

Student responses with examiner commentary (based on SAM2)

AS Psychology 7181/2
Psychology in Context

[First teaching: September 2015]
[First Examination: Summer 2016]

Introduction

These resources should be used in conjunction with the Specimen Assessment Material (7181/2) 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

02 Briefly explain one function of the endocrine system.

[2 marks]

MARK SCHEME

Marks for this question: AO1 = 2

1 mark for a correct function of the endocrine system

- To secrete the hormones which are required to regulate many bodily functions
- To provide a chemical system of communication via the blood stream

1 mark for elaboration of how the function occurs: such as via release of the required amount of a specific hormone to promote appropriate growth or metabolism or reproduction.

Exemplar response

Hormones released into the bloodstream and then distributed to the rest of the body through a system of internal glands.

Examiner commentary

There is a brief explanation of a function of the endocrine system for one mark but this would need further elaboration for the second mark.

Mark awarded = 1

QUESTION

03 Why are the standard deviation values found in the study above useful descriptive statistics for the cognitive psychologist?

[2 marks]

MARK SCHEME

Marks for this question: AO2 = 2

2 marks for a clear and coherent explanation of the usefulness of the standard deviation in this study.

1 mark for a weak or muddled answer in which the impact of the difference in the SDs is alluded to.

- useful to inform about the spread of scores
- indicates participant variables – as a group the people in Condition 1 are quite different/are more variable than those in Condition 2.

Credit answers which suggest that the SDs can be used to look for similarity or differences in variance.

Exemplar response

It shows condition 1 had much greater variation in scores than condition 2, which had a low variance. This shows much greater participant variables or individual differences in condition 1.

Examiner commentary

This response correctly points out the greater variation of scores in condition 1 and that this is indicative of participant variables.

Mark awarded = 2

QUESTION

04 Outline one problem of studying internal mental processes like memory ability by conducting experiments such as that described in Question 03 above.

[2 marks]

MARK SCHEME

Marks for this question: AO3 = 2

2 marks for a clear, coherent outline of a relevant problem

1 mark for a weak, muddled or very limited outline

Possible problems:

- Direct observation of memory is not possible and must be inferred from the results/behaviour of the participants – this inference could be mistaken.
- The task given is rarely how normal memory functioning occurs because it is specifically designed to make measurement possible – the researcher therefore collects data that is only related to memory processing under experimental conditions.

Credit other valid problems.

Exemplar response

People don't use their memory in this way usually so this only tells us how memory works in the lab, not for real.

Examiner commentary

This is a valid problem but needs elaboration/further clarification to gain the second mark.

Mark awarded = 1

QUESTION

- 05 Rita and Holly are identical twins who were separated at birth. When they finally met each other at the age of 35, they were surprised at how different their personalities were. Rita is much more social and out-going than Holly.**

Use your knowledge of genotype and phenotype to explain this difference in their personalities.

[4 marks]

MARK SCHEME

Marks for this question: AO2 = 4

Level	Marks	Description
2	3–4	Knowledge of genotype and phenotype is clear. Explanation of how these affect personality is clear. The answer is generally coherent with effective use of terminology.
1	1–2	There is limited/partial knowledge and explanation. Knowledge is clear but the explanation is missing or inaccurate. The answer lacks accuracy and detail. Use of terminology is either absent or inappropriate.
	0	No relevant content.

Possible Content:

- Holly and Rita have identical genotype as they are MZ twins.
- They have the predisposition to develop the same personalities as each other unless another factor(s) intervenes.
- For them to have developed different personalities over time, this must have been influenced by being in different environments.
- Their phenotypes – personalities achieved – are different, presumably because Rita was encouraged to be sociable and lively and Holly was not.

Exemplar response

Genotype is the fact they are MZ (identical) twins, so physically very similar. They will have a tendency to develop similar personalities. However, other factors in their different upbringing (environment) must have shaped their personality. So although they are identical they have had very different environments.

Examiner commentary

This is a Level 2 response. The first three bullet points on the mark scheme are covered in the answer but to gain full marks the term 'phenotype' should also feature in the explanation.

Mark awarded = 3

QUESTION

06 Outline and evaluate the social learning theory approach. Refer to evidence in your answer.

[12 marks]

MARK SCHEME

Marks for this question: AO1 = 6 AO3 = 6

Level	Marks	Description
4	10–12	Knowledge of social learning theory and associated evidence is accurate and generally well detailed. Discussion is mostly effective. The answer is clear, coherent and focused. Specialist terminology is used effectively. Minor detail and/or expansion sometimes lacking.
3	7–9	Knowledge of social learning theory is evident. Some evidence is included. Discussion is apparent and mostly effective. There are occasional inaccuracies. The answer is mostly clear and organised. Specialist terminology is mostly used appropriately. Lacks focus in places.
2	4–6	Knowledge of social learning theory is present. Focus is mainly on description. Any discussion is of limited effectiveness. The answer lacks clarity, accuracy and organisation in places. Specialist terminology is used inappropriately on occasions.
1	1–3	Knowledge of social learning theory is limited. Discussion is very limited, poorly focused or absent. The answer as a whole lacks clarity, has many inaccuracies and is poorly organised. Specialist terminology is either absent or inappropriately used.
	0	No relevant content.

Possible content:

- Learning takes place in a social context
- Learning occurs via observation of the behaviour of others and the rewards or punishments received for the behaviour
- Other people act as models and the characteristics of models influence the likelihood of imitation of the behaviour
- Learning and performance are not the same activity. Mediational processes affect production of behaviour reciprocal determinism and the concept of free will
- Relevant research eg Bobo doll study, Bandura
- Concepts of identification and vicarious reinforcement.

Possible discussion

- Use of evidence to support social learning theory
- Benefits of the experimental approach to investigate learning and issues with experimental evidence that might affect the validity of the results and therefore the conclusions drawn
- Focus on human traits of consciousness and rationality which cannot be demonstrated with animal research, addresses the influence of mediational processes on learning – neglected by behaviourists

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- Provides explanations that relate to behaviours such as aggression and intellectual development
 - Does not pay much attention to the impact of biological, heredity or maturational factors on behaviour, evidence from these areas of research does show they do have an impact.

Credit other relevant information.

Exemplar response

SLT argues that behaviour is acquired by vicarious reinforcement, the observation of role models, themselves receiving rewards. Bandura suggested there are four stages. Firstly, the behaviour must be noticed or paid attention to; then the behaviour must be reinforced or remembered, so that it can be produced at a later stage. Secondly, there is reproduction, whereby the person has the necessary skills to accurately carry out this behaviour. Finally, motivation: there needs to be some reason (e.g. expectation of reward) that motivates the person to carry out the new behaviour. Bandura supported this theory with a series of lab experiments using young children and bobo dolls. He was able to demonstrate how these children would imitate a role model behaving in a very aggressive way. However, his studies have been criticised as being artificial and lacking in external validity. A limitation of SLT is that it ignores the role of biological factors and with some behaviours (e.g. aggression) there is strong evidence for testosterone.

Examiner commentary

This is a Level 2 response. There is some knowledge of social learning theory but further concepts could have been included (eg identification, social context, etc.). The answer is largely descriptive because any evaluative points included are merely stated rather than discussed. For example, there is no discussion of why the studies are considered 'artificial and lacking in external validity'. Specialist terminology is not always clear as indicated with the mention of 'testosterone' which needs further elaboration.

Mark awarded = 6

QUESTION

07 What is meant by 'statistical infrequency' as a definition of abnormality?

[2 marks]

MARK SCHEME

Marks for this question: AO1 = 2

2 marks for a clear and accurate explanation of the term 'statistical infrequency' as a definition of abnormality

1 mark for a weak, muddled or very limited explanation

Content: A person's trait, thinking or behaviour would be considered to be an indication of abnormality if it was found to be numerically (statistically) rare/uncommon/anomalous

Exemplar response

Any behaviour which does not occur many times in a given population, so numerically it is quite rare. If using a normal distribution curve, it is likely to be behaviour which falls outside 2 SD, from the mean.

Examiner commentary

This is a full answer which is clear and accurate and gains both marks.

Mark awarded = 2

QUESTION

08 Outline two characteristics of obsessive-compulsive disorder. Refer to Gavin in your answer.

[4 marks]

MARK SCHEME

Marks for this question: AO1 = 2 AO2 = 2

Level	Marks	Description
2	3–4	Outline of characteristics of OCD is clear. Application to the stem is clear. The answer is generally coherent with effective use of terminology.
1	1–2	There is limited/partial explanation of the characteristics of OCD and application to the stem. Explanation of OCD characteristics is clear but the application is missing or inaccurate OR application is clear but the explanation is missing or inaccurate. The answer lacks accuracy and detail. Use of terminology is either absent or inappropriate.
	0	No relevant content.

Possible Content:

- A cognitive characteristic would be an irrational belief or persistent recurring thoughts – catastrophic thinking such as: my family is in danger and might get trapped in a house fire’.
- An emotional characteristic would be feeling anxiety or the reduction of anxiety such as: ‘worry about them’ or ‘feeling calm after making sure a fire cannot start’.
- A behavioural characteristic would be performing a repetitive action such as: switching plug sockets six times.

Credit for two characteristics of OCD, if student offers three, credit the best two.

Exemplar response

Irrational beliefs/thoughts=obsession. They are thoughts which cause great fear/anxiety, such as Gavin believing his family is in danger. Such thoughts are unpleasant and intrusive. 2. Compulsion= behaviour or rituals which are carried out to reduce the anxiety. In Gavin’s case it is the continuous checking that all the plug sockets are off.

Examiner commentary

This is a Level 2 response. The outline of two characteristics of OCD is clear with an appropriate application to the stem. The answer is generally coherent and terminology is used effectively.

Mark awarded = 4

QUESTION

- 09** A psychologist has suggested treating Tommy's fear of birds using systematic desensitisation. Explain how this procedure could be used to help Tommy overcome his phobia.

[4 marks]

MARK SCHEME

Marks for this question: AO2 = 4

1 mark each for applied description of the following aspects of systematic desensitisation: relaxation, hierarchy development, gradual exposure

Plus 1 further mark for some elaboration of any of the three aspects

Content:

- Tommy would be taught relaxation techniques he could use when he encounters birds as part of the therapy.
- Tommy would devise his hierarchy so it reflects his least to most feared bird situation (for example, small picture of a sparrow, then a small bird through a window...)
- Tommy would then be exposed to birds gradually, ensuring he is relaxed at each stage.

Exemplar response

First the psychologist would teach Tommy relaxation, so he could get himself into a totally relaxed state. Then together they would create an anxiety hierarchy, with least feared at the bottom (e.g. looking at a photo of a bird) to most feared at the top (e.g. holding a bird in his hand). Together the therapist and Tommy would work through the hierarchy, making sure he remains fully relaxed at each stage. Gradually he would be helped to reach the top of the hierarchy while remaining completely relaxed and the phobia would be gone.

Examiner commentary

All three components of systematic desensitisation – relaxation, hierarchy development, gradual exposure – are addressed clearly in this answer and there is enough expansion (e.g. with the last sentence) for the fourth mark.

Mark awarded = 4

QUESTION

10 Explain why systematic desensitisation might be more ethical than using flooding to treat Tommy's phobia.

[2 marks]

MARK SCHEME

Marks for this question: AO3 = 2

2 marks for a clear and coherent explanation of the benefits of systematic desensitisation over flooding as a treatment for a phobia for a child

1 mark for a very brief, weak or muddled explanation

Possible points:

- SD is gradual so the anxiety produced in the treatment is limited whereas in flooding the most feared situation is presented immediately which would be too traumatic for a small child.
- Tommy may not fully understand that consent to flooding would mean immediate exposure to his most feared situation so his consent to systematic desensitisation increases his protection from harm.

Exemplar response

Flooding is a very traumatic treatment – fighting fear with fear and it would be unethical to expose a 6 year old child to such a violent type of treatment.

Examiner commentary

This response is an outline of a limitation of 'flooding' as a treatment for a 6-year-old child. However, it does not answer the question set because there is no explanation (or even mention) of why systematic desensitisation would be more ethical.

Mark awarded = 0

QUESTION

11 Outline and evaluate at least one cognitive approach to explaining depression.

[12 marks]

MARK SCHEME

Marks for this question: AO1 = 6 AO3 = 6

Level	Marks	Description
4	10–12	Knowledge of a least one cognitive explanation for depression is accurate and generally well detailed. Discussion is mostly effective. The answer is clear, coherent and focused. Specialist terminology is used effectively. Minor detail and/or expansion sometimes lacking.
3	7–9	Knowledge of at least one cognitive explanation for depression is evident. Discussion is apparent and mostly effective. There are occasional inaccuracies. The answer is mostly clear and organised. Specialist terminology is mostly used appropriately. Lacks focus in places.
2	4–6	Knowledge of at least one cognitive explanation for depression is present. Focus is mainly on description. Any discussion is of limited effectiveness. The answer lacks clarity, accuracy and organisation in places. Specialist terminology used inappropriately on occasions.
1	1–3	Knowledge of at least one cognitive explanation for depression is limited. 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.

Possible content:

- Underlying assumption of the cognitive explanation – depression is the result of disturbance in ‘thinking’.
- Beck’s negative triad – childhood negative schemas develop providing a negative framework for viewing events pessimistically. In adulthood these become biases such as overgeneralisation; magnification; selective perception and absolutist thinking.
- The negative triad is where people think consistently negatively about the self, the world and the future.
- Ellis’s ABC model – developed to explain response to negative events – how people react differently to stress and adversity.
- The model provides the sequence of the process: A – the adversity or event to which there is a reaction; B – the belief or explanation about why the situation occurred; C – the consequence – the feelings and behaviour the belief now causes. In essence the external event is ‘blamed’ for the unhappiness being experienced.
- Both models explain depression as a consequence of faulty and negative thinking about events and suggest it can be managed by challenging this faulty thinking.
- Evidence to support either model such as Beck 1976.

Possible evaluation:

- The use of examples to illustrate the negative triad or the ABC model
- The use of evidence to support cognitive explanation(s)
- The development of successful therapies based on cognitive explanations: CBT and/or REBT
- Cognitive explanation(s) do not explain the links between anger and depression well
- Cognitive explanations do not distinguish cause and effect factors
- Cognitive explanations do not deal with the manic phases in bipolar I and II
- Comparison with alternative explanations eg biological evidence suggests genetic, neurochemical and neuroanatomical influences a biological predisposition

Credit other relevant information.

Exemplar response

Ellis proposed the ABC model to explain depression. 'A' is the occurring event; something happens to cause a series of thoughts (either rational and healthy or irrational and unhealthy). 'B' is the belief about these thoughts, for example, 'I must be a worthless person' or 'no one can love me'. 'C' is then the consequence of the irrational thoughts and behaviour, so that the person might believe there is no point in trying to form a relationship again. Ellis argued that people with depression tend to have this negative and irrational thought process which leads to a negative view of self and unhealthy responses. This is quite similar to Beck's negative triad, where the person has a negative view of themselves, the world and the future. Beck believed negative schemas develop in childhood when unrealistic demands are placed on children and individuals then have a negative and pessimistic outlook on life. Both models argue it is these negative thoughts that lead to depression.

One of the strengths of this approach is the development of successful therapies, such as CBT or REBT, which has been used to treat depression. Evidence to support the effectiveness of CBT in treating depression comes from Fara et al who found that two years after treatment there was only a 25% relapse with CBT compared with 80% using other therapies. However, the cognitive approach ignores the large amount of evidence which suggests there is a biological cause; genetic factors and neurochemicals have been shown to provide a strong biological cause, rather than it being due to irrational thinking. One final limitation is that of cause and effect. It is not possible to determine whether negative thoughts cause depression or are a consequence of the disorder itself.

Examiner commentary

This is a Level 4 response. There is sound knowledge of two cognitive explanations for depression. The answer is clear and focussed on the question set and specialist terminology is used effectively. It would have been useful if, following the evidence for treatment, the focus had returned back to the 'explanation for depression'. For example, they could make the point that the effective treatment suggests the cause is cognitive. However, given the restricted time limit, this is a thorough discussion which includes a number of pertinent evaluative points.

Mark awarded = 11

QUESTION

12.2 What does the display you have drawn in your answer in Question 12.1 suggest about the relationship between age and attitude to social care issues? Explain your answer. [2 marks]

MARK SCHEME

Marks for this question: AO2 = 2

2 marks for: there is a **positive relationship** between age and interest in social care issues/as people get older their interest in social care increases (1) this is because as the values on one co-variable increase, so do the values on the other co-variable (1) OR as age increases so does attitude to social care **rating/score**.

Exemplar response

There is a fairly strong positive correlation; as age increases so does attitudes towards social care.

Examiner commentary

This response gains the mark for identification of the positive correlation but the explanation is not enough as the mark scheme requires a more precise identification of the variable i.e. social care **rating/scale**.

Mark awarded = 1

QUESTION

12.3 Briefly explain how investigator effects might have occurred in this study.

[2 marks]

Marks for this question: AO2 = 2

1 mark for knowledge of an investigator effect – this is when the person collecting the data has knowledge of what the research aim is/traits and that knowledge/those traits affect the data obtained.

1 mark for a brief explanation of how investigator effects might have occurred in this study.

If the researchers believed that older people would be more interested in social care they could have just given scores based on the age of the person.

Exemplar response

In this study if they believed older people were more interested than younger people, they would have rated them as being more engaged (and interested) than they really were.

Examiner commentary

Although there is an attempt to explain investigator effects in this study, the answer lacks clarity (for example, presumably 'they' refers to 'the researchers') and it is not clear from this answer what investigator effects are.

Mark awarded = 1

QUESTION

12.4 Outline how the researchers could have avoided investigator effects having an impact on the study.

[2 marks]

MARK SCHEME

Marks for this question: AO3 = 2

2 marks for explaining how investigator effects could have been avoided in the study. The answer needs to explain what could be done and how that would decrease/eliminate the effect.

Possible content:

- Discussion of separate observation by the two researchers and comparison – inter-rater reliability
- Having ‘blind’ rating of the discussion by someone who is unaware of the aim or research hypothesis
- Filming the discussions so there is a permanent record that can be checked by peer review of the data to confirm the scores/ratings.

Credit other relevant procedures

Exemplar response

Use a double-blind technique – so the person having the discussion doesn't know the aim/hypothesis and so won't be subjective.

Examiner commentary

This answer lacks clarity. Although a double-blind technique could have avoided investigator effects it is unclear from the outline exactly who ‘the person having the discussion’ is, and who would ‘not be subjective’. The answer fails to give a clear outline of how the technique would be implemented and why investigator effects would be eliminated.

Mark awarded = 0

QUESTION

12.5 Briefly discuss the benefits for the researchers of using both closed and open questions on their questionnaire about attitudes to social care.

[4 marks]

MARK SCHEME

Marks for this question: AO2 = 4

Level	Marks	Description
2	3–4	Explanation of how closed and open questions are beneficial is clear. The answer is generally coherent with effective use of terminology.
1	1–2	There is limited/partial reference to the benefit(s) of closed and open questions. The answer lacks accuracy and detail. Use of terminology is either absent or inappropriate. OR answer only refers to either closed or open questions at Level 2.
	0	No relevant content.

Possible points:

- Closed questions would present participants with options for their response so the researchers would be able to collate and display the information collected easily.
- Closed questions make it easy to compare specific response to questions the researchers wanted answered – they can be sure there will be certain information because they have restricted the options to include that information.
- Open questions allow respondents to interpret the question as they wish to and develop their response with detail or depth – so there is lots of information received.
- Open questions allow the researchers to pursue a line of enquiry that they may not have predicted but which comes to light because of a response by an interviewee.

Credit other relevant information.

Exemplar response

Closed questions provide a limited range of answers (usually quantitative) which make for easier analysis. It also keeps all answers relevant and to the point, participants don't drift off into other topics. Open questions allow the participants to give in-depth, detailed answers, so a lot of detailed qualitative data is produced. It may suggest new lines of enquiry that the researchers hadn't originally thought of.

Examiner commentary

This is a Level 2 response. The benefits of using both open and closed questions are clearly outlined. The answer is coherent with effective use of terminology.

Mark awarded = 4

QUESTION

12.6 Write one question that you think the researchers might have put on their questionnaire. Explain which type of question you have written and why you think this would be a suitable question for this study.

[3 marks]

MARK SCHEME

Marks for this question: AO2 = 3

- **1 mark** for an appropriate open or closed question – requiring information about a social care issue
- **1 mark** for correct identification of this as an open or closed type of question
- **1 mark** for a suitable explanation for why the choice was appropriate – this could relate to producing a type of data (closed – ease of analysis, open – lots of detail or depth to response/allows respondent to elaborate her/his reasoning for the response given) or it could focus on an issue of social care introduced by the candidate and not in the stem.

Exemplar response

'To what extent do you think the Government should invest more in social care?'

Closed question, because participants cannot just give a yes or no.

Examiner commentary

This would be an appropriate question related to social care. As it stands the question is 'open', although it could be 'closed' by giving a scale for the 'extent'. There seems to be some confusion about open/closed because the explanation for 'closed question' is incorrect too. Due to the incorrect identification of the question as it stands, followed by a confused final point, this only gains the mark for the question.

Mark awarded = 1

QUESTION

12.7 The researchers have obtained both qualitative and quantitative data in the observations and interviews they have conducted.

Identify the qualitative and quantitative data collected in this study. Explain your answer.

[4 marks]

MARK SCHEME

Marks for this question: AO1 = 2 AO2 = 2

AO2

1 mark: the responses to the open questions in the interview constitute qualitative data

Plus

1 mark: the attitudes ratings **AND/OR** the collated responses to the closed questions in the interview constitute quantitative data

AO1

1 mark for an explanation of how the responses to the open questions is qualitative data ie is non-numeric/descriptive/retains detail of actions/thoughts/feelings

Plus

1 mark for an explanation of how the ratings/collated responses to closed questions is quantitative data ie numerical such as a score/behaviour is represented in the form of a score on a scale

Exemplar response

Quantitative data is numerical – so the value on a scale would be considered quantitative. Qualitative data refers to thoughts, attitudes etc. and is expressed in words like answers to open questions.

Examiner commentary

This answer clearly explains quantitative and qualitative data but the link to the study is too weak. Linking the answer regarding quantitative data to this particular study would need to state 'the attitude ratings towards social care issues' and not just 'the value on a scale', which is a generic answer. Similarly, answers to open questions would in general terms produce qualitative data, but the link to this particular research would need to state something like "the responses to the open questions in the interview" produced qualitative data in this study.

Mark awarded = 2

QUESTION

12.8 Explain how the researchers should have addressed two ethical issues in the investigation.

[4 marks]

MARK SCHEME

Marks for this question: AO3 = 4

2 marks for each explanation of how the chosen ethical issue could be dealt with.

1 mark for a brief muddled explanation.

2 marks for a clear explanation.

Consent – to be part of what is in essence two studies. Participants should be forewarned – a briefing.

Protection from harm – at the end of participation all will have to be fully aware that they were rated for their social care interest and a low score might indicate they are ‘uncaring’. They may wish to withdraw their data.

Right to withdraw – being made aware that they can at any time stop participating and at the end of their participation they can withdraw detail of their behaviour in the research.

The explanation must demonstrate an appreciation that people should be dealt with, with respect and competence.

Credit other relevant ethical issues.

Exemplar response

Right to withdraw – all participants should have been told at the start that they can leave the study at any time and be reminded of this right during the study. They should also be told that this right allows them to take all their data with them at the end and not have it used in the study.

Examiner commentary

This is a clear explanation of one ethical issue – right to withdraw. The question required an explanation of two ethical issues for full marks.

Mark awarded = 2