

AQA A-LEVEL PSYCHOLOGY • 7182

PSYCHOLOGY



EXAM QUESTION PACK

3.1.3 CAREGIVER-INFANT INTERACTIONS

SCORE

/46

PERCENTAGE

%

STEMUP

These questions belong to AQA, not to us.

The examination questions, mark schemes and examiner reports in this pack were written and published by AQA. They are past assessment materials, reproduced here so that students can revise from them.

What we do not own

STEMUP is not affiliated with AQA and does not own, and makes no claim to own, any of the question, mark scheme or examiner report material in this pack. AQA has not endorsed, approved or been involved in the production of it. AQA and the qualification titles used here belong to their respective owners and appear for identification only.

Where to find the originals

AQA publishes its past papers, mark schemes and examiner reports free of charge. Always check the current specification at aqa.org.uk before you revise, because content and wording can change between series.

If you hold the rights to any material in this pack and would like it amended or removed, contact admin@stemup.co.uk and we will act on it.

Q1.

Which **one** of the descriptions below best describes an infant showing reciprocity?

Shade **one** box only.

- | | | |
|----------|---|-----------------------|
| A | A baby moves her head in time with her mother | ☐ |
| B | A baby smiles and her mother smiles back | ☐ |
| C | A mother moves her head in time with her baby | ☐ |
| D | A mother smiles and her baby smiles back | ☐ |

(Total 1 mark)

Q2.

Which **one** of the descriptions below best describes an infant showing interactional synchrony?

Shade **one** box only.

- | | | |
|----------|---|-----------------------|
| A | A baby moves her head in time with her mother | ☐ |
| B | A baby smiles and her mother smiles back | ☐ |
| C | A mother moves her head in time with her baby | ☐ |
| D | A mother smiles and her baby smiles back | ☐ |

(Total 1 mark)

Q3.

Name **three** of the stages of attachment identified by Schaffer.

(Total 3 marks)

Q4.

What is meant by 'reciprocity' in the context of caregiver-infant interaction?

(Total 2 marks)

Q5.

Briefly evaluate research into caregiver-infant interaction.

(Total 4 marks)

Q6.

Read the item and then answer the question that follows.

Proud father Abdul was talking to his friend, as they were both watching Abdul's wife, Tasneem, interacting with their baby daughter, Aisha.

'It's amazing really', said Abdul. 'Tasneem smiles, Aisha smiles back. Tasneem moves her head, Aisha moves hers, perfectly in time with each other.'

'Yes', agreed the friend. 'It's almost as if they are one person.'

With reference to Abdul's conversation with his friend, outline **two** features of caregiver-infant interaction.

(Total 4 marks)

Q7.

Name **three** stages in the development of attachments identified by Schaffer.

1.

2.

3.

(Total 3 marks)

Q8.

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

(Total 4 marks)

Q9.

What is meant by the term 'attachment'?

(Total 2 marks)

Q10.

- (a) Describe **one** way in which psychologists have investigated caregiver-infant interaction in humans. Refer to a specific study in your answer.

(3)

- (b) Evaluate the way of investigating caregiver–infant interaction that you have described in your answer to part (a). Do **not** refer to ethical issues in your answer.

(3)

(Total 6 marks)

Q11.

Some researchers believe that caregiver–infant interactions influence the development of attachment.

Explain **one** reason why it is difficult to draw conclusions about the role of caregiver–infant interactions in the development of attachment.

(Total 2 marks)

Q12.

What is meant by the term *attachment*?

(Total 2 marks)

Q13.

One situation in which disruption of attachment can occur is when a mother of a young child is admitted into hospital. A researcher decided to study the behaviour of a two year old boy who experienced this disruption of attachment.

She decided to use naturalistic observation of the boy both before his mother was admitted into hospital and after she returned home. Each period of observation lasted for one hour.

- (a) Suggest **two** suitable behavioural categories the researcher could use to record the boy's behaviour.

(2)

- (b) How might the researcher record the boy's behaviour during the one-hour observation?

(2)

- (c) Explain why the psychologist might want to carry out a pilot study before the main observation.

(2)

(Total 6 marks)

Q14.

A psychologist analysed the results of 'Strange Situation' studies from different countries. Some of the results are shown below.

Country (and number of studies)	% of each type of attachment		
	Secure	Insecure-Avoidant	Insecure-Resistant
Country One (2)	64	7	29
Country Two (18)	65	21	14
Country Three (4)	67	26	7

- (a) Outline what the table above shows about cultural variations in attachment.

(3)

- (b) Explain **one** criticism of investigating cultural variations in attachment using the 'Strange Situation.'

(3)
(Total 6 marks)

Mark schemes

Q1.

[AO1 = 1]

D

[1]

Q2.

[AO1 = 1]

A

[1]

Q3.

[AO1 = 3]

1 mark each for any three of:

- asocial/pre-attachment stage
- indiscriminate/diffuse attachment/stage
- the beginnings of attachment/attachment in the making
- specific/discriminate attachment/stage
- multiple attachment/stage

Q4.

[AO1 = 2]

2 marks for a clear, coherent definition of reciprocity

1 mark for a limited / muddled definition.

Reciprocity – caregiver-infant interaction is a two-way/mutual process; each party responds to the other's signals to sustain interaction (turn-taking). The behaviour of each party elicits a response from the other.

Do not credit examples unless these add to the definition.

Q5.

[AO3 = 4]

Level	Marks	Description
2	3 – 4	Evaluation is relevant, generally well explained and focused on research into caregiver-infant interaction. The answer is generally coherent with effective use of specialist terminology.
1	1 – 2	Evaluation is relevant although there is limited explanation and/or limited focus on research into caregiver-infant

		interaction. Specialist terminology is not always used appropriately or is absent.
	0	No relevant content.

Possible evaluation points:

- babies cannot communicate so inferences must be drawn
- well-controlled – studies ‘capture’ micro-sequences of interaction
- practical issues – babies are often asleep or being fed
- issue of intentionality – are imitative behaviours deliberate/conscious?
- some studies have failed to replicate earlier findings, eg Koepke et al (1983)
- research may be socially sensitive, eg implications for working mothers
- economic implications of research
- contribution to understanding the importance of care-giver infant interaction.

Accept other valid points.

Note that material on maternal deprivation is not creditworthy on this question.

Answers may focus on the body of research in general or on a specific piece of research evidence.

Q6.

[AO2 = 4]

1 mark for each outline:

- interactional synchrony – adults and babies respond in time to sustain communication
- reciprocity / turn-taking – interaction flows both ways between adult and infant
- imitation – infant mimics / copies the adult’s behaviour
- sensitive responsiveness – adult attends sensitively to infant’s communications.

Plus

1 mark each for application of feature to stem:

- interactional synchrony – ‘...as if they are one person..’ / ‘...perfectly in time with each other..’
- reciprocity / imitation / sensitive responsiveness – ‘Tasneem smiles, Aisha smiles back...’

Same part of stem can be credited if applied appropriately to more than one feature.

Q7.

[AO1 = 3]

Discriminate (1)

Multiple (1)

Pre-attachment (1)

Q8.

[AO3 = 4]

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

Possible suggestions:

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

Q9.

AO1 = 2

Attachment can be defined as an emotional relationship between two people in which each seeks closeness and feels more secure when in the presence of the attachment figure.

1 mark for a very brief or slightly muddled answer e.g. an emotional bond.

2nd mark for accurate elaboration e.g. an emotional bond between two people.

Q10.

(a) **[AO1 = 3]**

Up to 3 marks for description of a valid way, one mark for each relevant detail. Full mark answers should refer to the method and DV / what was being measured (do not credit aims / conclusion). Likely answers include: studies of imitation, eg Melzoff and Moore (1977); studies of interactional synchrony, eg Condon and Sander, Murray and Trevarthen (1985); studies of skin-to-skin contact, eg Klaus and Kennell (1976); studies of sensitive responsiveness and the Strange Situation, eg Ainsworth et al (1978), De Wolff and van Ijzendoorn (1997).

More generic methodological answers which cannot be identified as a specific study (either by name or description) may gain a maximum of two marks.

No credit for animal studies.

(b) **[AO3 = 3]**

Up to 3 marks for evaluation of the way described in (a). Students who present an inappropriate study or no study in (a) may still gain marks for (b) where it becomes clear that a specific study / way of investigating caregiver-infant interaction is being evaluated. Students may choose to elaborate on one issue

or may mention more than one issue in less detail. Evaluative points will vary according to the method described but likely issues, include: usefulness of controlled experimentation in researching social relationships eg artificiality v cause and effect; usefulness of combining data from several studies as in meta-analysis; inferences based on findings, eg studies of imitation and the issue of intentionality; short-term v long-term effects.

For full marks evaluative point(s) must be fully applied to the study of caregiver-infant interaction. One mark only for a totally generic yet valid response.

Q11.

Please note that the AOs for the new AQA Specification (Sept 2015 onwards) have changed. Under the new Specification the following system of AOs applies:

- AO1 knowledge and understanding
- AO2 application (of psychological knowledge)
- AO3 evaluation, analysis, interpretation.

[AO2 = 2]

One mark for briefly noting a relevant reason, plus one mark for explanation / elaboration.

Likely answers: cannot ever show cause and effect because it is ethically impossible to manipulate the amount / quality of caregiver-infant interaction; extraneous factors such as home environment / substitute care / life events / culture / temperament may have a long term effect on attachment and cannot be controlled.

Note: valid reasons could overlap so care should be taken to award due credit and not automatically penalise candidates who might initially appear to be presenting two separate reasons.

Q12.

AO1 = 2

Attachment is a strong, enduring, emotional and reciprocal bond between two people, especially an infant and caregiver.

1 mark for a brief definition, eg an emotional bond.

1 further mark for some elaboration as above.

Q13.

Please note that the AOs for the new AQA Specification (Sept 2015 onwards) have changed. Under the new Specification the following system of AOs applies:

- AO1 knowledge and understanding
- AO2 application (of psychological knowledge)
- AO3 evaluation, analysis, interpretation.

(a) AO3 = 2

Behaviour must be operationalised. Suitable behavioural categories could include crying, clinging to mother, smiling, playing independently etc.

One mark for each suitable behavioural category.

(b) **AO3 = 2**

Candidates may refer to time sampling, CCTV and later analysis or ticking a box when the behaviour is shown. Unstructured observation could also be relevant.

One mark for a brief explanation. This could include demonstrating some understanding of the use of behavioural categories, eg draw a table and tick boxes. A further mark for elaboration, eg drawing the table and / or indicating when the boxes would be ticked.

(c) **AO3 = 2**

One reason for the psychologist carrying out a pilot study would be to check cameras were positioned appropriately. Another would be to check the suitability of the behavioural categories. Alternative relevant reasons should be credited. One mark for a brief reason eg to check equipment. A further mark for elaboration as above.

Q14.

(a) **AO3 = 3**

Candidates may point out that the % of secure attachment in all three countries is very similar, but that insecure attachments vary. Country one has the lowest % of insecure-avoidant but the highest of insecure resistant. Country three has the lowest % of insecure-resistant but the highest of insecure-avoidant.

One mark for a brief outline of one point. Two further marks for accurate elaboration of one point in detail or more than one point more briefly.

(b) **AO3 = 3**

Candidates may refer to limitations of the strange situation as a way of identifying attachment type. Alternatively they may focus on the differences in number of studies in each country.

They could also criticise the use of meta analysis.

One mark for a brief outline of a relevant criticism. Two further marks for elaboration. For example, the findings for country two come from 18 different studies. We can't be sure that all of the studies were carried out in the same way (second mark). It is possible that the 'Strange Situation' or ways of categorising types of attachment were different in the different studies (third mark).

If candidates give more than one criticism, the best should be credited.

Examiner reports

Q1.

The majority of students answered both questions accurately.

Q2.

The majority of students answered both questions accurately.

Q3.

This was a multiple choice question where the answers were A and C. Most students achieved full marks on this question.

Q4.

Although most students grasped the idea that reciprocity involved responses between caregiver and infant, many failed to outline the key element of reciprocity, that it is a two-way mutual process involving turn-taking. Analogies with 'a conversation' were an effective way of outlining this key element. Weaker answers confused reciprocity with interactional synchrony or imitation.

Q5.

This was a demanding question as students had to decide on their approach. As 'research' includes both specific studies and the whole body of research evidence, alternatives were to focus on one study and evaluate it, or to present a general evaluation of research into caregiver-infant interaction. Effective evaluation of single studies usually considered the implications of results for theory and/or practice. Effective general evaluation looked at problems such as the issue of correctly interpreting infant behaviour in terms of e.g. intentionality. Less successful evaluation tended to be generic, focusing on issues such as ethics and cultural relativity. A substantial number of answers also included far too much description rather than evaluation.

Q9.

Most students were able to provide an adequate definition of the term attachment, but for some students it would be beneficial to practise writing definitions of key terms. For example, answers such as "When people get along with each other okay" is too generic.

Q10.

- (a) In this part of the question students were asked to 'Describe one way...', yet descriptions of a way of investigating were sometimes very vague. Of the many students who chose to write about the Strange Situation, a good number failed to mention a stranger, the key element of the procedure. Although the study did not have to be identified by name, most were identifiable from the detail of the method. A small number of answers gained no credit because they consisted of little more than vague references to behaviours such as imitation, cuddling or motherese. A few students used animal studies despite the explicit instruction not to do so.
- (b) There were many well-applied three-mark answers to this part. Responses consisting of generic evaluation points without explicit application to the study were limited to one mark.

Q11.

This was a popular choice and some very capable responses were seen. Answers to this question varied enormously and were often very long; there were many rambling and vague allusions to possible confounding variables but relatively few succinct answers based on the problems of establishing cause and effect.

Q12.

This question was answered very well.

Q13.

- (a) Many candidates did not understand behavioural categories. Even those candidates who answered the rest of this question well struggled with part (a). Many candidates suggested broad behaviours, eg reunion behaviour, which could not be operationalised.
- (b) The requirement to explain how the researcher might record the boy's behaviour was often ignored. Better answers described how behaviour categories could be recorded in a tally chart.
- (c) Most candidates appeared to have some idea of why pilot studies are useful. However, a surprising number seemed to think that pilot studies are used to 'give you the idea for the main study'. Answers sometimes did not contain sufficient explanation to gain the second mark.

Q14.

- (a) This was a straightforward question and many candidates gained full marks. Some candidates inappropriately used their knowledge of cross-cultural research to write about different parenting styles in various countries instead of simply reading the table as the question required. It would be worth pointing out to candidates that when a question says, "Outline what the table shows", that is exactly what is required.
- (b) Most candidates were able to identify a criticism although they often failed to explain the criticism for full marks. Some candidates ignored the requirement to 'explain one criticism' and, instead, identified two or three criticisms without elaborating any of them. Other common errors were explaining a criticism of the strange situation with no reference to cultural variations, or explaining a criticism of investigations of cultural variation with no reference to the strange situation.