



Examiners' Report Lead Examiner Feedback

January 2021

Pearson BTEC Nationals
In Applied Psychology (21333L)
Unit 3: Health Psychology

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Introduction

The 2101 January series showed that centres and learners had clearly taken on board the feedback given from the 2001 series with a number of areas of the paper showing improvement, especially the extended open response questions. Overall learners appeared to have thorough knowledge across the three topic areas assessed, although some areas still need improvement in terms of structure of response. 3-mark evaluation questions, especially in terms of study evaluations, still need improvement although more learners were able to achieve the majority of marks than previous series.

For this unit learners were able to use psychological approaches, theories and studies and apply them to three different contexts taken from section B: namely, physiological addiction, behavioural addiction and stress. In this assessment the two addictions assessed were alcohol and gambling. Each section has a mix of short and extended open responses with one section heavier in terms of marks (30) which also included two 6-mark questions. Centres should note that this 30-mark section could be on any of the three areas noted above.

Responses at the pass level tended to show superficial knowledge of theories, approaches and studies. The pass level learner would be able to use their knowledge to answer direct knowledge questions successfully such as being able to explain what and irrational verbalisation is; they were also successfully able to pick an example out from the scenario to illustrate their understanding. Learners at the pass level found applying concepts to the scenario more of a challenge such as applying the term mastery experiences to the scenario in Section A. In terms of extended open responses, pass learners were able to show some knowledge of the model/theory/approach used within the question but showed little to no evaluative skills restricting them to level 1.

Responses that gained higher marks were able to apply accurate and thorough knowledge and understanding of approaches, theories and studies to the contexts, showing ability to critically evaluate across both short and extended responses. These learners were also able to make judgements about the appropriateness of approaches, theories and studies to the contexts given in the assessment, making judgements about their effectiveness. Level 3 answers also showed a balance between strength and weaknesses, and discussed alternative approaches and theories within their answers, often using evidence to strengthen their points.

More detail of the above can be found in the individual question section of the report.

Introduction to the Overall Performance of the Unit

All questions across the three assessed areas were attempted by the majority of the learners, with some success, showing that all content within the specification had been covered by centres; something that is challenging for any January series, but especially the current one.

There did not seem any major issues with timing with this assessment as the majority of learners completed all three essays, with the final essay being the strongest one in terms of performance on the paper. In terms of the extended open responses, the standard was higher than has been seen in previous series. Question 4 and 15 especially yielded some excellent answers, which achieved full marks. It was especially pleasing to see responses that showed both comprehensive knowledge of the topic areas at hand and balance in terms of assessment/evaluation. One other difference noted between the January 2020 series and the January 2021 series was the improved performance on study-based questions. Whereas in the previous series a number of learners either left the study questions blank, or gave very brief answers, the vast majority of learners showed knowledge of the study and we are able to answer the question with some success. This was especially true of the Bandura and Adams question which asked for the procedure of the study; here were some excellent answers for this question which showed both knowledge of the selection of participants and how systematic desensitisation worked.

As with previous series, the majority of learners showed effective exam technique by addressing the command verb in the question. For example, the command verbs **state or identify** only required a short answer and learners often completed these successfully. In terms of questions which were worth 1 mark, the biggest problem came with the '**state a difference**' question Q1(b) where some learners used answers such as 'Behavioural addiction is an addiction to an action' which of course is correct however they hadn't given the other side of the argument. It is important that learners know how to answer this type of question, and that they need both sides of the argument to achieve the marks.

There was an improvement in performance on 2 and 3-mark evaluation questions especially when questions were based upon studies. Knowledge of studies was consistent across the assessment with fewer gaps of knowledge

seen. The main issue in the January 2021 series centred around learners not writing enough to be able to achieve full marks. One example of this was Q12, which asked learners to give one strength of Lustman's study. Many learners were able to identify a strength of the study such as practical application to treatments and were able to link this back to the study/results of the study. However, many learners were unable to gain the third mark which would have been gained by explaining the consequence of that strength which many omitted. The 2-mark evaluation of studies questions were in the main answered well. The 3-mark **describe** question about the procedure of Bandura and Adams (1977) study was answered well. In addition, the 3-mark **explain** question on the General Adaptation Syndrome (GAS) was answered very well with learners showing excellent knowledge about the exhaustion stage with many providing responses which could have obtained more than 3 marks. The 2-mark question which did not perform well is the **explain** question about the freeze response with many learners not explaining that it is cognitive paralysis but rather concentrating on the body not being able to move which is incorrect.

The command verbs in extended open responses are still proving slightly more challenging. There was substantially more level 3 in this series, however, and some exceptional answers on Q15 which asked learners to assess causes of stress. Evaluate questions are still more successfully completed than assess questions overall although the differential is getting much smaller. Once again, it may be worth teachers ensuring that learners have a thorough understanding of the requirements of command verbs for future series.

In terms of study-based questions, namely Lustman, Bandura and Adams, Volpp and Griffiths in this assessment, there was an improvement in standard across learners. There were some gaps of knowledge shown, especially in terms of **evaluation**, however consistency in performance across the whole assessment was much higher. It is imperative that evaluation should be taught for all named studies on the specification as any of these studies can be assessed in future series. The 3-mark describe procedure question performed much better in this series than previous series, which was pleasing to see, and it seemed as though the comments on the examiner's report from the January 2020 series have been taken on board by centres which was reflected in learner's performance. Q5(c) asking learners to evaluate Griffith's study caused some issues, mainly because learners were asked not to use ethics in their answers. Unfortunately, many learners still used ethics as their response and consequently ended up with zero marks. It is imperative that all learners are reminded to read the

question properly in order not to lose marks unnecessarily. The performance on questions which asked learners to apply a study to a particular scenario still caused some issues with some learners struggling to make the links. This is an area which may need to be focused on for future series.

In terms of extended open responses, many learners achieved level 3 in any one essay, with a minority achieving level 3 across all three essays. Consistent with the January 2020 series a large number of learners did achieve at least a mid-level 2 with many showing excellent knowledge of the topic in hand and were able to select information from the scenario to support their knowledge. The weakest element once again was the evaluation/assessment although more learners were successful at this element than in previous series; with some learners balancing their evaluation/assessment and coming to an informed conclusion which allowed them to access the higher mark bands. The extended response question which performed consistently highest was Q15 about the causes of stress. This was a broader question which not only allowed learners to use the scenario to assess causes such as life events, daily hassles and workplace stress, but also show their knowledge from the specification as a whole meaning that it was unsurprising that this was the strongest extended open response. The weakest essay was Q8 which asked learners to assess rational non-adherence as a reason for Jason not attending CBT. Learners showed a weak understanding of the term and therefore struggled to achieve the higher levels. It is imperative that learners have knowledge of all the concepts named within the specification as any of these could be assessed in future series.

Finally, the one question which performed poorly on the assessment was Q2 which the 4 mark explain question asking learners to explain how mastery experiences and social persuasion could be used to predict whether Glenda would stop drinking. Although mastery experiences caused less of a problem, the majority of learners really struggled to explain social persuasion with learners just talking about persuasion of others rather than social persuasion. Some learners did show knowledge of both concepts but still struggled to obtain full marks giving vague responses which only obtained half marks.

As suggested previously, it is imperative that all concepts named in the specification are taught in enough depth that these types of questions can be attempted successfully.

Individual Questions

Question 1a

This question asked learners to identify the type of addiction in the scenario; behavioural or physiological.

This response gained 0 marks.

1 Two types of addiction are behavioural addiction and physiological addiction.

(a) Identify whether Glenda's addiction is behavioural or physiological.

Glenda's addiction is behavioural

This response gained 1 mark.

Correct identification of physiological addiction

1 Two types of addiction are behavioural addiction and physiological addiction.

(a) Identify whether Glenda's addiction is behavioural or physiological.

(1)

But Physiological

Question 1b

The 1-mark question asked learners to state one difference between a physiological and a behavioural addiction and comprised of 1 AO1 mark. Most learners were able to state one difference with most suggesting that a physiological addiction was an addiction to a substance whereas behavioural addiction was an addiction to an action/behaviour. Some learners, however, only looked at one side of the argument and described what a physiological addiction is without showing how it is different to a behavioural addiction or vice-versa.

This answer gets 0 marks.

This just states what a physiological addiction is and does not tell us a difference.

(b) State **one** difference between a behavioural and a physiological addiction.

(1)

A physiological addiction is when the person is addicted to a substance eg. alcohol

This answer gets 1 mark.

This is a valid difference and actually very close to the mark scheme answer.

(b) State **one** difference between a behavioural and a physiological addiction.

(1)

Behavioural is a addiction to a behaviour whereas physiological is a addiction to something like a substance like drugs or alcohol.

Question 2

This 4-mark explain question asked learners to explain how two concepts (mastery experiences and social persuasion) could predict whether Glenda would continue to drink answer. This question comprised of 4AO2 marks asking learners to show understanding of each concept, related to the scenario, and then use information from the scenario of this concept to explain whether Glenda would give up drinking. This question caused problems for learners, especially in relation to social persuasion. Most learners understand that mastery experiences were whether you had been able to successfully perform a behaviour in the past and would link this to Glenda's past behaviour and would then suggest how this could predict Glenda's future behaviour however this did not happen frequently with social persuasion where a lack of understanding was shown. Most learners just used the word persuasion and took it to mean that 'her friends persuaded her to drink' which is not the case. Better answers would link social persuasion to whether other people believed she could give up, and then successfully predicted Glenda's future behaviour although these were few and far between.

This response gets 0 marks.

This shows no understanding of either concept. Unfortunately, there were a number of these type of responses. It is important that learners are taught the concepts related to the models, which are named on the specification, in enough detail to answer this type of question.

- 2 Self-efficacy is a theory that tries to predict health behaviours by looking at an individual's belief in their own ability to succeed.

Explain how the following **two** concepts from self-efficacy theory could predict whether Glenda will continue to drink alcohol.

- 1 Mastery experiences

She drinks to suppress the stress at home ^{de} but she enjoys the feeling of being ~~relax~~ relaxed.

- 2 Social persuasion

she has had the 2 biggest ~~role~~ role models in her life drinking & she goes ~~drinking~~ drinking with them.

This response gets 3 marks.

Mastery experiences only has that her previous experiences will affect her belief of how she will be able to do it again which shows the learners understanding of the concept but not how it will affect her future behaviour. We needed the idea as she has given up before therefore, she is more likely to stop drinking again in the future for the second mark. The answer about social persuasion is good. It has the idea of other people (friends) telling her she won't be able to give up 'because she likes it too much'. This shows understanding that its other people's belief in you which will affect behaviour so 1 mark; and then it gives the consequences of this i.e. that Glenda will not stop drinking as she will doubt her ability to stop (self-efficacy). Good answer as a whole however the first part did not go on to explain the consequence of her giving up before on her future behaviour.

- 2 Self-efficacy is a theory that tries to predict health behaviours by looking at an individual's belief in their own ability to succeed.

Explain how the following **two** concepts from self-efficacy theory could predict whether Glenda will continue to drink alcohol.

- 1 Mastery experiences

Her ~~g~~ experiences with how she's previously dealt with giving up and addiction will affect her belief of how well she will be able to do it again.

- 2 Social persuasion

Glenda's friends persuade her not to ~~don~~ stop drinking by saying ~~she~~ ^{she} won't be able to because she likes it too much. This will ^{lower her self esteem and} influence Glenda ^{to} not stop drinking as she ~~do~~ will doubt her ability to stop.

(Total for Question 2 = 4 marks)

This response gets 4 marks.

The response shows understanding of both concepts and links them well to the scenario. Both answers nicely explain the consequences related to each concept, for example suggesting that due to her not being able to stop drinking permanently, she is not strong enough (linked to self-efficacy) and is less likely to give up. The answer for social persuasion is particularly nice linking to the idea of self-confidence due to her family telling her she can give up (so is more likely to). The answer also gives the reverse argument about her friends, but this is not necessary for full marks.

2 Self-efficacy is a theory that tries to predict health behaviours by looking at an individual's belief in their own ability to succeed.

Explain how the following **two** concepts from self-efficacy theory could predict whether Glenda will continue to drink alcohol.

impress
people or
not feel
left
out.

1 Mastery experiences

From Glenda's experiences, she has given up drinking twice, but only for a period of time. This will make it less likely that

Glenda quits drinking as she has tried twice but has not managed to keep it up, making her feel like she's not strong enough to do so, and therefore is less likely to give up drinking.

Glenda's friends and family are very supportive of her and tell her she can give up ~~smo~~ drinking, this gives her more of a confidence boost and therefore she is likely to give up drinking. However, her friends tell her to carry on drinking, this lowers her confidence.

(Total for Question 2 = 4 marks)

Question 3a

This 3-mark question asked learners to describe the procedure of Bandura and Adams (1977) study. This question comprised of 3 AO1 marks. Most learners performed well on this question and were able to provide some correct information about the study to at least get some marks. Many learners were able to give detailed descriptions of the study and were able to achieve all three marks. Learners could give information about how the sample was obtained, or the process used within the study i.e. systematic desensitisation. The most common answers tended to describe the process of systematic desensitisation, and these were more likely to achieve full marks than those who described the process of obtaining a sample, though there were some lovely responses for this as well. Errors on this question tended to be the vagueness of responses which showed very little understanding of the study itself, or responses which described the wrong study.

This response gets 0 marks.

No relevant points from the study.

3 Bandura and Adams (1977) analysed self-efficacy theory by studying individuals with a snake phobia.

(a) Describe the procedure of Bandura and Adams (1977) study.

(3)

The study was used on people who didn't have a phobia of snakes. The snakes were associated with something negative therefore causing a phobia to form.

This response gets 3 marks.

This is a good answer which related to how the sample was obtained for the study.

1 mark - for the fact that participants were put into a room with a snake to see how they react.

1 mark - for the use of a self-efficacy scale to place them into high or low self-efficacy groups.

1 mark - for the idea if participants were able to hold the snake easily, they were removed from the study.

3 Bandura and Adams (1977) analysed self-efficacy theory by studying individuals with a snake phobia.

(a) Describe the procedure of Bandura and Adams (1977) study.

(3)

Bandura put participants with a snake fear into a room with snakes allowing Bandura to see how they react. If the participant was able to hold it easily they were removed from the study. Bandura had a scale and depending on how they acted or well they performed they were put on his self efficacy scale this determined their self efficacy to be high or low. These would be from stepping closer to the snake or leaving the room.

This response gets 3 marks.

This is a nice concise response with enough detail to get full marks.

1 mark – for identifying that they used systematic desensitisation to help treat snake phobia.

1 mark – for the idea that they used a hierarchy of fear.

1 mark – for the detail of how they did this.

They also have the added detail that the participant was in control of their hierarchy but has already achieved maximum marks.

3 Bandura and Adams (1977) analysed self-efficacy theory by studying individuals with a snake phobia.

(a) Describe the procedure of Bandura and Adams (1977) study.

(3)

Bandura and Adams used systematic desensitisation to try and treat or cure snake phobias. They exposed participants to a hierarchy of fear (firstly looking at pictures of snakes, then seeing one in person, then holding one, etc.) The participants were in control of their own hierarchy/exposure.

Question 3b

This 2-mark question asked learners to explain one weakness of Bandura and Adams (1977) study. This question comprised of 2AO3 marks. Learners therefore had to identify a weakness, and then provide some justification of why it is a weakness for a total of two marks. This question was answered well with most learners able to access at least one mark for the identification of the weakness. The most common answers were about the use of self-reports, and the idea that it had ethical issues although some stronger learners also talked about the idea it was on a snake phobia therefore couldn't be applied to other types of phobias which was pleasing to see. The most common error which prevented learners from achieving 2 marks was that they did not identify a specific ethical issue such as harm to the participants therefore were only able to access one mark. Other errors included using generic terms i.e., "use of self-reports" which on its own is not enough for a mark.

This response gets 1 mark.

This gets 1 mark for the identification of an appropriate ethical issue. No mark for the expansion as it is not clear what study they are referring to therefore it is generic.

(b) Explain **one** weakness of Bandura and Adams (1977) study.

(2)

It was unethical as participants were
not being protected by harm. they were
put through an anxious ~~and stress~~ position
they did not look after the psychological health.

(Total for Question 3 = 5 marks)

This response gets 2 marks.

This is a nice response and one which was commonly seen throughout the series. This got 1 mark for the identification of an ethical issue (psychological harm) and 1 mark for the expansion linked to the study i.e. that they were shown pictures of snakes (which could have caused harm)

(b) Explain **one** weakness of Bandura and Adams (1977) study.

(2)

One weakness of this study is that it is unethical, participants with snake phobias were shown pictures of snakes which may have caused psychological harm.

(Total for Question 3 = 5 marks)

This response gets 2 marks.

1 mark for the idea that they only used participants with a snake phobia and a further mark for the idea that this means they cannot generalise the results to explain other phobias.

(b) Explain **one** weakness of Bandura and Adams (1977) study.

(2)

One weakness is that as they used ~~the study~~ only people with a snake phobia instead of multiple different phobias the data collected may not be able to be generalised for explanations for other phobias.

(Total for Question 3 = 5 marks)

Question 4

This 9-mark extended open response question required learners to evaluate approaches which may help Glenda's alcohol addiction; there was a requirement to evaluate at least two approaches. As is constant on these questions there are 3 AO1, 3 AO2 and 3 AO3 marks on offer. With an evaluate question learners are required to look at the strengths and weaknesses of the approaches leading to a fully supported conclusion. This extended open response question provided the full range of marks across the levels, with nearly all learners showing good knowledge of the approaches and being able to apply it to context well. The weaker element of the question was the AO3 element although many learners were able to provide some strengths and weaknesses which enabled them to get into at least mid-level 2. Learners were able to achieve mid-level 2 without evaluation although learners would have to show level 3 knowledge and application for this to be the case, which did not happen often. The most common approaches used were the cognitive and learning approaches, with the learning approach often being the stronger of the two. Some learners attempted to use the biological approach, but this was often limited to the idea of the addiction being passed down in the genes from parents and therefore didn't achieve more than level 1 for knowledge.

This response gets level 1 and 1 mark.

Very basic implicit knowledge about her associating drinking with being cool with this being linked to the scenario. Very little else within this answer and no evaluation.

4 Psychologists use a number of different approaches to help understand the initiation, maintenance and relapse of an individual's addiction.

Evaluate approaches that may help psychologists understand Glenda's addiction to alcohol.

You must refer to at least **two** different approaches in your answer.

When Glenda has decided to give up drinking she has to have an initiation, a reason why she wants to give up, this may be because she wants to give up for her children or for her health. Whatever this reason may be it will motivate her to carry on. An initiation may also be a reason as to why she started drinking in the first place which was because she thought it was 'cool'. Relapse is where someone stops a behaviour but then goes back to it. In Glenda's case she has had two relapses, the first was when she fell pregnant with her first child and 2 years after. The second was when she fell pregnant with her ~~first~~^{second} child. Then she started to drink again. This information may help psychologist to understand why she has relapsed and can decide what will be best to help her stop again. This may be by using her children as she stopped for them both.

This response gets level 2 and 4 marks.

This learner showed some accurate knowledge of the two approaches used (learning and biological) with some links to the scenario. However, the main focus here is on the learning approach with just a mention of the biological approach as an evaluation point. Therefore, although two approaches have been mentioned they are very unbalanced in terms of depth. There is little to no evaluation in the response. Therefore, knowledge and understanding and the application to the scenario are level 2 but at the bottom end with evaluation level 1. Looking holistically the response is bottom band 2 so 4 marks.

4 Psychologists use a number of different approaches to help understand the initiation, maintenance and relapse of an individual's addiction.

Evaluate approaches that may help psychologists understand Glenda's addiction to alcohol.

You must refer to at least **two** different approaches in your answer.

learning
Biological
Positive reinforcement
negative Reinforcement

The learning approach & could be used to explain her behaviour. through For example vicarious Reinforcement through her friends by her friends drinking and finding it 'cool' she wanted to be 'cool' too, also seeing her friends feeling good she wanted that feeling too. Positive Reinforcement, getting that good feeling from drinking. so drinking more to get that good feeling. Furthermore, Negative Reinforcement, getting rid of that anxious feeling she gets when not drinking. This is a great way of explaining as it covers how she has learnt that ~~is~~ behaviour and how she's learnt it from others. However, this doesn't explain biological Approaches to Glenda's alcohol

addiction. For example, the physical side effects she gets ~~which~~ while ^{not} drinking ~~is~~ like nausea and headaches which could ~~indicate~~ indicate her body is dependent to alcohol. ~~That~~ Furthermore, her parent could also drink so she might be biologically pre-dispositioned to having an alcohol addiction. In conclusion, I believe the learning approach is a great way of explaining ⁱⁿ how Glenda learnt her ~~behaviour~~ ^{addiction} however doesn't take into account biological factors that could be contributing to her addiction.

(Total for Question 4 = 9 marks)

This response gets level 3 and 7 marks.

The knowledge and understanding on this response of both the cognitive and learning approach to alcohol is accurate and thorough with lots of different elements well explained. There are some links to the scenario although they are not sustained throughout. The evaluation is one of the better responses seen with links to successful treatments increasing reliability (although slightly repetitive in both approaches), as well as issues with not looking at biology discussed. The knowledge and understanding is solid mid-level 3, with evaluation borderline top level 2/bottom level 3. The application to the scenario is the weakest element of the essay and is top level 2. Overall a bottom level 3 answer and 7 marks.

- 4 Psychologists use a number of different approaches to help understand the initiation, maintenance and relapse of an individual's addiction.

Evaluate approaches that may help psychologists understand Glenda's addiction to alcohol.

You must refer to at least **two** different approaches in your answer.

The cognitive approach can help psychologists understand why Glenda become addicted to alcohol. For instance, Glenda may have initiated into the behaviour because of self-medicating affects. For example, Glenda says drinking alcohol relieves her stress. // The self-medication model is a strength ~~This is~~ to helping psychologists understand Glenda's addiction in alcohol because it explain how individual drink ~~to~~ as a coping mechanism to help underlying problems that they have. This can help psychologist understand in greater detail detail why people drink. This is a strength because interventions can be put in place to target their underlying problem by helping ~~for~~ people like ~~for~~ Glenda develop better coping strategies. This increase the reliability of the self-medication model. However, a weakness of the self-medication model is that it doesn't take on board biological factors that could cause an addiction. For example, a genetic predisposition. This ~~is~~ ~~in~~ therefore doesn't provide a full explanation which reduces the validity of the model. //

The cognitive approach itself has a strength to helping ~~and~~ Psychologist understanding alcohol addiction because it has a practical application because it is useful in helping different therapists understand that irrational thoughts are the main cause to an addiction. For example, Glenda believes drinking helps with her anxiety. Therefore, ~~the~~ Psychologists can make sure these irrational thoughts are replaced with rational one to help support people like Glenda to stop drinking ^{through CBT therapy}. However, a weakness would be that the cognitive approach, also doesn't account for other factors such as genetic and neurochemistry. This therefore ~~also~~ reduces the validity of the whole approach. // The learning approach also helped Psychologist understand Glenda's addiction. For instance, due to classical and operant conditioning. Therefore, one strength of the learning approach is that we find psychologists understand why Glenda associates drinking

(Total for Question 4 = 9 marks)

in a positive way. (classical conditioning) For example Glenda associates drinking with having fun with her friends. This therefore help psychologist understand what initiates and maintains alcohol addiction. This means intervention can be put in place to change these associations. For example, using aversion therapy. This therefore, increase the reliability of the learning approach. However, one weakness would be that therapies such as aversion therapy ~~or~~ linked with the learning approach are deemed as unethical and put people ~~under~~ under distress. ~~Therefore, the~~ Another weakness would be that it doesn't take on board cognitive factors such as irrational thoughts that may cause addiction. Meaning the explanation isn't complete.

TOTAL FOR SECTION A = 20 MARKS

Question 5a

This was a 1-mark question asking learners to state what is meant by an irrational thought. This comprised of 1 AO1 mark. This question looked for answers which showed an understanding that an irrational thought is a thought that is not logical/is unlikely to be true/is not reasonable. The majority of learners were able to access this mark although some made the mistake of just suggesting an irrational thought is a thought which is not rational which wasn't creditworthy as it showed no understanding of the concept.

This response gets 0 marks.

This is not an irrational thought (more like an impulsive one).

- 5 Griffiths (1994) study used gamblers and non-gamblers to look at the cognitive processes involved in gambling. One of his findings was that verbalisation of irrational thoughts were more common in gamblers than non-gamblers.

(a) State what is meant by an irrational thought.

(1)

Irrational thoughts refers to doing something quickly without thinking of the consequences.

This response gets 1 mark.

This is perfectly good explanation.

- 5 Griffiths (1994) study used gamblers and non-gamblers to look at the cognitive processes involved in gambling. One of his findings was that verbalisation of irrational thoughts were more common in gamblers than non-gamblers.

(a) State what is meant by an irrational thought.

(1)

A thought which has no basis in fact or logic. ~~but still~~

Question 5b

This was a 1-mark question asking learners to identify one example of an irrational thought from the scenario. This comprised of 1 AO2 mark. Virtually all learners were able to access the mark for this question with the only errors coming where the learner had misunderstood the concept of an irrational thought in Q5(a). These were very few and far between, however.

This response gets 0 marks.

This is not an example of an irrational thought.

(b) Identify **one** example of an irrational thought from the scenario.

(1)

Refusing to attend therapy claiming
he didn't understand what was
going on in the session.

This response gets 1 mark.

Correct response.

(b) Identify **one** example of an irrational thought from the scenario.

(1)

When Jason used to say "I wouldn't
win because those teams hate me"

Question 5c

This was a 2-mark question asking learners to explain one weakness of Griffiths study which was not an ethical issue. Learners therefore had to identify a weakness, and then provide some justification of why it is a weakness for a total of 2 marks. This question was answered well by many learners with sampling issues i.e. only being from the UK being a popular answer. The other most common answer was the issue of snowball sampling with many learners able to explain that this meant personality characteristics would be similar. The most common error in this question was that learners used ethical issues as their weakness and therefore achieved zero marks. It is important for centres to reiterate again to learners that they need to read the question properly.

This response gets 0 marks.

This response talks about ethical issues which is not creditworthy.

The ethics of Griffiths (1994) study have been criticised.

(c) Explain **one** weakness of Griffiths (1994) study on gambling, other than ethical issues. (2)

He gave non gamblers money giving them
more chances to win than the gamblers.
this could have made non-gamblers addicted.

This response gets 1 mark.

Nothing for the top part as actually they were not in a lab environment. Just about 1 mark for the idea that they may have held back from verbalising their irrational thoughts affecting the extent of them. For the second mark we would have needed to see something about how this may have affected the validity of the study.

The ethics of Griffiths (1994) study have been criticised.

(c) Explain **one** weakness of Griffiths (1994) study on gambling, other than ethical issues.

(2)

The participants were not in a regular gambling environment during the procedure. They were in a controlled lab experiment. The gamblers may have held back their verbalisation of irrational thoughts which couldve affected the extent to which they had irrational thoughts.

(Total for Question 5 = 4 marks)

This answer gets 2 marks

1 mark for the weakness being the type of sampling that they used (snowball sampling) which makes it less generalisable (to the wider population) and the second mark for the idea that this may mean that they will be like each other and act in similar ways.

The ethics of Griffiths (1994) study have been criticised.

(c) Explain **one** weakness of Griffiths (1994) study on gambling, other than ethical issues.

(2)

One weakness is Griffiths used snowball sampling. This means that gamblers who are friends may be participating, as well as this these people may have the same mannerisms and thoughts. ^{as they often play together} This makes the results less generalisable as most participants likely knew each other and acted in similar ways.

(Total for Question 5 = 4 marks)

Question 6

This was a 3-mark question asking learners to explain how a gambling awareness campaign could use concepts from the Elaboration Likelihood model. This comprised of 3 AO2 marks therefore a link to the scenario was necessary within the answer to gain full marks (max 2 marks for generic response). For this question learners needed identify a concept from the Elaboration Likelihood model such as the different routes of persuasion and indeed could be credited with a mark if they identified one/both routes. They then would have to elaborate on this and say how they would use this route in the awareness campaign; and then would have to say why/how using this particular route would help persuade Jason stop gambling. It is in this how part of the response where the link to Jason would come in; usually by suggesting that he loved football therefore they could use a footballer to front the campaign (linked to the peripheral route). Getting full marks was an issue here, either due to generic responses or due to lack of a 'why' in the answer. Many learners got marks for identifying the routes, and then suggesting a way of implementing that route, but not why this would be effective in persuading Jason to stop gambling. Other common errors were talking about a completely different model of persuasion altogether (fear arousal common here).

This response gets 0 marks.

Absolutely nothing linked to the Elaboration Likelihood Model at all so 0 marks.

- 6 The elaboration-likelihood model would suggest that there are a number of factors that will affect how likely a change of behaviour is.

Explain how a gambling awareness campaign could use concepts from the elaboration-likelihood model to help persuade Jason to stop gambling.

Gambling awareness Campaigns would help Jason with his addiction as it could give him an understanding into his thoughts and feelings on gambling whilst also helping relationships of those around him such as his girlfriend. When reinforcements Jason would overcome his addiction, whether that be financial incentives or praise and encouragement.

This response gets 2 marks.

This get 1 mark for the identification of the central/peripheral route and 1 mark for the idea that using a footballer to discuss the dangers would be a successful way to persuade Jason. This response does not say which route that using a footballer would come under/or why it may be more effective (such as suggesting that the person who gave the message was more important than the message itself) so no third mark.

- 6 The elaboration-likelihood model would suggest that there are a number of factors that will affect how likely a change of behaviour is.

Explain how a gambling awareness campaign could use concepts from the elaboration-likelihood model to help persuade Jason to stop gambling.

The elaboration-likelihood model identifies two factors (central route and peripheral route) that ^{are} likely to influence Jason to stop gambling. Awareness campaigns can combine these two factors and influence persuade Jason. Perhaps having a footballer discuss the dangers of gambling and how to overcome it would be a successful way to persuade Jason because from the scenario it seems that he has a love for the sport.

(Total for Question 6 = 3 marks)

This response gets 3 marks

This response covers all bases really. It identifies the two route types and explains what that means. It then goes on to suggest how you would use either route in order to target Jason but then vitally goes on to suggest that the peripheral route (the celebrity) would be better for Jason as he misunderstands factual information (taken from the idea in the scenario that he didn't understand what was going on). A really good response showing excellent knowledge.

- 6 The elaboration-likelihood model would suggest that there are a number of factors that will affect how likely a change of behaviour is.

Explain how a gambling awareness campaign could use concepts from the elaboration-likelihood model to help persuade Jason to stop gambling.

The elaboration likelihood model involves ~~how~~
~~a central~~ how a message is delivered through
two routes central (content of the message)
and peripheral (~~how~~ who the message is delivered
by.) The campaign could use an emotional
and powerful message (central) as well as being
delivered by a celebrity (peripheral) this would
target Jason as he misunderstands factual
information and is more likely
(Total for Question 6 = 3 marks)
to be influenced by a well delivered, personal
message.

Question 7a

This 2-mark question asked learners to explain how Volpp's (2009) study could be used to encourage Jason not to gamble. This comprised of 2 AO2 marks which means there needs to be at least one link to Jason to access the marks. For this question's learners needed to identify something relevant from Volpp's study and then explain how this could be used to encourage Jason not to gamble. Many learners correctly identified that Volpp (2009) found that the use of financial incentives when an individual has stopped smoking for a period of time mean they were more likely to continue to abstain from smoking, and then correctly explained that if Jason was giving money after not gambling for a specific period of time then he would be more likely to not gamble. Common errors in this question were only talking about the procedure of the study, which is not relevant, or just talking about giving financial incentives to Jason without identifying anything from Volpp's study, which would only be 1 mark.

This response gets 0 marks.

This is not Volpp's study so no creditworthy material.

7 Jason has not gambled for a month. Volpp et al (2009) studied the use of incentives to improve adherence to medical advice.

(a) Explain how Volpp et al's (2009) study could be used to encourage Jason not to gamble again.

(2)

If Jason is allowed to ask questions then he has a better chance of remembering the information, leading to him ~~actually~~ actually using the advice to stop.

This response gets 1 mark.

This can get 1 mark for the use of financial incentives to reward Jason after not gambling for a period of time and not gambling again. However, there is no link to any aspect of Volpp's study so only 1 mark.

7 Jason has not gambled for a month. Volpp et al (2009) studied the use of incentives to improve adherence to medical advice.

(a) Explain how Volpp et al's (2009) study could be used to encourage Jason not to gamble again.

(2)

There could be a use of financial incentives so Jason will be rewarded after adhering for so long and not gambling again.

This response gets 2 marks.

1 mark for the link to the results of Volpp's study and a further mark for applying this to Jason i.e. a financial reward every month he doesn't gamble, which means he will be more motivated not to gamble again.

7 Jason has not gambled for a month. Volpp et al (2009) studied the use of incentives to improve adherence to medical advice.

(a) Explain how Volpp et al's (2009) study could be used to encourage Jason not to gamble again.

(2)

Volpp et al found that if financial incentives were given a person is more likely to give up the behaviour. If Jason was given a financial incentive every time he ~~passed a month~~ went another month of not gambling he would be more motivated to not gamble again.

Question 7b

This 2-mark question asked learners to explain one weakness of using Volpp's study to encourage Jason not to gamble. This question comprised of 1 AO2 and 1 AO3 mark which means that 1 mark is gained from identifying an appropriate weakness and 1 mark for a linked elaboration justifying the weakness given. This question was answered well with the problem of not getting to the root cause of Jason's reasons for gambling being the most common answer, alongside the possible issue of giving financial incentives meaning that Jason may actually start gambling again in the future in order to gain more money (from stopping again). There were some really nice responses which discussed the idea that giving Jason a financial incentive may actually increase his gambling habit as money could be a cue for his gambling and that because it isn't his money, he would be more likely to gamble with it, therefore an ethical issue of possible harm. Common errors were giving weaknesses for the wrong study, although these were few and far between, and not giving enough justification for the second mark.

This response gets 0 marks.

Nothing to do with Volpp's study so 0 marks.

(b) Explain **one** weakness of using Volpp et al's (2009) study to encourage Jason to stop gambling.

(2)

Some people dont listen to doctors advice because they feel they know themselves better than a doctor.

This response gets 1 mark.

This gets 1 mark for the idea that Jason will start gambling once the incentives stop however for the second mark, we would want to see the idea that this is, therefore, not a long-term solution or that its doesn't get to the root cause of the addiction (therefore once incentives start Jason will gamble again).

(b) Explain **one** weakness of using Volpp et al's (2009) study to encourage Jason to stop gambling.

(2)

once the incentives end or begin taking less effect, Jason will likely return to gambling.

This response gets two marks.

This is fine for 2 marks.

1 mark for the that giving incentives isn't a long term solution and a second mark for explaining that as soon as the financial incentives stop then Jason may start gambling again.

(b) Explain **one** weakness of using Volpp et al's (2009) study to encourage Jason to stop gambling.

(2)

Financial incentives isn't a long term way to improve adherence to medical advice. Also, it isn't realistic as, as soon as the incentive stops Jason will return to gambling.

Question 8

This extended open response 9-mark question asked learners to assess rational non-adherence as a reason why Jason does not want to continue attending CBT. This was the weakest of the three 9-mark questions on the assessment with many learners struggling to explain what was meant by rational non-adherence, with many just taking the word 'rational' and just telling a story from the scenario rather than using technical terms; these responses tended to remain in level 1. Better level 2 answers would use terms such as cost-benefit analysis, patient practitioner relationships, financial barriers but would provide little to no assessment. A minority of learners showed accurate and thorough knowledge of rational non-adherence, linked well to scenario and provided a balanced assessment including alternative reasons why Jason did not want to go to CBT and the idea that not all decisions people make are rational, with judgements made. These responses gained level 3 marks.

This response gets level 1 and 2 marks.

Some brief knowledge points about financial problems linked to Jason but not much else therefore level 1 and 2 marks.

This response gets level 2 and 4 marks.

- 8 Individuals sometimes refuse to follow a treatment plan suggested by their doctor. They often feel that their reasons for not adhering to treatment are justified.

Assess rational non-adherence as a reason why Jason does not want to continue attending cognitive behavioural therapy (CBT).

Jason doesn't want to attend CBT sessions anymore because of how much time he has missed of work. This wouldn't benefit anyone because how is Jason going to be able to pay for the sessions if he's not working? Jason doesn't have much money so missing work wouldn't be ideal for him. This shows ^{rational} non-adherence because he's acting out of what he feels. Jason also drives to his CBT sessions; Jason's CBT sessions are a long drive for him which means it's expensive.

This response shows some knowledge of rational non-adherence with factors such as financial barriers, relationship with doctor explained superficially; therefore, this was level 2 for knowledge. There are some links to the scenario although they are fairly superficial. There is one judgement/conclusion at the end of the essay which would be borderline top level 1/bottom level 2.

Overall, this is a bottom level 2 answer so 4 marks.

8 Individuals sometimes refuse to follow a treatment plan suggested by their doctor. They often feel that their reasons for not adhering to treatment are justified.

Assess rational non-adherence as a reason why Jason does not want to continue attending cognitive behavioural therapy (CBT).

Jason stated that he did not want to attend sessions for a number of reasons, one being a financial barrier as he was traveling a long way for the therapy, costing him money when he reportedly 'doesn't have much money'.

From the start when Jason was referred to use CBT treatment he left confused, this is when the non-adherence starts as the participant had no understanding of what was going on and didn't understand what the doctor was telling him. This is why he concluded at the end that CBT wouldn't work as he didn't understand the process from the off.

To conclude I believe the main reason as to why Jason did not want to continue, was because he was not understanding the process which could be because of his relationship with his doctor, however this will have caused him to be unmotivated and not want to carry on with the treatment anymore.

This response gets level 3 and 8 marks.

This response shows accurate and thorough knowledge and understanding of rational non-adherence. There is a definition at the start of the essay, and knowledge shown about such factors as understanding/problems with communication/financial barriers with clear links to the scenario throughout; both of which a solid level 3 answers. The assessment on this response is one of the better ones, with the idea that there is an assumption that everyone is rational, a brief use of research and a judgement at the end of the relevant importance of the different factors, which is bottom level 3. Overall, this is definitely a level 3 answer, but the weaker assessment element stops it from getting full marks therefore stops at 8.

8 Individuals sometimes refuse to follow a treatment plan suggested by their doctor. They often feel that their reasons for not adhering to treatment are justified.

Assess rational non-adherence as a reason why Jason does not want to continue attending cognitive behavioural therapy (CBT).

Rational non-adherence is the concept that Jason chooses, based on specific reasoning, to not adhere to CBT (his treatment). One of these reasons is lack of understanding, Jason not only came out of the surgery confused, but the doctor did not allow him to ask any questions, Jason's confusion has lead him to not adhere to treatment because he is not ~~satisfied~~ satisfied with the information he knows. Ley's cognitive model explain this really well; Jason has a lack of understanding and also a lack of memory as the doctor did not allow him to ask questions so he has forgotten this information. However, what Ley's cognitive model does not assess is Jason's financial barriers. He finds it expensive to travel to his treatment and because it is a long way, he may be taking time off work to go, hence why financial barriers are an issue to Jason and his ~~adherence~~ treatment. A one strength of rational non-adherence is financial barriers, one research study found that older people in Spain did not adhere to medication ~~as~~ if it was expensive, compared to those who had cheap medication, supporting the idea that Jason does not adhere as he is spending a lot to get to the CBT session. However one weakness of rational non-adherence is that it assumes everyone makes rational decisions based on their health behaviour.

however in everyday life this is not the case especially when people are stressed, if Jason has other things on his mind, even gambling itself, then he does not rationally non-adhere, he just is too busy to think of treatment. He

Overall ~~is~~ rational-non adherence certainly explains Jason's non-adherence to CBT, in all aspects, such as lack of understanding, patient-practitioner relationship and ~~is~~ financial barriers. All three combine to make Jason rationally not adhere to CBT as a treatment for his addiction.

(Total for Question 8 = 9 marks)

Question 9

This 1-mark question asked learners to state what is meant by the biopsychosocial model of health. This comprised of 1 AO1 mark. Learners found this question harder than the previous state questions although the majority did talk about the biological, psychological and social factors in health. The most common error was not identifying all three elements, or just talking about the model being a holistic model without expanding on the elements within it.

This response got 0 marks.

- There are a number of different models of health, including the biomedical model and the biopsychosocial model.

State what is meant by the 'biopsychosocial model' of health.

~~This is the model of social health~~
The biological model of health.

This response got 1 mark.

- 9 There are a number of different models of health, including the biomedical model and the biopsychosocial model.

State what is meant by the 'biopsychosocial model' of health.

The biopsychosocial model looks at biological, psychological and social factors and how they can have an effect on a persons health.

(Total for Question 9 = 1 mark)

This response gets 1 mark.

State what is meant by the 'biopsychosocial model' of health.

This model views health that health is affected by many factors. For example, biological characteristics (genes), psychological characteristics (attitude, personality) and social environment (family and friends)

(Total for Question 9 = 1 mark)

Question 10.

This 2-mark question asked learners to explain what is meant by the freeze response to stress. This question comprised of 2 AO1 marks. For this question learners needed to identify what is meant by the freeze response, and then a further mark would be for an appropriate expansion. This question caused problems, not due to lack of knowledge at times but for the vagueness of answers. The important part of any answer was the knowledge that this was the lack of a cognitive response to stress (cognitive paralysis) not just the body not being able to move, which unfortunately is where many answers went awry. Many learners were able to get the first mark by suggesting that this was a response when fight or flight was not appropriate or suggesting that it is when stress becomes too much and you become overwhelmed, but most struggled to get the second mark.

This response gets 0 marks

10 Psychologists have suggested that in addition to the fight or flight response to stress there is also the freeze response.

Explain what is meant by the freeze response to stress.

where fight is when the fight response is when you hide from your problems and fight is where you solve them. Freeze would be when you panic and have no case of action action

(Total for Question 10 = 2 marks)

This response gets 1 mark.

This gets a mark for the idea that the mind will go blank due to the stressor. This learner has done the hard part but not explained why it happens i.e. that they are overwhelmed with stress/that the fight or flight response is not effective in that situation.

10 Psychologists have suggested that in addition to the fight or flight response to stress there is also the freeze response.

Explain what is meant by the freeze response to stress.

freeze response is the third response to a stressor, it is when a person will remain stationary, their body and mind will go blank due to the stressor, and would simply just freeze freeze.

(Total for Question 10 = 2 marks)

This response gets 2 marks.

This response gets one mark for the idea of not being able to cope with a stressful situation they've been put in (so lose all rational thoughts) and then a further mark for explaining that all cognitions freeze up (cognitive paralysis) and they don't know what to do.

10 Psychologists have suggested that in addition to the fight or flight response to stress there is also the freeze response.

Explain what is meant by the freeze response to stress.

The freeze response is where a person who has just been put in a stressful situation loses all rational thoughts and ability to cope. Their brain and cognitions just freeze up and they don't know what to do in that very moment.

(Total for Question 10 = 2 marks)

Question 11

This 3-mark question asked learners to explain, using the scenario, why Donovan may be in the exhaustion stage of the general adaptation syndrome (GAS). This question comprised of 3 AO2 marks so links to Donovan needed to be present. Learners needed to explain the idea of the Donovan being overwhelmed/he had used up all his resources/unable to deal with chronic stress for the first mark. The second mark would be the effect on his immune system (suppressing it), and a third mark for any signs and symptoms Donovan is showing that would be related to the exhaustion stage such as headaches/insomnia/getting colds. This question was answered very well with many learners able to achieve all 3 marks with excellent explanations. One common error was that learners just listed signs and symptoms which would only achieve 1 mark.

This response gets 1 mark.

Mark awarded for depression being a sign of being in the exhaustion stage.

11 The general adaptation syndrome (GAS) is a three-part process that describes the body's physiological response to stress. The third part of the process is the exhaustion stage.

Explain, using the scenario, why Donovan may be in the exhaustion stage of the process.

Donovan may be in the exhaustion stage of GAS because he is having depressive feelings and thoughts about giving up.

This response gets 2 marks.

1 mark for the idea that his immune system is weakened, and 1 further mark for a symptom of the exhaustion stage i.e. coughs and colds.

11 The general adaptation syndrome (GAS) is a three-part process that describes the body's physiological response to stress. The third part of the process is the exhaustion stage.

Explain, using the scenario, why Donovan may be in the exhaustion stage of the process.

He's in the exhaustion stage as he couldn't sleep and is feeling depressed as he has mouths to feed and his job is weighing him down.

Exhaustion caused his immune system to weaken and therefore coughs and colds were more prone to him (Total for Question 11 = 3 marks)

This response gets 3 marks.

1 mark for saying that the exhaustion stage is when all the bodies resources are used up to deal with long term stress.

1 mark for suggesting that this causes the immune system to be less effective, and the final mark for giving a symptom from the exhaustion stage i.e. headaches and colds. Perfect response really and very close to the mark scheme.

- 11** The general adaptation syndrome (GAS) is a three-part process that describes the body's physiological response to stress. The third part of the process is the exhaustion stage.

Explain, using the scenario, why Donovan may be in the exhaustion stage of the process.

The Exhaustion phase is when all the ~~body~~ body's resources have been used up to deal with a long-term stressful challenge, such as Donovan's last job, or the new one and the regular overtime he works. After all the body's resources have been used the immune system is a lot less effective at fighting off illness. Donovan has been experiencing a lot of headaches and colds, indicating that his immune system has been suppressed due to lack of glucose and other resources in the body suggesting he may be entering the exhaustion phase.

Total for Question 11 = 3 marks

Question 12

This 3-mark explain question asked for one strength of Lustman's study. For this question learners had to identify a strength and then suggest why this is a strength in terms of the study, and then for the third mark explain the consequence of the strength. For example, you would gain 1 mark for practical application for treatments as a strength, then a further mark for saying why this was the case in the study (as they found that resolving a person's depression through use of fluoxetine improved adherence to medical advice) and then the final mark for saying that it would therefore allow doctors to use anti-depressants such as fluoxetine in real life to improve adherence and therefore an individual's health. Most learners used practical application in their answers and were able to apply that to the study well and therefore achieved 2 marks. Where learners lost marks is the final point about the consequence of the strength which was often omitted. Where learners failed to achieve marks, it was usually because they had written about the wrong study or had given inappropriate weaknesses such as the idea it was a lab experiment so lacking in ecological validity.

This response gets 0 marks.

This is result from the study rather than a strength with just the word generalisable added at the end. Not sure how we could make a link between the result and generalisability, so 0 marks.

12 Lustman et al (2000) studied whether using fluoxetine to treat an individual's depression could improve their adherence to a diabetic regime.

Explain **one** strength of Lustman et al's study.

Lustman found a positive correlation between using fluoxetine to treat someone's depression and how it improves their adherence to diabetic regime. This shows that Lustman's study could be generalised.

This response gets 3 marks.

1 mark for the strength identified which is practical application for treatments.

1 mark for the link to the result of study which was that reducing depression improved adherence.

1 mark for the consequence of this which was that doctors can use anti-depressants such as fluoxetine when trying to improve an individual's adherence.

12 Lustman et al (2000) studied whether using fluoxetine to treat an individual's depression could improve their adherence to a diabetic regime.

Explain **one** strength of Lustman et al's study.

This study has practical application, this is a strength because once doctors know what barriers there are they are able to overcome it. In this study it shows that if a patient is less depressed they are more than likely to adhere to medical advice. Doctors can now use anti-depressants such as fluoxetine when trying to improve an individual's adherence.

This response gets 3 marks

1 mark for the identification of the strength which was the use of a double-blind procedure. The second mark for the link to the study which was the idea that no one knew who took the fluoxetine (or the placebo) and a final mark for the consequence of this strength which was the improvement in reliability as there is no bias.

2 Lustman et al (2000) studied whether using fluoxetine to treat an individual's depression could improve their adherence to a diabetic regime. *double blind diabetes & depression fluoxetine*

Explain **one** strength of Lustman et al's study.

- It was a double-blind test therefore neither the participant or the experimenter knew who took the fluoxetine.

- This increase the studies reliability as there were no bias factors.

Question 13

This is a six-mark medium open response question which consists of 2 AO2 marks and 4 AO3 marks. Therefore, each strength and each weakness need to be linked to context at some point. Learners needed to identify one strength and one weakness of biofeedback as a way to reduce levels of stress, then say why this is a strength/weakness in relation to Donovan and then the consequence of this strength/weakness, very similar in format to the question above. The response on this question were mixed with many learners lacking knowledge about biofeedback as a while often giving strengths and weaknesses which were not relevant to the technique. The most common strengths talked about application to real life, and how the techniques and skills learnt within the biofeedback session can be applied in real life situations such as Donovan's workplace to help him manage stressful situations. The most common weaknesses looked at practical factors such as time/money although these were not done as well as the strengths. The most common error with the responses was not writing enough for the 3 marks. For example, for the strength many learners talked about lack of side effects and then elaborated comparing it to drug therapy which can cause withdrawal symptoms but then never went on to explain the consequence of this i.e. that this means its more ethical solution to Donovan's stress levels/that Donovan may be more likely to complete treatment and recover from his addiction. Overall, most learners were able to achieve some marks on this question, but few manage to achieve full marks.

This response gets 2 marks.

In terms of the strength, 1 mark for the idea that it gives him the skills to help prevent him getting into state. This is rather a weak point but just enough. In terms of the weakness, 1 mark for the practical weakness that it may be time consuming to do the feedback.

13 Biofeedback is one treatment that may help individuals to manage their stress levels.

Explain **one** strength and **one** weakness of Donovan using biofeedback as a way of managing his stress levels.

Strength

Biofeedback is like a tool box, it gives Donovan ^{coping} methods to avoid ~~high~~ him getting in a low state and ways he can ~~avoid~~ prevent it.

Weakness

Donovan may not have time ^{to do} use the feedback he gets ~~use~~ as it could be time consuming. for example if the Doctor told him to do Yoga meditate to calm him down he may not have time to.

This response gets 3 marks.

Nothing for the strength as biofeedback doesn't really look at the cause of stress rather the signs of stress; creating a coping mechanism is just too vague for a mark. For the weakness, 1 mark for the idea that you need numerous sessions of biofeedback, a further mark for the idea that this means it is very expensive/that Donovan may need more time off work, and the final mark for the consequence of this which is the very valid issue that this may actually cause more stress for Donovan rather than less (so is counterproductive).

13 Biofeedback is one treatment that may help individuals to manage their stress levels.

Explain **one** strength and **one** weakness of Donovan using biofeedback as a way of managing his stress levels.

Strength

The Biofeedback is an accurate way of ~~one~~ finding stressors and creating a coping mechanism. In Donovan's case this will be really useful as finding what causes him stress will help him avoid and overcome it, which could overall increase his health.

Weakness

Biofeedback is very expensive and requires consistent sessions and motivation, which may put Donovan in a hard position as he is stressed within his workplace, as it will require time off, which could create more stress.

This response gets 5 marks.

For the strength this response gets 1 mark which is that it can be applied to everyday life, a further mark for the elaborated link to scenario which is that Donovan can use the skills (lifelong toolbox) learnt within his workplace and home to decrease his stress levels and the final mark for the consequence of this which is that the treatment has a long-term effect on his stress. For the weakness this response gets 1 mark for the weakness which is the practical issue of expense/time, and a second mark for the link to Donovan having less money in his new position which would affect his ability to pay. What we are missing is the consequence of this which would be that Donovan may drop out of treatment as he cannot afford to pay for it (meaning that he will continue to have high stress levels) so it won't be effective.

13 Biofeedback is one treatment that may help individuals to manage their stress levels.

Explain **one** strength and **one** weakness of Donovan using biofeedback as a way of managing his stress levels.

Strength

One strength of biofeedback is that it gives a lifelong tool box. This means that the treatment has a long-term effect on a person. Because stress signals are identified in a way that can be seen, you are then able to suppress the symptoms of stress. This is a skill that can be used through life. Donovan can transfer the skillset into the workplace and his home to decrease his stress levels.

Weakness

~~Based on~~ Biofeedback can be very expensive, can use a lot of time and takes a lot of commitment and motivation. As Donovan is earning less money in his new position, this could affect his ability to pay for biofeedback as the machinery and sessions are very expensive. Also, ~~Donovan is working overtime. This is to earn enough money~~

Question 14

This is a six-mark extended open response question which comprises of 2 AO1 and 4 AO2 marks. This question asked learners to discuss how locus of control (LOC) theory can help psychologists decide whether Donovan would continue with high levels of stress. This was one of the weakest questions on the paper in terms of marks. Level 1 responses would consist of basic descriptions of internal and external locus of control with a few links to Donovan i.e. saying he is either internal or external but not much more. Level 2 answers will include a better description of both internal and external locus of control with some discussion about what this could mean in terms of stress. Level 3 responses will include a better discussion with good knowledge of locus of control, perhaps talking about extreme internals/externals and its effect on stress. Use of studies and how LOC is measured and possible issues with this type of measurement could all be discussed at level 3 but not all will be needed to reach that level. Common errors with this question are that learners would either show good knowledge of LOC but no discussion, or they would discuss well but knowledge was weaker; consequently level 2 answers were the most commonly seen.

This response gets level 1 and 1 mark.

This response shows very basic knowledge about locus of control. There is no application to the scenario, and no discussion therefore level 1 and 1 mark.

14 Discuss how locus of control theory could help psychologists decide whether Donovan is likely to continue to suffer with high levels of stress.

Locus of control could help psychologists decide whether Donovan is likely to continue to suffer with high levels of stress by ensuring that whether he has internal locus of control or external locus of control. Internal loc is when you believe that everything you that happens is because of you, external loc is when you believe that ~~everything~~ something may happen out of luck.

This response gets level 2 and 4 marks.

This response demonstrates some accurate knowledge and understanding of locus of control and how it affects level of stress. Application to the scenario is good although in some parts the relevance is not clear. There is a partially developed discussion about the different factors effecting a person with internal locus of control, and how they contribute to stress. For a level 3 answer we would accept a wider discussion of how being an internal locus of control could affect Donovan's stress through the use of research and how they link to the scenario, or how locus of control is measured.

14 Discuss how locus of control theory could help psychologists decide whether Donovan is likely to continue to suffer with high levels of stress.

~~Loc~~ Locus of control can help professionals decide whether Donovan is going to continue to have high stress levels. Internal locus of control means if you have high levels of stress you are able to control it because Internals have the power to control what happens to them for instance they put in loads of effort for their exams so they can do well. People who are ~~internals~~ ^{externals} believe everything that happens to them is out of luck and chance. Donovan has shown that he is an internal when he said if any errors occurred it was his fault and not the company's. He took responsibility which shows he is or has internal control. He should be able to get over it because he is stressed over that he has low income. He doesn't control that so that can make him stressed due to not being able to control his income and when he gets it. This could mean he has high internal locus of control so this means that it unavoidable and too challenging.

(Total for Question 14 = 6 marks)

This response gets level 3 and 5 marks.

This response has a good discussion but slightly weaker knowledge about locus of control. Knowledge of locus of control is fairly basic, but accurate, and therefore level 2. The application to the scenario is present throughout most of the response so borderline level 2/3. This discussion is much better looking at how locus of control is a continuum, so we are not sure if its stable, the use of a scale and possible issues with it and therefore is a solid level 3. This means that this response is a level 3 answer overall, and 5 marks.

14 Discuss how locus of control theory could help psychologists decide whether Donovan is likely to continue to suffer with high levels of stress.

The locus of control theory allows psychologists to determine whether or not people have ^{control} control over their lives. An internal locus of control is when you believe that you have the control in which can determine what happens in your life and an external locus of control is that you believe things happen in your life is out of your luck or chance. Psychologists can use attributions to determine if people like Donovan have an internal or external locus of control. Looking at the scenario, Donovan has some internal locus of control as he said he has not worked enough which suggests he feels that he is in control of his life. A strength to this is that Rotter's IE scale can be used on Donovan as it was proven to show whether you are internal or external. A downside to the theory is that the locus of control is a continuum so it can ~~exactly~~ predict if Donovan will stay on internal as we change from time to time. Overall, the locus of control theory can be used to help psychologists to decide if Donovan is likely to continue to suffer with high level of stress by using ~~attributions~~ attributions.

(Total for Question 14 = 6 marks)

Question 15

This is a nine-mark extended open response comprising of 3 AO1, 3 AO2 and 3 AO3 marks. This question asked learners to assess causes of Donovan's levels of stress. This question asks learners to assess different causes of stress as suggested from the scenario, including life events, daily hassles, workplace stress. As expected, these were the most common responses however some learners included personality type and locus of control. Evaluative issues would include the use of research such as Kanner, Johansson and Holmes and Rahe and an assessment of their usefulness in explaining Donovan's causes of stress. There were some exceptional responses to this question easily obtaining full marks, and this was the strongest question on the assessment. Level 1 answers tended to be very basic descriptions of causes of stress with little to no assessment. Level 2 answers tended to have two causes of stress well described, although one may be stronger than the other. There was clear application to the scenario for most of the response although there may be some areas with generic description. These responses may start to assess the relative importance of each one, with perhaps a brief use of a study although that may be descriptive rather than use to answer the question. Level 3 answers would show excellent knowledge of at least two causes of stress with clear links of how this applies to Donovan with good use of the scenario. The assessment is good with use of studies to emphasise points such as Rahe, Kanner, Johansson. The best answers may also bring in Type A and Rosenman study. The most common error with this question was that learners concentrated too much on one cause of stress, usually life events, which meant that the response was too narrow to achieve top level marks. There can be more depth than breadth in a response however it does make it difficult to achieve the higher marks.

This response gets level 1 and 3 marks.

This response is highly descriptive and list like in nature. There is some isolated knowledge about causes of stress with an attempt to apply that knowledge to the scenario; there is no assessment therefore this is a level 1 answer. The knowledge shown about the causes of stress means that this is a top level 1 answer and 3 marks.

15 Psychologists suggest that there are a number of reasons why individuals may suffer with high levels of stress.

Assess the possible causes of Donovan's high levels of stress.

A possible cause for Donovan's level of stress could be the new job that he took on. The stress could be brought on by a lack of training and/or experience within that job role. As said he had only been doing the job for a year. With him being in charge of the finances of the company he will be stressed as a fall in the company's profits would contribute to the high levels of stress as it would result in a lower wage for his fellow employees.

As well as this there are many other reasons that contribute to Donovan's high level of stress. Some examples are that he was recently married and now has a child on the way, as well as this he has recently moved home with his wife, this will be a stressful life event for him and his family, with all of these come some form of expense. So with him recently adopting a new job role that has less pay he will find that he has to do more work in order for him to support the family.

This response gets level 2 and 4 marks.

Knowledge and understanding of the causes of stress is mainly accurate but lacks the depth needed for level 3; but the breadth of knowledge means that it is top level 2. There are some points applied to the context which is top level 1/ bottom level 2, but there is limited assessment, however, which means that this is a bottom level 2 answer and 4 marks.

15 Psychologists suggest that there are a number of reasons why individuals may suffer with high levels of stress.

Assess the possible causes of Donovan's high levels of stress.

~~Donovan high stress might be due to his~~

~~personality type. For instance, it seems like~~

~~Dono~~

Donovan's high stress levels may be caused

to Donovan having a low perceived ability to

cope in many situations in life. This means

that high levels of stress will be experienced

in situations he believes he can cope with.

A high levels stress could also be caused to Donovan's

personality type. This is because different personality

types experience different levels of stress. For example,

Type A personalities are more prone to stress and are

likely to develop coronary heart disease as a

result.

Donovan's high levels of stress could also be due

to major life events he is experiencing and the

adjustment that is needed to be made. For example,

moving to a new house and his wife being

pregnant. Daily hassles may also cause

high levels of stress. Such as, traffic on the

way to work.

This response gets level 3 and 9 marks.

This response showed excellent depth and breadth of knowledge of different causes of stress such as workplace stress and life events, with sustained application to the scenario throughout. The assessment is excellent through the use of studies such as Rahe, with these studies discussed in terms of their effectiveness in supporting a particular cause of stress. Judgements are given throughout and justified, and a full conclusion given. This answer is fully worth the 9 marks that it was given.

15 Psychologists suggest that there are a number of reasons why individuals may suffer with high levels of stress.

Assess the possible causes of Donovan's high levels of stress.

one possible cause of Donovan's stress is workplace stress. This accounts factors such as level of control. Donovan has a new role in the company which has reduced his level of control in the workplace and he also finds this boring; having little control means Donovan has increased stress levels, and later illness.

level One strength of the workplace stress theory is that research has shown that workload was not a stressor for civil servants but level of control was, a low level of control lead to heart disease years later, reflecting on the idea that Donovan will become ill from this. A study to support workplace stress is Johansson et al who studied saw mill workers, and found that the high-risk group (with repetitive jobs and low levels of control) were significantly more likely to become ill than the low risk group. Again, this study indicates that Donovan ~~is~~ will become ill from his stress of the workplace.

One weakness however of workplace stress is cultural differences.

Another possible cause of stress for Donovan is life events. These are major, infrequent events in a persons life that causes them stress; for Donovan ~~is~~ he is experiencing ~~the~~ life events, moving house and having a baby. Life

events cause stress by causing the person to readjust to new life. Raye et al found ~~that~~ a positive correlation between life events and ill health. Reflecting on the idea that these are causing him stress and ill health. However, one way in which life events do not explain ~~33~~ Donovan's life is that they are measured through ^{the} SRRS, this scale assumes that all life events cause the same amount of stress to everyone. However, Donovan may have house move and new baby may have brought less stress to his life than his workplace has. Overall workplace stress is certainly a main predictor of stress for Donovan as he is thinking about work constantly and is most obviously causing him stress, perhaps more than life events and daily hassles.

(Total for Question 15 = 9 marks)

Summary

- Learners need to be aware of the importance of the smaller questions on the paper. There was some evidence of these questions being rushed with shorthand answers more common in this series. Although this may allow learners to achieve some marks in these questions, their ability to achieve full marks was significantly reduced.
- Ensure that learners write enough within their responses to be able to access all marks awarded on a question. This is especially true of the 3 mark explain questions such as the evaluation of studies. Too often learners would only write a response which could access 2 out of the 3 marks.
- Learners need to work on the evaluative/assessment aspects of extended open response questions. Learners showed some accurate and thorough knowledge of the topic areas across the whole of the paper but were sometimes let down by the assess/evaluate aspect of a question. Practicing skills would enable learners to access the top mark bands on these questions.
- Learners should make sure they read the question thoroughly. There were a number of questions where learners misunderstood the requirements of the question such as Q5(c) asking learners to evaluate Griffith's study without the use of ethics. This meant that learners would often achieve 0 marks on this question. This was also a problem with Q4 where some learners only wrote about one approach, despite the question asking for two; limiting their ability to access the higher levels.
- Key terms are still a problem with the short definition style questions often losing learners marks. It is important that key terminology forms an integral part of the teaching of this unit.
- Although this unit has no synoptic element it was pleasing to see many learners using their knowledge from unit 1 and 2 to answer questions; especially in 2 and 3-mark evaluation questions. Although this is by no means expected learners need to be aware that they will be credited if they are able to do this, where relevant.

- Questions about models named on the specification are still causing some issues. For example, Q6 which asked learners to explain how the Elaboration Likelihood model could be applied to a gambling awareness campaign performed poorly. Although learners showed knowledge of the model, this tended to be superficial which meant that they found it difficult to apply to a novel scenario. This may be a product of this particular series however allowing learners to practice applying models to novel scenarios would be preferable for future series.



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