

Student responses with examiner commentary

A-level Psychology 7182/1 (Specimen Material Second set)
Paper 1 Introductory Topics in Psychology

[First teaching: September 2015]

[First Examination: Summer 2017]

Introduction

These resources should be used in conjunction with the Specimen Assessment Material 7182/1 (second set) from the AQA website. This document illustrates how examiners intend to apply the mark scheme in live papers. The question papers will be marked using a levels of response mark scheme. These answers and the accompanying commentaries have been produced to help you understand what is required to achieve the different levels and how the mark scheme is to be interpreted. These principles of marking apply across all papers.

While every attempt has been made to show a range of student responses, the following responses, and examiner comments provide teachers with the best opportunity to understand the application of the mark scheme. Responses have not been produced for every question but rather cover a variety of different types of questions and topic areas.

*Please note that the students' responses have been typed exactly as they were written.

QUESTION

01 Outline **two** explanations for obedience.

[6 marks]

MARK SCHEME

Marks for this question: AO1 = 6

Level	Marks	Description
3	5–6	Knowledge of two explanations of obedience is clear and accurate. The answer is clear and coherent. Specialist terminology is used effectively.
2	3–4	Some knowledge of two explanations of obedience but there may be some detail missing/lack of clarity. There is some appropriate use of specialist terminology.
1	1–2	Some knowledge of an explanation of obedience is evident but lacks clarity/detail/links to obedience. Specialist terminology is either absent or inappropriately used.
	0	No relevant content.

Possible explanations:

- Authoritarian personality: a collection of traits/dispositions developed from strict/rigid parenting; examples of traits – conformist /conventional/dogmatic; obedient/servile towards people of perceived higher status
- Legitimacy of authority: of context/setting; genuineness/status of authority figure.
- Agentic shift/state: person ‘unthinkingly’ carries out orders; diffusion of responsibility.
- Accept other possible explanations: eg ‘foot in the door’/gradual commitment; credit situational ‘factors’ that affect obedience if these are presented as explanations.
- Accept details of Milgram’s original study/variation/other obedience research as elaboration/illustration of the explanation.

Exemplar response

One explanation is legitimate authority. This is where someone is obeyed because it is thought he/she has the right to give the order. The person wholly has power to administer sanctions. We are brought socialised up to follow orders given by legitimate authority figures with higher status than our self. Another is when we find ourselves in the Agentic State. We see ourselves as agents of the person giving the order.

Examiner commentary

This is a Level 2 response. There is some knowledge of two explanations of obedience and the first explanation – ‘legitimate authority’ - is sufficiently detailed. However, there is detail missing regarding the second explanation – ‘agentic state’. There is appropriate use of specialist terminology.

Mark awarded = 4

QUESTION

02 Briefly evaluate **one** of the explanations that you have outlined in your answer to **question 01**.

[3 marks]

MARK SCHEME

Marks for this question: AO3 = 3

3 marks for brief evaluation of one of the explanations presented in 01. Full marks may be awarded for a single point fully elaborated or for a number of points briefly stated. Content will depend on the explanation chosen.

Possible content:

- Use of evidence/analysis of evidence to illustrate the validity of the explanation
- Methodological evaluation of evidence (if used as commentary to assess the strength, or otherwise, of the explanation)
- Strengths and/or limitations of the explanation
- Comparison with alternatives.

Exemplar response

Variations of Milgram's experiment demonstrate the power of legitimate authority and provide support for this explanation. On average a much higher number (65%) of all participants obeyed the authority figure when he wore the "uniform" of a scientist IE lab coat.

Examiner commentary

There is an attempt to show how the evidence can be used to support the explanation of legitimate authority but for full marks there would need to be some expansion such as comparison with 'a variation' e.g. the per cent when the researcher is not present as an 'authority figure'/did not wear a laboratory coat etc.

Mark awarded = 2

QUESTION

- 03** Use your knowledge of conformity **and** minority influence to explain the factors that will determine how successful the small group of students will be.

[7 marks]

MARK SCHEME

Marks for this question: AO2 = 7

Level	Marks	Description
4	6–7	Knowledge of conformity and minority influence research/concepts is clear and generally well detailed. Application to the situation described is clear and effective. The answer is coherent with appropriate use of terminology.
3	4–5	Knowledge of conformity and minority influence research/concepts is evident. There is some effective application to the situation described. The answer is mostly clear and organised but may lack clarity in places. Specialist terminology mostly used effectively.
2	2–3	Knowledge of conformity and/or minority influence research/concepts is limited. Application to the situation described may lack clarity or be inappropriate. The answer may lack accuracy and organisation. Specialist terminology used inappropriately on occasions.
1	1	The answer constitutes little more than a 'list' of concepts related to conformity and/or minority influence. There is no attempted application.
	0	No relevant content.

Possible content:

- Factors affecting minority influence: the student body are more likely to be convinced if the group of students are consistent, committed and show flexibility in their views
- Credit examples of how the students might demonstrate this.
- Credit application of explanations of minority influence: eg social cryptoamnesia; the snowball effect; social impact theory.
- Application of variables affecting conformity, including group size (the campaigning group is 'small', the student body is the majority); unanimity (there may be other students who agree with the small group); etc.
- Credit application of explanations of conformity: eg explanations of how views may change through informational social influence/internalisation.

Exemplar response

Students need to start by being flexible, committed and non-dynamic in their views. They need to show their peers why going paper-free is beneficial and if they can be seen to have made some sacrifice for their movement, they will be even more persuasive. If initially they can persuade a few people to join them it is likely this will be through ISI, their peers will see the benefits to themselves and the environment of being paper-free. Gradually more and more students will join this campaign and it will reach a tipping point when the minority becomes the majority. At this stage the social influence will shift from ISI to NSI.

Examiner commentary

This is a Level 3 response. There is knowledge of conformity **and** minority influence and the application to the situation described is reasonably clear and effective. The answer makes appropriate use of terminology although some of the terms could have been explained. For example, there is an assumption that ISI and NSI are known acronyms and these should be outlined more fully initially and linked to 'conformity'. The answer should be more overtly linked to the concept of minority influence too. For example, it is evidence from minority influence studies that has shown the importance of the students being 'flexible, committed and non-dynamic'.

Mark awarded = 4

QUESTION

04 Outline the procedures **and** findings of Zimbardo's research into conformity to social roles.

[4 marks]

MARK SCHEME

Marks for this question: AO1 = 4

Level	Marks	Description
2	3–4	Knowledge of the procedures and findings of Zimbardo's research into conformity to social roles is clear and mostly accurate.
1	1–2	Knowledge of procedures and findings are both incomplete/partly accurate. For 1 mark there may be some detail of procedures but no findings or vice versa.
	0	No relevant content.

Content:

- Procedure: details of the sample, the basic set-up, how participants were recruited, processes used to deindividuate/establish roles, etc.
- Findings: increased passivity of the 'prisoners' in the face of increased brutality of the 'guards'; study abandoned after 5 days; pathological reactions of the prisoners, etc.

Credit other relevant information.

Exemplar response

He recruited a sample of university students through adverts (volunteers) half were chosen to be guards and were given uniforms, mirrored sunglasses etc. the other half were prisoners also in uniform – but shapeless tunics, caps and numbers. There were three cells, with three prisoners in each. Guards couldn't use physical harm, but could "control" the prisoners in any other way they liked.

Examiner commentary

There is good detail of the procedure but no findings in this response. The mark scheme clearly indicates only 1 mark is available for 'detail of procedures but no findings' as the question set has not been addressed.

Mark awarded = 1

QUESTION

05 Briefly discuss **two** criticisms of Zimbardo's research into conformity to social roles.

[4 marks]

MARK SCHEME

Marks for this question: AO3 = 4

Level	Marks	Description
2	3–4	Discussion of two criticisms is clear and coherent. Some detail/expansion may be lacking for 3 marks.
1	1–2	Two criticisms may be present but briefly stated/identified only. Alternatively, one criticism only may be presented.
	0	No relevant content.

Possible criticisms and discussion:

- Ethical issues: lack of informed consent, whether or not the consent gained was sufficiently informed; deception; lack of protection from psychological harm – whether or not the distress should have been anticipated
- Zimbardo playing a 'dual-role'. Zimbardo's own behaviour affected the way in which events unfolded, thus the validity of the findings could be questioned
- Methodological issues: sample bias; demand characteristics/lack of internal validity; lack of ecological validity/mundane realism and their implications for the findings
- Accept positive points if justified: led to reform of real prisons; valuable insight into human nature, etc.
- Note that a discussion of two ethical issues/criticisms could gain full marks.

Exemplar response

Ethics – although this was a role-play and technically no deception, it is debatable for how fully informed the participants were before taking part. For example, those who were prisoners did not know they were going to be arrested by the police at the start. The other ethical issue is that the prisoners experiences considerable emotional (and to a degree) physical harm. Zimbardo saw the considerable distress, but chose to let the study carry on for a few days before stopping it. He should have stopped it sooner to avoid such distress.

Examiner commentary

This is a Level 2 response. There is a clear and coherent discussion of two relevant ethical issues.

Mark awarded = 4

QUESTION

- 07** With reference to features of the working memory model, explain the different experiences of Bryan and Bob.

[4 marks]

MARK SCHEME

Marks for this question: AO2 = 4

Level	Marks	Description
2	3–4	Knowledge of relevant features of the working memory model is clear and accurate. The application of these to the scenario is effective. At the top of the band there must be reference to both characters in the stem. Specialist terminology is used effectively.
1	1–2	Knowledge of relevant features of the working memory model lacks clarity/accuracy/detail. Application may be limited or absent. Specialist terminology is not always used effectively.
	0	No relevant content.

Possible content:

- Reference to attentional capacity/capacity of the central executive – because driving is an ‘automated’ task for Bryan, it makes fewer attentional demands on his central executive so he is free to perform other tasks (such as talking or listening to music); this is not the case for Bob who requires all of his attentional capacity for driving.
- Credit reference to Bob’s inability to dual-task and to divide resources effectively between components of working memory.
- Credit the idea that Bryan is able to divide resources between his visuo-spatial scratch/sketch pad (driving) and articulatory control process/articulatory/phonological loop/primary acoustic store (talking and listening to music) and thus to dual-task.

Accept other valid applications of the model.

Exemplar response

Bryan demonstrates this ability to perform a dual task – ie driving uses the visuo-spatial sketch pad while conversation/listening to music uses the phonological loop and as the model predicts, each slave can function effectively. As Ryan must concentrate so much he cannot divide the “work” among the slaves.

Examiner commentary

This is a Level 1 response. Knowledge of relevant features of the working memory model is clear and accurate in relation to Bryan and the application to the scenario is effective. There is good use of specialist terminology in the first part of the answer. The application to Bob (note not Ryan) is insufficient and lacks clarity.

Mark awarded = 2

QUESTION

- 08** Discuss research into **two or more** factors that affect the reliability of eyewitness testimony. Refer to the information above in your answer.

[16 marks]

MARK SCHEME

Marks for this question: AO1 = 6, AO2 = 4 and AO3 = 6

Level	Marks	Description
4	13–16	Knowledge of research into two or more factors is accurate and generally well detailed. Discussion is thorough and effective. Application to the stem is appropriate and links between factors and stem content are explained. The answer is clear, coherent and focused. Specialist terminology is used effectively. Minor detail and/or expansion of argument sometimes lacking.
3	9–12	Knowledge of research into two or more factors is evident. Discussion is apparent and mostly effective. There are occasional inaccuracies. Application to the stem is appropriate although links to the factors are not always well explained. The answer is mostly clear and organised. Specialist terminology mostly used effectively. Lacks focus in places.
2	5–8	Knowledge of research into at least two factors is present but is vague/inaccurate or research into one factor only is present. Focus is mainly on description. Any discussion is only partly effective. Application to the stem is partial. The answer lacks clarity, accuracy and organisation in places. Specialist terminology used inappropriately on occasions.
1	1–4	Knowledge of research into factor(s) is limited. Discussion is limited, poorly focused or absent. Application is limited or absent. The answer as a whole lacks clarity, has many inaccuracies and is poorly organised. Specialist terminology either absent or inappropriately used.
	0	No relevant content.

AO1 Content

Knowledge of research into two or more factors affecting the accuracy of eyewitness testimony (usually those named in the specification and implied in the stem)

Misleading information, including leading questions:

- Loftus and Palmer's (1974) experiment where the verb in the critical question was changed (smashed, collided, bumped, hit or contacted)
- Loftus and Palmer: "Did you see any broken glass?"
- Loftus et al (1978) study using a red Datsun and Stop or Yield signs.
- Research relating to age in relation to misleading information could also be relevant: eg Warren et al (2005) found adults less likely to be influenced by leading questions than children
- Credit other relevant research/theory: eg post-event contamination; confabulation; reconstructive memory/the formation of schemas; confabulation.

Anxiety:

- Loftus's (1979) weapon focus experiment found that more participants correctly identified a person holding a pen (49%) than a person holding a knife covered in blood.

- Loftus and Burns (1982) found that participants who saw a violent version of a crime where a boy was shot in the face had impaired recall for events leading up to the accident.
- Peters (1988) found that participants who visited a healthcare centre were better able to recognise a researcher than a nurse who gave an injection.
- Yuille and Cutshall (1986) found that witnesses who had been most distressed at the time of a shooting gave the most accurate account five months later.
- Christianson and Hubinette (1993) found that victims of genuine bank robberies were more accurate in their recall than bystanders.
- Credit other relevant research/theory: eg the Yerkes-Dodson law of arousal.

Post-event discussion:

- Source monitoring theory; effects of conformity; Bodner et al (2009) – the effects of post-event discussion can be reduced if witnesses are warned of its effects.

AO2 Application points

- Links to leading questions – ‘Did you see the knife?’ (as opposed to a knife); question from officer is leading the witness who was not sure that there was a knife in the first place.
- Links to anxiety – witness claims that she was ‘so scared’ when the incident took place; this may inhibit or enhance her memory depending upon how severe the fear was.
- Links to post-event discussion – ‘my friends and I have talked about what happened so many times since that I’m almost not sure what I did see’.

AO3 Discussion points

Will depend on research chosen but might include:

- Issue of validity in laboratory studies or lack of control in real-life situations
- Methodological issues, including sampling, replication and corroboration with other studies
- Ethical issues
- Practical applications/implications of the research: eg development of cognitive interview

Credit other relevant evaluation points.

Examiner commentary

Exemplar response

There has been a lot of research into post-event questioning and how misleading information can be inserted into a stored memory of an event. In this scenario the woman was asked about the 'the knife the attacker was holding'. She wasn't sure there was a knife at first but then said 'I am sure there was'. Perhaps this information had been inserted into her memory. A study by Loftus looked at whether the type of questioning affected the reliability of eyewitness recall. Participants watched a film of a car crash and then were asked either "How fast were the cars going when they smashed into each other?" or "How fast were the cars going when they hit each other?" The group who were asked a question with the words 'smashed into' estimated a significantly faster speed than the group with 'hit'. This shows how the questions asked can affect recall. A further twist to this study showed how information can be inserted into memory because a week later the same participants were asked if they saw any broken glass (there was none). The 'smashed into' group were much more likely to report seeing broken glass than either the 'hit' group or the control group.

A criticism of such studies of eyewitness testimony concerns the lack of ecological validity. Participants would not be expecting misinformation to be implanted, and therefore such research does not relate to real life. Another criticism is concerned with the response bias hypothesis, and this is whether the memory is actually changed or whether the witnesses simply respond in a particular way to the unusual questioning but their real memory is intact.

In the scenario the woman says that she was 'so scared at the time' and this suggests she was anxious and stressed. Memory can be affected by stressful or emotional events. A study where participants were shown a film of a shooting had very poor memory of details prior to the shooting compared with a control group. Loftus refers to this as weapon focus because a witness spends longer looking at the weapon than the person. The problem with this type of study is it is carried out in a controlled environment and when a real robbery took place memory seemed to be different. For example, in a real life study in Canada when a thief was shot 6 times researchers found that the memory of witnesses was extremely accurate and misleading questions did not seem to have the same kind of effect that occurred in the more controlled laboratory studies. It seems to show that in a real life incident stress and anxiety can improve memory of eyewitnesses.

The final factor that might affect her accuracy is the fact that she and her friends have been talking about it. This is known as post event and can distort her own memory of what happened, but instead what her friends tell her becomes her own memory.

Examiner commentary

This is a Level 3 response. There is some knowledge of 3 factors that affect the reliability of eyewitness testimony, although the third one is very brief and contains no research. The answer is mostly clear and organised. The focus is mainly on description, although there is some effective discussion and the application is appropriate. Specialist terminology is mostly used appropriately, with the occasional slip, for example 'post event' is used for 'post-event contamination'.

Mark awarded = 10

QUESTION

- 10** Briefly discuss how researchers might address difficulties encountered when trying to investigate caregiver–infant interaction.

[4 marks]

MARK SCHEME

Marks for this question: AO3 = 4

Level	Marks	Description
2	3–4	Discussion of how to address difficulties is clear and coherent. There are appropriate suggestions for caregiver–infant research. Specialist terminology is used effectively.
1	1–2	Discussion lacks clarity/detail. The links to caregiver–infant research may be partial. Specialist terminology is not always used effectively.
	0	No relevant content.

Possible suggestions:

- Problem of context affecting behaviour – research should take place in natural setting eg child's home to increase validity
- Most research is observational so bias in observer interpretation – may be countered by using more than one observer
- Practical issues eg need for fewer but shorter observation periods because of limited waking periods
- Taking extra care in relation to ethics so as not to affect child/parent in any way eg protection from harm, confidentiality etc.

Exemplar response

Since caregiver knows they are being observed, they may unintentionally alter their behaviour which then affects the infant interaction. This could affect the validity. Caregiver might also be affected by social desirability.

Examiner commentary

This response has no relevant content. The response does not focus on the question set which requires a discussion of how the difficulties encountered when researchers try to investigate caregiver–infant interaction can be addressed. It merely identifies difficulties, which is not the question.

Marks awarded = 0

QUESTION

- 11** Discuss the effects of institutionalisation. Refer to the studies of Romanian orphans in your answer.

[16 marks]

MARK SCHEME

Marks for this question: AO1 = 6 and AO3 = 10

Level	Marks	Description
4	13-16	Knowledge of the effects of institutionalisation is accurate and generally well detailed. Discussion is thorough and effective. There is appropriate reference to studies of the Romanian orphans and clear links are made between these and the effects of institutionalisation. The answer is clear, coherent and focused. Specialist terminology is used effectively. Minor detail and/or expansion of argument sometimes lacking.
3	9-12	Knowledge of the effects of institutionalisation is evident. Discussion is apparent and mostly effective. There are occasional inaccuracies. There is appropriate reference to Romanian orphan studies although links to the effects are not always well explained. The answer is mostly clear and organised. Specialist terminology mostly used effectively. Lacks focus in places.
2	5-8	Knowledge of the effects is present but may be vague or inaccurate in places. Focus is mainly on description. Any discussion is only partly effective. Reference to Romanian orphan research may be partial or absent. The answer lacks clarity, accuracy and organisation in places. Specialist terminology used inappropriately on occasions.
1	1-4	Knowledge of the effects is limited, for instance, may be 'listed' rather than explained. Discussion is limited, poorly focused or absent. The answer as a whole lacks clarity, has many inaccuracies and is poorly organised. Specialist terminology either absent or inappropriately used.
	0	No relevant content.

AO1 Content

Knowledge of studies and/or theory into the effects of institutionalisation, including reference to the Romanian orphan studies

- Likely effects include: effects identified by Bowlby (1946): eg affectionless psychopathy, delinquency, low IQ
- Effects identified in privation studies: eg Harlow's findings of delinquency, affectionless behaviour
- ERA findings of quasi-autistic symptoms in Romanian orphans, impaired language and social skills; disinhibited attachment; attention seeking, clinginess; lower frequency of pretend play and reduced empathy (Kreppner et al 1999); more likely to be classified as disorganised attachment type (Zeanah et al 2005)
- The effects of levels of privation in institutions (Gunnar 2000)
- Credit links to theory – reactive attachment disorder; lack of internal working model.

AO3 Discussion points

Discussion/analysis/use of evidence:

- Research enhanced understanding of negative effects – establishment of key workers in institutions
- Evidence that adverse effects of institutionalisation can be overcome with adequate substitute care: eg Rutter (1998); Hodges and Tizard (1989)
- Importance of age of adoption and quality/stability of aftercare
- Problems of generalising from Romanian studies as standards of care were particularly poor
- Adoption vs control groups were not randomly assigned in ERA studies – more sociable children may have been selected
- Other studies, eg Bucharest Early Intervention Project, did randomly allocate but ethical issues with this
- Long-term effects on Romanian orphans are not yet clear
- Early studies of institutionalisation were poorly controlled or effects extrapolated from animal studies
- Credit use of evidence

Credit other relevant discussion points.

Exemplar response

Early longitudinal study by Hodges and Tizard followed 65 children who had been placed in an institution before they were 4 months old (therefore not attached). They studied them at 4, 8 and 16 years of age and compared them with a control group of children being brought up at home. They found that the earlier the children were adopted (or returned to original family) the less likely were there to be negative effects eg institutionalisation. While all the children showed some degree of difficulty in forming peer-relations, they were able to form close relationships with their adoptive parents.

Rutter's Romanian orphan study shows similar findings. In his early study of three orphans, most seemed to have caught up any deficiencies by the age of 4 and their age-related milestones were equivalent. However, he found that the later in life that they had been adopted the slower their progress. In a more recent, longitudinal study – he followed them at 4, 6 and 11 years old. Those who had been adopted before 6 months made good progress while those who had been adopted after 6 months had many more problems including disinterested attachment.

All these studies suggest that the effects of institutionalisation might not be as bad in a warm loving environment of an adopted family by the time they were 6 months. Such children went on to form good relationships with others, probably due to the formation of a positive internal working model. However there are many methodological issues with these studies, such as the difficulty in generalising from Romanian institutions. For most of the orphans it was not known exactly how long they had been in the institution, nor why they were there, nor if there were any medical or family history of disorders.

Examiner commentary

This is a Level 2 response. There is some knowledge of the effects of institutionalisation but this is vague and inaccurate in places. The focus is mainly on description. There is an attempt at a limited discussion at the end of the answer but this lacks explanation and is only partly effective. For example, what is 'an internal working model'? There is some reference to the Romanian orphan research but this lacks clarity/accuracy. For example, the longitudinal study also assessed the children aged 16 years; the problem was one of 'disinhibited attachment' and not 'disinterested attachment'. The answer lacks coherence and organisation in places and specialist terminology is used inappropriately on occasions.

Mark awarded = 6

QUESTION

- 12** Explain **two** factors that the researcher had to take into account when deciding to use the sign test. Refer to the investigation on the previous page in your answer.

[4 marks]

MARK SCHEME

Marks for this question: AO2 = 4

2 marks for identifying two factors that are relevant for use of the sign test: nominal/categorical data; test of difference; related design/repeated measures.

Plus

Up to 2 marks for application of these to the investigation described:

- Nominal data as patients are assigned to one of three categories – ‘improved’, ‘deteriorated’ or ‘neither’
- Testing for difference in the number of absences in the year following and prior to treatment
- Repeated measures as the same patients’ work records are compared before and after treatment

Exemplar response

Nominal data – patients are placed into categories eg improved or deteriorated or neither.

Repeated measures – as each patients’ records are looked at before and after treatment and then compared.

Examiner commentary

Two factors relevant to the use of the sign test are identified and applied appropriately to the investigation.

Mark awarded = 4

QUESTION

- 13** Calculate the sign test value of s for the data in **Table 1** on the previous page. Explain how you reached your answer.

[2 marks]

Marks for this question: AO2 = 2

1 mark for identifying the correct value of s as 5

Plus

1 mark for explanation/calculation of how this was arrived at:

- The most commonly occurring sign is + (12) and the least frequently occurring sign is – (5). The 0s are disregarded.
- The total for the least frequently occurring sign is the value of $s = 5$

Exemplar response

Add up all + and -, then use the least frequent sign. + = 12, - = 5 so $s = 5$

Examiner commentary

This response gains both marks as $s=5$ is correctly identified for the calculated value and the explanation is clear.

Mark awarded = 2

QUESTION

- 14** With reference to the critical values in **Table 2**, explain whether or not the value of s that you calculated in response to **question 13** is significant at the 0.05 level for a two tailed test.

[2 marks]

MARK SCHEME

Marks for this question: AO2 = 2

1 mark for stating that the value of s (5) is not significant at the 0.05 level.

Plus

1 mark for explanation:

- The critical value is 4. As the calculated value is higher than/exceeds the critical value, the result is significant not at the 0.05 level.

Accept alternative wording

Exemplar response

Calculated value for sign test = 5, this needs to be equal to or less than the critical value and therefore it is not significant at this level of probability (0.05).

Sign test – add up all + and -, then use the least frequent sign. +=12 -=5 so use 5.

Examiner commentary

This response gains the mark for stating that the calculated value of 5 is not significant at $p=0.05$. However, as the answer does not relate this to the critical value of 4, the 2nd mark is not accessed.

Mark awarded = 1

QUESTION

15 In what ways would the use of primary data have improved this investigation?

[3 marks]

MARK SCHEME

Marks for this question: AO3 = 3

Marks may be awarded for a single point that is expanded/elaborated or more than one point briefly stated.

1 mark only if there is no reference to the investigation described.

Possible points:

- Primary data are obtained 'first-hand' from the participants' themselves so are likely to lead to greater insight: eg into the patients' experience of treatment, whether they found it beneficial, negative, etc.
- Secondary data, such as time off work, may not be a valid measure of improvement in symptoms of depression. Primary data are more authentic and provide more than a surface understanding: eg participants may have taken time off work for reasons not related to their depression.
- The content of the data is more likely to match the researcher's needs and objectives because questions, assessment tools, etc. can be specifically tailored: eg an interview may produce more valid data than a list of absences.

Exemplar response

Primary data must have provided actual reasons unlike simply using number of absences (secondary data) might not in fact be a very valid measurement.

Examiner commentary

There is a hint of how primary data would improve the study but this is a vague answer and there is limited reference to the investigation.

Mark awarded = 1

QUESTION

- 16** Outline the implications of psychological research for the economy. Refer to the investigation above in your answer.

[5 marks]

MARK SCHEME

Marks for this question: AO1 = 3 and AO2 = 2

Level	Marks	Description
3	4–5	Knowledge of the implications of psychological research for the economy is clear. Application to the investigation described is effective. The answer is coherent with effective use of terminology.
2	2–3	Some knowledge of the implications of psychological research for the economy is present but there is a lack of detail/clarity. Application to the investigation described is limited or absent. Terminology is used appropriately on occasion.
1	1	An implication of psychological research for the economy is briefly stated.
	0	No relevant content.

AO1 – possible content:

- Psychological research may lead to improvements in psychological health/treatment programmes which may mean that people manage their health better and take less time off work.
- Absence from work costs the economy an estimated 15 billion a year annually and much of this absence is due to 'mild' mental illness: eg stress, anxiety.
- Psychological research may lead to better ways of managing people whilst they are at work to improve productivity: eg research into motivation and workplace stress.
- 'Cutting-edge' scientific research may encourage investment from overseas companies into this country.

Credit other relevant points/implications, including examples not linked to psychopathology.

AO2 – application

- If research (such as the investigation described) suggests that depressives are better able to manage their condition following CBT and return to work, then it may benefit the economy to make treatment more widely available, improve funding, etc.
- Psychological research such as this plays an important role in sustaining a healthy workforce and reducing absenteeism.

Credit other relevant application points.

Exemplar response

This investigation found no significant difference before and after CBT in number of absences – so government could save money and not bother with CBT (?!). Absenteeism costs the economy a significant amount of money each year, so any research which could reduce absences must be beneficial.

Examiner commentary

This is a Level 1 response. It is quite an interesting point with regard to this study, as the results were not significant. However, they were in the right direction and the answer is a little flippant. There is a brief point relating to absenteeism and the economy which is worthy of credit.

Mark awarded = 1

QUESTION

17 Outline **one** definition of abnormality.

[2 marks]

MARK SCHEME

Marks for this question: AO1 = 2

Possible definitions:

- Statistical infrequency/deviation from statistical norms – abnormal behaviour is that which is rare/uncommon/anomalous
- Deviation from social norms – abnormal behaviour is that which goes against/contravenes unwritten rules/expectations in a given society/culture
- Failure to function adequately – abnormal behaviour is that which causes person distress/anguish or an inability to cope with everyday life/maladaptiveness
- Deviation from ideal mental health – abnormality is that which fails to meet prescribed criteria for psychological normality/wellbeing: eg accurate perception of reality, resistance to stress, etc.

Exemplar response

Failure to function adequately – where a person's behaviour prevents them from dealing with life in an adaptive way.

Examiner commentary

This is an appropriate definition of abnormality which is outlined briefly but coherently.

Mark awarded = 2

QUESTION

18 Outline and evaluate **one other** definition of abnormality.

[6 marks]

MARK SCHEME

Marks for this question: AO1 = 2 and AO3 = 4

Level	Marks	Description
3	5–6	Knowledge of definition of abnormality is clear and accurate. Evaluation is relevant and well explained. The answer is clear and coherent. Specialist terminology is used effectively.
2	3–4	Knowledge of definition of abnormality is present though there may be some inaccuracy/lack of clarity. There is some relevant evaluation but there may be some omissions/lack of detail. There are some inaccuracies. There is some appropriate use of specialist terminology.
1	1–2	Knowledge of definition(s) of abnormality is briefly stated with no elaboration. There is a brief attempt to evaluate or this may be absent. The answer is brief, or has many inaccuracies and is poorly organised. Specialist terminology is either absent or inappropriately used.
	0	No relevant content.

AO1 – Possible content:

Definitions of abnormality:

- Statistical infrequency/deviation from statistical norms – abnormal behaviour is that which is rare/uncommon/anomalous
- Deviation from social norms – abnormal behaviour is that which goes against/contravenes unwritten rules/expectations in a given society/culture
- Failure to function adequately – abnormal behaviour is that which causes person distress/anguish or an inability to cope with everyday life/maladaptiveness
- Deviation from ideal mental health – abnormality is that which fails to meet prescribed criteria for psychological normality/wellbeing: eg accurate perception of reality, resistance to stress, etc.

Note that definition chosen must be **different** from that outlined in question 17.

AO3 – Possible evaluation points:

- Statistical infrequency/deviation from statistical norms – fails to account for behaviour that is statistically rare but desirable such as having a very high IQ; some disorders are not statistically rare; issue of who decides where the cut-off point is.
- Deviation from social norms – eccentric behaviours are not necessarily abnormal; social norms vary with time and with culture.
- Failure to function adequately – many mental disorders do not cause personal distress; many behaviours, eg smoking are maladaptive but not a sign of psychological abnormality.
- Deviation from ideal mental health – the criteria are too demanding – most people would be judged abnormal based on this definition; many of the criteria reflect Western cultural norms of psychological 'normality'.

Accept other relevant evaluation points.

Exemplar response

Deviation from ideal mental health – Vahuda proposed 6 criteria for optimal living, and abnormality is when these are not met. Criteria include self optimisation and accurate perception of reality. However, these criteria are extremely difficult to achieve, so that most people would be judged as being abnormal as they cannot meet them.

Examiner commentary

This is a Level 2 response. Knowledge of one further definition of abnormality is accurate although not fully outlined. There is some relevant evaluation, but the answer is brief and lacks sufficient discussion. There is also an inaccuracy – presumably 'self optimisation' should read 'self actualisation'. There is some appropriate use of specialist terminology.

Mark awarded = 3