GCE A LEVEL MARKING SCHEME

SUMMER 2019

A LEVEL
PSYCHOLOGY - COMPONENT 1
A290U10-1

© WJEC CBAC Ltd.

INTRODUCTION

This marking scheme was used by WJEC for the 2019 examination. It was finalised after detailed discussion at examiners' conferences by all the examiners involved in the assessment. The conference was held shortly after the paper was taken so that reference could be made to the full range of candidates' responses, with photocopied scripts forming the basis of discussion. The aim of the conference was to ensure that the marking scheme was interpreted and applied in the same way by all examiners.

It is hoped that this information will be of assistance to centres but it is recognised at the same time that, without the benefit of participation in the examiners' conference, teachers may have different views on certain matters of detail or interpretation.

WJEC regrets that it cannot enter into any discussion or correspondence about this marking scheme.

© WJEC CBAC Ltd.

GCE A LEVEL PSYCHOLOGY - COMPONENT 1

SUMMER 2019 MARK SCHEME

Question	AO1	AO2	AO3	TOTAL
1			10	10
2	8			8
3	10			10
4			10	10
5		10		10
6		10		10
7	10			10
8			8	8
9	12		12	24
TOTAL	40	20	40	100

© WJEC CBAC Ltd.

1. Evaluate Loftus and Palmer's (1974) research *'Reconstruction of automobile destruction: an example of the interaction between language and memory'*. [10]

This question is mainly focused on analysing, interpreting and evaluating scientific information, ideas and evidence in relation to making judgements and reaching conclusions.

Credit **could** be given for:

- Use of the experimental method e.g. cause and effect, standardised procedures, artificial environment, demand characteristics.
- Reliability and validity issues e.g. ecological validity, consistent use of video clips and verbs.
- Sample used e.g. student sample, American participants.
- Use of the findings in society e.g. the Innocence Project, use of the Cognitive Interview.
- Ethics of the research e.g. risk of harm due to the nature of the video clips, informed consent.
- The points above can be strengths or weaknesses.
- Any other relevant evaluation.

Marks	AO3
10	• A thorough evaluation. • Clearly linked to the classic research. • Examples are well chosen to support the point made. • Arguments are well-developed and balanced throughout. • Structure is logical. • Depth and range. • An appropriate conclusion is reached based on evidence presented.
7-9	• A reasonable evaluation. • Clearly linked to the classic research. • Examples are appropriate. • Arguments are developed. • Structure is mostly logical. • Depth and range but not in equal measure. • A reasonable conclusion is reached based on evidence presented.
4-6	• Basic evaluation. • Examples are not always relevant. • Arguments are not developed. • Structure is reasonable. • Depth or range. • A basic conclusion is reached.
1-3	• Superficial evaluation. • There are no examples to support. • Answer lacks structure. • No conclusion.
0	• Inappropriate answer given. • No response attempted.

© WJEC CBAC Ltd.

2. Outline the positive assumption of 'focus on the good life' and **one** other positive assumption. [4+4]

This question is focused on demonstrating knowledge and understanding of scientific ideas.	
Credit **could** be given for: • Seligman's three desirable lives; 'the pleasant life', 'the good life' and 'the meaningful life'. • Development of strengths and virtues to achieve the meaningful life. • Three elements of the good life; positive connections to others, positive individual traits and life regulation qualities. One other positive assumption: • Authenticity of goodness and excellence; signature strengths, focus on mental health instead of mental illness, traits that act as a buffer to mental illness. • Acknowledgement of free will; ability to take charge of our own actions, Ed Diener's research on happiness and wellbeing. Any other appropriate assumption clearly related to the positive approach.	
Marks (per assumption)	**AO1**
4	• Description and level of accuracy is thorough and clearly linked to psychology. • Effective use of appropriate terminology.
3	• Description and level of accuracy is reasonable and linked to psychology. • Good use of appropriate terminology.
2	• Description and level of accuracy is basic. • Link to psychology may not be clear. • Some use of appropriate terminology.
1	• Assumption is identified only. • Description is superficial. • No link to psychology. • Very little use of appropriate terminology.
0	• Inappropriate answer given. • No response attempted.

© WJEC CBAC Ltd.

3. Describe the methodology and procedures of Raine, Buchsbaum and La Casse's (1997) research '*Brain abnormalities in murderers indicated by positron emission tomography'.* [10]

This question is focused on demonstrating knowledge and understanding of scientific procedures.
Credit **could** be given for: **<u>Methodology</u>** • A quasi-experiment. • Matched pairs design. • IV = Not guilty by reason of insanity (NGRI) – Not manipulated by the experimenter • DV = Activity of brain regions • Experimental group: 41 participants; 39 men and 2 women; mean age 34.3; all charged with either murder or manslaughter; all had been referred to the University of California to obtain evidence using PET scanning for a NGRI defence or they had been found guilty and were referred to obtain information that may reduce their sentence. Reasons for referral included history of head injury or brain damage. • Control group: 41 participants; 39 men and 2 women; mean age 31.7; formed by matching each murderer with a normal subject of the same sex and age who was tested using identical PET imaging procedures in the same laboratory; 6 schizophrenics were matched from the University of California from a large psychiatric sample; participants were screened for health with a physical exam, a psychiatric interview and their medical history was checked. **<u>Procedures</u>** • Opportunity sample. • PET scans were used to study the active brain. • Ten minutes before the injection participants were given the chance to practice trails of the continuous performance task (CPT). • 30 seconds before the injection participants started the CPT. • The radioactive tracer (fluorodeoxyglucose) was injected into the participant. • After 32 minutes participants were given a PET scan. • Ten horizontal slices (pictures) of the brain were taken. Any other appropriate outline of methodology and procedures. Table of mental disorders and number of participants is acceptable. Extended bullet points rather than full paragraphs can be credited. NB Only methodology and procedures referred to in the original article can be credited.

© WJEC CBAC Ltd.

Marks	AO1
9-10	• Description and level of accuracy is thorough. • Depth and range included. • Effective use of terminology. • Logical structure.
6-8	• Description and level of accuracy is reasonable. • Depth and range, but not in equal measure. • Good use of terminology. • Mostly logical structure.
3-5	• Description and level of accuracy is basic. • Depth or range. • Some use of appropriate terminology. • Reasonable structure.
1-2	• Description and level of accuracy is superficial. • Very little use of terminology. • Answer lacks structure.
0	• Inappropriate answer given. • No response attempted.

© WJEC CBAC Ltd.

4. Evaluate either systematic desensitisation **OR** aversion therapy. [10]

This question is mainly focused on analysing, interpreting and evaluating scientific information, ideas and evidence in relation to making judgements and reaching conclusions.	
Credit **could** be given for: • Effectiveness of therapy e.g. length of treatment, long term effects, dropout rates. • Ethical issues of therapy e.g. social control, levels of anxiety, pace of the therapy for the patient, issues of valid consent. • Use of scientific methods that can be observed and measured. • Individual differences of patients. • Research to support or refute the therapy. Above points can be strengths or weaknesses of therapy. Any other appropriate evaluation of therapy.	
Marks	**AO3**
9-10	• A thorough evaluation. • Clearly linked to one therapy. • Examples are well chosen to support the point made. • Arguments are well-developed and balanced throughout. • Structure is logical. • Depth and range. • An appropriate conclusion is reached based on evidence presented.
6-8	• A reasonable evaluation. • Clearly linked to one therapy. • Examples are appropriate. • Arguments are developed. • Structure is mostly logical. • Depth and range but not in equal measure. • A reasonable conclusion is reached based on evidence presented.
3-5	• Basic evaluation. • Examples are not always relevant. • Arguments are not developed. • Structure is reasonable. • Depth or range. • A basic conclusion is reached.
1-2	• Superficial evaluation. • There are no examples • Answer lacks structure. • No conclusion.
0	• Inappropriate answer given. • No response attempted.

© WJEC CBAC Ltd.

5. Lucy and Michael are having a discussion about the biological approach. Lucy is impressed by the biological approach but Michael disagrees.

Explain **one** strength that Lucy might use and **one** weakness that Michael might use in their discussion. [5+5]

<table>
<tr><td colspan="2">This question is focused on applying knowledge and understanding of scientific ideas, processes, techniques and procedures in a practical context.</td></tr>
<tr><td colspan="2">Credit could be given for:</td></tr>
<tr><td colspan="2">The following points can be either strengths or weaknesses:
• Therapy; success rates, relapse, treating symptoms rather than cause, length of treatment.
• Scientific approach with measurable and observable results.
• Methods used; laboratory experiments, brain scans.
• Application to the real world.
• Issues and debates; reductionism, determinism, nature over nurture, individual differences.
• Ethics of the biological approach.

Any other appropriate application.</td></tr>
<tr><td>Marks (per strength and weakness)</td><td>AO2</td></tr>
<tr><td>5</td><td>• Explanation and level of accuracy is thorough.
• Exemplars used are well chosen.
• Clear reference to the statement.
• Logical structure.</td></tr>
<tr><td>3-4</td><td>• Explanation and level of accuracy is basic.
• Exemplars not always made relevant.
• Reference to the statement is basic.
• Structure is reasonable.</td></tr>
<tr><td>1-2</td><td>• Explanation and level of accuracy is superficial.
• Exemplars identified but not made relevant.
• No reference to the statement.
• Answer lacks structure</td></tr>
<tr><td>0</td><td>• Inappropriate answer given.
• No response attempted.</td></tr>
</table>

© WJEC CBAC Ltd.

6. Apply the assumptions of the cognitive approach to explain human behaviour. [10]

This question is focused on applying knowledge and understanding of scientific ideas, processes, techniques and procedures in a practical context.	
Credit **could** be given for: • Any human behaviour can be credited (e.g. addictive behaviours, autistic spectrum behaviours, bullying behaviours, criminal behaviours, schizophrenia and stress). • More than one human behaviour can be credited. • Computer analogy; process of perception, attention and memory. • Schemas; information from past experiences forming a behaviour. • Internal mental processes; rational and irrational thinking in behaviour, role of introspection. • Discussion on role of free will and determinism in explaining human behaviour. • Credit can be given for application of assumptions to relationship formation. Any other appropriate application.	
Marks	**AO2**
9-10	• Explanation and level of accuracy is thorough. • Exemplars used are well chosen. • Depth and range are displayed. • Effective use of appropriate terminology. • Logical structure.
6-8	• Explanation and level of accuracy is reasonable. • Appropriate exemplars are used. • Depth and range is displayed, but not in equal measure. • Good use of appropriate terminology. • Structure is mostly logical.
3-5	• Explanation and level of accuracy is basic. • Exemplars not always made relevant. • Depth or range. • Some use of appropriate terminology. • Structure is reasonable.
1-2	• Explanation and level of accuracy is superficial. • Exemplars identified but not made relevant. • Little use of appropriate terminology. • Answer lacks structure.
0	• Inappropriate answer given. • No response attempted.

© WJEC CBAC Ltd.

7. Describe the main components of either mindfulness **OR** quality of life therapy. [10]

<table>
<tr><td colspan="2">This question is focused on demonstrating knowledge and understanding of scientific ideas.</td></tr>
<tr><td colspan="2">Credit could be given for:</td></tr>
<tr><td>Mindfulness

• Control of own thoughts.
• Mindfulness Based Stress Reduction (MBSR).
• Role of meditation and mindful breathing.
• Mindfulness Based Cognitive Therapy (MBCT).
• Mindfulness practice as a daily way of life with no professional skills needed to practice it.
• Research to illustrate the main components of mindfulness
• Any other relevant component.</td><td>Quality of life therapy

• 16 areas of the Quality of Life Inventory.
• CASIO model.
• ‘Three Pillars’ of Quality of Life Therapy.
• Relation to CBT.
• Research to illustrate the main components of quality of life therapy.
• Any other relevant component.</td></tr>
</table>

Marks	AO1
9-10	• Description and level of accuracy is thorough. • Depth and range included. • Effective use of terminology. • Logical structure.
6-8	• Description and level of accuracy is reasonable. • Depth and range, but not in equal measure. • Good use of terminology. • Mostly logical structure.
3-5	• Description and level of accuracy is basic. • Depth or range. • Some use of appropriate terminology. • Reasonable structure.
1-2	• Description and level of accuracy is superficial. • Very little use of terminology. • Answer lacks structure.
0	• Inappropriate answer given. • No response attempted.

© WJEC CBAC Ltd.

8. Evaluate Watson and Rayner's (1920) research '*Conditioned emotional reactions'* in relation to social implications and ethical issues. [8]

This question is mainly focused on analysing, interpreting and evaluating scientific information, ideas and evidence in relation to making judgements and reaching conclusions.	
Credit **could** be given for: • Ethics of using vulnerable participants. • Psychological harm from inducing a phobia. • Informed consent from Little Albert's mother. • Benefits for therapy e.g. systematic desensitisation. • Cost/benefit analysis of using one participant to benefit many. • Any other appropriate ethical issue or social implication evaluated.	
Marks	**AO3**
7-8	• A thorough evaluation. • Clearly linked to the classic research. • Examples are well chosen to support the point made. • Arguments are well-developed and balanced throughout. • Structure is logical. • Depth and range.
5-6	• A reasonable evaluation. • Clearly linked to the classic research. • Examples are appropriate. • Arguments are developed. • Structure is mostly logical. • Depth and range but not in equal measure.
3-4	• Basic evaluation. • Examples are not always relevant. • Arguments are not developed. • Structure is reasonable. • Depth or range.
1-2	• Superficial evaluation. • There are no examples to support. • Answer lacks structure.
0	• Inappropriate answer given. • No response attempted

© WJEC CBAC Ltd.

9. Since 2015, in the United Kingdom, fathers can share parental leave with mothers. Discuss the debate of the mother as the primary caregiver of an infant. [24]

This question is focused on demonstrating knowledge and understanding of scientific ideas, processes, techniques and procedures.

This debate is linked to the psychodynamic approach. However, the materials used in the responses may be taken from any approach and perspective within psychology. Some reference could also be made to economic, social and political evidence (as long as it is explicitly linked to the psychological issue).

Credit **could** be given for:

- Research by Bowlby on attachment.
- Freud's theory of 'cupboard love'.
- Research exploring this debate e.g. Guardian Article on nursery care by Richard reeves (1999), New Statesman article on brain scans of fathers being hardwired to be positive caregivers (July 2014).
- Impact of shared maternity and paternity leave on the child, mother and father.
- Role of the wider family e.g. grandparents.
- Role of alternative care with reference to political and economic benefits and costs e.g. childminders and nursery providing care so that parents can contribute to the economy by going back to work.
- Research into the role of the father and mother in childcare.

Any other appropriate material.

Marks	AO1
10-12	• Description and level of accuracy is thorough. • Exemplars are well chosen. • There is depth and range to material included. • Effective use of terminology throughout. • The structure is logical.
7-9	• Description and level of accuracy is reasonable. • Exemplars are appropriate. • There is depth and range to material used, but not in equal measure. • Good use of terminology. • The structure is mostly logical.
4-6	• Description and level of accuracy is basic. • Exemplars may not always be appropriate. • There is depth or range only in material used. • There is some use of appropriate terminology. • There is a reasonable structure.
1-3	• Description and level of accuracy is superficial. • Exemplars not always made relevant. • Very little use of appropriate terminology. • Answer lacks structure.
0	• Inappropriate answer given. • No response attempted.

© WJEC CBAC Ltd.

This question is mainly focused on analysing, interpreting and evaluating scientific information, ideas and evidence in relation to making judgements and reaching conclusions and to develop and refine practical design and procedures.

Credit **could** be given for:

- Analysis of the influence of the evidence on political decisions e.g. mothers feeling inadequate for going back to work or not, fathers feeling isolated due to female driven clubs for caregivers.
- Improving reliability e.g. the way in which this debate is investigated; self-reports and observations.
- Cultural differences in childcare/view of the father's role as 'breadwinner'.
- Ethical implications of mother as the primary caregiver.
- Individual differences in childcare.
- NHS recommendations on breastfeeding.
- Biological theories for the mother being primary caregiver e.g. release of oxytocin during childbirth.
- Conclusion to the debate. Overall agreement or disagreement with the quote.

Any other appropriate discussion.

Marks	AO3
10-12	• A thorough discussion is made of both sides of the debate. • Evaluative comments are evidently relevant to the context. • Structure is logical throughout. • An appropriate conclusion is reached based on analysing and interpreting the evidence presented.
7-9	• A reasonable discussion is made of both sides of the debate. • Evaluative comments show some relevance to the context. • Structure is mostly logical. • A reasonable conclusion is reached based on analysing and interpreting the evidence presented.
4-6	• A basic discussion of both sides of the debate OR a reasonable discussion is made of only one side of the debate. • Evaluative comments are generic and not appropriately contextualised. • Structure is reasonable. • A basic conclusion is reached.
1-3	• A superficial discussion is made of the debate. • Evaluative comments are superficial. • Answer lacks structure. • No conclusion.
0	• Inappropriate answer given. • No response attempted.

© WJEC CBAC Ltd.