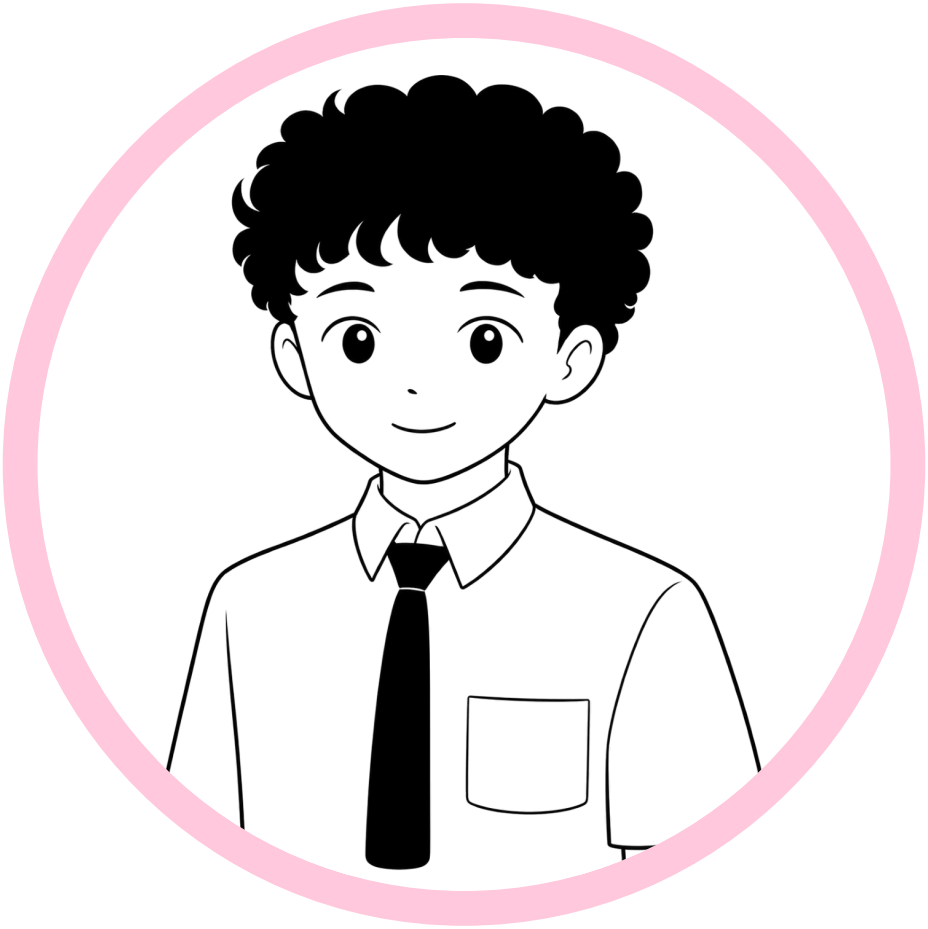
AQA A-LEVEL PSYCHOLOGY · 7182

PSYCHOLOGY



MARK SCHEME

3.2.1 HUMANISTIC PSYCHOLOGY

SCORE	PERCENTAGE
/81	%

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Q1.

[AO1 = 6 AO2 = 4 AO3 = 6]

Level	Marks	Description
4	13 – 16	Knowledge of the humanistic approach is accurate and generally well detailed. Application is effective. Evaluation of the humanistic approach is thorough and effective. Minor detail and/or expansion of the argument is sometimes lacking. The answer is clear, coherent and focused. Specialist terminology is used effectively.
3	9 – 12	Knowledge of the humanistic approach is evident but there are occasional inaccuracies/omissions. Application/evaluation of the humanistic approach 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 humanistic approach is present. Focus is mainly on description. Any application is of limited effectiveness. Any evaluation 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 humanistic approach is very limited. Application is limited, poorly focused or absent. 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:

- Maslow's hierarchy of needs – motivation to achieve progression through the levels
- Rogers' focus on the concept of self and self-acceptance
- Incongruence between self-concept and ideal self leading to negative feelings of self-worth
- person-centred approach to therapy – client led
- self-actualisation – fulfilling one's potential
- unconditional positive regard rather than setting conditions of worth.

Possible application:

- hierarchy of needs: Tatiana requires her mobile phone to meet her safety needs, 'feel safe', love and belonging needs, 'socially isolated without her phone', 'feels good about herself when she receives messages or comments on social media', self-esteem needs, 'low self-esteem'/ 'feels good about herself when she receives messages or comments'
- self-actualisation – 'achievement at school'
- conditions of worth linked to feeling the need to text friends and use social media for

acceptance and friendship
- incongruence and negative feelings of self-worth applied to ‘low self-esteem’/ ‘feels good about herself when she receives messages or comments’ and/or anxiety.

Possible evaluation:
- limited application of the humanistic approach due to its abstract concepts
- the humanistic approach is not reductionist which may improve validity
- humanistic approach lacks empirical evidence to support its claims
- consideration of influence eg. counselling, theoretical influence etc.
- discussion regarding whether behaviour is due to free will or environmental factors
- credit use of evidence to discuss the different explanations when made relevant to the stem
- comparison with alternative approaches in terms of evaluation and/or application.

Credit other relevant material.

Q2.

[AO1 = 2 AO2 = 2]

Level	Marks	Description
2	3 – 4	Outline of congruence is clear and coherent with appropriate use of terminology. Application to Dominic is appropriate with description of need to reduce the gap and how to achieve this.
1	1 – 2	Outline is limited, ie shows some knowledge that congruence involves different aspects of the self. Application is vague. The answer as a whole is not very clearly expressed.
	0	No relevant content.

Content / Outline:

- congruence is the fit / match / comparability / consistency between the perceived self (how you see yourself) and the ideal self (the self you would like to be).

Application:

- Dominic needs to close the gap / discrepancy between his perceived and his ideal self
- gap can be reduced / closed if he develops a more healthy view of himself, or, has a more achievable and realistic ideal self – unconditional positive regard from the therapist is an example of a specific strategy here.

Q3.

[AO1 = 3 AO3 = 5]

Level	Marks	Description
4	7 – 8	Outline of the psychodynamic approach is generally

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		accurate. Discussion of difference(s) is thorough and effective. Answer is clear, coherent and well focused. Specialist terminology is used effectively. Minor detail and/or expansion of argument sometimes lacking.
3	5 – 6	Outline of the psychodynamic approach is evident. There are occasional inaccuracies. Discussion of difference(s) is apparent and mostly effective. The answer is mostly clear and organised. Specialist terminology mostly used effectively. Lacks focus in places.
2	3 – 4	Outline of the psychodynamic approach is present. Focus is mainly on description. Any discussion of difference(s) is only partly effective. The answer lacks clarity, accuracy and organisation in places. Specialist terminology used inappropriately on occasions.
1	1 – 2	Outline of the psychodynamic approach is very limited. Discussion of difference(s) 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 – outline:

- The concept of the unconscious and role of unconscious in behaviour
- Tripartite structure of the personality – id, ego, superego
- Psychosexual stages of development
- Conflicts – Oedipus and Electra
- Defence mechanisms
- Psychodynamic approach to therapy – psychoanalysis

Possible differences – discussion:

- Negativity of Freud in relation to the positive outlook of humanistic psychology
- Emphasis on repressed thoughts and emotions, and past experiences (Freud) versus emphasis on subjective experience of the present and personal growth in the future
- Emphasis on unconscious drives/motives versus conscious awareness and experience
- Psychic determinism (Freud) versus free will and rational choice
- Directive versus non-directive approach to therapy

Not all of this is necessary for full credit.

Credit other relevant information.

Q4.

[AO1 = 1]

B

Q5.

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

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Level	Marks	Description
4	13 – 16	Knowledge is accurate and generally well detailed. Discussion / evaluation / application is thorough and effective. Other approach used effectively. The answer is clear, coherent and focused. Specialist terminology is used effectively. Minor detail and / or expansion of argument sometimes lacking.
3	9 – 12	Knowledge is evident. There are occasional inaccuracies. Discussion / evaluation / application is apparent and mostly effective. Some use of other approach. The answer is mostly clear and organised. Specialist terminology is mostly used effectively. Lacks focus in places.
2	5 – 8	Some knowledge is present. Focus is mainly on description. Any discussion / evaluation / application is only partly effective. The answer lacks clarity, accuracy and organisation in places. Specialist terminology is used inappropriately on occasions.
1	1 – 4	Knowledge is limited. Discussion / evaluation / application 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.

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AO1

Marks for relevant knowledge of assumptions of the humanistic approach and concepts. Most likely assumptions and concepts will focus on: concern with individual's subjective view and experience of the world and conscious experience; focus on person-centred approach and uniqueness of the individual; holistic approach; the individual has free will; the individual striving for self-actualisation; scientific methods are inappropriate for the study of human minds; aim of psychology is to help people reach their full potential; concept of self; conditions of worth; unconditional positive regard; client-centred therapy; Q-sort / POI.

AO3

Marks for analysis, comparisons with other approaches, evaluation of the approach including its contributions and application of knowledge.
Discussion may focus on comparison with one other approach, though students may well broaden their discussion to include more than one. All approaches are acceptable though the behaviourist approach, with its focus on objectivity, determinism, reductionism and scientific and mechanistic approach, is likely.
Students may be stimulated to respond to the claim that the approach has little to offer psychology as part of their discussion. Strengths may cover: promotes a

positive image of human beings; optimistic view – person can grow and change throughout life; focus on subjective experience makes a valuable contribution to understanding the individual – more sensitive than scientific methods; persons in control of their lives – largely ignored by other approaches; contributes to psychological theories eg mood disorders; effective in some treatments eg counselling for stressful events – insight and control, milieu therapy. Limitations may include: opposition to scientific approach and implications; use of qualitative techniques; focus on individual, and problem of formulating general laws of behaviour / idiographic approach; vagueness of terms – implications for testing; lack of comprehensiveness; culture-bound values.
Credit use of relevant evidence.

Q6.

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

Level	Marks	Description
4	13 – 16	Knowledge is accurate and generally well detailed. Discussion / evaluation / application is thorough and effective. The answer is clear, coherent and focused. Specialist terminology is used effectively. Minor detail and / or expansion of argument sometimes lacking.
3	9 – 12	Knowledge is evident. There are occasional inaccuracies. Discussion / evaluation / application is apparent and mostly effective. The answer is mostly clear and organised. Specialist terminology is mostly used effectively. Lacks focus in places.
2	5 – 8	Some knowledge is present. Focus is mainly on description. Any discussion / evaluation / application is only partly effective. The answer lacks clarity, accuracy and organisation in places. Specialist terminology is used inappropriately on occasions.
1	1 – 4	Knowledge is limited. Discussion / evaluation / application 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.

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AO1

Marks for description of the features of the humanistic approach. Features could include how each person is unique and / or good. The subjective experiences, feelings and thoughts of a person should be of importance to psychologists (phenomenology). Focus on the importance of self and congruence. Self-actualisation – every person has an innate tendency to reach his or her full potential. Hierarchy of Needs. Concept of free will – able to choose and determine own

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actions. Conditions of worth. Unconditional positive regard – the unconditional love is essential to the development of a well-adjusted adult. Client- centred therapy – client at the centre of their own therapy in solving their own problems. The idiographic approach – emphasis on understanding the uniqueness of a person. Concept of holism. Research methods used eg the Q-sort technique.

AO3

Marks for evaluation: The humanistic approach has been criticised for its rejection of the scientific approach and its failure to use experiments to understand and predict human behaviour. There is little objective evidence to support the assumptions made by humanistic psychologists. Students may evaluate the approach in relation to other approaches, eg the behaviourist approach which views humans as passively responding to stimuli in the environment. Humanistic psychologists state that humans are active agents – able to change and determine their own development. However, this may be seen as idealistic. Students may contrast the concept of free will with the deterministic features of other approaches, eg the biological approach. The value of a person-centred approach may be compared to the psychodynamic approach. Practical applications of the approach, eg motivation in business world and client centred therapy. Credit other relevant points.
Credit use of relevant evidence.

Q7.

[AO3 = 4]

Up to two marks for two assumptions of the humanistic approach. One mark for each assumption which will probably be embedded in the explanation.
Up to two marks for explaining why each assumption is at odds with the scientific method. One mark for each explanation. Likely content:
Each person can exercise free will – explanation might focus on principle of determinism in science.
Each person is a rational and conscious being and not dominated by unconscious primitive instincts – explanation might focus on the principles of determinism and reductionism in science.
A person's subjective experience and understanding of the world is of greater importance to understanding the person than objective reality – explanation might focus on empiricism in science.
Humans should be viewed as a whole and not reduced to component parts – explanation might focus on reductionism in science.
Humans strive towards achieving self-actualisation- explanation might focus on the need for objectivity in science eg operational definition vs. subjectively defined; hypothetical construct; no objective measure.
Each person is unique – explanation might focus on general laws of behaviour / nomothetic approach.

Accept other valid answers such as unconditional positive regard / congruence / fully functioning person / client centre therapy / focus on the self.

Q8.

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

Level	Marks	Description
4	13 – 16	Knowledge is accurate and generally well detailed.

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		Discussion / evaluation / application / reference to differences is thorough and effective. The answer is clear, coherent and focused. Specialist terminology is used effectively. Minor detail and / or expansion of argument sometimes lacking.
3	9 – 12	Knowledge is evident. There are occasional inaccuracies. Discussion / evaluation / application / reference to differences is apparent and mostly effective. The answer is mostly clear and organised. Specialist terminology is mostly used effectively. Lacks focus in places.
2	5 – 8	Some knowledge is present. Focus is mainly on description. Any discussion / evaluation / application is only partly effective. The answer lacks clarity, accuracy and organisation in places. Specialist terminology is used inappropriately on occasions.
1	1 – 4	Knowledge is limited. Discussion / evaluation / application 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.

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AO1

Features of the humanistic approach in psychology could include the concept of free will; focus on self and self-concept; personal growth; (un)conditional positive regard; each person is unique and should be treated as such; study of subjective experience; client related therapy; Maslow's Hierarchy of Needs; self-actualisation. Credit reference to Rogers; Credit reference to research methods used e.g.open-ended interviews.

AO3

Discussion should focus on differences between the humanistic approach and the psychodynamic approach. Likely differences: The humanistic approach focuses on the present / future versus the retrospective accounts of the psychodynamic approach; humanistic psychologists are more positive in their outlook of human behaviour versus the negative views of the psychodynamic approach; humanistic psychologists focus on the person's conscious mind whereas the psychodynamic approach focuses on the unconscious mind; humanistic psychologists focus on eg Maslow's drive for self-actualisation versus the psychodynamic view of motivational / underlying physiological forces; the humanistic approach is based on free-will versus the psychodynamic focus on determinism; different approaches to therapy (directive versus client-centred).

Q1.

There were some very good responses, which were accurate and far more detailed than necessary, with extremely effective and insightful application. However, most of the responses were level 2 or level 3 standard with weaker students struggling to describe abstract ideas coherently using specialist terminology. Students were generally able to provide an accurate description of the humanistic approach with good descriptions of Maslow's hierarchy of needs, although many believed that self-actualisation meant nothing more than doing well in your exams. Better students could explain Rogers' work effectively and some demonstrated very detailed knowledge. Evaluation was mixed, often focussing on the lack of a scientific approach or a discussion of the practical applications of the humanistic approach to counselling theory. There was some confusion relating to reductionism with the common claim that this approach is reductionist because it fails to consider biological mechanisms, which often led to some contradictory evaluations. Some more sophisticated responses used research evidence to support the points posed and elaborated on this effectively. Application was usually attempted, with varying degrees of success. Weaker application either demonstrated a lack of understanding or inappropriate use of terminology, and/or consisted mostly of reiterations of the stem. Evaluation was sometimes better than the outline of the concepts of the humanistic approach. It appeared that many students had prepared to write an essay on the comparison between approaches and thus struggled to give the necessary detail the question required, and struggled to link other approaches back to the question. Thus comparative evaluations often lacked focus. Better students used the stem to construct convincing arguments with appropriate knowledge and evaluation intertwined within their application. The very best were able to blend these elements together in a highly sophisticated manner, effectively referring to other approaches as part of the discussion. Students should be encouraged to take time to plan their answers and construct concise and fluent essays with the appropriate use of paragraphs in order to improve coherence and focus.

Q5.

This question was answered well with a number of students gaining full marks. Most students had sound knowledge of the assumptions of the humanistic approach and some showed detailed insight into client-centred therapy and measuring techniques such as Q-sort and Personal Orientation Inventory (POI). The answers were sometimes overly descriptive and some students had difficulty providing sufficient discussion, but most accessed some points regarding the lack of scientific rigour and use of qualitative techniques, etc. Better answers compared the humanistic approach with other approaches on concepts such as 'freewill' and 'methodology' and were able to give a detailed discussion of both strengths and weaknesses of the approach. There were some valid and thoughtful comparisons with other approaches, in particular key differences between behaviourism and humanism and similarities / contrasts between humanism and the psychodynamic approach.

Q6.

This was reasonably well answered with a good spread of marks awarded. However, students did find it difficult to access marks in the top two mark bands. There was a great deal of muddle in some of the description offered by students, who could not distinguish between the theoretical proposals of Rogers and Maslow. Many offered long lists of named concepts such as: self, free will, hierarchy of needs, congruence and so on, but did not demonstrate that they had clear knowledge of these key features. When concepts were elaborated it was evident that students often had quite superficial, and in some

cases, inaccurate understanding of these and it was quite common to see comments such as: ‘we do not have free will because there are laws,’ or ‘self-actualisation is when you get all you want,’ or ‘the hierarchy of needs must be wrong because people in China cannot satisfy basic needs.’ Evaluation of the approach was generally weaker than the description and many responses were lists of statements of difference between humanistic theory and other explanations of behaviour. These were often in the form, ‘the humanistic approach says we have free will but the psychodynamic approach says we are determined by the unconscious / the behaviourist approach says the environment determines behaviour.’ Other attempts at analysis were in the form of unsubstantiated claims that there is **no** evidence to support it or the therapy is **very** effective.

As already stated, the standard of literacy in this extended writing was often very weak, with frequent spelling errors and poor structure and coherence.

Q7.

Many students performed well on this question with two assumptions of the humanistic approach clearly placed in the context of the rejection of the scientific method. Generally, students focused their answers on holism and the reductionist nature of science, and free will and the determinism of the scientific method. Where students did not score full marks, this was often because the student made generic points such as ‘you cannot generalise’ or the link to science was unclear. Some, for example, referred to the use of client-centred therapy and it was not always apparent why this was a rejection of the scientific method.

Q8.

This question required students to provide an accurate description of features and concepts associated with the humanistic approach and then to organise their understanding of the distinguishing features of the humanistic and psychodynamic approaches to provide a discussion of differences between them. The descriptions of the work of humanistic psychologists were varied and a number of students covered a good range of concepts and were able to achieve 4 / 5 AO1 marks for their knowledge. It was encouraging to read the answers of students who had developed an understanding that was beyond rote learning and could therefore produce effective discussion of concepts of free will and the unconscious, positive outlook and pessimism and non-directive and directive therapy. However, many students did not seem to understand how to deal with differences between the approaches beyond stating these. Some students listed similarities rather than differences.

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