given partial performance penalties apply (see mark allocations)

#### **Ideas for additional synopticity:**

- reductionism (e.g., 'reduction' of patients to constellations of symptoms)
- gender and culture bias (e.g., in the diagnosis of schizophrenia and depression)
- links across the specification (e.g. to defining psychological abnormality on AS)

# (b) Indicative AO2:

This is a relatively open ended question and there is no requirement for the candidate to explicitly engage with issues raised in the quotation (no penalty). However, the issues that diagnostic/classificatory systems such as DSM/ICD have serious shortcomings including those related to reliability and validity are broad so it is unlikely that candidates will not have made some reference to them.

There are three principal points of concentration, given the wording of the quotation/question and the wording of the specification:

- Research (refer quotation). It should be remembered that this permits/encourages reference to theories and/or studies. Given its inclusion in the specification the research carried out by Rosenhan (e.g., 1973) is a likely candidate for inclusion. Other likely research is that carried out on bias in diagnosis/classification, for example that on gender, race, culture (including culture-bound syndromes) and class. Note that the candidate is required to be evaluative in answering this question. Consequently descriptive accounts of research should only be credited as a 'springboard' to help lead into evaluation/analysis. Such material may receive marks up to maximum of the top of Band 2 (6 marks).
- **Specification content** (refer specification). The nature of classification/diagnostic systems and reliability/validity. Note again material must be evaluative (same ceiling applies as that given immediately above). Examples would be the alleged ethnocentricity and androcentricity of the classification systems (e.g., Fernando, 1988; Humphreys et al., 1997; Ussher, 1992).
- **Further possibilities** include evidence which suggests that reliability and validity have increased in recent years; that gender bias and cultural blindness (for example) in classification and diagnosis may have been merely indicative of broader biases/failings in psychological research per se until recently. Candidates may focus on the difficulties of operationalising reliability/validity in research and practice. Ethnocentricity and androcentricity are also relevant here.

# Ideas for additional synopticity:

The quotation has the synoptic feature of reliability and validity (see p.6) but the following are some additional possibilities:

- ethical issues relating to the consequences of diagnosis e.g., labelling (Szasz)
- psychology as science (e.g., the status of psychiatry as opposed to other 'approaches' to mental illness such as psychoanalysis).
- links across the specification (e.g., an evaluation of whether culture bound syndromes can be accommodated within the DSM/ICD)

Note it is not intended that this part of the question requires a plurality performance: the number of issues offered will constitute the breadth of response.

There is no penalty in (b) if candidates do not explicitly address the issues raised in the quotation.

# **Question 1(a): Assessment Objective 1**

Outline of DSM and ICD as approaches to the classification of psychological abnormality

Band	Mark allocation	Marks
Band 5	Outline of DSM and ICD as approaches to the classification of psychological abnormality is <b>substantial</b> . It is <b>accurate and well-detailed</b> . The organisation and structure of the answer is <b>coherent</b> . There is <b>substantial evidence</b> of breadth/depth and synoptic possibilities (p.6).	15-13
Band 4	Outline of DSM and ICD as approaches to the classification of psychological abnormality is <b>slightly limited</b> . It is <b>accurate and reasonably detailed</b> . The organisation and structure of the answer is <b>coherent</b> . There is <b>evidence</b> of breadth/depth and synoptic possibilities (p.6).	12-10
Band 3	Outline of DSM and ICD as approaches to the classification of psychological abnormality is <b>limited</b> . It is <b>generally accurate and reasonably detailed</b> . The organisation and structure of the answer is <b>reasonably constructed</b> . There is <b>some evidence</b> of breadth/depth and synoptic possibilities (p.6). Partial performance is substantial, accurate and well-detailed (top of band) or slightly limited, accurate and reasonably detailed (bottom of band).	9-7
Band 2	Outline of DSM and ICD as approaches to the classification of psychological abnormality is <b>basic</b> and <b>lacking detail</b> . There is some <b>focus on the question</b> . There is <b>little</b> evidence of synoptic possibilities (p.6).  Partial performance is limited, generally accurate and reasonably detailed.	6-4
Band 1	Outline of DSM and ICD as approaches to the classification of psychological abnormality is <b>just discernible</b> . It is <b>weak</b> and shows <b>muddled</b> understanding. The answer may be wholly or mainly <b>irrelevant</b> to the question's requirement. There is <b>little or no</b> evidence of synoptic possibilities (p.6).  Partial performance is basic, lacking detail with little focus on the question.	3-0

# 1 (b): Assessment Objective 2

Evaluation of DSM and/or ICD with reference to issues such as those raised in the quotation

Band	Mark allocation	Marks _
Band 5	Evaluation of DSM and/or ICD with reference to issues such as those raised in the quotation is <b>thorough</b> . The material is used in a <b>highly effective</b> manner and shows evidence of <b>appropriate selection and coherent elaboration</b> of synoptic possibilities (p.6).	15-13
Band 4	Evaluation of DSM and/or ICD with reference to issues such as those raised in the quotation is <b>slightly limited</b> . The material is used in an <b>effective</b> manner and shows evidence of <b>appropriate selection and elaboration</b> of synoptic possibilities (p.6).	12-10
Band 3	Evaluation of DSM and/or ICD with reference to issues such as those raised in the quotation is <b>limited</b> . The material is used in a <b>reasonably effective</b> manner and shows <b>reasonable elaboration</b> of synoptic possibilities (p.6).	9-7
Band 2	Evaluation of DSM and/or ICD with reference to issues such as those raised in the quotation is <b>basic</b> . The material is used in a <b>restricted</b> manner and shows <b>some evidence of elaboration</b> of synoptic possibilities (p.6).	6-4
Band 1	Evaluation of DSM and/or ICD with reference to issues such as those raised in the quotation is <b>weak</b> , <b>muddled and incomplete</b> . The material is <b>not used effectively</b> and may be <b>wholly or mainly irrelevant</b> in terms of synoptic possibilities (p.6).	3-0

2

# Total for this question: 30 marks

"Biological explanations of schizophrenia tell us all that we need to know about this disorder."

Critically consider biological explanations of schizophrenia, with reference to the issue raised in the quotation above. (30 marks)

Critically consider is an AO1 and AO2 term which requires the candidate to both describe and evaluate biological explanations of schizophrenia.

The key is that points should be both described and evaluated. If a candidate adopts a 'shopping list' (a list of points for and against biological explanations of schizophrenia with a minimum of elaboration) it is likely that evaluation will not show effective use of material and will thus be limited to a maximum at the top of Band 3 (9 marks).

In this question candidates **are** required to engage with the issue in the quotation.

#### **Indicative AO1:**

Other issues may be addressed but should only be credited if they are related to, or 'add to' a consideration of this one. Note also that the focus is on explanations, so candidates who offer, for example, clinical characteristics or treatments should only receive credit if this material is serendipitously relevant.

It should be noted that there are, of course, a variety of biological explanations (e.g., genes, brain chemistry, neurological damage) and hence this question satisfies the requirement for synopticity by the vertical rather than the horizontal route.

MacLeod (1998) identifies the following three biological factors which have been shown to influence schizophrenia:

- Genetics. For example, Gottesman (1991) pooled data from a number of studies which showed that monozygotic twins had a 48% concordance rate, dizygotic twins 17% and second degree relatives (e.g., nephews and grandchildren) 5%.
- **Brain structure**. Examining brains is directly dependent on technology. CT scans have shown enlarged ventricles in some schizophrenic patients and reduced size in limbic structures. PET scans have shown lower than average activity in areas of the frontal cortex in schizophrenic patients but other studies have shown deficits in temporal cortex activity as well.
- Neurochemistry. This area is often focused on the appealing (but inaccurate) logic that if a particular drug is effective in reducing schizophrenia then it is implicated in its aetiology (the treatment-aetiology fallacy). Direct evidence for the dopamine hypothesis using PET scans was found by Wong et al. (1986) that schizophrenic patients had an excess of dopamine (D2) receptors. Other studies, however, have failed to replicate this finding. More recently, clozapine, a drug which works by blocking serotonin has been found to an effective treatment in otherwise drug-resistant schizophrenic patients.

Answers must focus upon biological explanations in psychology as explanations of schizophrenia. General accounts, such as the influence of genes and gene research per se, may receive credit only insofar as they are relevant to this particular pathology. Evolutionary psychology may be counted as a biological explanation.

#### **Ideas for additional synopticity:**

The question has the synoptic feature of biological explanations (see p.6) but the following are some additional possibilities:

- Reductionism (seeing schizophrenia as a product of somatic factors)
- psychology as a science (the status of biological versus psychological explanations in terms of their scientific 'standing')
- nature-nurture (schizophrenia as an inherited disorder, i.e., as a result of genetic influence)

#### **Indicative AO2:**

The following are likely routes to receiving **AO2** credit in answering this question:

- an 'internal' evaluation/appraisal of biological explanations of schizophrenia (for example, in terms of their logical coherence and/or empirical corroboration)
- a comparison of how well biological explanations account for schizophrenia as compared to other explanations such as learning theory and psychoanalysis.
- empirical support or (if studies are credited as **AO1** illustration) interpretations or evaluation of the studies.

On the second point examiners should be particularly mindful of the need for candidates to demonstrate 'sustained critical commentary'. Candidates should not be permitted to gain full access to **AO2** marks by merely using a link sentence such as "However, behaviourists had a different view.." and then going on to write what is effectively a freestanding behaviourism answer. To gain credit answers must consistently engage with the prescribed (biological) explanations.

# Ideas for additional synopticity:

All the points made above with reference to **AO1** above are relevant here but must be made relevant at analytical and/or evaluative levels. In addition, credit may be earned by employing a number of different means of evaluation or analysis.

#### **BOTH AO1 AND AO2:**

Candidates are required to offer a plurality of biological explanations. If only one is given partial performance penalties apply (see mark allocations).

Examiners should be mindful of the depth/breadth trade-off when marking the work of candidates who offer two biological explanations and those offering more than this.

Candidates who do not make explicit reference to the quotation should be limited to marks at the top of Band 4 for **AO2** insofar as they have failed to make highly effective use of their material.

# **Question 2: Assessment Objective 1**

Description of biological explanations of schizophrenia with reference to the issue raised in the quotation

quotat		
Band	Mark allocation	Marks
Band 5	Description of biological explanations of schizophrenia with reference to the issue raised in the quotation is <b>substantial</b> . It is <b>accurate and well-detailed</b> . The organisation and structure of the answer is <b>coherent</b> . There is <b>substantial evidence</b> of breadth/depth and synoptic possibilities (p.6).	15-13
Band 4	Description of biological explanations of schizophrenia with reference to the issue raised in the quotation is <b>slightly limited</b> . It is <b>accurate and reasonably detailed</b> . The organisation and structure of the answer is <b>coherent</b> . There is <b>evidence</b> of breadth/depth and synoptic possibilities (p.6).	12-10
Band 3	Description of biological explanations of schizophrenia with reference to the issue raised in the quotation is <b>limited</b> . It is <b>generally accurate and reasonably detailed</b> . The organisation and structure of the answer is <b>reasonably constructed</b> . There is <b>some evidence</b> of breadth/depth and synoptic possibilities (p.6).  Partial performance is substantial, accurate and well-detailed (top of band) or slightly limited,	
	accurate and reasonably detailed (bottom of band).	
Band 2	Description of biological explanations of schizophrenia with reference to the issue raised in the quotation is <b>basic and lacking detail</b> . There is <b>some focus</b> on the question. There is <b>little evidence</b> of synoptic possibilities (p.6).  Partial performance is limited, generally accurate and reasonably detailed.	6-4
Band 1	Description of biological explanations of schizophrenia with reference to the issue raised in the quotation is <b>just discernible</b> . It is <b>weak and shows muddled understanding</b> . The answer may be <b>wholly or mainly irrelevant</b> to the question's requirement. There is <b>little or no evidence</b> of synoptic possibilities (p.6).  Partial performance is basic, lacking detail with little focus on the question.	3-0

# **Assessment Objective 2**

Evaluation of biological explanations of schizophrenia with reference to the issue raised in the quotation

Band	Mark allocation	Marks	
<b>D</b> 15	Evaluation of biological explanations of schizophrenia with reference to the issue raised in the	45.40	
Band 5	quotation is <b>thorough</b> . The material is used in a <b>highly effective</b> manner and shows evidence	15-13	
	of appropriate selection and coherent elaboration of synoptic possibilities (p.6).		
	Evaluation of biological explanations of schizophrenia with reference to the issue raised in the		
Band 4	quotation is <b>slightly limited</b> . The material is used in an <b>effective</b> manner and shows evidence	12-10	
	of appropriate selection and elaboration of synoptic possibilities (p.6).		
	Evaluation of biological explanations of schizophrenia with reference to the issue raised in the		
Band 3	quotation is <b>limited</b> . The material is used in a <b>reasonably effective</b> manner and shows	9-7	
	reasonable elaboration of synoptic possibilities (p.6).		
	Partial performance is thorough, highly effective and coherent (top of band) or slightly limited		
	and effective (bottom of band).		
	Evaluation of biological explanations of schizophrenia with reference to the issue raised in the		
Band 2	quotation is basic. The material is used in a restricted manner and shows some evidence of	6-4	
	elaboration of synoptic possibilities (p.6)		
	Partial performance is limited and reasonably effective with reasonable elaboration.		
	Evaluation of biological explanations of schizophrenia with reference to the issue raised in the		
Band 1	quotation is weak, muddled and incomplete. The material is not used effectively and may be	3-0	
	wholly or mainly irrelevant in terms of synoptic possibilities (p.6).		
	Partial performance is basic and restricted with some evidence of elaboration.		

3

# Total for this question: 30 marks

Compare and contrast biological **and** behavioural therapies for treating mental disorders.

(30 marks)

Compare and contrast is an AO1 and AO2 term which requires the candidate to demonstrate his or her knowledge and understanding of behavioural and biological therapies for treating mental disorders and to address similarities and differences between the two.

There are **two strategies** which examiners may use to mark answers to *compare and contrast* questions.

The **first strategy** is for 'free-standing' description of biological and behavioural therapies for treating mental disorders to be credited under the **AO1** allocation of marks. Such content should be descriptive but evaluative material *may* receive credit if it constitutes an elaboration of this description. The **AO2** allocation of marks is then awarded for explicit comparing and contrasting of the biological and behavioural therapies and may be descriptive and/or evaluative.

The **second strategy** is to credit description of similarities and differences as **AO1** and evaluation of similarities and differences as **AO2**.

These strategies are reflected in the marking allocations which follow.

Examiners should award marks according to whichever of the two strategies will earn more credit for the candidate. In almost all instances this will be determined by whether the essay comprises predominantly free-standing accounts of the explanations or whether it is predominantly comparing and contrasting.

#### STRATEGY 1

#### **Indicative AO1:**

The focus in this question is clearly on therapies, therefore answers should also have this focus. If material is presented which addresses, for example, pathologies, then only material which is serendipitously relevant should earn credit.

Gross et al. (2000) list the following behavioural therapies:

- **Based on classical conditioning:** Implosion therapy; flooding; systematic desensitisation; aversion therapy.
- **Based on operant conditioning:** Behaviour modification using extinction; punishment and positive reinforcement; token economies.

Biological therapies/treatments on the other hand, are predicated on the belief that mental disorders are illnesses which can be attributed to somatic causes. Treatments then endeavour, through techniques such as chemotherapy, to address these causes.

#### **Indicative AO2:**

Similarities and differences, identification, description and evaluation. See below.

#### **STRATEGY 2**

#### **Indicative AO1:**

#### Similarities and differences:

There are relatively few similarities between the two sets of treatments, other than they are both used to treat mental disorders or illnesses (although modal illnesses tend to differ for each). Both focus upon particular aspects of the patient and are thus reductionist (as opposed to humanistic psychology) and both focus on the individual (as opposed to cultural relativism or social constructionism which focus on the influence of culture). They are both determinist although the nature of the determinism is different.

Some of the key differences are behaviour versus biology (psychological versus medical orientation); different views of the nature-nurture debate; the nature of the treatment; the role of the patient; dependency; side effects.

**N.B.** Note that in **Strategy 2** similarities and differences will be given as 'stand-alone' statements and as such may be descriptive and/or evaluative. If there is any inter-facing or juxtaposing then the marks are given under **AO2** in this instance.

#### **Indicative AO2**

Rather than evaluating biological and behavioural therapies candidates will be evaluating similarities and differences between them. The following list of evaluative criteria given by Starbuck (1998) may be useful when comparing the biological and behavioural therapies

- How well do they help open up or extend debate?
- How well they helped the way psychologists look at a particular issue or area?
- Do they employ concepts/definitions that can be criticised?
- Do they reflect the values of a perspective or the psychologist?
- Are they outdated?
- Are they well supported by empirical evidence?
- What are the advantages/disadvantages of the method(s) used?
- Are they objective?
- What sampling procedures are normally used (e.g., use of non-human animals)?
- Can assertions or findings be generalised?
- How well do they satisfy the requirements of reliability/validity?
- Are there biases? (e.g., ethnocentricity, androcentricity, heterosexism)
- Are there alternative explanations/interpretations?
- Have they helped clarify the meaning of any concepts in psychology?
- Have they added to our understanding in the relevant area of psychology?
- Are they likely to be of any use to psychologists in the future?
- Are they useful to society in general?

# Ideas for additional synopticity:

The question has the synoptic feature of biological and behavioural perspectives (see p.6) but the following are some additional possibilities:

- different methodologies or modes of use
- ethical issues (in that biological treatments may be less reversible than behavioural treatments, for example)
- psychology as science (the perception that biological treatments, located in medicine and psychiatry, have greater scientific status)
- links across the specification (e.g., location in biological and psychological models of abnormality, from AS).

Note (injunction definition above) that candidates are required to offer both similarities and differences. If they offer only one partial performance penalties apply (see Mark Allocations).

If only one form of therapy/treatment (biological or behavioural) is offered partial performance penalties apply (see Mark Allocation).

In **Strategy 1**, if only biological or behavioural therapies are given then marks will be restricted to a maximum of top of Band 3 (9 marks) in **AO1**.

In **Strategy 1** if only similarities or differences are given in the comparing and contrasting marks will be restricted to a maximum of top of Band 3 (9 marks) in **AO2**.

In **Strategy 2** if only similarities or differences are given marks will be restricted to maximum of Band 3 (9 marks) in both **AO1** and **AO2**.

# **STRATEGY 1**

# **Question 3 Assessment Objective 1**

Description of biological and behavioural therapies for treating mental disorders

	phon of blooglear and behavioural incrapies for iteating mental disorders	7.7
<b>Band</b>	Mark allocation	Marks
	Description of biological and behavioural therapies for treating mental disorders is	
Band 5	substantial. It is accurate and well-detailed. The organisation and structure of the	15-13
	answer is coherent. There is substantial evidence of breadth/depth and synoptic	
	possibilities (p.6).	
	Description of biological and behavioural therapies for treating mental disorders is	
Band 4	slightly limited. It is accurate and reasonably detailed. The organisation and	12-10
	structure of the answer is <b>coherent</b> . There is <b>evidence</b> of breadth/depth and synoptic	
,	possibilities (p.6).	
	Description of biological and behavioural therapies for treating mental disorders is	
Band 3		9-7
Danu 3	limited. It is generally accurate and reasonably detailed. The organisation and	<b>3-</b> 1
	structure of the answer is reasonably constructed. There is some evidence of	
	breadth/depth and synoptic possibilities (p.6).	
	Partial performance is substantial, accurate and well-detailed (top of band) or slightly	
	limited, accurate and reasonably detailed (bottom of band).	
	Description of biological and behavioural therapies for treating mental disorders is	
Band 2	basic and lacking detail. There is some focus on the question. There is little	6-4
	evidence of synoptic possibilities (p.6).	
	Partial performance is limited, generally accurate and reasonably detailed.	
	Description of biological and behavioural therapies for treating mental disorders is <b>just</b>	
Band 1	discernible. It is weak and shows muddled understanding. The answer may be	3-0
	wholly or mainly irrelevant to the question's requirement. There is little or no	
	evidence of synoptic possibilities (p.6).	
	Partial performance is basic, lacking detail with little focus on the question.	

# **Assessment Objective 2**

Consideration of biological and behavioural therapies in terms of similarities and differences

Band	Mark allocation	Marks
Band 5	Consideration of biological and behavioural therapies in terms of similarities and differences between the therapies is <b>thorough</b> . The material is used in a <b>highly effective</b> manner and shows evidence of <b>appropriate selection and coherent elaboration</b> of synoptic possibilities (p.6).	15-13
Band 4	Consideration of biological and behavioural therapies in terms of similarities and differences between the therapies is <b>slightly limited</b> . The material is used in an <b>effective</b> manner and shows evidence of <b>appropriate selection and elaboration</b> of synoptic possibilities (p.6).	12-10
Band 3	Consideration of biological and behavioural therapies in terms of similarities and differences between the therapies is <b>limited</b> . The material is used in a <b>reasonably effective</b> manner and shows <b>reasonable elaboration</b> of synoptic possibilities (p.6). Partial performance is thorough, highly effective and coherent (top of band) or slightly limited and effective (bottom of band).	9-7
Band 2	Consideration of biological and behavioural therapies in terms of similarities and differences between the therapies is <b>basic</b> . The material is used in a <b>restricted</b> manner and shows <b>some evidence of elaboration</b> of synoptic possibilities (p.6)  Partial performance is limited and reasonably effective with reasonable elaboration.	6-4
Band 1	Consideration of biological and behavioural in terms of similarities and differences between the therapies is <b>weak</b> , <b>muddled and incomplete</b> . The material is <b>not used effectively</b> and may be <b>wholly or mainly irrelevant</b> in terms of synoptic possibilities (p.6).  Partial performance is basic and restricted with some evidence of elaboration.	

# OR STRATEGY 2.

# **Question 3 Assessment Objective 1**

Description of similarities and differences between biological and behavioural therapies for treating mental disorders.

D 1	disorders.	3.6
Band	Mark allocation	Marks
Band 5	Description of similarities and differences between biological and behavioural therapies is <b>substantial</b> . It is <b>accurate and well-detailed</b> . The organisation and structure of the answer is <b>coherent</b> . There is <b>substantial evidence</b> of breadth/depth and synoptic possibilities (p.6).	15-13
Band 4	Description of similarities and differences between biological and behavioural therapies is <b>slightly limited</b> . It is <b>accurate and reasonably detailed</b> . The organisation and structure of the answer is <b>coherent</b> . There is <b>evidence</b> of breadth/depth and synoptic possibilities (p.6).	12-10
Band 3	Description of similarities and differences between biological and behavioural therapies is <b>limited</b> . It is <b>generally accurate and reasonably detailed</b> . The organisation and structure of the answer is <b>reasonably constructed</b> . There is <b>some evidence</b> of breadth/depth and synoptic possibilities (p.6). Partial performance is substantial, accurate and well-detailed (top of band) or slightly limited, accurate and reasonably detailed (bottom of band).	9-7
Band 2	Description of similarities and differences between biological and behavioural therapies is <b>basic</b> and <b>lacking detail</b> . There is some <b>focus on the question</b> . There is <b>little</b> evidence of synoptic possibilities (p.6).  Partial performance is limited, generally accurate and reasonably detailed.	6-4
Band 1	Description of similarities and differences between biological and behavioural therapies is <b>just discernible</b> . It is <b>weak</b> and shows <b>muddled</b> understanding. The answer may be wholly or mainly <b>irrelevant</b> to the question's requirement. There is <b>little or no</b> evidence of synoptic possibilities (p.6).  Partial performance is basic, lacking detail with little focus on the question.	3-0

# **Assessment Objective 2**

Evaluation of similarities and differences between biological and behavioural therapies for treating mental disorders.

Band	Mark allocation	Marks
	Evaluation of similarities and differences between biological and behavioural therapies	
Band 5	is <b>thorough</b> . The material is used in a <b>highly effective</b> manner and shows evidence of	15-13
	appropriate selection and coherent elaboration of synoptic possibilities (p.6).	
	Evaluation of similarities and differences between biological and behavioural therapies	
Band 4	is <b>slightly limited</b> . The material is used in an <b>effective</b> manner and shows evidence of	12-10
	appropriate selection and elaboration of synoptic possibilities (p.6).	
	Evaluation of similarities and differences between biological and behavioural therapies	
Band 3	is <b>limited</b> . The material is used in a <b>reasonably effective</b> manner and shows	9-7
	reasonable elaboration of synoptic possibilities (p.6).	
	Partial performance is thorough, highly effective and coherent (top of band) or slightly	
	limited and effective (bottom of band).	
	Evaluation of similarities and differences between biological and behavioural therapies	
Band 2	is basic. The material is used in a restricted manner and shows some evidence of	6-4
	elaboration of synoptic possibilities (p.6)	
	Partial performance is limited and reasonably effective with reasonable elaboration.	
	Evaluation of similarities and differences between biological and behavioural therapies	
Band 1	is weak, muddled and incomplete. The material is not used effectively and may be	3-0
	wholly or mainly irrelevant in terms of synoptic possibilities (p.6).	
	Partial performance is basic and restricted with some evidence of elaboration.	

# 4 Total for this question: 30 marks

(a) Explain what is meant by the phrase "cultural bias".

(5 marks)

(b) Discuss psychological research (theories **and/or** studies) in terms of its cultural bias. (25 marks)

Explain is an AO1 term which requires the candidate to demonstrate his or her knowledge of what is meant by cultural bias.

*Discuss* is an **AO1** and **AO2** term which requires the candidate to both describe and evaluate examples of psychological research in terms of its cultural bias.

# (a) Indicative AO1:

Culture is frequently defined as the human-made part of the living environment. It refers to shared values and beliefs rather than physical boundaries. Cultural bias can occur through a variety of different activities such as ignoring the influence of culture or as seeing all human life through the perspectives of one particular culture.

Candidates can legitimately illustrate the concept by addressing sub-cultural factors (literally a culture within a culture). The conceptual differentiation between a culture and a society is not always a clear one and examiners should be tolerant of this.

Candidates may make good use of examples to enhance the quality of their definition. These would include imposed etic and historical bias. The notion of emic and etic was introduced by the anthropologist Parke (1951). An imposed etic is when the value-systems and beliefs of one culture are imposed in research upon another culture where they are not indigenous.

#### (b) Indicative AO1:

Candidates are likely to focus on one of two approaches (or combine both)

- 1. Specific examples of psychological theories and/or research. For example:
- Kohlberg's (1963) theory of moral development which is accused of Western, middle –class and individualistic bias.
- Freud's psychoanalysis (ditto)
- So-called economic theories of interpersonal attraction, e.g., Social exchange theory (Homans, 1961).
- Examples of research into psychopathology characterised by ethnocentricity
- Research into race and IQ.
- **2.** An exploration of types of cultural bias in psychological research.

Haralambos & Rice (2002) give the following examples:

- ignoring culture (important because it leaves out a key determinant of behaviour)
- culture doesn't matter (all human life is pretty much of a much-ness. Universal Man argument)
- culture change doesn't matter (a lack of historical perspective)
- culture and psychology (e.g., the accusation of Western bias)
- ethnocentrism (interpreting behaviour through the values of one particular (dominant) society.

For the AO1 marks (examiners: remember 10, not 15) these accounts should be descriptive.

The case for gender as a form of cultural bias can also be made via the argument that the different genders are social groups who share similar beliefs and practices. However, it must be emphasised that this justification must be explicitly made by the candidate. Those offering gender bias essays without such justification should receive 0 marks.

Examiners should be mindful that the focus of the question is on cultural bias and not cultural differences. No credit should be awarded for the latter unless it is serendipitously relevant.

## **Ideas for additional synopticity:**

The question has the synoptic feature of cultural bias (see p.6) but the following are some additional possibilities:

- cultural variation (for example the debates surrounding culture-bound syndromes)
- ethical issues such as socially sensitive research which marginalizes certain cultural/sub-cultural groups (e.g., gay research)
- links to other parts of the specification (such as Developmental Psychology) in Unit 4 which carry examples of culturally biased research

#### **Indicative AO2**

The material here is evaluative/ analytical. A popular approach is a critical consideration of whether or not the examples of cultural bias given for AO1 can be justified. An example here would be the Universal Man argument such as that in the area of biological psychology it could be argued that it does not matter if all participants in psychological studies are drawn from the same culture as our biological 'equipment' and functioning varies little across the world. Conversely, candidates could use examples such as those from social psychology (e.g., altruism in individualist/collectivist cultures) where it could be argued that there are clear cultural differences and ignoring these is biased and unacceptable.

#### **Ideas for additional synopticity:**

All the points made above with reference to AO1 above are relevant here but must be made relevant at analytical and/or evaluative levels. In addition, credit may be earned by employing a number of different means of evaluation or analysis.

#### Both AO1 and AO2

Note it is not intended that this question requires a plurality performance but the number of theories/studies offered will constitute the breadth of the response.

# Question 4(a): Assessment Objective 1

Explanation of cultural bias

Band	Mark allocation	Marks
Band 3	Explanation of cultural bias is reasonably thorough, accurate and coherent.	
	AS APPROPRIATE FOR 5 MARKS.	5-4
Band 2	Explanation of cultural bias is <b>limited</b> , <b>generally accurate and reasonably coherent</b> .	
	AS APPROPRIATE FOR 5 MARKS.	3-2
Band 1	Explanation of cultural bias is weak and muddled.	
	AS APPROPRIATE FOR 5 MARKS.	1-0

# **Assessment Objective 1**

Part (b): Description of psychological research in terms of its cultural bias

Band	Mark allocation	Marks
Band 5	Description of psychological research in terms of its cultural bias is <b>substantial</b> . It is <b>accurate and well-detailed</b> . The organisation and structure of the answer is <b>coherent</b> . There is <b>substantial evidence</b> of breadth/depth and synoptic possibilities (p.6). AS APPROPRIATE FOR 10 MARKS.	10-9
Band 4	Description of psychological research in terms of its cultural bias is <b>slightly limited</b> . It is <b>accurate and reasonably detailed</b> . The organisation and structure of the answer is <b>coherent</b> . There is <b>evidence</b> of breadth/depth and synoptic possibilities (p.6). AS APPROPRIATE FOR 10 MARKS.	8-7
Band 3	Description of psychological research in terms of its cultural bias is <b>limited</b> . It is <b>generally accurate and reasonably detailed</b> . The organisation and structure of the answer is <b>reasonably constructed</b> . There is <b>some evidence</b> of breadth/depth and synoptic possibilities (p.6). AS APPROPRIATE FOR 10 MARKS.	6-5
Band 2	Description of psychological research in terms of its cultural bias is <b>basic</b> and <b>lacking detail</b> . There is <b>some focus</b> on the question. There is <b>little evidence</b> of synoptic possibilities (p.6). AS APPROPRIATE FOR 10 MARKS.	4-3
Band 1	Description of psychological research in terms of its cultural bias is <b>just discernible</b> . It is <b>weak and shows muddled</b> understanding. The answer may be <b>wholly or mainly irrelevant</b> to the question's requirement. There is <b>little or no evidence</b> of synoptic possibilities (p.6).  AS APPROPRIATE FOR 10 MARKS.	2-0

# Assessment Objective 2.

Evaluation of psychological research in terms of its cultural bias

Band	Mark allocation	Marks
Dallu		Marks
	Evaluation of psychological research in terms of its cultural bias is <b>thorough</b> . The material is	
Band 5	used in a highly effective manner and shows evidence of appropriate selection and coherent	15-13
	elaboration of synoptic possibilities (p.6).	
	Evaluation of psychological research in terms of its cultural bias is slightly limited.	
Band 4	The material is used in an effective manner and shows evidence of appropriate selection and	12-10
	elaboration of synoptic possibilities (p.6).	
	Evaluation of psychological research in terms of its cultural bias is limited. The material is	
Band 3	used in a reasonably effective manner and shows reasonable elaboration of synoptic	9-7
	possibilities (p.6).	
	Evaluation of psychological research in terms of its cultural bias is <b>basic</b> . The material is used	
Band 2	in a <b>restricted</b> manner and shows <b>some evidence of elaboration</b> of synoptic possibilities (p.6).	6-4
	Evaluation of psychological research in terms of its cultural bias is weak, muddled and	
Band 1	incomplete. The material is not used effectively and may be wholly or mainly irrelevant in	3-0
	terms of synoptic possibilities (p.6).	

5

#### Total for this question: 30 marks

Critically consider ethical issues that arise in psychological investigations involving human participants. (30 marks)

Critically consider is an AO1 and AO2 term which requires the candidate to both describe and evaluate ethical issues that arise in psychological investigations involving human participants.

#### **Indicative AO1:**

It should be noted that the focus is the critical consideration of ethical issues relating to psychological investigations with human participants. Consequently the answer must be concerned with empirical studies and must not focus upon studies carried out with non-human animals (unless these are used to illustrate a relevant point or example such as Harlow's deprivation work with monkeys 'supplementing' our knowledge of deprivation effects derived from human studies, e.g. the case study of Genie) but note the point on sustained critical commentary in **AO2** below. Note that, as in all Issues & Debates questions, studies/investigations are a means to an end. In this instance they illustrate ethical issues in psychology and the focus should be on this rather than a detailed description of the study as a whole.

Likely ethical issues are those addressed by the BPS ethical guidelines (1993):

- Consent
- Deception
- Withdrawal
- Confidentiality
- Protection
- Giving advice

There is overlap with issues relating to socially sensitive research studies, which are also relevant. Sieber & Stanley (1988) offer:

- Privacy
- Confidentiality
- Sound & valid methodology
- Deception
- Informed consent
- Justice & equitable treatment
- Scientific freedom
- Ownership of data
- Values & epistemology of social scientists
- Risk/benefit ratio.

When marking those answers which largely focus on social influence experiments (e.g. those carried out by Milgram) examiners should be mindful of the A2 standard. It is reasonable to expect greater sophistication, knowledge and analytical ability than that demonstrated at AS. However, an answer solely concerned with Milgram that explores many of his studies and multiple ethical issues could attract full marks.

Candidates may choose to write about ethical concerns in the context of socially sensitive research. This is acceptable and may earn full credit.

Ethical issues arising from therapeutic practice are acceptable as these will almost certainly have been addressed in published reports of investigations.

# Ideas for additional synopticity:

The question has the synoptic feature of ethical issues (see p.6) but the following are some additional possibilities:

- certain methodologies (such as the laboratory experiment) may, historically, be more associated
  with ethical concerns such as deception than other methodologies (such as interviews or
  observations).
- gender bias (the marginalisation of women in psychological research according to writers such as Kitzinger).
- links across the specification to particular areas which raise ethical concerns such as deprivation and privation in AS.

#### **Indicative AO2:**

The focus here is on evaluation/analysis of the issues. This might be in terms of whether ethical controversy in specified studies can be justified (e.g., cost-benefit analysis) or how effective ethical guidelines have been in influencing how the studies have been carried out.

Those focusing on Milgram's obedience to authority studies can legitimately focus on a critical orientation to issues such as de-briefing, counselling, and additional knowledge about how people behave in certain situations. This constitutes an evaluation of the study in terms of how it addressed ethical issues. The same principal should be applied to other studies.

Candidates who simply describe alternative research evidence without using this material as part of a sustained commentary may receive a maximum to the top of Band 1 for this skill component.

# Ideas for additional synopticity:

All the points made above with reference to **AO1** above are relevant here but must be made relevant at analytical and/or evaluative levels. In addition, credit may be earned by employing a number of different means of evaluation or analysis.

Note it is not intended that this question requires a plurality performance but the number of issues will constitute the breadth of the response.

If there is just a study, no marks.

Answers which focus on guidelines should be assessed on their merits.

# Question 5. AO1

Description of ethical issues that arise in psychological investigations involving humans

Band	Mark allocation	Marks
	Description of ethical issues that arise in psychological investigations involving	
Band 5	humans is <b>substantial</b> . It is <b>accurate and well-detailed</b> . The organisation and	15-13
	structure of the answer is <b>coherent</b> . There is <b>substantial evidence</b> of breadth/depth	
	and synoptic possibilities (p.6).	
	Description of ethical issues that arise in psychological investigations involving	
Band 4	humans is slightly limited. It is accurate and reasonably detailed.	12-10
	The organisation and structure of the answer is <b>coherent</b> . There is <b>evidence</b> of	
	breadth/depth and synoptic possibilities (p.6).	
	Description of ethical issues that arise in psychological investigations involving	
Band 3	humans is limited. It is generally accurate and reasonably detailed.	9-7
	The organisation and structure of the answer is <b>reasonably constructed</b> . There is	
	some evidence of breadth/depth and synoptic possibilities (p.6).	
	Description of ethical issues that arise in psychological investigations involving	
Band 2	humans is basic and lacking detail. There is some focus on the question. There is	6-4
	<b>little evidence</b> of synoptic possibilities (p.6).	
	Description of ethical issues that arise in psychological investigations involving	
Band 1	humans is just discernible. It is weak and shows muddled understanding.	3-0
	The answer may be <b>wholly or mainly irrelevant</b> to the question's requirement.	
	There is <b>little or no evidence</b> of synoptic possibilities (p.6).	

# AO2

Evaluation of ethical issues that arise in psychological investigations involving humans

Band	Mark allocation	Marks
Band 5	Evaluation of ethical issues that arise in psychological investigations involving humans is <b>thorough</b> . The material is used in a <b>highly effective</b> manner and shows evidence of <b>appropriate selection and coherent elaboration</b> of synoptic possibilities (n. 6)	15-13
	possibilities (p.6).  Evaluation of ethical issues that arise in psychological investigations involving	
Band 4	humans is <b>slightly limited</b> . The material is used in an <b>effective</b> manner and shows evidence of <b>appropriate selection and elaboration</b> of synoptic possibilities (p.6).	12-10
	Evaluation of ethical issues that arise in psychological investigations involving	
Band 3	humans is <b>limited</b> . The material is used in a <b>reasonably effective</b> manner and shows <b>reasonable elaboration</b> of synoptic possibilities (p.6).	9-7
	Evaluation of ethical issues that arise in psychological investigations involving	
Band 2	humans is <b>basic</b> . The material is used in a <b>restricted</b> manner and shows <b>some evidence of elaboration</b> of synoptic possibilities (p.6).	6-4
	Evaluation of ethical issues that arise in psychological investigations involving	
Band 1	humans is <b>weak</b> , <b>muddled and incomplete</b> . The material is <b>not used effectively</b> and may be <b>wholly or mainly irrelevant</b> in terms of synoptic possibilities (p.6)	3-0

Total for this question: 30 marks

6

(a) Explain what is meant by the free will and determinism debate.

(5 marks)

(b) Discuss free will and determinism in relation to **two or more** psychological theories. (25 marks).

Explain is an **AO1** term which requires the candidate to present his or her knowledge of what is meant by the free will and determinism debate.

*Discuss* is an **AO1** and **AO2** term which requires the candidate to both describe and evaluate the concepts of free will and determinism in relation to two or more psychological theories.

# (a) Indicative AO1:

Cardwell (2003) offers the following:

"Free will versus determinism refers to the debate between those who believe that behaviour is determined by external or internal factors acting upon the individual (determinism), and those who believe that people respond actively to events around them (freedom). The notion of pure free will suggests that events are uncaused or completely random. This is not what psychologists mean by free will. An individual's behaviour is seen not as being determined by external events (such as conditioning) but rather that they act consistently with their character (soft determinism)".

Examiners should bear in mind that the allocation of marks is only 5, this means this has a notional time allocation of around 6 minutes so it is unreasonable to expect particularly detailed or lengthy answers. Note that the explanation does not have to be in the context of psychology.

#### (b) Indicative AO1:

Candidates are required here to give a descriptive account of free will and determinism in relation to two more psychological theories. Note therefore that answers which address studies should not earn **AO1** credit unless they add to the descriptive account of a theory or theories. They may be counted as **AO2** but note the point made below about sustained critical commentary in **AO2**.

Two possible pitfalls are that candidates may write generally about free will and determinism without relating it to psychological theories and/or they may focus on the theories but insufficiently relate them to the free will and determinism. In both instances material should receive credit only to the extent that it fulfils the requirements of the question.

Candidates are likely to include behaviourism, bio-determinism, psychoanalysis and humanistic psychology. The **AO1** will then be a descriptive account of how the theory is characterised by free—will and determinism. For example, behaviourism is deterministic (environmental determinism). Skinner (1971) argues that free-will is a fallacy. Humanistic Psychology, on the other hand, argued for free will although, Rogers (1983) later altered his position somewhat. See Gross (2003) for summary.

## **Ideas for additional synopticity:**

The question has the synoptic feature of free will and determinism (see p.6) but the following are some additional possibilities:

- ethical issues (such as responsibility for one's actions)
- psychology as a science (given that science is often seen as deterministic)
- examples drawn from the specification (e.g., models of abnormality from AS)

#### **Indicative AO2:**

This is likely to be an analysis/evaluation of the **AO1** points made. Possibilities include the appropriateness or usefulness of a free will and determinism analysis and what it tells us about the human condition (for example in terms of determinants of our behaviour and experiences).

One strength of determinism is that it enables experiments to be carried out which could then be applied to determinist theories (e.g., behaviourism). One weakness is that if one takes the determinist stance to its ultimate position it suggests that individuals do not have moral responsibility (Flanagan 2002). The belief in free will creates two problems: it is hard to provide a precise account of what is meant by free will, and most successful sciences are based on the assumption of determinism even if one recognises that uncertainty principles may operate (Eysenck & Flanagan, 2001).

The point made in **AO1** above about the two possible pitfalls applies equally here. Examiners should be particularly mindful of the need for candidates to demonstrate 'sustained critical commentary'. To gain credit answers must consistently relate to theories illustrating the free will and determinism debate and *use* such material as commentary.

# Ideas for additional synopticity:

All the points made above with reference to **AO1** above are relevant here but must be made relevant at analytical and/or evaluative levels. In addition, credit may be earned by employing a number of different means of evaluation or analysis.

## Both AO1 and AO2

Candidates are required to offer two or more psychological theories. If only one is given partial performance penalties apply (see mark allocations).

Examiners should be mindful of the depth/breadth trade-off when marking the work of candidates who offer two theories and those offering more than this.

# Question 6(a): Assessment Objective 1

Explanation of what is meant by the free will and determinism debate

Band	Mark allocation	Marks
Band 3	Explanation of what is meant by the free will and determinism debate is <b>reasonably thorough, accurate and coherent.</b> AS APPROPRIATE FOR 5 MARKS.	5-4
Band 2	Explanation of what is meant by the free will and determinism debate is <b>limited</b> , <b>generally accurate and reasonably coherent</b> . AS APPROPRIATE FOR 5 MARKS.	3-2
Band 1	Explanation of what is meant by the free will and determinism debate is <b>weak and muddled</b> .  AS APPROPRIATE FOR 5 MARKS.	1-0

# Question 6(b): Assessment Objective 1

Description of free will and determinism in relation to two or more psychological theories

	Mark allocation	Marks
Band		Marks
	Description of free will and determinism in relation to two or more psychological	
Band 5	theories is substantial. It is accurate and well-detailed. The organisation and	10-9
	structure of the answer is <b>coherent</b> . There is <b>substantial evidence</b> of breadth/depth	
	and synoptic possibilities (p.6).	
	AS APPROPRIATE FOR 10 MARKS.	
	Description of free will and determinism in relation to two or more psychological	
Band 4	theories is slightly limited. It is accurate and reasonably detailed.	8-7
2020	The organisation and structure of the answer is <b>coherent</b> . There is <b>evidence</b> of	0 /
	breadth/depth and synoptic possibilities (p.6).	
	AS APPROPRIATE FOR 10 MARKS.	
D 10	Description of free will and determinism in relation to two or more psychological	<i>-</i>
Band 3	theories is limited. It is generally accurate and reasonably detailed.	6-5
	The organisation and structure of the answer is <b>reasonably constructed</b> . There is	
	<b>some evidence</b> of breadth/depth and synoptic possibilities (p.6).	
	Partial performance is thorough, highly effective and coherent (top of band) or	
	slightly limited and effective (bottom of band)	
	AS APPROPRIATE FOR 10 MARKS.	
	Description of free will and determinism in relation to two or more psychological	
Band 2	theories is basic and lacking detail. There is some focus on the question. There is	4-3
	little evidence of synoptic possibilities (p.6).	
	Partial performance is limited and reasonably effective with reasonable elaboration.	
	AS APPROPRIATE FOR 10 MARKS.	
	Description of free will and determinism in relation to two or more psychological	
Band 1	theories is just discernible. It is weak and shows muddled understanding.	2-0
	The answer may be <b>wholly or mainly irrelevant</b> to the question's requirement.	-
	There is <b>little or no evidence</b> of synoptic possibilities (p.6).	
	Partial performance is basic and restricted with some evidence of elaboration.	
	AS APPROPRIATE FOR 10 MARKS.	
	AD ALL KOLKIALL LOK TO WAKKS.	

# 6(b) Assessment Objective 2.

Evaluation of free will and determinism in relation to two or more psychological theories

Band	Mark allocation	Marks
Band 5	Evaluation of free will and determinism in relation to two or more psychological theories is <b>thorough</b> . The material is used in a <b>highly effective</b> manner and shows evidence of <b>appropriate selection and coherent elaboration</b> of synoptic possibilities (p.6).	15-13
Band 4	Evaluation of free will and determinism in relation to two or more psychological theories is <b>slightly limited</b> . The material is used in an <b>effective</b> manner and shows evidence of <b>appropriate selection and elaboration</b> of synoptic possibilities (p.6).	12-10
Band 3	Evaluation of free will and determinism in relation to two or more psychological theories is <b>limited</b> . The material is used in a <b>reasonably effective</b> manner and shows <b>reasonable elaboration</b> of synoptic possibilities (p.6).	9-7
	Partial performance is thorough, highly effective and coherent (top of band) or slightly limited and effective (bottom of band).	
Band 2	Evaluation of free will and determinism in relation to two or more psychological theories is <b>basic</b> . The material is used in a <b>restricted</b> manner and shows <b>some evidence of elaboration</b> of synoptic possibilities (p.6).  Partial performance is limited and reasonably effective with reasonable elaboration.	6-4
Band 1	Evaluation of free will and determinism in relation to two or more psychological theories is <b>weak</b> , <b>muddled and incomplete</b> . The material is <b>not used effectively</b> and may be <b>wholly or mainly irrelevant</b> in terms of synoptic possibilities (p.6). <i>Partial performance is basic and restricted with some evidence of elaboration</i> .	3-0

7 Total for this question: 30 marks

Describe **and** evaluate the claim that psychology is a science.

(30 marks)

*Describe* is an **AO1** term which requires the candidate to present evidence in relation to the claim that psychology is a science.

*Evaluate* is an **AO2** term which requires the candidate to give evidence of **AO2** with relation to the claim that psychology is a science.

#### **Indicative AO1:**

This part of the answer is likely to be a descriptive detailing of the claim that psychology *is* a science. Many arguments have been presented, for example Eysenck (2000) offers the following arguments for psychology being a science:

- Some theories in psychology have been successful in achieving the scientific goals of prediction, understanding and control.
- Some theories have also satisfied Popper's criterion of falsifiability (i.e., been disproved by empirical studies).
- There has been considerable success in replicability.

An alternative, popular approach is to address the criteria of science (some would argue sciences, plural) and of different branches of psychology. **AO2** (below) would then be a critical exploration of the match between the two.

# Ideas for additional synopticity:

The question has the synoptic feature of psychology as science (see p.6) but the following are some additional possibilities:

- methodologies (with some, e.g., the laboratory experiment, being considered more scientific than others, e.g., case studies)
- the use of non-human animals (e.g., issues of control and manipulation)
- reductionism (as one of the generally held characteristics of science)
- links across the specification to areas which tend to support the argument (e.g., cognitive psychology) and those which are less secure (e.g., psychoanalysis)

# **Indicative AO2:**

The three main approaches to providing this are:

- An evaluation/analysis of the arguments, such as those given above, for psychology being a science.
- A critical match of the criteria of science with those of branches of psychology which are described for **AO1** (see above).
- Arguments *against* psychology as a science. Eysenck (2000) lists the following
  - Imprecise formulation of many theories and models.
  - Lack of objectivity of some data.
  - Influence of the researcher upon the data gathering process (e.g., demand characteristics; participant reactivity) and interpretation of data (e.g., by expectation and influence of culture biases).
  - Lack of ecological validity.
  - Lack of a Kuhnian paradigm.

# Ideas for additional synopticity:

All the points made above with reference to **AO1** above are relevant here but must be made relevant at analytical and/or evaluative levels. In addition, credit may be earned by employing a number of different means of evaluation or analysis.

**Question 7: Assessment Objective 1**Description of claim that psychology is a science

	prior of claim that psychology is a science	
Band	Mark allocation	Marks
	Description of claim that psychology is a science is <b>substantial</b> . It is <b>accurate and</b>	
Band 5	well-detailed. The organisation and structure of the answer is coherent. There is	15-13
	substantial evidence of breadth/depth and synoptic possibilities (p.6).	
	Description of claim that psychology is a science is <b>slightly limited</b> . It is <b>accurate and</b>	
Band 4	<b>reasonably detailed</b> . The organisation and structure of the answer is <b>coherent</b> . There	12-10
	is <b>evidence</b> of breadth/depth and synoptic possibilities (p.6).	
	Description of claim that psychology is a science is <b>limited</b> . It is <b>generally accurate</b>	
Band 3	and reasonably detailed. The organisation and structure of the answer is reasonably	9-7
	<b>constructed</b> . There is <b>some evidence</b> of breadth/depth and synoptic possibilities (p.6).	
	Description of claim that psychology is a science is <b>basic and lacking detail</b> . There is	
Band 2	<b>some focus</b> on the question. There is <b>little evidence</b> of synoptic possibilities (p.6).	6-4
	Description of claim that psychology is a science is just discernible. It is weak and	
Band 1	shows muddled understanding. The answer may be wholly or mainly irrelevant to	3-0
	the question's requirement. There is <b>little or no evidence</b> of synoptic possibilities (p.6)	

# **Assessment Objective 2**

Evaluation of claim that psychology is a science

Band	Mark allocation	Marks
Band 5	Evaluation of claim that psychology is a science is <b>thorough</b> . The material is used in a <b>highly effective</b> manner and shows evidence of <b>appropriate selection and coherent elaboration</b> of synoptic possibilities (p.6).	15-13
Band 4	Evaluation of claim that psychology is a science is <b>slightly limited</b> . The material is used in an <b>effective</b> manner and shows evidence of <b>appropriate selection and elaboration</b> of synoptic possibilities (p.6).	12-10
Band 3	Evaluation of claim that psychology is a science is <b>limited</b> . The material is used in a <b>reasonably effective</b> manner and shows <b>reasonable elaboration</b> of synoptic possibilities (p.6).	9-7
Band 2	Evaluation of claim that psychology is a science is <b>basic</b> . The material is used in a <b>restricted</b> manner and shows <b>some evidence</b> of elaboration of synoptic possibilities (p.6).	6-4
Band 1	Evaluation of claim that psychology is a science is <b>weak</b> , <b>muddled and incomplete</b> . The material is <b>not used effectively</b> and may be <b>wholly or mainly irrelevant</b> in terms of synoptic possibilities (p.6).	3-0

8

#### Total for this question: 30 marks

A newspaper article claimed that many young people are going to the cinema these days to see horror films. Although the films are not particularly popular in terms of video and DVD rentals, many people are going to see them at cinemas, and there is evidence that the young people frequently go in groups to see the films. The young people say that they enjoy the experience of being shocked and frightened by sequences in the films, and enjoy sharing these moments with their friends.

- (a) Describe how the popularity of horror films might be explained by **two** different approaches. (6 marks + 6 marks)
- (b) Assess **one** of these explanations of the popularity of horror films in terms of its strengths and limitations. (6 marks)
- (c) How might the popularity of horror films be investigated by **one** of these approaches? (6 marks)
- (d) Evaluate the use of this method of investigating the popularity of horror films.

  (6 marks)

It must be clearly appreciated that the Approaches questions are concerned with epistemology rather than ontology, thus the candidate is rewarded for demonstrating knowledge of how a particular approach would endeavour to explore the topic in questions. Answers which focus on particular studies or published accounts should receive credit only insofar as these illustrate an understanding and critical appreciation of the theoretical and methodological orientations of the general approach to the hypothetical example given in the question.

#### **Illustration of the approaches:**

- Psychodynamics. Jarvis (2003) shows that a good deal of fascination with horror in films and television can be explained by psychoanalytic theory. For example monsters can act as symbols for feared objects in the unconscious, either at the level of the individual (Freud) or the collective (Jungian archetypes). The resolution of the tension in the horror scenes can be cathartic. It also permits the exploration of frightening events in a safe and secure environment.
- Social psychology. The stimulus material makes several mentions of the fact that the young people like to watch the films in groups (at the cinema, rather than at home on video or DVD). As well as picking up on the last point above (about permitting the exploration of frightening events in a safe environment) there are also several other factors of significance in social viewing. It may be, for example, that as a popular activity there is social status to going to see the films and the genre-bias may be a form of in-group identification.

The method described should clearly be one associated with, or be appropriate to, the approach chosen. Illustration of methodology:

• A psychoanalyst would be interested in employing the clinical method on the horror film viewers. As the cause is likely to reside in the unconscious the investigation would utilise methods such as dream analysis and projective techniques. Results from case studies could then be generalised from specific individuals to other people who also derive such pleasure.

Export can be done between (a) and (b) and between (c) and (d) but not between any other combination.

• A social psychologist might carry out a laboratory experiment. A hypothesis could be that people gain more pleasure from watching films in the company of others than on their own. They could explore the influence of genre in such a study. One group could watch a film on their own and self-report on their enjoyment of the experience whilst a second group (controlled for personality variables, etc.) could watch a film with friends and self-report on their enjoyment.

In all parts of the Approaches question candidates are required to engage with the stimulus material, as distinct from presenting pre-prepared material on Approaches. Some candidates may simply add a few appropriate words (such as 'horror films'). This tactic is unlikely to raise a candidate's mark above Band 1 (Basic). On the other hand, some candidates may *shape* their responses in order to address issues in the stimulus material. Such responses could gain full marks depending on the degree of shaping for purpose. The extent to which candidates have used their knowledge to effectively answer the four parts of the question constitutes the merit of their response.

Some candidates may describe a way of investigating the phenomena which is clearly appropriate to one approach identified in (a) but operationalises the variables without explicit reference to the stimulus. Such responses may gain credit insofar as they accurately portray methodology and assumptions of the chosen approach.

# Question 8(a) Assessment Objective 1

AO1: For description of each approach

Band	Mark allocation	Marks
Band 3	Psychological content is reasonably thorough and accurate. Engagement with the stimulus	6-5
	material is <b>coherent</b> .	
Band 2	Psychological content is <b>limited and generally accurate</b> . Engagement with the stimulus material is	
	reasonable.	
Band 1	Psychological content is basic, sometimes flawed and inaccurate. Engagement with the stimulus	2-0
	material is <b>muddled</b> or there is <b>no meaningful attempt</b> to engage with the stimulus material.	

# Question 8 (b) Assessment Objective 2

AO2: For assessment of strengths and weaknesses of one approach

Band	Mark allocation	Marks		
Band 3	There is <b>reasonably thorough</b> commentary and evaluation of one of the approaches given in (a).			
	Material has been used in an <b>effective</b> manner. Engagement with the stimulus material is <b>coherent</b> .			
Band 2	There is <b>limited commentary</b> and evaluation of one of the approaches given in (a). Material has			
	been used in a <b>reasonably effective</b> manner. Engagement with the stimulus material is <b>reasonable</b> .			
	If there is partial performance strengths or limitations is reasonably thorough and engagement with			
	the stimulus material is coherent. Material has been used in an effective manner. Engagement with			
	material is coherent.			
Band 1	There is <b>basic</b> commentary and evaluation of one of the approaches given in (a).	2-0		
	The material has been used in a <b>restricted</b> manner. Engagement with the stimulus material is			
	muddled or there is no meaningful attempt to engage with the stimulus material.			
	If there is partial performance strengths or limitations is limited. Material has been used in a			
	reasonably effective manner. Engagement with the stimulus material is reasonably.			

# Question 8 (c) Assessment Objective 2

AO2: For one approach investigating the phenomenon

Band	Mark allocation	Marks
Band 3	There is <b>reasonably thorough</b> commentary in relation to how one of the approaches in (a) might	6-5
	investigate the topic in question. The plausibility of the answer is appropriate. Engagement with	
	the stimulus material is <b>coherent</b> .	
Band 2	There is <b>limited</b> commentary in relation to how one of the approaches in (a) might investigate the	4-3
	topic in question. The plausibility of the answer is <b>reasonably appropriate</b> . Engagement with the	
	stimulus material is <b>reasonable</b> .	
Band 1	There is <b>basic</b> commentary in relation to how one of the approaches in (a) might investigate the	2-0
	topic in question. The plausibility of the answer is largely inappropriate. Engagement with the	
	stimulus material is muddled or there is no meaningful attempt to engage with the stimulus	
	material.	

# Question 8 (d) Assessment Objective 2

AO2: For evaluation of this investigative approach.

Band	Mark allocation	Marks
Band 3	There is <b>reasonably thorough</b> commentary and evaluation of the method used in (c) to investigate	6-5
	the topic in question. Material has been used in an <b>effective</b> manner. Engagement with the stimulus	
	material is <b>coherent</b> .	
Band 2	There is <b>limited</b> commentary and evaluation of the method used in (c) to investigate the topic in	4-3
	question. Material has been used in a <b>reasonably effective</b> manner. Engagement with the stimulus	
	material is <b>reasonable</b> .	
Band 1	There is basic commentary and evaluation of the method used in (c) to investigate the topic in	2-0
	question. The material has been used is restricted. Engagement with the stimulus material is	
	muddled or there is no meaningful attempt to engage with the stimulus material.	

9

# Total for this question: 30 marks

Kirsty read her horoscope in the daily newspaper every morning. She also read other horoscopes in her teen magazines. She felt she needed to know whether a lucky or unlucky day lay ahead of her and what kinds of things were likely to happen to her. An unfavourable horoscope sometimes caused her to change her plans. However, a favourable horoscope made her feel good.

- (a) Describe how people's dependence on horoscopes might be explained by **two** different approaches. (6 marks + 6 marks)
- (b) Assess **one** of these explanations of people's dependence on horoscopes in terms of its strengths and limitations. (6 marks)
- (c) How might people's dependence on horoscopes be investigated by **one** of these approaches? (6 marks)
- (d) Evaluate the use of this method of investigating people's dependence on horoscopes.

  (6 marks)

It must be clearly appreciated that the Approaches questions are concerned with epistemology rather than ontology, thus the candidate is rewarded for demonstrating knowledge of how a particular approach would endeavour to explore the topic in questions. Answers which focus on particular studies or published accounts should receive credit only insofar as these illustrate an understanding and critical appreciation of the theoretical and methodological orientations of the general approach to the hypothetical example given in the question.

#### Illustration of the approaches:

- Cognitive psychology. Horoscope reading could provide people with a schema or cognitive organisational framework for their understanding/expectation of the day ahead. It could provide them with 'sense-making' interpretations for things which happen to them.
- Behaviourism. People might find it reassuring/rewarding when predictions came 'true'. They
  may actually act in such a manner as to increase the likelihood of them coming true (and then
  find this rewarding). They may observe the behaviour of others reading horoscopes and model
  this behaviour themselves.

The method described should clearly be one associated with, or be appropriate to, the approach chosen. Illustration of methodology:

- cognitive psychologists might carry out interviews to examine how people such as Kirsty view
  their horoscope reading. Interviews could be structured, semi-structured or open ended. The
  analysis of results (such as identification of recurrent themes) would be dependent upon the form
  of interview used. In any eventuality the psychologist would be interested in identifying modes
  of cognitive representation and schema.
- A behaviourist might carry out an experiment. An independent variable could be predictability
  of outcome with participants divided into groups where predictability is high or low and the
  dependent variable could be how much security or self-confidence is generated within each
  group. Confounding variables might include personality differences such as those measured by
  psychometric tools such as the EPI.

In all parts of the Approaches question candidates are required to engage with the stimulus material, as distinct from presenting pre-prepared material on Approaches. Some candidates may simply add a few appropriate words (such as 'Kirsty' or 'horoscope reading'). This tactic is unlikely to raise a candidate's mark above Band 1 (Basic). On the other hand, some candidates may *shape* their responses in order to address issues in the stimulus material. Such responses could gain full marks depending on the degree of shaping for purpose. The extent to which candidates have used their knowledge to effectively answer the four parts of the question constitutes the merit of their response.

Some candidates may describe a way of investigating the phenomena which is clearly appropriate to one approach identified in (a) but operationalises the variables without explicit reference to the stimulus. Such responses may gain credit insofar as they accurately portray methodology and assumptions of the chosen approach.

Export can be done between (a) and (b) and between (c) and (d) but not between any other combination.

# Question 9(a) Assessment Objective 1

AO1: For description of each approach

Band	Mark allocation	Marks
Band 3	Psychological content is reasonably thorough and accurate. Engagement with the stimulus	6-5
	material is <b>coherent</b> .	
Band 2	Psychological content is <b>limited and generally accurate</b> . Engagement with the stimulus material is	
	reasonable.	
Band 1	Psychological content is basic, sometimes flawed and inaccurate. Engagement with the stimulus	2-0
	material is <b>muddled</b> or there is <b>no meaningful attempt</b> to engage with the stimulus material.	

# Question 9 (b) Assessment Objective 2

AO2: For assessment of strengths and weaknesses of one approach

Band	Mark allocation	Marks		
Band 3	There is <b>reasonably thorough</b> commentary and evaluation of one of the approaches given in (a).			
	Material has been used in an <b>effective</b> manner. Engagement with the stimulus material is <b>coherent</b> .			
Band 2	There is <b>limited</b> commentary and evaluation of one of the approaches given in (a). Material has been used in a <b>reasonably effective</b> manner. Engagement with the stimulus material is <b>reasonable</b> . If there is partial performance strengths or limitations is reasonably thorough and engagement with the stimulus material is coherent. Material has been used in an effective manner. Engagement with material is coherent.	4-3		
Band 1	There is <b>basic</b> commentary and evaluation of one of the approaches given in (a). The material has been used in a <b>restricted</b> manner. Engagement with the stimulus material is <b>muddled</b> or there is <b>no meaningful attempt</b> to engage with the stimulus material.  If there is partial performance strengths or limitations is limited. Material has been used in a reasonably effective manner. Engagement with the stimulus material is reasonably.	2-0		

# Question 9 (c) Assessment Objective 2

AO2: For one approach investigating the phenomenon

Band	Mark allocation	Marks
Band 3	There is <b>reasonably thorough</b> commentary in relation to how one of the approaches in (a) might	6-5
	investigate the topic in question. The plausibility of the answer is appropriate. Engagement with	
	the stimulus material is <b>coherent</b> .	
Band 2	There is <b>limited</b> commentary in relation to how one of the approaches in (a) might investigate the	4-3
	topic in question. The plausibility of the answer is reasonably appropriate. Engagement with the	
	stimulus material is <b>reasonable</b> .	
Band 1	There is <b>basic</b> commentary in relation to how one of the approaches in (a) might investigate the topic	2-0
	in question. The plausibility of the answer is largely inappropriate. Engagement with the stimulus	
	material is <b>muddled</b> or there is <b>no meaningful attempt</b> to engage with the stimulus material.	

# Question 9 (d) Assessment Objective 2

AO2: For evaluation of this investigative approach.

Band	Mark allocation	Marks
Band 3	There is <b>reasonably thorough</b> commentary and evaluation of the method used in (c) to investigate	6-5
	the topic in question. Material has been used in an <b>effective</b> manner. Engagement with the stimulus	
	material is <b>coherent</b> .	
Band 2	There is <b>limited</b> commentary and evaluation of the method used in (c) to investigate the topic in	4-3
	question. Material has been used in a reasonably effective manner. Engagement with the stimulus	
	material is <b>reasonable</b> .	
Band 1	There is <b>basic</b> commentary and evaluation of the method used in (c) to investigate the topic in	2-0
	question. The material has been used is <b>restricted</b> . Engagement with the stimulus material is	
	muddled or there is no meaningful attempt to engage with the stimulus material.	

# A LEVEL/A2 UNIT 5: ASSESSMENT GRID

<b>Question number</b>	AO1	AO2
1(a) & (b)	15	15
2	15	15
3	15	15
4(a)	5	
(b)	10	15
5	15	15
6(a)	5	
(b)	10	15
7	15	15
8(a)	12	
(b) (c)		6
(c)		6
(d)		6
9(a)	12	
(b)		6
(c)		6
(d)		6

Marks	AO1	AO2
Total marks for 3 questions	42	48
QoWC	4	
Total for paper	46	48
A-level total weighting	9.6%	10.4%
(20%)		