

Examiners' Report June 2024

IAL Psychology WPS04 01

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Introduction

This was a very successful summer 2024 series with the range of responses seen showing improvements in a number of key areas to the previous cohort entry. Across the paper, candidate responses showed good understanding of key terms and theoretical concepts. Mathematical skills were consistently good, with many candidates achieving the majority of marks available on the paper for this skill.

In terms of section A, responses showed good understanding of the different explanations of schizophrenia, with many candidates producing thoughtful responses which enabled them to achieve the majority, if not all, the marks. Knowledge of Suzuki et al (2014), in relation to the aim, and measurement of nutritional status was good however responses for the question asking for two strengths of Suzuki's study in terms of validity, were mixed and this was reflected in the number of marks candidates achieved on this 4 mark question. Questions such as this still pose some difficulties for candidates and an increased focus on this type of question would be advisable for future series.

Some minor difficulties tend to remain with the long answer questions, although an improvement in performance was definitely seen. Although some candidate responses still struggled to justify their arguments and evaluations, there were a pleasing amount of responses that did just this, and this was reflected in a good number of candidates achieving the higher level marks bands. The extended open response which saw the strongest performance was the one which asked candidates to show their knowledge of family therapy, worth 16 marks. Many candidate responses showed accurate and thorough knowledge of the process of family therapy, and some were able to produce some thoughtful evaluation (AO3) points. Where candidate responses were limited to the lower mark bands this was usually due to evaluation points which were not developed enough to access the higher bands. This lack of AO3 was more evident in the 20 mark question, where the responses were dominated significantly by AO1 knowledge and understanding of ethical issues.

The 8 mark key question also caused some issues, with candidates finding it difficult to understand the demands of the question and what was needed to achieve the AO1 and AO2 marks. Application for AO2 responses was not always evident in responses, and it still remains an area that is difficult for a number of candidates. Where generic responses were given, candidates did not achieve highly. It is recommended that candidates practise their application to stimulus material to demonstrate their ability to draw on their understanding of content and show how this would apply in each context.

Overall, candidates performed to a good standard, and should be commended for the hard work undertaken to achieve the improvements detailed above.

Question 1 (a)

This question requires candidates to give one symptom of schizophrenia and is comprised of one AO1 mark.

Creditworthy responses included:

- Hallucinations.
- Delusions.
- Thought insertion, amongst others.

If candidate responses explained the symptom clearly, but did not name it specifically they could still achieve the mark. Most candidates achieved the 1 mark available for this question.

1 In your studies of clinical psychology, you will have learned about schizophrenia.

(a) Give **one** symptom of schizophrenia.

(1)

one symptom of schizophrenia is delusions of
persecution



This response achieves the mark for an appropriate symptom of schizophrenia.



Please note that for a 'give' question, there is no need for candidates to expand on their response; as long as it is correct, one word will be enough.

1 In your studies of clinical psychology, you will have learned about schizophrenia.

(a) Give **one** symptom of schizophrenia.

(1)

Hallucinations



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This response achieves 1 mark.

Hallucination is an appropriate symptom of schizophrenia.

As this question uses the 'give' command word then one (correct) word is enough for the mark.

Question 1 (b)

This question requires candidates to describe the function of neurotransmitters as an explanation for schizophrenia. This question is comprised of four AO1 marks.

There was a wide range of candidate responses for this question which covered the full breadth of marks available. The most common responses gaining credit were:

- Excess dopamine/overstimulation of dopamine receptors leads to positive symptoms.
- Imbalance of dopamine leads to schizophrenic symptoms.
- Lower dopamine activity (in the ventral striatum) can lead to negative symptoms.
- Lower levels of glutamate can lead to positive and negative symptoms.

The most common error was not giving enough unique points to enable responses to access all 4 marks.

(b) Describe the function of neurotransmitters as an explanation for schizophrenia.

(4)

It's believed an imbalance of the neurotransmitter dopamine is what causes schizophrenia. PET scans show how there's a greater density of the neurotransmitter dopamine in patients with schizophrenia. Dopamine controls ~~mood, cognitions and mood~~ and cognitions therefore an ~~over~~ imbalance of dopamine produces an over-excitment of these brain functions. ~~Patient's Patients taking drugs which increase dopamine have~~ Some research suggests its both glutamate and dopamine which lead to schizophrenia as glutamate is what regulates dopamine, therefore an imbalance of glutamate could be the cause for the imbalance in dopamine.



This response achieves marks for:

- AO1 mark for the imbalance of dopamine linked to schizophrenia. (1)
- AO1 mark for both glutamate and dopamine involved as glutamate regulates dopamine (causing dopamine imbalance). (1)

Total: 2 marks.



For 'describe' questions candidates need to ensure that they give enough unique points to enable them to access the full range of marks.

(b) Describe the function of neurotransmitters as an explanation for schizophrenia.

(4)

Schizophrenia may be explained using a biological explanation such as the dopamine hypothesis, which states that symptoms of schizophrenia are caused by an excess in dopamine neurotransmitter in some areas in the brain. — it more specifically links dopamine in some areas in the brain and increased sensitivity in positive symptoms to increased dopamine activity in the mesolimbic pathway and negative symptoms to decreased dopamine activity in the mesocortical pathway. Increased sensitivity in D2 dopamine receptors is also linked to symptoms of schizophrenia. The effectiveness of drugs such as clozapine (which also interferes with serotonin activity) show that other neurotransmitters such as serotonin and glutamate are also involved in the development of symptoms of schizophrenia.



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Examiner Comments

This is a really nice response and well worth the full marks achieved. Response achieves AO2 marks for:

- Excess dopamine in mesolimbic pathway causing positive symptoms. (1)
- Decreased activity in the mesocortical pathway linked to negative symptoms. (1)
- Increased sensitivity in the D2 receptors linked to symptoms. (1)
- Effectiveness of drug (to treat) means that neurotransmitters such as dopamine involved in symptoms. (1)

Total: 4 marks

Question 1 (c)

This question requires candidates to analyse one biological explanation for schizophrenia, other than neurotransmitters. The question is comprised of three AO1 and three AO3 marks and to achieve the full 6 marks, candidate responses needed to:

1. Show knowledge of genetics/brain structure (AO1).
2. Justify the knowledge point they have given (AO3).

The majority of candidates used genetics as their alternative explanation of schizophrenia and creditworthy responses included:

- The increased risk of developing schizophrenia if a family member also has the disorder (with the use of a study such as Kendler to justify the point given).
- The relative concordance rates of MZ and DZ twins (with Gottesman to justify the point given).
- Concordance rate is not 100% so not only genetics involved (with alternative theories/evidence to justify their point).

Candidate responses for this question were mixed in terms of marks given. Although it was often clear that candidates had some knowledge about alternative theories, the responses often did not lack the detail needed to achieve the higher marks; this was especially true of the AO3 points.

(c) Analyse **one** biological explanation for schizophrenia, other than the function of neurotransmitters.

(6)

One biological explanation for schizophrenia are genes (such as the HTR2A gene). Genes are inherited from a family member and these genes can then cause a person to develop schizophrenia or make them more likely to develop it than someone who doesn't carry the gene. The HTR2A gene was found to have a positive correlation with patients who are diagnosed with schizophrenia. This means that people who have the gene are more likely to develop schizophrenia. Because it is correlational research, we are able to see the relationship between the genes and the likelihood of developing schizophrenia.



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Examiner Comments

This response achieves marks for:

- AO1 mark for genetic inheritance being a cause of schizophrenia. (1)
- AO3 mark (just) for the findings that a positive correlation was found between HTR2a gene and schizophrenia. (1)

Total: 2 marks.

(c) Analyse one biological explanation for schizophrenia, other than the function of neurotransmitters.

(6)

One strength of a genetic explanation of schizophrenia is that there is much evidence to support that an ^{the closer genetic} increased genetic link to how a person has with schizophrenia increases their risk of developing it later on. Claxton et al looked at studies of families with a schizophrenic member and found that these families had an average 27% increased risk factor compared to the general population. Thus this supporting evidence provides great validity to this explanation.

Another strength is supporting evidence by Gottesman for the fact that an increased genetic link increases likelihood to develop schizophrenia. He found that concordance rates for monozygotic twins was much higher (48%) compared to rates between dizygotic twins ^(17%) of developing the disorder if one already had it, thus increasing the validity of this genetic explanation.

However a weakness is that there may be other factors that contribute to increased risk of schizophrenia which this genetic theory does not consider. For example, ^{research by} Capriani ^{et al} found that child people who faced severe lack of care and maltreatment during childhood were more likely to develop schizophrenia compared to those who ^{had secure} ~~were treated~~ attachment. This presents an environmental explanation which suggests genetics is not the only or sole explanation of schizophrenia, reducing its credibility and also presenting it as a reductionist one.

(Total for Question 1 = 11 marks)



This response achieves marks for:

- AO1 mark for the genetic inheritance of schizophrenia. (1)
- AO3 mark for Claxton et al research. (1)
- AO3 mark for Gotteman et al research. (1)
- AO3 mark for Capriani research. (1)

Total: 4 marks.



It is worth noting that the AO1 and AO3 marks for this question can be awarded independently of each other.

Question 2 (a)

This 1 mark question requires candidates to state one aim of Suzuk et al (2014). This question is comprised of one AO1 mark.

Candidate responses were usually able to achieve the 1 mark available for this question. The most common error was responses which missed out an important part of the aim. To achieve the mark candidate responses needed to include:

- Reference to Japanese (in)patients.
- Reference to schizophrenia.
- Reference to either overweight/underweight or nutritional status.

2 In your studies of schizophrenia, you will have learned about the following contemporary study in detail:

- Suzuki et al. (2014).

(a) State **one** aim of Suzuki et al. (2014).

(1)

To investigate the prevalence of
being underweight or over weight
amongst schizophrenic patients



This response did not achieve any marks as it did not refer to the participants being **Japanese** inpatients.

2 In your studies of schizophrenia, you will have learned about the following contemporary study in detail:

- Suzuki et al. (2014).

(a) State **one** aim of Suzuki et al. (2014).

(1)

An aim of Suzuki was to investigate the nutritional status of patients ~~in~~ with schizophrenia in Japan.



This response achieves the 1 mark available as it has all elements needed for the aim of Suzuki et al (2024) study.

Note: patients rather than inpatients is fine.

Question 2 (b)

This 2 mark question requires candidates to describe how nutritional status was measured by Suzuki et al (2014). This question is comprised of two AO1 marks.

To achieve the 2 marks, candidate responses needed to include:

- A blood sample being taken after (9hr) fasting.
- That they measured Cholesterol, Fasting Plasma, Triglyceride, and Protein.

There are a number of things to note for this question:

1. Candidate responses did not need the 9hrs to get a mark but did need to show knowledge that the blood sample was taken after fasting.
2. Candidate responses did not need all four elements (two minimum) to achieve the second mark although it is worth ensuring that they know all four.
3. If candidate responses only gave one element but were able to give accurate figures in terms of the measurement of this element then they could get the second mark.

Responses showed excellent understanding for this question, with the majority gaining at least 1 mark.

(b) Describe how nutritional status was measured in the study by Suzuki et al. (2014).

(2)

Nutritional status was measured using a blood test after a 9 hour or longer fast and the values were compared to the following standardised measurements: Total Protein < 6.7 mg/dL, fasting plasma glucose < 70 mg/dL, Total cholesterol < 10 mg/dL and triglyceride < 50 mg/dL

TP < 6.7 mg/dL
FPG < 70
TC < 10
TG < 50



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This response achieves AO1 marks for:

- blood sample after a 9 hour fast. (1)
- For accurately naming at least two elements (this response named all four) that were measured. (1)

Total: 2 marks.

(b) Describe how nutritional status was measured in the study by Suzuki et al. (2014).

(2)

The participant's nutritional status was ~~be~~ measured using BMI to compare weight and height ~~as~~ and ~~well as~~ a blood sample was taken ~~from~~ after a 9 hour fast. ~~informing of the~~



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Examiner Comments

This response achieves an AO1 mark for:

- Blood sample after a 9 hour fast. (1)

No information about what was measured was given.

Total: 1 mark.

Question 2 (c)

This 4 mark question requires candidates to explain two strengths, in terms of validity, of the Suzuki et al (2014) study. This question is comprised of two AO1 marks and two AO3 marks.

To achieve the 2 marks available for each strength candidate responses needed to:

- **Identify** a strength in **relation to the study** which helps validity.
- A **justification** of why this is a strength which will help validity.

Creditworthy responses included:

- Big sample of 333 inpatients (population validity.)
- Research was performed in a real-life hospital with real patients (ecological validity.)
- Measurement of nutritional status/BMq was objective (construct validity.)
- Use of a control group as a baseline (internal validity.)
- Standardise procedure/controls; with specific information from the study.

Many candidate responses were able to achieve 2 marks by identifying two strengths of the study. Limited performance was due to an inability to justify these strengths through the various types of validity. In addition some candidate responses used generic strengths and did not relate them back to the study and consequently did not receive any marks.

(c) Explain **two** strengths of the study by Suzuki et al. (2014) in terms of validity.

(4)

- 1 Suzuki's study can be seen as valid due to large sample of 333 participants and high levels of control of 191 participants; This gives a good base measure of weight and nutritional status of healthy individuals to provide insightful data to be compared with data of the schizophrenic patients - which results in high validity of results.
- 2 This was done in 9 different institutions/hospitals; providing great network of data of different hospitals rather than testing on just one, this makes the data collected more diverse and applicable, thus ~~also~~ increasing its validity.



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Examiner Comments

This response achieves marks for:

- AO1 mark for the large sample of 333 patients. (1)
- AO1 mark for the use of different hospitals/institutions. (1)

No AO3 justification is present for either point so no further marks can be given.

Total: 2 marks.

(c) Explain **two** strengths of the study by Suzuki et al. (2014) in terms of validity.

(4)

1. The schizophrenic inpatients' nutritional status was operationalised into objective, ^{numerical} measures of their total protein, cholesterol, triglyceride and fasting plasma glucose levels. This increases the objectivity of the findings as the participants' schizophrenic inpatients' was not open to researcher interpretation bias, increasing the validity of the results.
2. The study gathered schizophrenic inpatients from actual, real life Japanese psychiatric hospitals. As a result, the study has high ecological validity since it used a real life setting. Participants from a real, real non-artificial setting, admitted to a psychiatric hospital, and were diagnosed with schizophrenia.



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This nice response achieves marks for:

- AO1 mark for nutritional status being operationalised with measures that are objective. (1)
- AO3 mark (just) for not being open to interpretation/bias and so increasing validity. (1)
- AO1 mark for the study being in real, psychiatric hospitals with real patients. (1)
- AO3 mark for high ecological validity as used a non-artificial setting. (1)

Total: 4 marks.



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Examiner Tip

Candidates should make sure that, for questions that require strengths and weaknesses, they justify their strengths explicitly to ensure they can access all of the marks available.

Question 3 (a)

This 2 mark question requires candidates to describe how Amy could use an opportunity sampling technique for her study. The question is comprised of two AO2 marks which means that candidate responses need to link each point back to the scenario.

To achieve 2 marks candidate responses need to:

1. Say about visiting the therapist's office to see patient (who are available at the time) undertaking CBT.
2. THEN ask/approach them to partake of her study on the effectiveness of CBT.

Many candidate responses were able to achieve at least 1 mark, usually for the point about going to the therapist office. Where performance was limited was due to responses not suggesting how these patients would be sampled ie the need to actually go up to them and ask them to take part.

3 Amy is planning to research the effectiveness of Cognitive Behavioural Therapy (CBT). She plans to use an interview to gather qualitative and quantitative data from patients who are taking part in Cognitive Behavioural Therapy (CBT).

Amy visits a therapist who gives permission for her to approach their patients to take part in the research.

(a) Describe how Amy could use an opportunity sampling technique to gather the participants for her research.

(2)

Amy could ~~gather~~ take down the names of the first 20 patients she sees at the institute taking part in CBT. She could then let them know that she's conducting a ^{research} study on the effectiveness of CBT to be in line with ethical considerations.



This response achieves marks for:

- AO2 mark for writing down (20) names of patients she sees at the institute taking part in CBT. (1)

Although written slightly differently, this can only be opportunity sampling and is linked to the scenario so can be credited. No further marks as no indication of the patients being asked to take part (suggesting that she would tell them what the study is about implies this but is just not enough.)

Total: 1 mark.

3 Amy is planning to research the effectiveness of Cognitive Behavioural Therapy (CBT). She plans to use an interview to gather qualitative and quantitative data from patients who are taking part in Cognitive Behavioural Therapy (CBT).

Amy visits a therapist who gives permission for her to approach their patients to take part in the research.

(a) Describe how Amy could use an opportunity sampling technique to gather the participants for her research.

(2)

Amy could stand in the therapist's office or waiting room and ~~go up to~~ approach their patients to ask them to take part in her research on the effectiveness of Cognitive behavioural therapy. Then she would hand her contact information to invite the patients to take part in her interview.



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This response achieves marks for:

- AO2 mark for standing in the therapist's office or waiting room (linked to the study). (1)
- AO2 mark for approaching patients to ask them to be part of research into the effectiveness of CBT. (1)

This is concise but does enough for the marks.

Total: 2 marks.

Question 3 (b)

This 4 mark question requires candidates to describe how Amy could plan her interview for her study. This is comprised of four AO2 marks therefore each point made needs to be linked to the scenario.

Candidates need to make four unique points about Amy's interview in order to get all 4 marks. Creditworthy responses included:

- List of predetermined questions about CBT she would ask patients.
- Get informed consent from patients.
- Examples of open and closed questions she could use.
- Asking further questions to gain more insight about CBT from patients.
- The type of interview used with patients (semi-structured/structured).
- Making sure no questions she asked patients could cause distress/invoke privacy.

Most candidate responses achieved some marks on this question with some lovely examples of closed and open questions which could be used. Where performance was limited was due to the examples of questions being the only marks gained. Very few responses talked about informed consent/ensuring questions were ethical although a few candidates who did achieve full marks often focused on the type of interview, and the asking of further questions. The other limiting factor in responses was generic answers which could not be credited.

(b) Describe how Amy could plan her interview to investigate the effectiveness of Cognitive Behavioural Therapy (CBT).

~~structured~~ structured

(4)

Amy could plan some closed ended questions first and then some open ended questions like "how did they feel after the CBT session?". Then Amy can ask more questions related to the answers that are given by the patients and gather qualitative data.



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This response achieves marks for:

- AO2 mark for closed ended question such as "how did they feel after the CBT session." (1)
- AO2 mark for questions related to the answers given by the patients (patients is the link here). (1)

Total: 2 marks.

(b) Describe how Amy could plan her interview to investigate the effectiveness of Cognitive Behavioural Therapy (CBT).

(4)

Amy could gather different types of questions such as closed to get more of quantitative data about how patients think CBT is working for them (use a scale of 1 to 10 for example) and a range of open questions which would give Amy the opportunity to gather qualitative data, given patients the opportunity to explain in depth how effective they feel CBT is working for them. However Amy should consider semi-structured interviews, which would give patients more confidence as it would not be as professional. To add to this Amy should make sure that the participants stay anonymous and they give informed consent, making them feel safe to express their feelings on how well CBT is working for them.



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This nice response achieves marks for:

- AO2 mark for closed questions to gain quantitative data about patients view about CBT. (1)
- AO2 mark for open questions to gain qualitative data giving the patient the opportunity to explain in depth. (1)
- AO2 marks for getting informed consent from patients (1) leading to feeling safe to confidentially express feelings on CBT. (1)

Total: 4 marks.

Question 3 (c)

This 4 mark question requires candidates to explain two strengths of Amy using an interview for her study on Cognitive Behavioural Therapy (CBT) effectiveness. This question is comprised of two AO2 and two AO3 marks so therefore needs to link to the scenario for each point given.

To achieve 2 marks for each point candidate responses need:

1. A strength of interviews with a link to the scenario. (AO2)
2. A justification of the above strength. (AO3)

Creditworthy responses included:

- The gathering of in-depth data about CBT.
- Being able to use both qualitative and quantitative techniques through open and closed questions.
- Being able to put the respondent at ease by clarifying questions/simplifying the question (which you cannot do with a remote questionnaire).

Many candidate responses were able to identify at least one of these strengths and were able to access 1 or 2 marks. Where performance was limited was due to one of two issues; either the strengths were generic, or candidate responses did not justify their strengths. Often responses would just add 'this increases validity' which is not enough for the second mark. For this to be credited, responses needed to suggest that results become more holistic/the idea of more truthful responses etc.

(c) Explain **two** strengths of Amy using an interview to investigate the effectiveness of Cognitive Behavioural Therapy (CBT).

(4)

- 1 Amy ~~to~~ can use interviews to help her ~~gain~~ ~~the~~ ~~the~~ ~~for~~ achieve the aims of her research. Since she is seeing the effectiveness of CBT on patients it can help her understand whether CBT reduces ~~that~~ unipolar depression ~~on~~ and the differences or impact it has made on the patients
- 2 Using interviews can help her understand whether CBT has been effective for patients who have attended sessions for a long time and by ~~an~~ understanding the effectiveness she could perhaps include it in her research on other treatment such as drugs or Family therapy



This response achieves 0 marks as there is nothing within it which can be credited as a strength of interviews. Suggesting that interviews could help her fulfil her aim is relevant to any type of research method; the response needs to say WHY interviews in particular would be helpful in this regard.

(c) Explain **two** strengths of Amy using an interview to investigate the effectiveness of Cognitive Behavioural Therapy (CBT).

(4)

1 Amy is able to gain a more in depth & detailed analysis & data to investigate effectiveness of CBT. It's also first hand information since it's primary data which increases validity.

2 Individuals are able to freely express their experiences with CBT during a face-to-face interview. This can increase ~~validity~~ validity of Amy's research into CBT.



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This response achieves marks for:

- AO2 mark for Amy gaining a more in depth detailed analysis to investigate the effectiveness of CBT. (1)
- AO2 mark for freely expressing their experiences with CBT during a face to face interview increasing validity. (1)

Increasing validity is not enough for an AO3 mark for the second point.

Total: 2 marks.

(c) Explain **two** strengths of Amy using an interview to investigate the effectiveness of Cognitive Behavioural Therapy (CBT).

(4)

1 By using an interview, Amy will be able to gather rich qualitative and quantitative data from her sample (the patients). This will allow Amy to deeply analyse the effectiveness of CBT and also gives her the opportunity to ask additional questions if needed when interviewing unique patients, ~~adding~~ enhancing the credibility of her findings.

2 Conducting an interview will help negate any weaknesses ~~in~~ Amy's findings caused by poor evaluation apprehension by the patients, as if the patient doesn't understand the question, Amy would be present and can simplify the question for the patient. This will improve the validity of her findings on the effectiveness of CBT as her patients have accurately expressed their opinions ~~at~~ in the interview.



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This nice response achieves marks for:

- An AO2 and an AO3 mark for being able to gather rich qualitative and quantitative data about patients (1) to allow Amy to analyse the effectiveness of CBT and increase credibility. (1)
- An AO2 and an AO3 mark for reducing evaluation apprehension (the fear of being evaluated by others) by the patients (1) as the questions can be simplified and allow patients to express their true opinions. (1)

Total: 4 marks.



Ensure that candidates justify their strengths/weaknesses/improvements in enough depth to achieve the AO3 mark. Remember validity/reliability on their own is not enough.

Question 4 (a)

This 2 mark question requires candidates to describe how Rahul's mental health condition could be defined as failure to function adequately. The question is comprised of two AO2 marks which mean that both points need to be linked to the scenario.

Many candidate responses achieved the 2 marks available for this question. It was clear that candidates knew this definition well, and could apply it to Rahul's situation. Creditworthy responses included:

- Rahul being unable to cope/struggled with/feels anxious with the demands of his everyday/daily activities.
- Struggles to meet new people and avoids social situations (which impacts his life).

Limited performance was mainly due to generic responses, but also responses that did not make it clear that the above issues impact his normal functioning (things he would normally do), which is an integral part of this definition.

- 4 Rahul has been finding it difficult to take part in his usual daily activities. He has found it increasingly difficult to leave his house. Rahul feels worried and nervous when meeting new people and he has stopped attending social events with his friends.

A psychiatrist and their trainee have both independently diagnosed Rahul with the same mental health condition using the DSM classification system. Rahul's treatment is helping him return to his usual daily activities.

- (a) Describe how Rahul's mental health condition could be defined as a failure to function adequately.

(2)

Failure to function adequately is a definition of abnormality that refers to the inability to cope with everyday demands. In Rahul's case, difficulty in leaving his house would be considered as a failure to function adequately as he is unable to take part in his usual daily activities such as interacting with friends.



This response achieves marks for:

- AO2 mark for not able to cope with every day demands such as leaving his house. (1)
- AO2 mark for being unable to interact with his friends (which are his daily activities). (1)

Total: 2 marks.

- 4 Rahul has been finding it difficult to take part in his usual daily activities. He has found it increasingly difficult to leave his house. Rahul feels worried and nervous when meeting new people and he has stopped attending social events with his friends.

↳ social withdrawal, negative emotions.

A psychiatrist and their trainee have both independently diagnosed Rahul with the same mental health condition using the DSM classification system. Rahul's treatment is helping him return to his usual daily activities.

- (a) Describe how Rahul's mental health condition could be defined as a failure to function adequately.

Rahul's condition is characterised by maladaptive behaviour shown as ~~he cannot~~ his daily functioning is impaired. Rahul showed signs of social withdrawal and negative emotions that has lead to difficulty to leave his house. ⁽²⁾ extreme



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This response achieves marks for:

- AO2 mark for daily functioning impaired as difficulty leaving house. (1)

The first sentence cannot be credited as it is not linked to the scenario.

Total: 1 mark.

Question 4 (b)

This 2 mark question requires candidates to explain one reason why Rahul believed his diagnosis was valid. The question is comprised of one AO2 and one AO3 mark which means that there needs to be one link to the scenario somewhere in the response.

Most candidate responses achieved at least 1 mark for this question mainly for giving an appropriate reasons for Rahul thinking his diagnosis was valid. Candidate responses need:

- Identification of reason such as trainee and psychiatrist giving the same diagnosis independently/treatment being effective (AO2).
- Any piece of research that will justify the above/that treatment would only work if the practitioners were targeting the right thing (AO3).

Limited performance was not so much due to generic responses (although that did still occur at times), but due to the lack of justification for the reasons given.

(b) Explain **one** reason why Rahul believes his diagnosis is valid.

(2)

one reason Rahul believes his diagnosis is valid is because 2 different people used the same diagnostic system and reached the same conclusion, this means that his diagnosis contains ~~inter-rater~~ validity since a known set of symptoms is given in the form of a criteria in the DSM, so if two separate people agree on the diagnosis given to Rahul, then

(Total for Question 4 = 4 marks)

it must contain criterion validity. **TOTAL FOR SECTION A = 32 MARKS**



This response achieves 0 marks which is a shame as, despite showing correct knowledge and understanding, there is no reference to the scenario at all. A name is not enough.



Candidates need to ensure that they use the scenario within their response to this type of question.

(b) Explain **one** reason why Rahul believes his diagnosis is valid.

(2)

Because a psychiatrist and trainee both diagnosed him with the same mental health condition and the treatment Rahul is undergoing is helping improve his condition. As a result, this suggests the treatment Rahul was given is an effective treatment and targets the abnormality that has caused his maladaptiveness. Thus it is suggested that Rahul's diagnosis is valid due to the fact that his treatment is effective, as treatments are only effective if targeting the right cause, such as antidepressants targeting serotonin levels

(Total for Question 4 = 4 marks)



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This nice response achieves marks for:

- AO2 mark for the idea that he was diagnosed by a psychiatrist and trainee and the treatment Rahul was given helped him. (1)
- AO3 mark for the idea of validity as if the treatment is effective then it is targeting the right cause. (1)

Total: 2 marks.

Question 5

This question is an extended 16 mark essay on a clinical topic area. It requires candidates to evaluate the effectiveness of family therapy as a treatment for schizophrenia.

Many candidates showed accurate and thorough understanding of family therapy and were also able to evaluate it reasonably well. At the lower end of the marks allocated, the responses largely consisted of descriptive points giving details about the family therapy, but then with quite limited, and often generic, AO3 evaluative points.

With this question being heavily weighted to AO3 in the levels-based mark scheme, those responses that provided more AO1 than was necessarily required, appeared to rush the AO3 element of the question and so lost marks. Candidates should remember that the AO3 skill has a higher weighting on this question and therefore more attention needs to be paid to this, rather than just describing the therapy.

Some creditworthy AO1 points included:

- Environmental/social and emotional issues all tackled.
- Allows both patient and family to attend and express concerns.
- The idea of psychoeducation related to symptoms, practical problems, how to handle crisis situations
- Involves tasks for some Sz patients which gradually build up the responsibility they have for their behaviour/actions.

Some creditworthy AO3 points included:

- Research support ie Pharoah/Kavanag.
- May struggle to communicate especially if one of their major symptoms is paranoia and distrust so may only be effective for certain types of Sz.
- The demand in terms of time/effort/access.
- Only deals with management of symptoms but not the cause.

5 Evaluate the effectiveness of family therapy as a treatment for schizophrenia.

(16)

Schizophrenia (SZ) is a mental disorder which deeply affects the patient's everyday life, as well as the people around them. Family therapy should be considered as a treatment for schizophrenia, as family therapy strengthens the lines of communication and understanding between the patient and their family members.

Moreover, a therapist can work with the family to offer them better insights into how the patient individually struggles, and ~~the~~ in turn learn new ways of dealing with certain situations or behaviours. However, to evaluate family therapy effectiveness to treat schizophrenia can have its limitations.

Family therapy typically lasts for 9-12 months, within a timeframe, it's not certain that the patient can fully reduce their positive symptoms. To ~~prevent~~ ^{have family therapy} ~~prevent~~ symptoms, the patient must be very open about their vulnerable experiences which can be very hard to

discuss in front of loved ones. However, if the patient has an open dialogue of communication with their family this can help express emotions (EE). The patient can become more comfortable sharing their symptoms, and the family can become more aware of how the patient's experiences are affecting them. This level of understanding across the whole family is incredibly beneficial in adapting their everyday lives to accommodate the patient's experiences so they can feel more naturally being apart of society.

In closing, although family therapy offers many tools ~~and~~ for a patient to manage their SZ symptoms, family therapy is not entirely effective as a treatment alone for SZ.




The response achieves marks for:

- AO1 reaches level 1. Shows some knowledge and understanding of family therapy although fairly isolated and superficial.
- AO3 reaches level 1. Gives a brief evaluation but again there is a limited attempt to address the idea of effectiveness.

On balance this is a fairly typical level 1 response. It meets the criteria for level 1 so no reason to bring it down from the top of the mark band.

Total: 4 marks.

Family therapy is a talking therapy that involves an individual's close family member attending weekly sessions with a therapist/psychiatrist. As this form of therapy is reliant on ~~more~~ ^{more} than ^{just} the schizophrenic patient themselves turning up, ~~it could be~~ there is a risk that other family members may not want, or be able, to dedicate time to attending. This could lead to higher drop out rates which in turn would make it less effective as a treatment for  schizophrenia.

Family therapy aims ~~to~~ ^{to} inform the patient and their family on what it means to have schizophrenia as well as the best coping strategies to accommodate and deal with the disorder. This could prove very effective as there is a lot of stigma surrounding schizophrenia as a disorder ~~so~~ due to ~~let~~ "lack of understanding and stereotypes. Giving families the ~~and~~ knowledge

they need could allow the patient to feel less isolated amongst their family, and create a more supportive effective support system for them. Furthermore, ~~the family will be able to aid in~~ This could be by the family aiding in tasks such as ~~the~~ reminding the individual to take medication, or simply making them more aware of triggers. (+)

In contradiction, it could be argued that family therapy is only effective when used in tandem with a drug drug therapy such as Chlorpromazine. ~~which~~ This blocks dopamine receptors without activating them, ~~limiting dopamine~~ reducing the effects of ~~hyperdopaminergic~~ hyperdopaminergia. Non-biological treatments such as family therapy ~~do~~ do not address the root cause of schizophrenia so it ~~is~~ could be argued that they only reduce the impacts of schizophrenia instead of curing the root cause. (-)

Family therapy takes place over many months with many sessions. This is an issue

as family therapy will not provide any instant relief like a drug for schizophrenia will. This can make it harder for an individual to continue and stay consistent with the therapy which is required for it to be effective. Furthermore, family therapy can be expensive, particularly over many sessions, which can again lead to high drop out rates of families especially in low income areas. This makes family therapy less effective. (-)

On the other hand, by incorporating family members into the treatment this allows more accountability for the schizophrenic individual to continue the therapy. This is unlike ~~therapy~~ therapies such as CBT which involve only the clinician and the patient, unless the patient is a minor. (+)

In conclusion, Family therapy is effective in treating schizophrenia as it allows the patient and their family to develop coping strategies and ~~provided~~ provide needed support. However, family therapy's effectiveness is limited unless it is paired with another therapy such as drug therapy. This is because family therapy doesn't address the root cause of schizophrenia as a disorder.



This response achieves marks for:

- AO1 reaches level 2. Shows mostly accurate knowledge about family therapy though fairly brief at times.
- AO3 reaches level 4. Shows logical chains of reasoning with their arguments for and against the effectiveness of family therapy which are balanced. Some judgements are made within those paragraphs, with a conclusion presented. Really nice AO3. This response highlights that research is not needed for AO3 to achieve level 4.

On balance this is level 2; AO1 keeps this in level 3 but at the higher end.

Total: 11 marks.

Question 6 (a)

This 1 mark question requires candidates to identify the level of measurement for Beverley's data. The question is comprised of one AO2 mark.

Performance on this question was surprisingly mixed with many candidate responses failing to identify that the data was nominal. Where performance was limited, a lack of understanding about what is meant by level of measurement was apparent. Many responses suggested frequencies, bar charts, questionnaires with those who did seem to understand the terminology often suggesting that the data was ordinal, which is not correct.

- 6 Beverley is a school nurse investigating healthy eating habits in children. She counts how many children choose to eat fruit, cake or both for a snack during breaktime at a school.**

(a) Identify the level of measurement for Beverley's data.

(1)

ordinal data frequencies



This response achieves no marks as frequencies are not related to levels of measurement.

6 Beverley is a school nurse investigating healthy eating habits in children. She counts how many children choose to eat fruit, cake or both for a snack during breaktime at a school.

(a) Identify the level of measurement for Beverley's data.

(1)

Nominal



ResultsPlus
Examiner Comments

This response achieves the mark for correctly identifying nominal data as the level of measurement.



ResultsPlus
Examiner Tip

Make sure that candidates know key methodological terminology and can apply it to different scenarios

Question 6 (b)

This 1 mark question requires candidates to identify modal food type from a bar chart. This question is comprised of one AO2 mark.

The only correct response for this question is 'cake' and the vast majority of candidates achieved the 1 mark.

Question 6 (c)

This question requires candidates to calculate a ratio from data given. This question is comprised of one AO2 mark.

The only correct response to this question is 6:11. Most candidates achieved the 1 mark available. Limited performance was either due to incorrect calculation or reducing the 6:11 down further when it cannot be reduced further. This was very much the minority of responses however.

(c) Calculate the ratio of children who chose only fruit to those who chose only cake.

You **must** give your answer in the lowest form.

(1)

Space for calculations

$$\begin{array}{r} 6 \quad 11 \\ \underline{6} \\ 17 \end{array}$$

6:11

8:22
11:22
3:11 3:6
6:11

Ratio 3:6



Although this candidate response has 6:11 on the page, they have tried to reduce it down further and incorrectly suggested that 3:6 is the ratio's lowest form.

It is worth noting that the answer does not need to be on the line in order to get the mark, but in instances such as this one where it is clear that the candidate has performed a further incorrect calculation on the data, the final answer will need to taken.

Total: 0 marks.

Question 6 (d)

This question requires candidates to calculate a percentage from the data given in the question. This question is comprised of one AO2 mark.

The only answer for this question is 27.27%. Limited performance was mainly due to a wrong calculation of the final results, although some candidates did not give the answer to two decimal places.

Question 7

This three part question requires candidates to:

- (a) Calculate the chi-squared using the data given (four AO2 marks).
- (b) State whether the results of the chi-squared are significant (one AO2 mark).
- (c) Give one conclusion Jamie could have made from the results of his investigation (one AO2 mark).

For part (a) the correct answer is 1.02. It is worth noting that if the answer is correct then 4 marks are automatically given, no matter the calculations that have gone previously. If the candidate response gives an incorrect final answer, then they could still get marks for:

- The O-E column.
- The $(O-E)^2$ column.
- The $(O-E)^2/E$ column.

Most candidate responses got at least 1 mark. Where performance was limited was due to misunderstandings about the process of calculating a chi-squared.

For part (b) the correct answer is that the results are not significant as 1.02 is less than the critical value of 5.02. Figures are needed to get the 1 mark here. It is worth noting that if the answer in part (a) is wrong, but the candidate uses this figure correctly, then credit can still be given.

For part (c) candidates need to ensure that both the independent variable and the dependent variable are in their conclusion.

Parts (b) and (c) were answered less well than part (a) but a large amount of candidate responses were able to access all of the marks available for this question. Limited performance on parts (b) and (c) were due to the figures being omitted (part b) and either IV or DV not being used (part c).

7 Jamie investigated gender differences in obedience by observing males and females at a train station. Jamie wanted to see if they would follow an instruction announced loudly over a speaker that said, "passengers must not run on the platform when the train arrives".

Jamie counted how many males and females did or did not run when the arrival of their train was announced.

Jamie used a chi-squared test to find out if the results were significant.

(a) Calculate the chi-squared for the data gathered by Jamie by completing **Table 1**.

The formulae and statistical tables can be found at the front of the paper.

Your answers should **all** be correct to **two** decimal places.

(4)

		Observed	Expected	O-E	(O-E) ²	(O-E) ² /E
Males	Ran on the platform	41	38.03	2.97	+8.82	0.23
	Did not run on the platform	21	23.97	-2.97	+8.82	0.37
Females	Ran on the platform	51	53.97	-2.97	+8.82	0.37
	Did not run on the platform	37	34.03	2.97	+8.82	0.23
Chi-squared =						1.20

0.46 - 0.74
Table 1

- (b) State, using the data, whether Jamie's results are significant for a two-tailed test at $P \leq 0.025$ where $df = 1$.

The formulae and statistical tables can be found at the front of the paper.

(1)

~~No, because the~~ It is not significant
because it's less than 2.71

- (c) Give **one** conclusion that Jamie could make from the data gathered from his investigation.

(1)

Females were more ~~obedient~~ obedient than
males.



For part (a) this candidate response achieves marks for:

- Correct O-E column. (1)
- Correct $(O-E)^2$ column. (1)

Unfortunately the next two column are incorrect:

- part (b) no marks awarded as the two correct figures (critical and observed) are not given.
- part (c) no marks awarded as the IV and DV are not both present in the conclusion (and the conclusion is wrong as the response needs to say that there is no difference).

Total:

(a) 2 marks

(b) 0 marks

(c) 0 marks.

- 7 Jamie investigated gender differences in obedience by observing males and females at a train station. Jamie wanted to see if they would follow an instruction announced loudly over a speaker that said, "passengers must not run on the platform when the train arrives".

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- (a) Calculate the chi-squared for the data gathered by Jamie by completing **Table 1**.

The formulae and statistical tables can be found at the front of the paper.

Your answers should **all** be correct to **two** decimal places.

(4)

		Observed	Expected	O-E	(O-E) ²	(O-E) ² /E
Males	Ran on the platform	41	38.03	2.97	8.82	0.23
	Did not run on the platform	21	23.97	-2.97	8.82	0.37
Females	Ran on the platform	51	53.97	-2.97	8.82	0.16
	Did not run on the platform	37	34.03	2.97	8.82	0.26
					Chi-squared =	1.02

- (b) State, using the data, whether Jamie's results are significant for a two-tailed test at $P \leq 0.025$ where $df = 1$.

3.84 1.02

The formulae and statistical tables can be found at the front of the paper.

(1)

There is no significant difference between the number of male and female who had run or not run as the calculated value of 1.02 is less than critical value of 3.84.

- (c) Give **one** conclusion that Jamie could make from the data gathered from his investigation.

(1)

~~There is no significant difference between the number of~~ Men are more likely to run on the platform and obey than females. Men are more likely to obey than women.

(Total for Question 7 = 6 marks)



ResultsPlus
Examiner Comments

This candidate achieves marks for:

- (a) The correct value for chi-squared of 1.02. (4)
(b) the critical value is incorrect and (c) conclusion is incorrect as (b) has already said that the results are not significant.

Total:

- (a) 4 marks.
(b) 0 marks.
(c) 0 marks.

7 Jamie investigated gender differences in obedience by observing males and females at a train station. Jamie wanted to see if they would follow an instruction announced loudly over a speaker that said, "passengers must not run on the platform when the train arrives".

Jamie counted how many males and females did or did not run when the arrival of their train was announced.

Jamie used a chi-squared test to find out if the results were significant.

(a) Calculate the chi-squared for the data gathered by Jamie by completing **Table 1**.

The formulae and statistical tables can be found at the front of the paper.

Your answers should all be correct to two decimal places.

(4)

		Observed	Expected	O-E	(O-E) ²	(O-E) ² /E
Males	Ran on the platform	41	38.03	2.97	8.82	0.23
	Did not run on the platform	21	23.97	-2.97	8.82	0.37
Females	Ran on the platform	51	53.97	-2.97	8.82	0.16
	Did not run on the platform	37	34.03	2.97	8.82	0.26
Chi-squared =						1.02

- (b) State, using the data, whether Jamie's results are significant for a two-tailed test at $P \leq 0.025$ where $df = 1$.

The formulae and statistical tables can be found at the front of the paper.

(1)

Jamie's results are not significant as the calculated value of 1.02 is not equal to or greater than the critical value of 5.02, for a two-tailed test at $P \leq 0.025$ where $df = 1$.

- (c) Give **one** conclusion that Jamie could make from the data gathered from his investigation.

(1)

There will be no gender differences in obedience displayed by males and females.



This candidate response achieves marks for:

- (a) The correct value for the chi-squared calculation on 1.02. (4)
- (b) An accurate statement about whether results were significant using the correct observed and critical values. (1)
- (c) An appropriate conclusion using both the IV (gender) and the DV (obedience). (1)

Total:

- (a) 4 marks.
- (b) 1 mark.
- (c) 1 mark.

Question 8 (a)

This 2 mark question requires candidates to describe how Ling could use thematic analysis to analyse the qualitative data. This question is comprised of two AO2 marks and therefore needs some link to the scenario in each point made.

To achieve the 2 marks candidate responses need to:

- Talk about reading the articles and choose/look for key phrases about parenting styles.
- Read them again to look for similarities/differences in the ideas on parenting and attachment.

Most candidate responses were able to achieve the first mark about reading the articles. Limited performance was due to generic responses at times, but the main issue came with responses that strayed into quantitative content analysis and talking about tallying each time a word/phrase comes up. This was not creditworthy.

8 Ling is investigating the impact of parenting styles on infant attachment. She has gathered nine peer-reviewed, published articles. The articles include in-depth, qualitative data from parents about their parenting styles and infant behaviours.

(a) Describe how Ling could use thematic analysis to analyse the qualitative data in the articles.

(2)

Ling could list key themes such as the different attachment types or different attachment behaviours, eg. Secure, Avoidant, Resistant etc. and as she goes through the articles, she can tally up every time she ~~hears~~^{reads} a certain word and then see which word came up most often.



This candidate achieves marks for:

- AO2 mark for suggesting to list key themes from the articles as she goes through them (with examples of relevant words which provides a link). (1)

No marks are awarded for tallying up the number of times they occur as this is content analysis not thematic analysis.

Total: 1 mark.

8 Ling is investigating the impact of parenting styles on infant attachment. She has gathered nine peer-reviewed, published articles. The articles include in-depth, qualitative data from parents about their parenting styles and infant behaviours.

(a) Describe how Ling could use thematic analysis to analyse the qualitative data in the articles.

(2)

Ling could decide which themes to group together before the thematic analysis, such as clingy, healthy, distant for parenting style, and clingy, healthy, distant for infant behaviours. Then, she should read the articles and sort the parenting styles and infant behaviours into the different themes.



ResultsPlus
Examiner Comments

This candidate response achieves marks for:

- AO2 mark for the idea of themes such as clingy/healthy being grouped together. (1)
- AO2 mark for reading the articles and sorting the parenting styles etc into different themes. (1)

Nice response.

Total: 2 marks.

Question 8 (b)

This 2 mark question requires candidates to explain one improvement that Ling could make to her investigation. This question is comprised of one AO2 and one AO3 mark which means that one link to the scenario is needed somewhere in the response.

To achieve the 2 marks candidate responses need to:

- Identify one improvement to Ling's study. (AO2)
- Provide a justification of this improvement. (AO3)

Creditworthy responses included:

- The idea of using more than nine articles which have been peer reviewed (the nine articles is the link here).
- Using more articles about parenting style from different cultures/ethnicities.
- Using articles about parenting style that have not been peer reviewed to reduce possible selection/publication bias.

Candidate responses, in the main, were able to identify an improvement to Ling's study. Where performance was limited was due to not justifying the improvement identified. Many candidates just said that "it would increase generalisability/representativeness" which is not enough for the second mark.

(b) Explain **one** improvement that Ling could make to her investigation.

(2)

Ling could gather more articles, since 9 articles isn't that many, her sample of articles is quite small. If she were to increase the number of articles she used, she would increase the generalizability of her meta analysis and be able to apply her findings to more parents and infants.



ResultsPlus
Examiner Comments

This response achieves 0 marks.

Increasing the sample size does not automatically improve the study. The only way it can be credited is if a specific appropriate number (such as 20) is stated.



ResultsPlus
Examiner Tip

Candidates should be reminded that if they use an increase in sample size they should give a number of how many researchers should increase it to.

(b) Explain **one** improvement that Ling could make to her investigation.

(2)

Ling could ~~gather~~ ~~Quantitative~~ have another individual ~~inter~~ to code the articles and find themes regarding parenting style and infant behaviour. ~~at the~~ This means her experiment is not just reliant on her subjective interpretation of articles and the theme its suggesting but also of another ~~the~~ person, giving her experiment inter coder reliability and increasing objectivity.



ResultsPlus
Examiner Comments

This response achieves marks for:

- AO2 mark for the suggestion to use another person to code the articles regarding parenting styles as well. (1)
- AO3 mark not being reliant on one person's subjective interpretation of articles therefore increasing objectivity/inter-rater reliability. (1)

Total: 2 marks.

Question 9

This 6 mark question requires candidates to explain three control issues that Poppy would need to plan for when designing her experiment. The question is comprised of three AO2 and three AO3 marks which means there needs to be a link to the scenario in each point made.

To achieve the 2 marks available per point candidate responses need to:

- Identify a relevant control linked to Poppy's study (AO2).
- Justify why it was important/relevant for her research (AO3).

Creditworthy responses included:

- Control for participant variables such as poor eyesight (AO2). As if not done then results would be valid due to third factor not controlled for (AO3).
- Ensured the procedure was standardised across all trials ie same lines (AO2). This would allow replication to test for reliability (AO3).
- Control of boredom effects due to the number of trials participants are doing (AO2).
- Making sure the participant variables such as previous experience of psychology/Asch (AO2). As this would lead to demand characteristics and would no longer be measuring conformity (AO3).

Candidate responses to this question were mixed. Many achieved 1 or 2 marks by identifying controls but not much more. Where performance was limited was due to generic responses, or mainly a lack of justification for the controls given.

9 Poppy is designing a laboratory experiment to test conformity to a majority group. She intends to replicate the procedure used by Asch (1951) for his research into conformity using lines. Poppy will increase the number of participants to three per experiment and the number of confederates to 10. Poppy has a total of nine participants, so plans to replicate her experiment three times.

Each experiment consists of 20 trials where the three participants have to state their answer for each slide. There are 20 different slides, each with three possible answers. In all trials, the 10 confederates will give the same, previously agreed, incorrect response.

Explain **three** control issues that Poppy would need to plan for when designing her laboratory experiment.

- 1 one control issue Poppy would need to plan for is the participant variables. As Poppy will increase the number of participants to three per experiment, this could mean that the participants feel anxious and show social desirability responses. Poppy could make a questionnaire to ^{understand} ~~test~~ the personalities of the participants.
- 2 There could be situational variables like poor lighting which could make it difficult for the participants to see the slides. Therefore, Poppy must ensure there is good lighting when the slides are shown to ensure validity for her findings.
- 3 Poppy would need to ~~have~~ control any extraneous variables that could affect the answers of the participant. ~~As~~ She could control the fact that the participants don't talk to each other which can affect their answer.



This candidate response achieves marks for

- AO2 mark for the idea of controlling situational variables such as light which could mean participants cannot see slides. (1)

Nothing creditworthy in the first point as giving them a questionnaire would not control participant variables and would also invalidate her research.

Total: 1 mark.

9 Poppy is designing a laboratory experiment to test conformity to a majority group. She intends to replicate the procedure used by Asch (1951) for his research into conformity using lines. Poppy will increase the number of participants to three per experiment and the number of confederates to 10. Poppy has a total of nine participants, so plans to replicate her experiment three times.

⊗

Each experiment consists of 20 trials where the three participants have to state their answer for each slide. There are 20 different slides, each with three possible answers. In all trials, the 10 confederates will give the same, previously agreed, incorrect response.

Explain **three** control issues that Poppy would need to plan for when designing her laboratory experiment.

1 Poppy would need to try and ensure none of the participants she uses have previous psychological background and could be aware of Asch's original experiment. This will reduce the effect of demand characteristics as pps. are able to guess the aim and change behaviours accordingly.

2 Control ~~extraneous~~ ^{aim and change} ~~variables~~ ^{variables}

She would need to make sure all pps see the same slides for the same period of time.

3 Also need to control the percentage of each gender in the groups as gender may effect conformity reducing the validity as the conformity may not be due to majority influence.



This response achieves marks for:

- AO2 and AO3 mark for ensuring participants do not have a psychological background and be aware of Asch's experiment (AO2) which will reduce the effect of demand characteristics and change their behaviour accordingly (AO3). (2)
- AO2 mark for making sure all participants see the same slides for the same period of time (AO2). (1)
- AO2 mark for controlling the gender as gender may affect conformity (AO2). (1) Nothing for the second part of this point as 'this may affect the validity' is not enough for the justification mark.

Total: 4 marks.



Candidates need to ensure that the points made in this type of question are linked to the specific scenario given and also that there is relevant justification for each point.

Question 10

This question is an unseen 8 mark synoptic essay, formulated around a key question for society. This question requires candidates to discuss the key question of 'the implication for treating offenders if aggression is found to be a result of innate biological factors rather than choice.'

Candidates are required to use concepts, theories and/or research studies to achieve the AO1 content for this question, with AO2 application to the key question area that requires them to develop points from the scenario material given.

AO1 content should be about biological theories of aggression such as: the role of the amygdala, MAOA gene, brain structure/abnormalities and testosterone and cortisol.

AO2 content should include what the above means for society/punishment/treatments with examples from studies/theories.

Creditworthy responses for AO2 included:

- Charles Whitman and possible brain tumour. What does this mean for the legal system ie punishment vs. treatment.
- Do offenders have free will if biological? Or are their actions determined? What are the implications of this?
- Could you pre-empt such issues? Would this be ethical to pre-screen people?
- Dabbs and the role of testosterone.
- Mix of biology and environment; punished but still treated.
- Does saying it is biological take away the aggressors moral responsibility for their actions?

Candidates often found it difficult to access the higher bands on this question. Although candidates often made a good attempt at the AO1, the AO2 application was weak, with occasional references to Charles Whitman, Dabbs etc. but very little acknowledgement about the implication of this for society. Some candidates did the AO2 well, but then struggled with the AO1 knowledge part of the response; this made for a very imbalanced essay.

Some responses only copied large chunks of the scenario without development, which limited the levels that could be achieved.

10 One key question for society is the implication for treating offenders if aggression is found to be a result of innate biological factors rather than choice.

Legal systems are often based on the idea that individuals have free will, so have acted out of choice, so we should punish them for their actions. Some biological theories suggest that aggression is innately determined, and actions may not be a choice, so treatments may be more appropriate for offenders.

In 1966 Charles Whitman randomly fired gun shots at people, killing a total of 16 and wounding 31 others. It was discovered he had a brain tumour that may have affected his amygdala, potentially resulting in an inability to control his emotions and actions.

Dabbs et al. (1995) studied 692 male prisoners and found high levels of testosterone in those who committed violent crimes, which could indicate a link between aggression and increased testosterone levels.

Discuss the key question of the implication for treating offenders if aggression is found to be a result of innate biological factors rather than choice. You should use concepts, theories and/or research studied in your psychology course.

You must make reference to the context in your answer.

(8)

offenders who offended due
to innate biological factors
need to be given medical
care. Since if they are
just put in jail it would not
cause any change and they
will reoffend once they are back
out again unlike those who
offended by choice they will
learn and take consequences
for their actions and will
have improved their mindset.

Those who suffer from biological issues that cause them to be aggressive need to be put in rehabilitation centers until the medical specialists treating them are sure they are less likely to reoffend and prescribe them with medication and follow up with them and make sure they are taking their med.



ResultsPlus
Examiner Comments

This is a level 1 answer, but due to the lack of AO1 knowledge shown it remains at the bottom of the level. This response achieve marks for:

AO1: level 0. There really is no knowledge shown about biological reasons for aggression.

AO2: level 1: There is a slight reference of the implications ie rehabilitation/medical treatment not punishment but it is very vague and no more than level 1.

Total: level 1, 1 mark.

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Legal systems are often based on the idea that individuals have free will, so have acted out of choice, so we should punish them for their actions. Some biological theories suggest that aggression is innately determined, and actions may not be a choice, so treatments may be more appropriate for offenders.

In 1966 Charles Whitman randomly fired gun shots at people, killing a total of 16 and wounding 31 others. It was discovered he had a brain tumour that may have affected his amygdala, potentially resulting in an inability to control his emotions and actions.

Dabbs et al. (1995) studied 692 male prisoners and found high levels of testosterone in those who committed violent crimes, which could indicate a link between aggression and increased testosterone levels.

Discuss the key question of the implication for treating offenders if aggression is found to be a result of innate biological factors rather than choice. You should use concepts, theories and/or research studied in your psychology course.

You must make reference to the context in your answer.

(8)

Aggression is ~~is~~ explained by brain abnormalities such as impaired amygdala or brain tumour. Hormones are another biological explanation of human aggression. Social learning theory is a learning theory that explains how individuals immitate desired behaviour from observing their perceived role model. Operant conditioning is another learning theory that involves positive reinforcement, whereby a behaviour is continued if rewarded positively.

Charles Whitman who fired gun shots at people could be an explanation of the brain tumour that he was found to have, as a result of which he might have acted in such a way, because this is not a choice,

Charles should be given treatment instead of being imprisoned. Dabbs et al found male prisoners with high testosterone levels could explain their aggression and violent crimes, as testosterone is such a hormone that is linked to higher aggression, such offenders should be treated with drug therapy, as imprisoning them may lead to increased aggression, making them act more aggressively after being released. Some offenders choose to commit crimes after imitating observed behaviour from their role models who may be engaging in crimes, such type of aggression may be purely out of choice and treated through punishment. ~~or~~ ~~co~~ other offenders may be acting out simply because they could be rewarded positively, like receiving money from stolen items, as the legal system idealism ideals, such individuals have free will, and act out of choice, thus should be punished.



ResultsPlus
Examiner Comments

This response is level 2 but at the bottom due to the weaker AO1. This response achieves marks for:

AO1: top level 1. There is some accurate knowledge about brain abnormalities/amygdala/tumours but it is very brief and superficial.

AO2: level 2. There is some relevant evidence such as Charle Whitman, Dabbs, alternative theories such as social learning theory.

Total: level 2, 3 marks.

10 One key question for society is the implication for treating offenders if aggression is found to be a result of innate biological factors rather than choice.

Legal systems are often based on the idea that individuals have free will, so have acted out of choice, so we should punish them for their actions. Some biological theories suggest that aggression is innately determined, and actions may not be a choice, so treatments may be more appropriate for offenders.

In 1966 Charles Whitman randomly fired gun shots at people, killing a total of 16 and wounding 31 others. It was discovered he had a brain tumour that may have affected his amygdala, potentially resulting in an inability to control his emotions and actions.

Dabbs et al. (1995) studied 692 male prisoners and found high levels of testosterone in those who committed violent crimes, which could indicate a link between aggression and increased testosterone levels.

Discuss the key question of the implication for treating offenders if aggression is found to be a result of innate biological factors rather than choice. You should use concepts, theories and/or research studied in your psychology course.

You must make reference to the context in your answer.

(8)

aggression is behaviour that is seen as angry and has a negative effect on others; aggressive behaviour can be due to genetic factors such as genes or mutations that result in certain proteins that result in aggression, but it can also be due to social and environmental experiences that result in a person feeling angry/upset with the people and the world around them, therefore taking matters into their own hands and displaying aggressive behaviour.

Research has shown that individuals with high levels of testosterone are more aggressive than those with normal levels.

Damage in the prefrontal cortex and amygdala has also

proven to have a large association with aggression, this is because brain is considered ineffective/damaged therefore person will not be functioning normally.

Legal systems that are heavily based on the idea that individuals have Free will and all their actions are entirely up to choice, may be invalid since it does not consider any biological factors that contribute to aggression, such as genetic composition, mutations, testosterone and damaged brain areas.

The example of Charles Whitman 1966 provides evidence that people who have suffered from brain damage may not have proper brain functioning and therefore are not in control of their actions since they are not in control of their brains.

Dabbs et al 1995 links criminals that have conducted violent crimes to having increased levels of testosterone, this is a hormone that contributes to aggression, so increased testosterone reaching body areas, such as blood, brain/muscles may be the reason prisoners are committing the crimes.

it is unethical to assume someone person is aggressive is entirely based on environmental factors (nurture) since a large amount of studies have proven that to be false, so legal systems should implement new laws that are considerate to those who have biological abnormalities which contribute to aggression.



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Examiner Comments

This is a level 3 response, but due to the weaker AO1 it is at the bottom end. This response achieves marks for:

AO1: top level 2. Some accurate knowledge about different biological reasons for aggression such as genes, testosterone, pre frontal cortex.

AO2: level 3. Reference to legal systems being based on free will, and how that may not be the case. Charles Whitman, Dabbs et al and the implications from these studies for individuals, and the idea that it may not be biology at all.

Total: level 3, 5 marks.



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Examiner Tip

Candidates need to practice their skills on a variety of key questions to ensure they understand what is needed for the AO1 and AO2 element of the question.

Question 11

This 20 mark question requires candidates to assess how far psychology can be considered ethical. This question is comprised of eight AO1 marks and twelve AO3 marks.

This question demonstrated a broad spread of marks, with some candidates showing some good AO1 understanding of ethical issues although they tended to be slightly list-like. The AO3 evaluation was the stronger element in responses which was preferable due to the higher weighting of the AOs on this question.

Creditworthy responses for AO1 included:

- Knowledge of BPS ethical guidelines.
- Knowledge of the UNCRC.
- Scientific procedure act for animals along with detail.
- Examples of studies where ethics were not followed.

Creditworthy response for AO3 included:

- Assessment of studies where there are ethical concerns.
- Why studies were done that way, was it necessary? And why?
- Was there any alternative, ie Burger vs. Milgram?
- Cost benefit analysis, ie were the results from the study of benefit to us? Does this make it worthwhile?
- Use of animals rather than human participants.
- Lack of ethical guidelines for animals in past (ie skinner's pigeons).

Limited performance was candidates 'listing' a range of studies from across the course, without any development or evaluation of what these reflected in terms of ethics. Therefore, at the lower end of the mark range, the responses were largely points of definition and pieces of research with weak and often generic AO3.

There is a heavier weighting to the AO3 evaluative skills in a 20 mark essay. It would benefit candidates to focus on the ways in which issues and debates impact in psychology and psychological research, to enable stronger arguments and judgements about the relevance, implications and potential merits and demerits of the issue debated in the question.

11 Assess how far psychological research can be considered ethical.

(20)

Milgram study was considered ~~eth~~ ethical during the period of time the investigation was conducted. Milgram study was related to electric shocks by participant and fake confederate. The fake screams by confederate would have caused psychological distress to the patient. This may have caused psychological harm in the future. In today's society Milgram's study is said to be unethical as it ~~a~~ breaches the code of ethics on so many levels. However, the study being unethical brought real life applications which ~~can~~ can be related to society about conformity. Another research being unethical is Burger which brought



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Examiner Comments

This is a very basic level 1 response with the weaker AO1 keeping the response towards the bottom of level 1. This response achieves marks for:

AO1: bottom level 1. Some brief reference to ethical issues such as psychological harm.

AO3: level 1. Some reference to studies such as Milgram, possible reasons why ethical issues can be broken.

Total: level 1, 2 marks.

Psychological research must be ethical as in it must follow the BPS, ^{ethical} codes of conduct and the Scientific Act of procedure. This is to keep Humans and animals safe & protected.

It is important for all researchers to gain informed consent or presumptive consent. ~~to~~ and to not deceive participants or cause any harm including Psychological harm.

Sometimes it is necessary to test on animals such as Rhesus, rats & rhesus monkeys as their structures may be the most similar to ours. However, it is important to follow the Scientific Act procedure. Use the least amount of animals, to provide basic needs such as shelter, food when animals are not being used & to give & produce the least harm where investigating & experimenting with the animals.

Milgram et al deceived his participants when investigating the levels of obedience ~~as~~ and that means informed consent was not given, however it is argued that deception played ~~is~~ an important factor & was needed

to be able to get the right findings. Milgram's research has led psychologists into better in depth understandings.

Burger et al 2009 also replicated Milgram's study but by following ethical considerations.

Harlow et al ~~test~~ experimented on monkey's causing maternal deprivation & living in a cage that resulted in them even dying there. Therefore being extremely unethical, However Harlow argues that the risks taken had to be that way to get the accurate results. Harlow was completely unethical.

Bowlby researched maternal deprivation & that was in natural circumstances where participants already were naturally deprived this follows ethical considerations.

Watson & Rayner: ~~Test~~ Investigated on little Albert by conditioning which caused him extreme distress, However they did get presumptive consent from little Albert's ~~mother~~ ~~mother~~ & ~~she~~ were able to stop when they wanted to. Therefore following the BPS code.

the patient HM suffered from memory loss due to a surgical mistake & that resulted in memory loss. Psychologists constantly kept experimenting on him & till he sadly passed away. Ethically H.M. has never consented & as he always lost his memory & wasn't sure about what was happening. However, HM has provided psychologists lots of knowledge about the importance of brain structure & how it can affect many aspects of an individual's life such as memory.

HM's information was not kept confidential & therefore that breaks ethical guidelines.

Skinner used pigeons to carry out mazes in a study during the war. This is extremely unethical & does affect the pigeons. However, ~~Skinner~~ Skinner suggests that it was normalized during that specific time.

Pavlov investigated in conditioning & used dogs & he taught them how to behave and feel them & took care of them even when doing the experiment of investigating classical conditioning. Therefore he is ethical.

Skinner's box did not follow ~~ethical guidelines~~
the Scientific Act of procedure as it
taught positive & negative reinforcement. The
rat had to press a lever to eat & were
kept in a small box this may cause discomfort
& is unethical.

Milgram's procedures did not encourage to stop
the experiment whenever the participant wanted
etc as four prods were used & for the women's
experiment more ~~low~~ prods were used to use.
The prods were like it is essential for you to
continue. Which may cause participant distress
& as they may thought that the money paid
much less like cause



This is a level 2 response but at the bottom end due to slightly weaker AO1. It achieves marks for:

AO1: bottom level 2. Accurate knowledge of ethical issues such as informed consent, deception, harm, animal ethical issues (SPA).

AO3: level 2. Some accurate assessment of how lack of ethics may be necessary to test on animals, that benefits outweigh the costs ie HM, Burger more ethical than Milgram showing it can be done. This response intertwined arguments for and against ethics and showed some judgements on this.

Total: level 2, 5 marks.

11 Assess how far psychological research can be considered ethical.

(20)

Psychological research in the past have not really considered ethics in their investigations, compared to more modern research. This is due to the development of the BPS (2009), ethical rules of use of animals in research, and UNICRS for children. The BPS was established in 2009 in the considerations of participants who partake in psychological research studies. Some of the principles include anonymity, confidentiality, no deception, no harm to participants, informed consent and more. As, these investigations should not cause any ~~psych~~ psychological harm to participants and not deceive them of the aims of the study. Informed consent is essential so that ^{it is certain that} the participants are willing to participate. Also, that there should be right to withdraw if the participants wish to not participate anymore. Additionally, ethical considerations should be considered for animals as well ~~because they~~ since there have been certain studies that caused harm to

animals and have brought awareness. Some principles include proper care of the animals when they are not being investigated, such as providing them with plenty of food, water and space. Furthermore, the least amount of animals should be used for the investigation and also, not causing any harm to them. Especially, if a surgical procedure must be done, anaesthetics should be provided. And, UNCRS was established so that when research is conducted on children, no harm must be caused such as psychological harm.

A Psychological research may not be considered ethical. This is because the Bandura Bobo doll experiment had children observe and also learn from aggressive role models who conducted aggressive acts. This could have caused the children to copy these acts in the long term and affect them mentally. So, it did not teach them the right thing. So, it is deemed as unethical.

Psychological research may be considered ethical. As, in some research, meta-analysis

have been conducted, for example Van Ijzendoorn and Kroonenberg. They did a meta-analysis of attachment types and chose studies that ~~either~~ performed the strange situation procedure. Since they did not actually conduct these ~~prose~~ SSAs, their study is deemed ethical as no psychological harm was done on children. Psychological research might not be considered ethical. An example of a study is Milgram's. Milgram was investigating about obedience and also about agency theory. He had the participants give electric shocks to the confederates who would give wrong answers. The participants did not know that the confederates were acting and thought they were giving real ~~sets~~ shocks that would go up to 400v. This caused psychological distress and some participants were deeply affected. They ~~could~~ were encouraged to carry on and could not withdraw. The study was very unethical and went against BPS guidelines. However, Milgram's findings furthered our understanding of why people obey ~~to~~ which is essential for society. So the benefits

outweigh the ethical considerations.

Psychological research can be deemed as unethical because of Rosenhan's study.

~~Rosenhan~~ Rosenhan wanted to know if the insane could be distinguished between the sane. He used a sample of 8 sane people to be pseudo-patients, faking their schizophrenic symptoms and being admitted to 12 hospitals across the US. The hospital staff were actually not aware that these pseudo-patients were fake and did not know they were being observed. This goes against the ethical guidelines as hospital staff were deceived, nor knowing about the study. ~~It~~ So it is unethical.

Psychological research may be deemed as ethical. ~~As~~ This is because some

studies have gathered informed consent by participants such as Suzuki et al. The participants were willing to take part ~~through~~ and have tests such as their

~~the~~ BMI being measured to be done.

So, they were not deceived and were not forced to take part. So, it is ethical.

But, as the inpatients were ~~suffering~~ suffering from schizophrenia, they may

nor have been in their right state of mind to understand what is going on. So this goes against ethical considerations.

In conclusion, psychological research can be deemed as unethical because most studies have gone against ethical guidelines such as causing psychological harm. However, the benefits seem to outweigh the ethics as certain findings have helped society.



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Examiner Comments

This is a level 3 response but towards the top end. It achieves marks for:

AO1: level 3. Some accurate and thorough information about ethical issues such as BPS guidelines (with detail) the UNCRC, animal ethics (with detail).

AO3: level 3. Some good use of research which is deemed unethical ie Bandura, Milgram, Rosenhan and ethical ie Van Ijzendoorn, Suzuki. This can be seen as slightly list-like but is balanced in terms of 'for and against' but little judgements made in detail.

Total: level 3, 11 marks.

Paper Summary

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

- Review the taxonomy expectations within the specification to aid understanding of the key requirements of the questions and the distinctions between these. This is especially important in terms of 'describe' and 'explain' in shorter questions.
- Within extended open responses, give balanced responses and exemplified points, which lead to making informed conclusions or judgements (where appropriate) in relation to the question content.
- AO3 evaluation/assessment is still the weakest part of extended open responses so further practice on this type of question would be a benefit.
- The 'key question' essay is still causing a number of difficulties. Apply AO1 understanding of the appropriate areas of psychology to the context in the given scenario; do not merely replicate the information in the scenario.
- Marks were often lost due to responses being generic, rather than a lack of knowledge. Remember that if the question is asking for use of the scenario then responses should link to that scenario explicitly.
- Remember that a name is not enough to apply a response to a scenario; in addition, do not just lift from the question as this will also not be seen as being linked to the scenario.
- When expanding points, the use of evidence and supporting/contesting concepts will aid in exemplifying knowledge and understanding, as appropriate.
- Focus on the specific direction of the question to avoid going off-topic, particularly in the extended essay questions.
- The 6 mark analyse question caused a number of difficulties this series. A thorough understanding of the expectations of this taxonomy word are needed, especially in relation to how points of knowledge can be justified. Often most of the AO1 marks available would be achieved on this question, but very few of the AO3 points.

Grade boundaries

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

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

