



A-level PSYCHOLOGY 7182/3

Paper 3 Issues and options in psychology

Mark scheme

June 2025

Version: 1.0 Final



Mark schemes are prepared by the Lead Assessment Writer and considered, together with the relevant questions, by a panel of subject teachers. This mark scheme includes any amendments made at the standardisation events which all associates participate in and is the scheme which was used by them in this examination. The standardisation process ensures that the mark scheme covers the students' responses to questions and that every associate understands and applies it in the same correct way. As preparation for standardisation each associate analyses a number of students' scripts. Alternative answers not already covered by the mark scheme are discussed and legislated for. If, after the standardisation process, associates encounter unusual answers which have not been raised they are required to refer these to the Lead Examiner.

It must be stressed that a mark scheme is a working document, in many cases further developed and expanded on the basis of students' reactions to a particular paper. Assumptions about future mark schemes on the basis of one year's document should be avoided; whilst the guiding principles of assessment remain constant, details will change, depending on the content of a particular examination paper.

No student should be disadvantaged on the basis of their gender identity and/or how they refer to the gender identity of others in their exam responses.

A consistent use of 'they/them' as a singular and pronouns beyond 'she/her' or 'he/him' will be credited in exam responses in line with existing mark scheme criteria.

Further copies of this mark scheme are available from aqa.org.uk

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Level of response marking instructions

Level of response mark schemes are broken down into levels, each of which has a descriptor. The descriptor for the level shows the average performance for the level. There are marks in each level.

Before you apply the mark scheme to a student's answer read through the answer and annotate it (as instructed) to show the qualities that are being looked for. You can then apply the mark scheme.

Step 1 Determine a level

Start at the lowest level of the mark scheme and use it as a ladder to see whether the answer meets the descriptor for that level. The descriptor for the level indicates the different qualities that might be seen in the student's answer for that level. If it meets the lowest level then go to the next one and decide if it meets this level, and so on, until you have a match between the level descriptor and the answer. With practice and familiarity you will find that for better answers you will be able to quickly skip through the lower levels of the mark scheme.

When assigning a level you should look at the overall quality of the answer and not look to pick holes in small and specific parts of the answer where the student has not performed quite as well as the rest. If the answer covers different aspects of different levels of the mark scheme you should use a best fit approach for defining the level and then use the variability of the response to help decide the mark within the level, ie if the response is predominantly level 3 with a small amount of level 4 material it would be placed in level 3 but be awarded a mark near the top of the level because of the level 4 content.

Step 2 Determine a mark

Once you have assigned a level you need to decide on the mark. The descriptors on how to allocate marks can help with this. The exemplar materials used during standardisation will help. There will be an answer in the standardising materials which will correspond with each level of the mark scheme. This answer will have been awarded a mark by the Lead Examiner. You can compare the student's answer with the example to determine if it is the same standard, better or worse than the example. You can then use this to allocate a mark for the answer based on the Lead Examiner's mark on the example.

You may well need to read back through the answer as you apply the mark scheme to clarify points and assure yourself that the level and the mark are appropriate.

Indicative content in the mark scheme is provided as a guide for examiners. It is not intended to be exhaustive and you must credit other valid points. Students do not have to cover all of the points mentioned in the Indicative content to reach the highest level of the mark scheme.

An answer which contains nothing of relevance to the question must be awarded no marks.

Section A

Issues and debates in psychology

- 0 1** Use your knowledge of **two** different types of determinism to explain the findings in **Group 1** and **Group 2**.

[4 marks]

Marks for this question: AO1 = 2, AO2 = 2

For **each** type of determinism award marks as follows:

2 marks for clear and appropriate application showing knowledge of a type of determinism and the mechanism involved

1 mark for limited/muddled/generic application of a type of determinism

Possible content

biological determinism – the children of the professional musicians have inherited their ability/musical genes/DNA from their parents OR opposite application linked to the parents in Group 2 (not inherited any musical genes)

environmental determinism - the children of the professional musicians (Group 1) may have imitated/modelled the musical ability of their parents/see their parents as musical role models/may have been rewarded/reinforced for demonstrating musical ability/may have associated music with pleasure OR opposite application linked to Group 2

Credit answers based on other types of determinism if made relevant eg hard, psychic

Full credit may still be awarded without explicit reference to both groups

No marks for simply naming types

- 0 2** Use the measures of central tendency to identify the type of distribution of scores in the motor skills test. Explain your answer.

[2 marks]

Marks for this question: AO2 = 2

Award marks as follows:

1 mark for identifying negatively skewed distribution

1 mark for the explanation: the majority of the scores are at the top end/to the right-hand side of the distribution graph with only a few at the lower end/to the left-hand side of the distribution graph/mode is greater than the mean/median is greater than the mean/mode is greater than the median.

For the explanation mark, credit can be awarded for an appropriately labelled diagram

Explanation mark can be awarded even if type of skew is not identified/incorrect

0 3

Explain how the researcher could modify the motor skills test so that it would be more likely to produce a set of scores that is normally distributed.

[2 marks]

Marks for this question: AO3 = 2

Award marks as follows:

1 mark for make the test harder/more difficult/more demanding

1 mark for elaboration: so that fewer people get a score at the top of the scale, most people score in the middle and a few score at the lower end of the scale/the mean, median and mode are more in line with one another.

0 4

Suggest how the researcher could use the existing data to investigate the relationship between musical ability and motor skills.

[4 marks]

Marks for this question: AO3 = 4

Award **1 mark each** for any of the following up to a maximum of **4 marks**:

1 mark the researcher should conduct a correlational study

1 mark use the existing data to plot a scattergraph

1 mark look to see if there is a positive correlation/as one variable (musical ability) increases, so does the other (motor skills)

1 mark use a statistical test to correlate scores on the motor skills test with scores on the musical ability test

1 mark use either a Spearman's rho or a Pearson's r test

1 mark calculate the correlation co-efficient

1 mark look to see if the test produces a calculated value/co-efficient that is higher than the critical table value

1 mark this would indicate a significant positive relationship between musical ability and motor skills.

0 5

Explain what is meant by cultural relativism in psychology. Use **one** topic you have studied in psychology as part of your explanation.

[4 marks]

Marks for this question: AO1 = 2, AO2 = 2

Level	Marks	Description
2	3–4	The explanation of what is meant by cultural relativism is clear and accurate. Application of cultural relativism to an appropriate topic is effective with some detail. There is appropriate use of specialist terminology.
1	1–2	The explanation of cultural relativism is limited/muddled. The application of cultural relativism to a topic is limited/lacks effectiveness. Use of specialist terminology is either absent or inappropriate.
	0	No relevant content.

Possible content:

- behaviours/traits can only properly be understood in the culture/context/social environment in which they arise
- it does not make sense to study a behaviour out of its usual context
- we cannot generalise findings beyond the usual culture/context.

Possible application to topics:

- attachment – types of attachment vary according to culture as demonstrated by van Ijzendoorn, presumably because of differing child-rearing norms/practices and expectations of parenting
- social influence – some cross-cultural findings from obedience/conformity research suggests that certain cultures are more inclined to be obedient/conforming, eg collectivist cultures
- psychopathology – mental disorders are sometimes understood differently, diagnosed differently and treated differently depending on the culture/society, eg defining mental disorder according to social norms.

Credit other relevant applications to topics.

0 6 Discuss the idiographic approach to psychological investigation.

[8 marks]

Marks for this question: AO1 = 3, AO3 = 5

Level	Marks	Description
4	7–8	Knowledge of the idiographic approach to psychological investigation is accurate with some detail. Discussion is thorough and effective. Minor detail and/or expansion of argument is sometimes lacking. The answer is clear, coherent and focused. Specialist terminology is used effectively.
3	5–6	Knowledge of the idiographic approach to psychological investigation is evident but there are occasional inaccuracies/omissions. Discussion is mostly effective. The answer is mostly clear and organised but occasionally lacks focus. Specialist terminology is used appropriately.
2	3–4	Knowledge of the idiographic approach to psychological investigation 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	1–2	Knowledge of the idiographic approach to psychological investigation is very limited. Discussion is 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:

- the idiographic approach is one where researchers focus on the behaviour/experiences of single individuals/a single sample
- emphasis on uniqueness/self rather than comparison
- idiographic research usually involves the use of the case study method or single-case interviews, experiments, observations
- sees universal/general laws/generalisation as irrelevant.
- knowledge of examples eg use of idiographic methods in the humanistic approach and/or specific examples of case studies eg HM

Possible discussion:

- tends to yield in-depth, qualitative data and findings that are meaningful
- limited possibility of generalisation to a wider population
- methods often rely on subjective interpretation, therefore could be seen as less scientific
- more useful in certain areas where subjective experience is important for the understanding of behaviour, eg in a clinical context
- can use a single case to contest an established theory
- comparison with the nomothetic approach and methods used by nomothetic researchers
- use of examples to illustrate strengths and limitations
- usefulness of finding a balance between focus on the individual (idiographic) and the need for general explanations (nomothetic)
- discussion in the context of broader approaches, eg the link between the idiographic approach and humanistic psychology.

Credit other relevant material.

Section B**Relationships****0 7**

Explain how Rusbult's investment model of romantic relationships can be applied to the conversation between Mike and Dan.

[4 marks]**Marks for this question: AO2 = 4**

Level	Marks	Description
2	3–4	Application of Rusbult's model of romantic relationships to the scenario is effective with some detail. The answer is clear and coherent. Specialist terminology is used effectively.
1	1–2	Application of Rusbult's model of romantic relationships to the scenario is limited/lacks effectiveness. The answer lacks clarity. Specialist terminology is either absent or inappropriately used.
	0	No relevant content.

Possible application

- Mike and Dan appear to gain from the relationship: great times on holidays, fun with friends, lovely home, showing satisfaction which is a key part of Rusbult's model
- Mike and Dan have given 10 years of their lives to the relationship, bought a home, accumulated joint possessions, share friends and pets so they have made many investments – a key part of Rusbult's model; intrinsic and extrinsic investments
- their relationship compares favourably with any alternative – Dan refers to the difficulty of a new relationship which would 'never be the same' – comparison with alternatives is a key part of Rusbult's model
- Mike and Dan have stayed together for some time (10 years) and are committed to staying in the relationship – Rusbult said that satisfaction, investment and poor alternatives combined lead to commitment.

Credit other relevant material.

0 8

Briefly evaluate absence of gating as a factor in virtual relationships.

[4 marks]**Marks for this question: AO3 = 4**

Level	Marks	Description
2	3–4	Evaluation of absence of gating as a factor in virtual relationships is effective with some detail. The answer is clear and coherent. Specialist terminology is used appropriately.
1	1–2	Evaluation of absence of gating as a factor in virtual relationships is limited/lacks effectiveness. The answer lacks clarity. Specialist terminology is either absent or inappropriately used.
	0	No relevant content.

Possible evaluation:

- use of evidence to support/contradict the effects of absence of gating, eg McKenna (2002) increased liking in couples that meet online initially; McKenna and Bargh (2000) absence of gating facilitates interaction for socially anxious people
- gates may not be entirely missing from more modern online platforms, they may just present in a different form, eg emoticons/emojis, length of response
- absence of gating may actually lead to reduced self-disclosure – people may be more ‘guarded’ online
- absence of gating might enable deception in online relationships, eg a person might represent themselves dishonestly, for example, an older man might pose as a young boy
- absence of gating in virtual relationships might not be so significant as relationships can often be in multiple modes, ie both online and face-to-face

Credit other relevant material.

0 9

Discuss the filter theory of romantic relationships. Refer to Joy in your answer.

[16 marks]**Marks for this question: AO1 = 6, AO2 = 4, AO3 = 6**

Level	Marks	Description
4	13–16	Knowledge of filter theory is accurate with some detail. Application is effective. Discussion is effective. Minor detail and/or expansion of argument is sometimes lacking. The answer is clear, coherent and focused. Specialist terminology is used effectively.
3	9–12	Knowledge of filter theory is evident but there are occasional inaccuracies/omissions. Application/discussion is mostly effective. The answer is mostly clear and organised but occasionally lacks focus. Specialist terminology is used appropriately.
2	5–8	Limited knowledge of filter theory is present. Focus is mainly on description. Any application/discussion is of limited effectiveness. The answer lacks clarity, accuracy and organisation in places. Specialist terminology is used inappropriately on occasions.
1	1–4	Knowledge of filter theory is very limited. Application/discussion is 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:

- Kerckhoff and Davis (1962) proposed we use filtering to reduce the field of availables to a field of desirables
- when we meet people we engage in three levels of filtering: social demography, similarity in attitude, complementarity
- social demography – at the outset we screen out people who are different in terms of age, sex, education etc so we end up with people similar to ourselves
- then we choose people who have similar attitudes to our own, eg social, moral and political values
- in the longer term, we choose people who complement our own traits to enable the two people to work well together as a couple.

Possible application:

- Joy gives details of her work as a teacher and her economics degree because she would be more attracted to people of similar social demography and filter out those whose backgrounds are too different – demographic first level filtering
- Joy states she lives in Essex to filter out any potential partner who lived too far away as proximity would be important for any face-to-face meeting – demographic first level filtering
- Joy cycles because she cares about the environment – an attitude she might expect a potential partner to share because it is important to her – attitude second level filtering
- Joy says she likes walking and cooking as she wants to filter out anyone whose attitudes/interests are different – attitude second level filtering
- Joy is looking for someone who enjoys food because she cooks, and someone who is good at doing repairs around the house to make up for her lack of practical skill – complementarity third level filtering.

Possible discussion points:

- use of evidence to support/contradict filter theory, eg Taylor (2010) – people tend to marry someone from their own ethnic group; Kerckhoff and David (1962) – attitude similarity is an important factor in staying together; Gruber-Baldini (1995) – found similarities between spouses
- filter theory is consistent with the matching hypothesis
- cannot establish causality – maybe partners are not that similar at the start of a relationship but similarity increases over time
- temporal validity – modern society is highly mobile and diverse; technology reduces/eliminates physical constraints to the establishment of relationships, eg with internet relationships
- discussion of conflicting importance of similarity and complementarity
- discussion of gender differences and cultural differences in filtering.

Credit other relevant material.

Section B**Gender****1 0**

Explain how the concepts of identification and internalisation can be applied to the description of Cal's behaviour.

[4 marks]**Marks for this question: AO2 = 4**

Level	Marks	Description
2	3–4	Application of the concepts of identification and internalisation to the scenario is effective with some detail. The answer is clear and coherent. Specialist terminology is used effectively.
1	1–2	Application of the concept(s) of identification/internalisation to the scenario is limited/lacks effectiveness. The answer lacks clarity. Specialist terminology is either absent or inappropriately used.
	0	No relevant content.

Possible application:

- Cal sees his father as an attractive character/role model (admires him) and therefore wants to be like him – identification
- Cal's father possesses 'desirable' characteristics – he is perceived as clever and important – this makes identification with him more likely
- according to psychodynamic theory, identification with the same-sex parent (in this case, Cal's father) takes place at around six years of age through resolution of the Oedipus complex – Cal is six years old.
- through the process of identification, Cal will come to adopt/internalise the behaviours and attitudes of his father, for example, 'cleverness' and 'importance'
- the behaviours demonstrated by Cal's father, cleverness and importance, thus are internalised as part of Cal's (male) identity.

Credit other relevant material, for example, the social learning and the cognitive explanation of identification

Note: Explicit reference to psychodynamic theory is not required for full marks.

1 1

Briefly evaluate the influence of sex-role stereotyping on gender.

[4 marks]**Marks for this question: AO3 = 4**

Level	Marks	Description
2	3–4	Evaluation of the influence of sex-role stereotyping is effective with some detail. The answer is clear and coherent. Specialist terminology is used appropriately.
1	1–2	Evaluation of the influence of sex-role stereotyping is limited/lacks effectiveness. The answer lacks clarity. Specialist terminology is either absent or inappropriately used.
	0	No relevant content.

Possible evaluation:

- use of evidence for/against the influence of sex-role stereotypes on behaviour, eg Urberg (1982) sex-role stereotyping and children's stories; Archer and Lloyd (1982) peer disapproval of cross-gender play; Smith and Lloyd (1978) differential treatment of babies presented as 'boys' and 'girls'; Lytton and Romney (1991) meta-analysis of socialisation of boys and girls; Williams (1981) notel, unitel, multitel
- problem of causality – difficult to demonstrate stereotyping as the cause of behaviour due to extraneous variables
- negative effects of stereotyping, eg narrowing of career opportunities and expectations
- the role of the media in stereotyping – changes over time, eg portrayal in books, advertisements, TV programmes (Aubrey and Harrison (2004)
- determinism – environmental factors dictating development of behaviour.

Credit other relevant material.

1 2 Discuss gender schema theory. Refer to Leela in your answer.

[16 marks]

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

Level	Marks	Description
4	13–16	Knowledge of gender schema theory is accurate with some detail. Application is effective. Discussion is effective. Minor detail and/or expansion of argument is sometimes lacking. The answer is clear, coherent and focused. Specialist terminology is used effectively.
3	9–12	Knowledge of gender schema theory is evident but there are occasional inaccuracies/omissions. Application/discussion is mostly effective. The answer is mostly clear and organised but occasionally lacks focus. Specialist terminology is used appropriately.
2	5–8	Limited knowledge of gender schema theory is present. Focus is mainly on description. Any application/discussion is of limited effectiveness. The answer lacks clarity, accuracy and organisation in places. Specialist terminology is used inappropriately on occasions.
1	1–4	Knowledge of gender schema theory is very limited. Application/discussion is 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:

- Martin and Halverson (1981) propose that the understanding of gender develops with age
- a gender schema is an organised set of beliefs/expectations about gender and gender-related behaviour
- as the schema develops a child learns what is associated with each gender, then can make links between activities/features for own gender and later can make links between activities/features for other gender(s)
- by the age of three, when a child has developed a gender identity, the child will actively search the environment for information about their own gender, the in-group
- at this age, the child shows no/little interest in traits and activities of any/the other genders, the out-groups
- the child focuses on adding new information to their own-gender schema and will disregard any information inconsistent with their idea of gender
- by the age of six, the understanding of gender is becoming more rigid and fixed (ingroup schema develops first).

Possible application:

- Leela is three years old so will have developed a gender identity of herself as a girl, and along with that, is developing a 'girl' schema
- her 'girl' schema consists of all the knowledge she has of girls that she has acquired over three years
- at home, Leela plays mostly with toys that fit with her 'girl' schema, such as dressing up and the toy kitchen, ignoring the other toys like the toy cars and garage
- Leela talks mainly about the girls' nursery games as she pays more attention to 'girl' behaviour because she is actively trying to expand her girl schema or in-group knowledge
- Leela says little about what boys do because she disregards information of the out-group.

Possible discussion:

- use of evidence to support/contradict gender schema theory, eg Martin and Halverson (1983) memory for gender consistent and inconsistent information; Campbell (2000) early preference for watching same-sex activities; Campbell (2002) children do not show preferences for gender-typical toys
- comparison with Kohlberg's cognitive developmental theory of gender – both see child as actively acquiring understanding, but with a difference in the age at which children start to focus on in-group information – Kohlberg states this occurs later
- cognitive theory offers a description of how the understanding of gender develops but does not explain the cause
- children show preference for same-sex play earlier than either cognitive theory would predict
- comparison with alternative explanations of gender, eg biological explanations and learning theory explanations
- implications for child-rearing and education.

Credit other relevant material.

Section B**Cognition and development****1 3**

Explain how Vygotsky's theory of cognitive development can be applied to the interactions between Mario and his mother.

[4 marks]**Marks for this question: AO2 = 4**

Level	Marks	Description
2	3–4	Application of Vygotsky's theory of cognitive development to the scenario is effective with some detail. The answer is clear and coherent. Specialist terminology is used effectively.
1	1–2	Application of Vygotsky's theory of cognitive development to the scenario is limited/lacks effectiveness. The answer lacks clarity. Specialist terminology is either absent or inappropriately used.
	0	No relevant content.

Possible application:

- Mario's mother acts as 'a more knowledgeable other'/expert: Vygotsky emphasises how children develop through interactions with/support from people who are more experienced/skilled, like Mario's mother
- Mario's mother 'scaffolds' or assists his actions in various ways, her scaffolding support is then withdrawn as Mario becomes more competent to build the bricks on his own
- the text illustrates various aspects of scaffolding: demonstration – she shows him; verbal instruction – she tells him which brick to use; pointing – she shows the suitable brick; reinforcing – she says, "Well done"; prompting – which one to use next; withdrawing – she sits back as he completes the task
- brick building is within Mario's zone of proximal development – can currently be achieved with help from his mother
- credit other terms associated with scaffolding as applied to the text, eg recruitment, direction maintenance etc.

Credit other relevant material

1 4 Briefly evaluate research into perspective-taking.

[4 marks]

Marks for this question: AO3 = 4

Level	Marks	Description
2	3–4	Evaluation of research into perspective-taking is effective with some detail. The answer is clear and coherent. Specialist terminology is used appropriately.
1	1–2	Evaluation of research into perspective-taking is limited/lacks effectiveness. The answer lacks clarity. Specialist terminology is either absent or inappropriately used.
	0	No relevant content.

Possible evaluation:

- mostly based on hypothetical dilemmas and therefore may not represent real-life reasoning, eg Selman's hypothetical dilemmas (1976)
- dilemma reasoning might not predict behaviour accurately, ie child may reason at a sophisticated level, but when presented with the situation in real life, behaviour may be less sophisticated
- dilemmas can be used both cross-sectionally to compare age groups and longitudinally to show the development of more sophisticated reasoning over time (Gurucharri, Phelps and Selman, 1984)
- dilemma research focuses purely on changes in cognitive perspective-taking with age and takes no account of social, cultural and emotional factors, eg family attitudes, peers, mediation etc
- practical applications of perspective-taking research, eg coaching in taking another person's perspective can be used in conflict resolution, mediation services etc
- research assumes perspective-taking ability is related to empathy and prosocial behaviour but some evidence suggests otherwise, eg Gasser and Keller (2009) bullying behaviour and perspective-taking ability.

Credit other relevant material, for example, theory of mind studies such as Sally-Anne.

- 1 5** Discuss Piaget's theory of cognitive development in the sensorimotor stage. Refer to Sunny and Gina in your answer.

[16 marks]

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

Level	Marks	Description
4	13–16	Knowledge of Piaget's theory of cognitive development in the sensorimotor stage is accurate with some detail. Application is effective. Discussion is effective. Minor detail and/or expansion of argument is sometimes lacking. The answer is clear, coherent and focused. Specialist terminology is used effectively.
3	9–12	Knowledge of Piaget's theory of cognitive development in the sensorimotor stage is evident but there are occasional inaccuracies/omissions. Application/discussion is mostly effective. The answer is mostly clear and organised but occasionally lacks focus. Specialist terminology is used appropriately.
2	5–8	Limited knowledge of Piaget's theory of cognitive development in the sensorimotor stage is present. Focus is mainly on description. Any application/discussion is of limited effectiveness. The answer lacks clarity, accuracy and organisation in places. Specialist terminology is used inappropriately on occasions.
1	1–4	Knowledge of Piaget's theory of cognitive development in the sensorimotor stage is very limited. Application/discussion is 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:

- the sensorimotor stage (0–2 years) is the first stage of Piaget's stage theory of cognitive development – children show characteristic forms of thinking
- divided into six sub-stages (reflex, primary circular reaction, secondary circular reaction etc)
- at the start of the stage knowledge consists mainly of simple reflex actions, eg grasping, sucking and awareness of sensations/movements
- trial and error learning occurs, eg by trial and error child learns to move arms and legs in a chosen direction
- around eight months the child becomes capable of acting intentionally, eg throwing a toy which someone then picks up
- object permanence develops at about eight months – child starts to hold a mental representation of an unseen object (person permanence develops slightly earlier)
- general symbolic function arises – understanding that one thing can stand for another, eg picture of a dog stands for a real dog
- in the sensorimotor stage the child is highly egocentric – cannot see from another's perspective
- development of schema – assimilation, accommodation, adaptation, (dis)equilibrium.

Possible application:

- Sunny is showing trial and error motor actions – moving repetitively, waving his arms and kicking his legs
- Sunny is responding to sensations, eg the sound of the rattle which he loves
- Sunny is hitting the rattle more and more, showing he is starting to acquire a representation of a simple motor action
- Gina is showing she has developed intentional behaviour as she can get hold of things, and deliberately throw the teddy
- Gina seems to have developed object permanence as she looks under the cushion for the teddy when it is out of sight
- Piaget would say that Gina is probably around eight months old.

Possible discussion:

- use of evidence to support the features of the sensorimotor stage proposed by Piaget, eg the primary evidence for object permanence arising at eight months – how Piaget's vanishing teddy experiments show children will continue to search in the place where the object was last seen
- contradictory evidence from later work by Baillargeon who demonstrated object permanence arises earlier, eg violation of expectation studies with three-month-old babies
- performance in object permanence studies may have been due to limited motor skills
- Piaget is often accused of underestimated ability at all stages, eg erroneously assuming that an inability to continue to reach for an out-of-sight object was the same as an inability to understand
- discussion of the importance of object permanence in representational memory
- discussion of more general points about Piaget's theory/work that could be applied to the sensorimotor stage.

Credit other relevant material.

Section C**Schizophrenia**

1 6 Describe and evaluate family therapy as a treatment for schizophrenia.

[8 marks]

Marks for this question: AO1 = 3, AO3 = 5

Level	Marks	Description
4	7–8	Knowledge of family therapy as a treatment for schizophrenia is accurate with some detail. Evaluation is thorough and effective. Minor detail and/or expansion of argument is sometimes lacking. The answer is clear, coherent and focused. Specialist terminology is used effectively.
3	5–6	Knowledge of family therapy as a treatment for schizophrenia is evident but there are occasional inaccuracies/omissions. Evaluation is mostly effective. The answer is mostly clear and organised but occasionally lacks focus. Specialist terminology is used appropriately.
2	3–4	Knowledge of family therapy as a treatment for schizophrenia is present. Focus is mainly on description. Any evaluation is of limited effectiveness. The answer lacks clarity, accuracy and organisation in places. Specialist terminology is used inappropriately on occasions.
1	1–2	Knowledge of family therapy as a treatment for schizophrenia is very limited. Evaluation is 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:

- aim is to reduce anger, guilt, frustration and expressed emotion and increase tolerance and understanding – to reduce stress for the patient
- therapist meets family members and patient (usually together) for open, productive discussion to establish a therapeutic alliance
- family members are educated about the disorder, learn to develop realistic expectations and thus reduces family dysfunction eg psychoeducation, behavioural family therapy (Falloon)
- encourages family to develop problem-solving and communication skills to support the patient.

Possible evaluation:

- use of evidence to support/contradict the therapy in terms of effectiveness, eg: Pharoah (2010) effect on hospital readmissions; Pilling (2002) meta-analysis of relapse rates; Montero (2001) high drop-out rate
- ethical issues – sharing of information, need for privacy/right to confidentiality for family members, might lead the family to question whether they are responsible
- consideration of practicalities, such as availability/time for sessions; availability of skilled practitioners; reasoned discussion of cost-effectiveness, eg reduction in revolving door effect
- suitability for different patients – requires co-operation/positive attitude
- general outcomes, eg improved family interactions and communication skills, eg reduction in double bind communication
- comparison with alternative therapies/treatments such as medication; family therapy as an adjunct for drug therapy.
- broader issues, eg holism versus reductionism.

Credit other relevant material.

1 7

Discuss the diathesis-stress model as a way of explaining schizophrenia.

[16 marks]**Marks for this question: AO1 = 6, AO3 = 10**

Level	Marks	Description
4	13–16	Knowledge of the diathesis-stress model as a way of explaining schizophrenia is accurate and generally well detailed. Discussion is thorough and effective. Minor detail and/or expansion of argument is sometimes lacking. The answer is clear, coherent and focused. Specialist terminology is used effectively.
3	9–12	Knowledge of the diathesis-stress model as a way of explaining schizophrenia is evident but there are occasional inaccuracies/omissions. Discussion is mostly effective. The answer is mostly clear and organised but occasionally lacks focus. Specialist terminology is used appropriately.
2	5–8	Limited knowledge of the diathesis-stress model as a way of explaining schizophrenia 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	1–4	Knowledge of the diathesis-stress model as a way of explaining schizophrenia is very limited. Discussion is 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:

- an interactionist approach to explaining schizophrenia – combining both biological and social/environmental explanations
- underlying vulnerability/predisposition is the diathesis
- the diathesis combined with the presence of a stressor(s) results in the development of schizophrenia
- underlying vulnerability is genetic: single gene (Meehl, 1962); polygenic (Ripke, 2014)
- early view of diathesis as purely genetic has been revised to incorporate early experiences as potential sources of diathesis: prenatal, eg maternal exposure to flu virus in pregnancy; postnatal, eg psychological trauma such as abuse in early childhood
- types of environmental stressors might include life event, family stress, workplace stress, cannabis use.

Possible evaluation:

- use of evidence to support/contradict genetic or other vulnerability in development of schizophrenia, eg twin, adoption and family studies
- use of evidence to support/contradict the importance of stressors in development of schizophrenia, eg Hultman (1997) episodes precipitated by life events; Walker (1997) high levels of the stress hormone cortisol in people with schizophrenia
- problem of demonstrating cause and effect – impossible to conduct causal research
- discussion of the role of cognitive processing – are dysfunctional thought processes best seen as a diathesis or as a trigger?
- comparison of the early view of diathesis-stress model and more recent understanding
- links to broader debates such as nature-nurture, types of determinism, reductionism and more general psychological approaches
- implications for treatment, for example, discussion of the effectiveness of combined treatments, eg Tarrier (2004).

Credit other relevant material.

Section C**Eating behaviour**

1 8 Describe and evaluate the boundary model explanation for obesity.

[8 marks]

Marks for this question: AO1 = 3, AO3 = 5

Level	Marks	Description
4	7–8	Knowledge of the boundary model explanation for obesity is accurate with some detail. Evaluation is thorough and effective. Minor detail and/or expansion of argument is sometimes lacking. The answer is clear, coherent and focused. Specialist terminology is used effectively.
3	5–6	Knowledge of the boundary model explanation for obesity is evident but there are occasional inaccuracies/omissions. Evaluation is mostly effective. The answer is mostly clear and organised but occasionally lacks focus. Specialist terminology is used appropriately.
2	3–4	Knowledge of the boundary model explanation for obesity is present. Focus is mainly on description. Any evaluation is of limited effectiveness. The answer lacks clarity, accuracy and organisation in places. Specialist terminology is used inappropriately on occasions.
1	1–2	Knowledge of the boundary model explanation for obesity is very limited. Evaluation is 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:

- the model incorporates both restraint and disinhibition
- recognises the balance/space between hunger and satiation – the zone of biological indifference
- notion of set points and self-imposed boundaries – once broken overeating can occur through disinhibition/‘what the hell’ effect
- at the extremes eating is motivated by deficit/hunger and fullness/satiation motivates cessation of eating
- acknowledges the importance of cognition and social factors in the space between hunger and satiety.

Possible evaluation:

- use of evidence to support/contradict the explanation, eg Boyce and Kuijer (2014) responses of restrained eaters to media images; Wilkinson (2010) links between disinhibited eating, obesity and attachment style
- boundary model recognises the underlying role of physiological mechanisms
- consideration of how explanations are overlapping: restrained eating occurs where there is a higher satiety boundary so person eats more: disinhibition and restraint are part of a continuous cycle
- comparison with biological explanations, eg genetics, neural, hormonal
- links with broader approaches in psychology, eg biological, learning theories
- evaluation linked to issues such as nurture, determinism etc.

Credit other relevant material.

- 1 9** Discuss the role of neural and hormonal mechanisms involved in the control of eating behaviour.

[16 marks]

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

Level	Marks	Description
4	13–16	Knowledge of the role of neural and hormonal mechanisms involved in the control of eating behaviour is accurate and generally well detailed. Discussion is thorough and effective. Minor detail and/or expansion of argument is sometimes lacking. The answer is clear, coherent and focused. Specialist terminology is used effectively.
3	9–12	Knowledge of the role of neural and hormonal mechanisms involved in the control of eating behaviour is evident but there are occasional inaccuracies/omissions. Discussion is mostly effective. The answer is mostly clear and organised but occasionally lacks focus. Specialist terminology is used appropriately.
2	5–8	Limited knowledge of the role of neural and hormonal mechanisms involved in the control of eating behaviour 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	1–4	Knowledge of the role of neural and hormonal mechanisms involved in the control of eating behaviour is very limited. Discussion is 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:

- homeostatic control of eating is regulated by the hypothalamus
- dual-control theory – the lateral hypothalamus (LH) is the hunger centre and the ventromedial hypothalamus (VMH) is the satiety centre; the lateral hypothalamus is activated by messages from the liver when glucose levels fall, causing hunger; after eating glucose levels rise, triggering the ventromedial hypothalamus to signal satiety
- glucose levels in the blood are regulated by the action of the hormones glucagon and insulin is secreted by the pancreas
- lipostatic theory that a set point for body fat is regulated by hypothalamic detection and regulation of fat levels in the blood
- ghrelin – hormone released when the stomach is empty causing hunger
- leptin – a neuropeptide/hormone produced when fat is stored signalling satiety
- cholecystikinin (CCK) is a hormone secreted in the duodenum – it suppresses appetite acting in opposition to ghrelin.

Possible discussion:

- use of evidence to support/contradict dual control theory and the role of the hypothalamus, eg Lashley (1938) lesions to the LH/VMH in rats; Ranson (1942) lesions to the VMH of rats leading to hyperphagia/overeating; Reeves and Plum (1969) case study of obese woman with VMH tumour
- use of hormone evidence, eg Cummings (2004) levels of blood ghrelin linked to hunger; Licinio (2004) genetic inability to secrete leptin associated with obesity
- inconsistent long-term and short-term effects of lesions – long-term effects of lesions are not sustained, eg Teitelbaum (1957) rats with VMH lesions become fussy eaters
- fat levels in the blood change slowly over time so lipostatic theory could explain why diets often fail
- most research is based on animals therefore may not easily be generalised to explain human eating behaviour
- discussion of implications for treating people with anorexia and obesity
- discussion in relation to broader issues such as nature-nurture, biological determinism and reductionism.

Credit other relevant material.

Section C**Stress**

2 0 Describe and evaluate the role of social support in coping with stress.

[8 marks]

Marks for this question: AO1 = 3, AO3 = 5

Level	Marks	Description
4	7–8	Knowledge of the role of social support in coping with stress is accurate with some detail. Evaluation is thorough and effective. Minor detail and/or expansion of argument is sometimes lacking. The answer is clear, coherent and focused. Specialist terminology is used effectively.
3	5–6	Knowledge of the role of social support in coping with stress is evident but there are occasional inaccuracies/omissions. Evaluation is mostly effective. The answer is mostly clear and organised but occasionally lacks focus. Specialist terminology is used appropriately.
2	3–4	Knowledge of the role of social support in coping with stress is present. Focus is mainly on description. Any evaluation is of limited effectiveness. The answer lacks clarity, accuracy and organisation in places. Specialist terminology is used inappropriately on occasions.
1	1–2	Knowledge of the role of social support in coping with stress is very limited. Evaluation is 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:

- social support as a general concept – any way in which other people can help a person cope with stress
- social support can have ‘direct’ positive effects on health or be a ‘buffer’ protecting from negative effects in stressful times – buffering hypothesis, Jones and Bright (2001)
- Stroebe (2000) identified several types of social support:
 - instrumental support – the provision of practical assistance
 - emotional support, for example listening to someone and showing empathy
 - esteem support involving positive bolstering to increase self-esteem
 - informational support – providing the stressed person with knowledge to assist the situation
 - appraisal support – helping the stressed individual to recognise and understand their stress.

Possible evaluation:

- use of evidence to support/contradict the role of social support in coping with stress, eg Cohen (2015) hugs as social support and the cold virus; Kamarck (1998) presence of a companion reduces stress; Orth-Gomer (1993) increased mortality rate in men without social support
- cultural/age-related differences in social support, eg role of extended family versus peers
- appropriateness of social support depends on context/circumstances and what type of help is needed
- mediating effect of social skills – individuals with better social skills are more able to benefit from social support
- gender differences: women more likely to use social support effectively (Jones and Bright, 2001); men and women use different types of social support
- negative effects of social support – might be perceived as interfering, too time consuming, overwhelming
- broader discussion, eg role of self-help groups and online forums, eg Mumsnet.

Credit other relevant material.

2 1 Discuss individual differences in stress.

[16 marks]

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

Level	Marks	Description
4	13–16	Knowledge of individual differences in stress is accurate and generally well detailed. Discussion is thorough and effective. Minor detail and/or expansion of argument is sometimes lacking. The answer is clear, coherent and focused. Specialist terminology is used effectively.
3	9–12	Knowledge of individual differences in stress is evident but there are occasional inaccuracies/omissions. Discussion is mostly effective. The answer is mostly clear and organised but occasionally lacks focus. Specialist terminology is used appropriately.
2	5–8	Limited knowledge of individual differences in stress 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	1–4	Knowledge of individual differences in stress is very limited. Discussion is 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:

- personality type – Friedman and Rosenman (1960s) argued personality type was related to negative consequences of stress, especially CHD
 - Type A most at risk from CHD due to traits such as time urgency, competitiveness, aggression, hostility
 - Type B less likely to suffer from stress
 - Type C easily stressed and cancer-prone
 - Type D routine-bound, anxious therefore at increased risk of cardiac illness
- hardiness – hardy people less likely to suffer from stress; Kobasa (1979) identified three aspects of hardiness
 - commitment – to family, community, society
 - challenge – seeing change as an opportunity not a threat
 - control – feeling autonomous and actively in control.

Possible discussion:

- use of evidence to support/contradict the role of individual differences in stress, eg: Friedman and Rosenman (1976) West coast study of CHD; Dattore (1980) cancer patients and Type C; Temoshok (1987) skin cancer and Type C; Denollet (1996) Type D and sudden cardiac death; Kobasa (1979) the three Cs in 800 business executives
- specific Type A traits more predictive of stress than general Type A – hostility is the key factor (Forshaw, 2012); Dembroski (1989)
- not easy to categorise people as a specific type – most people show traits from across different types
- any effect is not causal, only correlational
- discussion of role of external factors/other or third variables, eg smoking as a contributory to CHD; gender effect in hardiness
- overlap between concepts of personality type and hardiness might explain inconsistent findings, eg some Type A individuals exercise a high level of control in their lives.
- implications for treating stress, eg use of hardiness training
- broader discussion of how stress and/or personality is measured in individual differences research.

Credit other relevant material, for example, other individual differences such as gender and culture.

Section D

Aggression

2 2 Which **one** of the following is a consequence of desensitisation?

[1 mark]

Marks for this question: AO1 = 1

Answer: D – Reduced sympathetic nervous system arousal when viewing violent images makes aggression more likely.

2 3 Which **one** of the following is the best example of how disinhibition might lead to aggression?

[1 mark]

Marks for this question: AO1 = 1

Answer: C – People playing violent computer games feel anonymous so feel less responsible for their aggressive actions.

2 4 Briefly outline the evolutionary explanation for human aggression.

[2 marks]

Marks for this question: AO1 = 2

2 marks for a clear and coherent outline, using appropriate terminology.

1 mark for a limited/muddled outline.

Possible content:

- aggression may help to confer reproductive success in various ways
- aggressive male may be perceived to have greater access to resources therefore appear more attractive
- aggressive male may be perceived to be stronger/higher status and therefore more desirable
- aggressive strategies such as direct guarding and coercion/threats/negative inducements are believed to have the effect of ensuring faithfulness and thereby ensuring genetic certainty.

Note: that the above points may overlap.
Credit other relevant material.

2 5

Briefly evaluate the evolutionary explanation for human aggression.

[4 marks]**Marks for this question: AO3 = 4**

Level	Marks	Description
2	3–4	Evaluation is effective with some detail. The answer is clear and coherent. There is appropriate use of specialist terminology.
1	1–2	Evaluation is limited/lacks effectiveness. The answer lacks clarity. Use of specialist terminology is either absent or inappropriate.
	0	No relevant content.

Possible evaluation:

- some research into evolutionary explanations comes from the animal kingdom making extrapolation to human behaviour difficult
- based on outmoded ideas about relationships, eg men as sole providers, women as dependent
- use of evidence in evaluation, eg Wilson and Daly (1996) mate retention strategy research; Goetz (2008) motivations for intimate partner abuse; Buss and Shackelford (1997) use of status as a mate retention strategy
- comparison with alternative explanations, eg social explanations for aggression
- deterministic, reinforcing negative and damaging stereotypes of men and women in relationships – controlling, violent, dangerous and coercive males, with females being weak, controlled, powerless victims of aggression (socially sensitive)
- unfalsifiable as evolution of behaviour (aggression) cannot be directly/empirically observed – it is a circular argument (cause and effect cannot be studied/established)
- practical applications that have come from understanding of direct guarding/negative inducements to educate and protect potential domestic abuse survivors – Claire's Law – right to know, right to tell in UK
- reductionist nature of evolutionary explanations to aggression etc.

Credit other relevant material.

2 6

Discuss the situational explanation of institutional aggression in the context of prisons.
Refer to Max's experiences in your answer.

[16 marks]

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

Level	Marks	Description
4	13–16	Knowledge of the situational explanation of institutional aggression in the context of prisons is accurate and generally well detailed. Application is clear and effective. Discussion is thorough and effective. Minor detail and/or expansion of argument is sometimes lacking. The answer is clear, coherent and focused. Specialist terminology is used effectively.
3	9–12	Knowledge of the situational explanation of institutional aggression in the context of prisons is evident but there are occasional inaccuracies/omissions. Application/discussion is mostly effective. The answer is mostly clear and organised but occasionally lacks focus. Specialist terminology is used appropriately.
2	5–8	Limited knowledge of the situational explanation of institutional aggression in the context of prisons is present. Focus is mainly on description. Any discussion/application is of limited effectiveness. The answer lacks clarity, accuracy and organisation in places. Specialist terminology is used inappropriately on occasions.
1	1–4	Knowledge of the situational explanation of institutional aggression in the context of prisons is very limited. Discussion/application is 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:

- Clemmer's deprivation model sees institutional aggression as situation dependent
- the model suggests aggression is a consequence of harsh prison conditions which can include many deprivations
- Sykes lists five types of prison deprivation: liberty, autonomy, goods, heterosexual/intimate relationships, security
- deprivation results in stress and competition for limited resources – leading to violence and aggression; frustration-aggression theory in this context.

Possible application:

- Max refers to lack of autonomy, having 'little choice' in activities or food
- Max refers to deprivations: of resources, activities, social contacts all leading to frustration, 'it's so boring'
- Max suggests there is competition for resources – pool table, books
- Max feels isolated/is deprived of intimate relationships and wishes his girlfriend could visit
- Max implies that aggression increases in prison – you have to 'be tough'.

Possible discussion:

- use of evidence to support/contradict the situational model, eg use of Zimbardo's study of prison behaviour; Steiner (2009) prison violence linked to conditions; Johnson (1991) prison overcrowding linked to increased aggression; DeLisi (2004) importation of gang values
- contrast with the dispositional/importation model of aggression (Irwin and Cressey) – aggression as inherent rather than situational
- contrast with the administrative control model (Dilulio) arguing that prison management is the key factor in prison violence, not deprivation
- discussion of link between the situational model of prison aggression and the more general frustration-aggression hypothesis
- discussion in the context of broader explanations in psychology, eg brutalisation as an example of social learning and links to broader debates, eg nature v nurture, biological v environmental determinism.

Credit other relevant material.

Section D

Forensic psychology

- 2 7** Which **one** of the following best explains the role of atavistic form in offending? [1 mark]

Marks for this question: AO1 = 1

Answer: B – People offend because they are primitive and cannot conform to societal rules.

- 2 8** Which **one** of the following describes Eysenck’s criminal personality type? [1 mark]

Marks for this question: AO1 = 1

Answer: B – Someone with a high neuroticism score and a high extraversion score, who is impulsive and unstable.

- 2 9** Briefly outline **one** aim of custodial sentencing. [2 marks]

Marks for this question: AO1 = 2

2 marks for a clear and coherent outline of **one** aim using appropriate terminology.

1 mark for a limited/muddled outline.

Possible content:

- Deterrence – a custodial sentence should aim to put off other would-be offenders, and also reduce reoffending – negative consequences are evident to all
- Retribution – a custodial sentence allows justice to be seen to be done by the victim, the family and wider society
- Rehabilitation/Reform – a custodial sentence might provide opportunities for learning more acceptable forms of behaviour/new skills/encourage self-reflection/contrition
- Incapacitation – a custodial sentence makes it impossible for the offender to continue to commit crimes in society avoiding further suffering to the victims/threat to the public.

No marks for simply naming an aim

Credit other relevant material.

3 0

Briefly evaluate custodial sentencing as a way of dealing with offending behaviour.

[4 marks]**Marks for this question: AO3 = 4**

Level	Marks	Description
2	3–4	Evaluation is effective with some detail. The answer is clear and coherent. There is appropriate use of specialist terminology.
1	1–2	Evaluation is limited/lacks effectiveness. The answer lacks clarity. Use of specialist terminology is either absent or inappropriate.
	0	No relevant content.

Possible evaluation:

- does not result in a reduction in re-offending/recidivism – recidivism rates are high
- is not much more than retribution to appease the public/society so justice appears to be done and a perception that society has enacted revenge
- can provide opportunities for learning more acceptable forms of behaviour, eg through anger management, education or restorative justice programmes so might have a rehabilitative effect and thus reduce recidivism
- only incapacitates temporarily, many sentences are only partially served
- brutalisation/prisonisation – exposure to a harsh/threatening environment leads prisoner to become hardened and more aggressive, adopting the prison code
- institutionalisation – lack of autonomy and adherence to prison norms fosters dependency with an inability to make independent choices
- poor mental health – imprisonment often leads to deterioration in mental health due to fear, isolation, lack of stimulation. Prisoners are more likely to suffer from anxiety, depression, PTSD which can sometimes result in self-harm and increased suicide risk.

Only credit aims of custodial sentencing if explicitly used as evaluation

Credit other relevant material.

- 3 1** Discuss level of moral reasoning as an explanation for offending. Refer to Debi's comments in your answer.

[16 marks]

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

Level	Marks	Description
4	13–16	Knowledge of level of moral reasoning as an explanation for offending is accurate and generally well detailed. Application is clear and effective. Discussion is thorough and effective. Minor detail and/or expansion of argument is sometimes lacking. The answer is clear, coherent and focused. Specialist terminology is used effectively.
3	9–12	Knowledge of level of moral reasoning as an explanation for offending is evident but there are occasional inaccuracies/omissions. Application/discussion is mostly effective. The answer is mostly clear and organised but occasionally lacks focus. Specialist terminology is used appropriately.
2	5–8	Limited knowledge of level of moral reasoning as an explanation for offending is present. Focus is mainly on description. Any discussion/application is of limited effectiveness. The answer lacks clarity, accuracy and organisation in places. Specialist terminology is used inappropriately on occasions.
1	1–4	Knowledge of level of moral reasoning as an explanation for offending is very limited. Discussion/application is 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:

- Kohlberg devised a theory of moral reasoning which can be used to explain why people offend. The theory suggests that the ability to understand right and wrong becomes more sophisticated with age
- offenders have been found to show reasoning at the lowest/least sophisticated pre-conventional level, typical of young children, and do not develop more sophisticated empathic reasoning/perspective-taking skills/do not progress to levels two and three
- the pre-conventional level is divided into punishment and reward stages
- in the punishment stage, wrongdoing is judged to be any behaviour that is punished
- in the reward stage, wrongdoing is judged to be any behaviour that results in reward/benefit for the actor
- description of the Heinz dilemma as used to study moral reasoning.

Possible application:

- Debi shows reward stage/pre-conventional reasoning with reference to: material rewards such as a big TV and mobile phone; excitement/thrill of the crime itself; social reward of having friends respect her for being such a capable thief
- Debi shows punishment stage/pre-conventional reasoning with reference to: police not bothering her; it's OK because she doesn't get caught; any fine being inconsequential
- Debi is not reasoning at the more sophisticated conventional level where she could take the perspective of the victim: she says she 'doesn't hurt anyone' indicating lack of empathy/perspective-taking and 'Nobody cares' suggesting she is unaware of any social contract.

Possible discussion:

- use of evidence to support/contradict the existence of pre-conventional reasoning in offender populations, eg Palmer and Hollin (1998) use of dilemmas with offenders and non-offenders
- comparison with other explanations for offending, eg differential association theory, cognitive biases, biological explanations
- reasoning may be context specific – some evidence suggests that offenders reason at the pre-conventional level only in a context related to their crime and not in other contexts (Ashkar and Kenny, 2007)
- male bias in Kohlberg's research – Gilligan critique
- discussion of underlying causes of pre-conventional thinking in offenders
- discussion of underpinning research – use of moral dilemmas
- links with broader psychological theories, eg theories of cognitive development and to broader debates in psychology, eg reductionism.

Credit other relevant material.

Section D

Addiction

3 2 Which **one** of the following best explains the role of cue reactivity in addiction? [1 mark]

Marks for this question: AO1 = 1

Answer: D – Where an association is formed so that a secondary reinforcer elicits cravings for nicotine.

3 3 Which **one** of the following best explains the role of dopamine in nicotine addiction? [1 mark]

Marks for this question: AO1 = 1

Answer: B – Nicotine increases dopamine action in the brain, stimulating the reward pathway leading to feelings of euphoria.

3 4 What is meant by risk factors in addiction? [2 marks]

Marks for this question: AO1 = 2

2 marks for a clear and coherent description, using appropriate terminology.

1 mark for a limited/muddled description.

Possible content:

- any biological, personality or environmental factor which might increase the chance of a person developing an addictive behaviour
- factors include genetic predisposition, specific traits (eg neuroticism, impulsivity, sensation-seeking), combination of traits (eg anti-social personality disorder or APD), stress and social factors, such as family/peer group.

Note: can credit description embedded in an example.

Credit other relevant material.

3 5 Briefly evaluate the role of risk factors in addiction.

[4 marks]

Marks for this question: AO3 = 4

Level	Marks	Description
2	3–4	Evaluation of risk factor(s) is effective with some detail. The answer is clear and coherent. There is appropriate use of specialist terminology.
1	1–2	Evaluation of risk factor(s) is limited/lacks effectiveness. The answer lacks clarity. Use of specialist terminology is either absent or inappropriate.
	0	No relevant content.

Possible evaluation:

- use of evidence to support/contradict the role of any risk factor, eg Wan-Sen Yan (2013) link between personality type and internet addiction; Epstein (1998) link between childhood abuse (stress) and alcohol addiction; Kendler (2006) twin studies of addiction (genetics)
- findings are mostly correlational so there is an issue of causality – does any risk factor cause addiction or is it a consequence of the addictive behaviour? Is there a 3rd factor making the other two appear related?
- general evaluation of risk factor(s) in the light of issues such as reductionism, determinism, free will, nature, nurture
- evaluation of single versus multiple causes approaches to explaining addiction using risk factors
- implications of risk factors in relation to treatment for addiction.

Answers can focus on one risk factor or risk factors in general.
Credit other relevant material.

3 6

Discuss cognitive behaviour therapy (CBT) as a way of reducing addiction. Refer to Ash's comments in your answer.

[16 marks]

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

Level	Marks	Description
4	13–16	Knowledge of cognitive behaviour therapy (CBT) as a means of reducing addiction is accurate and generally well detailed. Application is clear and effective. Discussion is thorough and effective. Minor detail and/or expansion of argument is sometimes lacking. The answer is clear, coherent and focused. Specialist terminology is used effectively.
3	9–12	Knowledge of cognitive behaviour therapy (CBT) as a means of reducing addiction is evident but there are occasional inaccuracies/omissions. Application/discussion is mostly effective. The answer is mostly clear and organised but occasionally lacks focus. Specialist terminology is used appropriately.
2	5–8	Limited knowledge of cognitive behaviour therapy (CBT) as a means of reducing addiction is present. Focus is mainly on description. Any discussion/application is of limited effectiveness. The answer lacks clarity, accuracy and organisation in places. Specialist terminology is used inappropriately on occasions.
1	1–4	Knowledge of cognitive behaviour therapy (CBT) as a means of reducing addiction is very limited. Discussion/application is 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:

- focus is on changing the way the addicted person thinks
- relaxation training prevents the build up of stress and anxiety that might trigger addictive behaviour
- cognitive restructuring enables the person to understand what triggers the addictive behaviour and provides alternative thought processes
- coping strategies like time-management, refusal skills and assertiveness skills are learned and practised, to be used in the future to help the addict to resist the addictive behaviour
- can include relapse prevention, identifying and coping with interpersonal influences (eg peers) and intrapersonal factors (eg stress).

Possible application:

- Ash refers to stress which could be a trigger for his wanting to play games – CBT could address the stress through relaxation training
- Ash needs to learn/understand that stress and being alone are triggers for the addictive behaviour – cognitive restructuring
- Ash understands playing computer games as a positive thing – feels better, everything improves, fun with friends, party – cognitive restructuring would help him to see it as a negative influence to be avoided
- Ash refers to the social pressures attached to playing computer games – being left out, joining the party – CBT could provide coping strategies so he could refuse to join in when his friends invite him to play
- Ash's boredom could be addressed by time management strategies.

Possible discussion:

- use of evidence for the effectiveness or otherwise of CBT for addictive behaviour: Petry (2006) gambling; Ladouceur (2001) pathological gambling; Young (2007) internet addiction
- discussion of short-term versus long-term effectiveness (Cowlshaw et al 2012)
- high drop-out rates (Cuijpers, 2008) in contrast to alternative therapies
- suitability for specific client types, ie motivated, articulate as it requires considerable effort on the part of the client
- beneficial side effects such as generic life-enhancing outcomes related to increased control/autonomy, improved self-esteem, better decision-making and assertiveness
- comparison with other therapies, eg drug therapy and behavioural interventions.

Credit other relevant material.