



Examiners' Report Principal Examiner Feedback

January 2025

Pearson Edexcel International Advanced
Level In Psychology (WPS04) Paper 1
Clinical Psychology and Psychological Skills

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General Comments

The January 2025 exam series was a successful one, which produced some excellent work from candidates. The series saw improvements in some extended open responses especially the key question which was excellent to see. Overall, learners appeared to have good knowledge across the topic areas assessed, although the clinical section is still weaker than the psychological skills section.

Describe questions often were the strongest in terms of answers on the paper, with many candidates able to achieve at least some of the marks. One thing to note however, that with describe questions candidates need to ensure that there are enough explicit points to allow them to access the full range of marks on the question. The weakest responses on a describe question on the paper came from question 2b which focused on randomised controlled trials. Candidates understanding of the process of randomised controlled trials seemed to be limited therefore it may be worth some focus being placed on the teaching of the methods that are not as 'common' as experiments, observations etc.

Candidates, once again, found **application** to the scenario more difficult and often would show excellent knowledge of a theory/model but then did not relate it back to the scenario. Teachers need to ensure that candidates are aware that if a scenario is present, and they are asked to use it then responses which do not do so are likely to get zero marks.

The **psychological skills** question provided some excellent responses from candidates, with mathematical skills at a high level. However as is the case in previous series, there were candidates who lost marks unnecessarily for omitting important details, such as question 2a which looked at volunteer sampling. It was clear that the vast majority of candidates had the knowledge of volunteer sampling but just did not include both elements needed or forgot to link to the scenario. The Wilcoxon calculation (6ab) performed below expectations therefore teachers need to ensure that candidates are able to calculate a variety of different statistical tests and understand how to use the critical values table at the front of the paper.

One thing to note with the **extended open response** questions (both the 16- and 20-mark question) is that AO3 element was significantly weaker. This often brought the number of marks achieved down which was a shame when the level of knowledge was generally good. Very few tended to justify their arguments and evaluations, with very little supporting material used.

The remainder of this report will focus on specific questions from the examination.

Q01a

Question introduction

This question asked candidates to state what is meant by statistical infrequency when defining abnormality. The majority of candidates were able to achieve the 1AO1 mark available for this question. Where candidates performed less well it was due to responses which were vague and would just repeat the term but in a different format e.g. it is where a behaviour is infrequent. Terms such as uncommon or rare in relation to behaviour were just enough for the 1 mark. Few candidates correctly suggested it was 2 standard deviations away from the mean. It is important for teachers to ensure candidates know the definitions of key terms for the examination.

This response got 1 mark.

This is the correct definition of statistical infrequency.

1 In your studies of clinical psychology, you will have learned about the definitions and diagnosis of mental health disorders.

(a) State what is meant by 'statistical infrequency' when defining abnormality.

(1)

Statistical infrequency refers to traits and behaviours that are 2 SD away from the mean in a normal distribution curve as abnormal.

Question 01b

Question Introduction

This question asked candidates to describe failure to function adequately as a definition of abnormality. This question was comprised of 4AO1 marks. Candidates struggled to achieve more than 1 or 2 marks for this question. Candidates were usually able to suggest that it is when a person struggled to cope with everyday life, and some were able then to give a list of the factors that Rosenhan and Seligman (1989) looked for to define abnormality, such as or describe one factor accurately (usually maladaptiveness) but very little else. That is not to say there were not any candidates that described different factors accurately, but these were in the minority.

This response achieved 3 marks

This response achieved 1 mark for the idea of behaviour deviating from social norms, 1 mark for behaviour taking away the quality of their life, and 1 mark for outing others in danger.

This definition of abnormality states that a person who has symptoms of either deviance, distress, danger or dysfunction that would be used to classify their behaviour as abnormal. This is where their behaviour deviates from the socially 'normal' ways (deviance), their behaviour causes them stress to an extent and takes away from their quality of life (distress), their behaviour ^{puts} ~~exposes~~ them or the people around them in danger (danger) and their behaviour doesn't allow them to function as a human should function for example lack of energy (dysfunction).

Question 01c

Question introduction

This question asked candidates to explain three ways that diagnosis of mental health disorders can be considered reliable/valid. This is a 3AO1 and 3AO3 question. There was a spread of marks on this question, but these tended to be at the lower range with very few candidates achieving two or three marks. The main issue which stopped candidates getting higher marks was the lack of AO3 in their answers. Often candidates would correctly identify, for example, that two researchers giving the same diagnosis independently would be inter-rater reliability but would not then on and give any evidence/justification for this. Conversely, some candidates would only give the AO3 evidence but then not explain this, which was a shame as this meant a maximum of three marks. This is not to say that no candidates were able to achieve full marks, as there were a few really strong answers for this question, which showed excellent knowledge about the topic area and how to structure an answer for this type of question.

This response achieved 6 marks

This is an excellent response. This got marks for:

- Symptoms and diagnosis match (1) justified through an appropriate study (1)
- Use of different diagnostic manuals to get the same diagnosis (1) justified through Andrew et al (1).
- Multiple clinicians getting the same diagnosis (1) justified through Brown et al (1)

(6)

1. Validity could be checked if the patient with diagnosis shows the symptom of diagnosis ~~of~~ ^{later in life}. This is Predictive Validity. In 2015 Lahey et al. found those 4-6 years old ~~to~~ patients with diagnosis of ADHD showed persistent symptom in primary school.
2. Validity \Rightarrow A diagnosis could be considered as valid, if the same diagnosis were produced using different ~~or~~ diagnostic criteria. This is Concurrent validity. In 1999 Andrew et al. found agreement between DSM-IV and ICD-10 on diagnosis of depression, anxiety disorder in 1500 patients.
3. ~~A~~ A diagnosis could be considered reliable if the same diagnosis were ~~produced~~ produced by multiple clinicians. In 2001 Brown et al. found that the diagnosis of mood disorder and anxiety is consistent between 2 independent clinicians in 362 patients.

Question 02a

Question introduction.

This question introduced a novel scenario, and asked candidates to describe how Krystal could use volunteer sampling technique to gather participants for her research. This is an 2AO2 question therefore there needs to be links to the scenario in each point, which often did not happen with candidates. Teachers need to highlight to candidates that if the question references the scenario given, they need to ensure that they use it within their response. The other most common error for this question is that candidates did not make it clear that contact details would need to be provided in order for potential volunteers to agree to take part. For example, candidates would suggest putting posters on the wall of the mental health service and then just said that those who wanted to take part could reply. This would achieve 1 mark for an appropriate method but needed to say that the poster would include contact details for potential participants to contact Krystal for the 2 marks.

This response achieved 2 marks

This response achieves two marks. One for the idea of putting posters on the wall in the psychiatric hospital and then the individuals who are interested in her research could contact her with the number provided on the posters.

(2)

Krystal could find a psychiatric hospital where include patients registered with a mental health support service. Then she could provide a inform consent and detailed research procedure on a posters. She put the posters on the hint board or magazines in hospital. Then, the individuals who interest^{with} and want to attend her research could contact with her by ~~asking~~ the contact number on the posters.

Question 02b

Question introduction

This question asked candidates to describe how Krystal could conduct a randomised controlled trial (RCT) to research the effectiveness of the drug therapy. The question was comprised of 4AO2 marks therefore links to the scenario need to be present throughout the response. This question caused candidates a number of issues. It was clear that many candidates were not sure what a RCT was, and therefore just did the basics of

- splitting groups into 2, and then giving one an existing drug/placebo, and the other group the new drug.
- The need. For this to be double blind procedure and participants chosen at random.

What candidates did not do is what they would do after the research began such as

- Use of self-reports to ask questions about side effects,
- and then how she would use that data i.e. comparing the results from the two different groups.

This was disappointing as similar questions about drug research have yielded higher scores, but the use of the RCT really seemed to confuse candidates, meaning the most common score for this question was 1-2 marks.

This response achieved 2 marks.

This response achieved one mark for randomizing the names in a computer programme and placing into two conditions (the idea of not knowing which group they are in) (1) and then one group would have usual treatment and then the other new drug therapy (1).

(4)
krystal could put all ~~sample~~ names schizophrenic sample into a computer programme. She ~~can~~ would then randomize their name in the programme. She would then put these names into two conditions. One condition would be given given usual drug treatment e.g. ~~new~~ antidepressant like clozapine. ~~Another~~ The second condition would be given a krystal new drug therapy.
krystal then can see which drug treatment is most effective ~~to~~ on the schizophrenic sample.

This response achieved 0 marks

Although this response is close to a mark, their points are too vague and mainly generic. For example:

- For the experimental and control group mark the candidate would need to highlight what the interventions are for each group (such as new drug v old drug)
- For the effectiveness of the interventions the candidate would need to highlight how the researcher would know about effectiveness (use of self-reports)
- The point about blinding is not really accurate and actually does not say what this would mean for the study.

This means that Krystal has an Experimental & a Control group in her research. This type of trial is randomised to ensure patients are assigned to groups by chance, reducing bias. The control group allows researchers to isolate the effect of interventions. & Blinding trials are either one side blinded or both side blinded to minimize bias.

Question 02c

Question introduction

This question asked candidates to explain one strength and one weakness of Krystal using a randomised controlled trial for her research. This is an 2AO2/3 question so there needs to be some link in each point in order for the response to gain credit. Candidates fared better on this question than the previous one and were often able to get 2 marks for a weakness which was usually the idea of the drugs being an unknown quantity and therefore there may be side effects. Fewer candidates achieved more than 2 marks and struggled with the strength. Where candidates did achieve marks for the strength it was usually for the idea of double-blind procedure ensuring a lack of researcher bias. More often than not, however, they were unable to justify this strength and only achieved 1 mark.

This response achieved 3 marks

This strength achieved 1 mark for the strength of there being no researcher bias due to the double-blind procedure and a second mark for the justification that this would mean the schizophrenics (the context) behaviour would be due to drugs not subjectivity. The weakness achieved one mark for the idea of the schizophrenic patients being volunteers so sharing characteristics. No second mark as the justification needed to say that this would not be representative of all patients at the support centred and therefore not generalisable rather than generalisable alone.

Strength

- There will be no researcher bias of the data collected, as it is a double ~~blide~~ blind-test, therefore the experimentors data collected will not be biased, ~~but~~ by their own beliefs, any change in behaviour of schizophrenics and control group would be due to change in drugs rather than Krystal's experimenters' subjectivity.

Weakness

The study contains a voluntary sample of schizophrenic patients. This means that the participants may share same characteristics of interest towards new drugs. Therefore the sample may not be generalizable for all schizophrenic patients.

This response achieved 0 marks.

This response is generic so no marks could be awarded. If context had been present the weakness could have achieved a mark for the idea of volunteer sampling leading to a certain type of participant.

Strength

By using RCT, Krystal is able to ensure the variables are controlled, and therefore increasing the validity of the results.

Weakness

Volunteering sample - the volunteer sample may show demand characteristics as they are showing pre-emptive enthusiasm about the research and overall may not represent the general population.

1. Ashamí's research might not ~~effort~~ ^{not be} effective because it is from a case study not an investigation.

2. Ashamí's research would be done on a person so it will ~~like~~ have some evidence and personal experience.

Question 03a

Question introduction

This question asked candidates to describe the procedure used by the pseudopatients in Rosenhan's (1973) study when gaining admission to the mental health hospitals. This question was comprised of 3AO1 marks.

To achieve full marks candidates could have written:

- That they said they were hearing voices saying words such as 'hollow' 'thud'
- That the voices were of the same sex/unfamiliar.
- That only the names/occupation were false rest of information was real.

What was NOT creditworthy was anything that happened after admission to the mental health hospitals. This is unfortunately what many candidates did do and meant that many responses only achieved 1 mark for the first bullet point. Teachers need to remind candidates to read the question fully before attempting to answer the question.

The other reason by candidates did not get full marks was the errors in knowledge such as believing that all other information than the voices was real; which unfortunately many candidates suggested.

This response achieved 2 marks

This response got 1 mark for giving fake names but all other experiences real (fake names OR occupation was enough for a mark), and one mark for hearing voices which are the same sex as them which is very similar to the second bullet point.

when gaining admission to the mental health hospitals.

(3)

The pseudo-patients are were given fake names but the experiences of the pseudo-patients are real such as their ups and downs. The pseudo-patients all claim they have ~~heard~~ heard voices that are same sex with them. And they ~~test~~ the pseudo-patients tell the practitioners they think they been spied.

This response achieved 0 marks.

This responses described as significant amount of design features such as the types of hospitals, who the participants were, and what they did once admitted but did not say anything about the admissions procedure and therefore no marks could be given.

(3)

~~Pseudo patients were involved in a field experiment~~ The study was with participant observation
with a independent group design method & sane
people, among who ~~was~~ was a psychology gradu-
cate, 3 psychologists, 1 pediatrician, 1 psychiatrist
and 1 painter and 1 housewife were sent to
21 different hospitals in 5 different states in USA
as schizophrenia patients (pseudo patients) and kept
a dairy ~~and~~ to write how ^{actual} schizophrenia patients were treated in
the hospitals and whether they could be distinguished as
sane or not.

Question 03b

Question introduction

This question asked candidates to explain two weaknesses of the study by Rosenhan (1973) in terms of objectivity. This question comprised of 2AO1 and 2AO3 marks. This question was more successful in terms of marks achieved than the previous question, with many candidates able to achieve at least some marks for relevant weaknesses such as:

- The use of qualitative data through diary entries.
- The type of researchers creating expectations for the study.
- That there was only one person in each hospital.
- That their mistreatment within the hospital would reduce their objectivity about the hospital in general.

The type of data and the use of only one person was by far the most common creditworthy response. Where responses were limited, it was due to candidates misreading the question and giving a strength and a weakness, and there were occasions where candidates would suggest something that would make it more objective, neither of which were creditworthy.

This response achieved 3 marks

This response achieved 1 mark for type of researchers creating expectations in the study, and one further mark for the justification of this weakness that this could lead to negative interpretation of behaviour due to these expectations (so subjective). A further mark was credited for the idea that there was only one person in each hospital. Unfortunately, the final mark could not be awarded here as the lack of information would be more about validity/reliability than objectivity.

(4)

1. In 8 Pseudo Patient there were Psychologists, Psychiatrists and Psychology Graduate. These researcher might carry expectation that the hospital would treat patient in inhuman way. Therefore, they could subjectively interpret every information in negative way.
2. ~~Resentment et al. didn't~~ Given that there were one ~~per~~ Pseudo-Patient in each hospital, the study can't be checked for inter-rater reliability. The Pseudo-Patient can't be observing every thing in the hospital, therefore there could be emission of information that lead to less objectivity.

Question 04

Question introduction

A novel scenario was introduced for this question, which asked candidates to explain two reasons why family therapy could be an effective treatment for Libby's schizophrenia. This was comprised of 2AO2 and 2AO3 marks which meant there needed to be one point of context in each point made. A full range of marks was seen for this question. Some candidates produced excellent and thoughtful responses that achieved close to full, or full, marks. The most common reasons seen were:

- Enhancing communication between the family members
- The idea of psychoeducation and the family understanding more about Libby's symptoms
- That it provides strategies to cope with Libby's behaviour and symptoms
- Allows the family to learn more about Libby's treatments and the importance of adherence to them.

- Helps the family have a greater understanding of what Libby is experiencing and how she feels.

Where candidates' responses did not achieve the marks, it was often due to a lack of justification/exemplification of their reasons, generic responses (this was rare however) or just rewording of the scenario without any explanation of why family therapy would help.

This response achieved 3 marks

This response achieved 1 mark for family therapy aiding communication to help understand symptoms, and 1 mark for family therapy to provide strategies to cope with these symptoms. Unfortunately, this candidate has used the Pharaoh study for both of their AO3 points, and the use of the study is not different enough (such as different elements) to be able to credit separately so the 2nd mark was given for the second point not the first, as this was stronger.

- 1 One reason is that family therapy is seen to aid communication in the family. Pharaoh et al. (2010) outlined this as one of the benefits of family therapy for schizophrenia, and this aid in communication could help Libby's family to understand her symptoms better, thus helping them support Libby's needs more effectively.
- 2 Another is that family therapy provides the families with strategies to cope with the patients' symptoms better. Another one of Pharaoh et al. (2010)'s proposed benefits, this would aid her family to cope with events such as Libby breaking the television better, helping them not becoming upset and thus, not upsetting Libby.

Question 05

Question introduction.

This 16-mark levels based extended open response asked candidates to evaluate one biological explanation for their chosen mental health disorder (either Anorexia nervosa or Unipolar depression). This question was comprised of 6AO1 And 10AO3 marks, therefore candidates needed to place more emphasis on the evaluative side of the question than the AO1 knowledge. Candidates answered this question fairly well although most candidates struggled to achieve over half marks. The AO3 was stronger than the AO1 at times on this question which is not surprising as candidates tend to find the explanations slightly more difficult. In addition to this the stronger responses were those that chose Unipolar depression rather than Anorexia nervosa.

For AO1 the most common responses included

For depression:

- The different neurotransmitters cited in depression i.e. serotonin.
- Down regulation
- Serotonin reuptake.
- The role of MAO-A
- Monoamine hypothesis.
- The role of norepinephrine and the symptoms that causes such as lack of alertness and arousal.

For AO3 most common responses were:

- The use of SSRIs which help control symptoms.
- Alternative explanations such as cognitive/use of CBT
- Studies related to the different biological theories.

For Anorexia nervosa

AO1

- The role of the hypothalamus in satiation
- The dual hypothalamic theory
- What anorexia is
- Malfunction of the lateral hypothalamus
- The role of serotonin and noradrenaline.

AO3

- Biological reductionism in relation to the explanations.
- Studies related to the biological explanations
- Studies such as Backer which look at alternative explanations.
- The correlational aspect of these theories.

The major problem of responses was the lack of depth. Often candidates would know elements of the different theories but would not explain them in enough depth to achieve the higher marks. The AO3 was slightly stronger, as suggested, but tended to be a list like rather than evaluation.

Teachers need to ensure that candidates know the difference between description and evaluation in the extended open response.

This response achieved top level 2 and 8 marks

AO1 - bottom level 2. Some accurate knowledge about serotonin/the role of MAO-A but the points are fairly brief and superficial.

AO3 - top level 2/bottom level 3. The evaluation shows some development i.e. the use of SSRIs/alternative approaches such as the cognitive approach, alongside the use of CBT. Still slightly list like, however, so logical chains of reasoning are not always present (especially given the use of bullet points)

The heavier weighting of the AO3 means this responses stays at the top of level 2 and 8 marks.

Chosen mental health disorder

Unipolar depression

- ~~Psychologists~~ The 5-HTT gene regulates the level of serotonin in people's body.
- If the serotonin level is low due to dysfunctional 5-HTT gene, one would be likely to be diagnosed as unipolar depression because serotonin is a neurotransmitter that handles emotion and mood.
- Certain drugs are developed for increasing the serotonin level in order to reduce depressive symptoms, for example the SSRIs.
- Prozac belongs to the SSRI family that it increases the level of serotonin to treat unipolar depression.
- Tricyclics can also be used to boost serotonin and noradrenaline level in order

to help with unipolar depression.

- However, serotonin isn't the only biological explanation of unipolar depression. As the low level of noradrenaline also causes depressive symptoms.
- The monoamine hypothesis states that the excessive amount of MAO-A could reduce the level of monoamine oxidase which ^{breaks down} ~~produces~~ noradrenaline, and so ~~at~~ cause depression.
- In ~~is~~ order to deal with this, MAOI could effectively decrease the MAOA-A and thus increase the monoamine level in order to ease the depressive symptoms.
- Beyond that, ~~social or the natural factors~~ there're non-biological explanations ~~of~~ for unipolar depression.
- Freud believes depression is caused by traumatic experiences underlying one's ~~&~~ unconscious, for example bullying and sexual abuse.
- The psychoanalysis approach uses method such as the free association and dream analysis to reveal the client's unconscious,

therefore, the therapist could interpret the client's unconscious and to figure out ways in helping the client's traumatic experiences to be resolved in order to help him/her with his/her unipolar depression.

- Psychologists also suggest that depression is caused by a negative cognitive triad of thoughts, emotions, and behaviors that the patient overgeneralize, the negative events in his life to everything and so view himself as worthless in self-evaluation.
- The cognitive behavioral therapy (CBT) can therefore be used to change the depression patients' cognitive triad into a positive one through filling in the hot-cross bund.
- Hot cross bund is a two-by-two diagram that shows the ~~interconnected~~ connected ~~relationships~~ relationship of an individual's thought and behavior.
- Based on all of these, it's reductionist to ~~think unipolar~~ consider only the serotonin explanation branched from ~~biological~~ biological explanation, excluding all other biological ^{and non-biological} explanations.

- However, research had found there^{are} less relapse in unipolar depression if patients takes in prozac regularly.
- There may be the problem of over dose of prozac in the unipolar depression patients, which may be harmful to their health due to side effects.
- But prozac is cheap and easy to obtain for patients, adding to its effectiveness as the drug therapy for the serotonin explanation.
- Even though prozac is cheap and easy to obtain, ignoring the non-biological factors such as the traumatic experiences still causes relapse of the depression once the patients stop taking it.
- Additionally, research had shown a high drop out rate to take ~~the~~ medicines for increasing the serotonin level among the unipolar depression patients in the middle of the session.
- At last, excessive amount of serotonin ~~at~~ may lead to bipolar depression.

Question 06a

Question introduction.

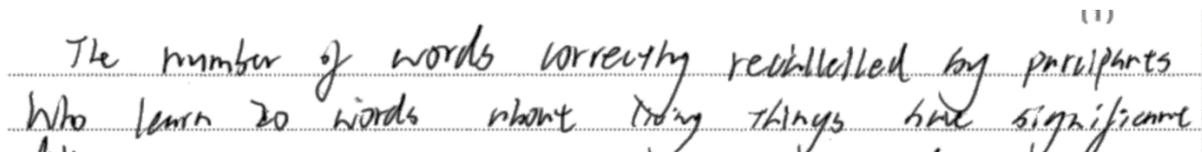
This 1-mark question asked candidates to state the fully operationalised dependent variable (DV) for Iram's experiment. This was comprised of a 1AO2 question. This question proved difficult for some candidates. As this DV had to be fully operationalised candidates needed to have:

- the number of words recalled
- and the **out of 20 words**.

The part that was often missing in responses was the out of 20 words which meant they were not able to achieve the mark.

The response achieved 1 mark

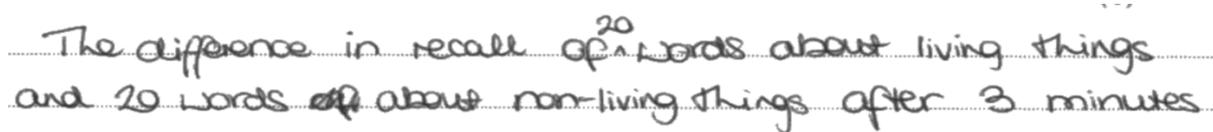
This has all elements needed: number of words recalled and the out of 20 words.



The number of words correctly recalled by participants who learn 20 words about living things had significant difference.

This response achieved 0 marks.

This is unfortunate as this response has the 20 words but talks about the difference in the number of words recalled which is not correct, so no marks awarded.



The difference in recall of 20 words about living things and 20 words about non-living things after 3 minutes.

Question 6bc

Question introduction

This two-part question comprised of 4AO2 mark calculation of a Wilcoxon test and a 1AO2 mark statement of significance. For the calculation the result had to be -12.5, and for the statement of significance candidates needed to say that the results are not significant and have the correct figure from the tables at the front. A couple of things to note:

- If -12.5 is the answer given anywhere then 4 marks are awarded automatically no matter the working out.
- It is always better to show working out just in case any part of the process is incorrect.
- For the statement of significance, the critical value needs to be correct at 3.
- If the candidate gives a different answer which is incorrect, they can still get the statement of significance mark using their own results as long as it is correct.

Candidates slightly struggled to get full marks on this question. Most candidates were able to get the first mark but often made mistakes with the ranking. Most candidates who got the correct answer in part a) got the 1 mark for the statement of significance.

This response got 4, 1 marks.

(b) Iram analysed her data using a Wilcoxon signed ranks test. Calculate the T value for the data gathered by Iram by completing Table 1.

The formulae and statistical tables can be found at the front of the paper.

You must show your working out.

(4)

Participant	Condition A: Words about living things	Condition B: Words about non-living things	Difference	Ranked difference
A	11	15	-4	6.5
B	14	12	2	3
C	9	11	-2	3
D	12	14	-2	3
E	14	13	1	1
F	16	16	0	
G	13	9	4	6.5
H	17	14	3	5

Table 1

Space for calculations

$$\sum \text{Rank positives} \rightarrow 3 + 1 + 6.5 + 5 = 15.5$$

$$\sum \text{Rank negatives} \rightarrow 6.5 + 3 + 3 = 12.5$$

$$T = 12.5$$

(c) State, using the data, whether Iram's results are significant for a one-tailed test at $P \leq 0.05$.

The formulae and statistical tables can be found at the front of the paper.

(1)

Results aren't significant for a one-tailed test at $P \leq 0.05$ as the calculated value (12.5) isn't less than the critical value (3).

Question 06d

Question introduction

This 1AO2 mark was for the correct calculation of the range of 8. The vast majority of candidates achieved the one mark available for this question.

$$17 - 9 = 8$$

Range: 8

Question 06e

Question introduction

The 1-mark AO2 question asked candidates to justify how changing the words could improve the validity of Iram's experiment. Candidates struggled slightly with this question with some talking about length of words in general without mentioning confounding variables/effect on the DV which was not enough for the mark. The most common creditworthy responses were:

- The controlling of extraneous variable of length of words which would affect recall.
- Controlling the difficulty of words meaning IV is the two conditions not word length.

This response achieved 1 mark.

Elimination of confounding variable of word length is fine for 1 mark.

(1)

Changing the words could improve the Iram's experiment's validity by eliminating the confounding variable of word length affecting recall. ~~Also makes~~

Question 07a

Question introduction.

This two-mark question introduced a novel scenario and required candidates to state two reasons why Haruto may have chosen to gather qualitative data in his study. This question comprised of 2AO2 marks. Candidates answered this question fairly well, with many candidates getting at least 1 mark with some get both marks. The most common answers seen were:

- The ability to gain in depth data about how the children play/communicate
- That the data would give detailed information about community life.
- The data would be able to be analysed using thematic analysis to come up with specific themes about life in the community.

Where responses did not achieve the full marks, it was for one of three main reasons.

- Firstly, if the responses were generic and did not talk about anything within the research study such as communication/playing etc.
- Secondly, as detailed and in-depth have a fair amount of crossover in terms of meaning, candidates could only get both marks if their points were about different aspects of the study i.e. in depth about how children play, detailed information about community life. If their expansion on the point was too similar, then 1 mark only would be given.
- Lastly, some candidates did a weakness of using quantitative data which was not creditworthy as it did not answer the question.

This response achieved 2 marks.

This is a really nice response. The first point gets the mark for the idea of rich detail and insight about the children's behaviours in the community. The second point gets a mark for the use of thematic analysis to look for patterns in the behaviours of the children in the community.

1 Qualitative data provides rich detail, which will provide Haruto's study with deeper insight on the social behaviours of children in a remote community.

2 Haruto will be able to analyse his data thematically to find trends and themes, which will provide his study with information on patterns of the social behaviours of children in a remote community.

This response achieved 0 marks.

The first point is incorrect as it is not easier to analyse qualitative data (and even if it was correct the response is generic). The second point is an example where the candidate just talked about the weakness of quantitative data only. If they have used quantitative as a comparative point with qualitative data (such as saying qualitative will provide more detail than quantitative) then that's fine but not when they only talk about quantitative alone (and again it was also generic).

(a) State **two** reasons why Haruto may have chosen to gather qualitative data in his study.

(2)

- 1 It is easier to analyse qualitative data in the context of his research aim, and the duration of the research
- 2 Coding quantitative data in this context will bring down the range of the possible data and limit the amount of usable data.

Question 07b

Question introduction

This two-mark question required candidates to describe how Haruto could use a naturalistic observation in his study. This question was comprised of 2AO2 marks and so there needed to be context for each mark. For this question candidates needed to complete two elements

- Suggest a place where the observation can take place i.e. a children's playground, at an event where adults and children are interacting
- How the data would be collected i.e. writing down the skills the children show in their interactions.
-

Many candidates could gain 1 mark for stating a relevant place to observe, but far fewer went on to talk about how the data would be collected and so only achieved the 1 mark.

This response achieved 2 marks

1 mark for observing in a park where children communicate with each other and adults
1 mark for recording the context/key words from that the children were saying/their communication.

(b) Describe how Haruto could use a naturalistic observation within his study.

(2)

Haruto could set his observation setting at park where children may communicate with each other and the adults around them as real life behaviour. Then Haruto record the context children saying or key words from observe children's communication.

This response achieved 1 mark

This response achieved their mark for suggesting a relevant place in context (public area such as a shop/park) where the children are interacting with the adults, but no further mark as there is nothing about how the data was collected.

(2)

Haruto may ~~to~~ observe the children in
the public area ^{Such as shop, park,} when the children are interact
with the adults.

Question 07c

Question introduction

This two-mark question required candidates to explain one way that Haruto could improve the reliability of his study. This question comprised 1AO2 and 1AO3 mark therefore there needed to be context in the response to achieve any of the marks. Candidates found this question a challenge, with many failing to achieve any marks. Where candidates did achieve marks, it was usually due to the idea of using another researcher in addition to Haruto to record the children's activities. Unfortunately, many candidates would then say that this would improve inter-rater reliability. This is not enough for the second mark, for candidates to achieve a mark related to inter-rater reliability they need to make it clear that the results from both observers need to be compared to ensure that the same results were found – this would then increase inter-rater reliability. Teachers need to ensure that candidates do not just use terms such as inter-rater reliability etc without explaining what they mean, and how it can be achieved. Just naming a term will not achieve the mark available.

This response achieved 2 marks

This response achieved 1 mark for giving all his reports about the community to another researcher to come up with themes, and a further mark for reducing subjectivity of analysing them himself, increasing reliability.

- he could give all his reports about the findings of this community to another researcher to read through & come up with themes for social behaviours as Haruto's viewpoint of the community may be subjective if he himself analyses his data. Having another person to review his work would increase reliability.

(Total for Question 7 = 6 marks)

Question 08

Question introduction

This 6-mark question presented a novel scenario and required candidates to explain three weaknesses of Rene using a case study method to investigate the patients long term memory loss. This question was comprised of 3AO2 marks and 3AO3 marks. This question produced the full range of marks, although very few actually achieved all 6 marks. It was pleasing to see however, that also very few candidates did not achieve any marks at all.

Creditworthy responses for AO2 would include:

- Subjectivity/researcher due to working with the patient every day.
- The use of only one 27-year-old patients reduces the generalisability
- The fact that most of the data will be qualitative from discussions with the patient.
- Practical aspects such as it being time consuming visiting every day

AO3 justification would then be:

- Reducing reliability as researcher interpretation may be influenced by the close relationship formed.
- That this would not be representative of all patients with memory loss/that it would be difficult to generalise beyond the current patient.
- Qualitative data can be subjective as it requires interpretation of researcher (who may be biased) reducing reliability
- That the researcher may find they cannot go every day so may be gaps in the data reducing validity.

As was the case with the previous 6-mark question, many candidates were able to get some of the AO2 points but then did not justify them well enough to achieve the second mark. For example, when talking about the single person used then candidates would need to see that it is not **REPRESENTATIVE** of the population studied and therefore cannot be **GENERALISED** to all people with memory loss.

This response achieved 5 marks

- 1st point achieved 2 marks – visiting patient each day causes researcher bias (1) as the patient/researcher may develop love and affection towards each other (1)
- 2nd point achieved 1 mark – only one 27-year-old patient (1) need both representativeness and generalisability for the second mark, however, which this response did not have.
- 3rd point achieved 2 marks – discussion with patient will lead to qualitative data which may be subjective (1) decreasing objectivity as this type of data will need interpretation (1)

1. Due to Rene visiting the patient every day for three months, results of the 27 year old patient may be affected by researcher bias due to the patient developing care and affection towards the researcher and vice versa.

2. ~~The patient 27 year old patient's case study is a unique situation in which he may be Rene is~~ is only studying the 27 year old patient's unique case, where results and findings about his long-term memory loss will not be generalised to a whole population as the patient's individual factors may have an effect on results.

3. Rene conducting discussions with the patient will gather qualitative data, which provides rich detail* but is subjective and needs interpretation ^{by} of Rene, reducing objectivity of findings.

* about the patient's long-term memory loss.

(Total for Question 8 – 6 marks)

Question 09

Question introduction

This 8-mark extended open response asked candidates to discuss the key question about the use of animals in psychological research using the information given in the context. This question was comprised of 4AO1 and 4AO2 marks. There were some pleasing responses to this key question, with a full range of marks seen. There were few responses in the 7–8-mark range however many candidates were able to achieve at least half marks which was pleasing to see. Candidates used the scenario well and often brought in their own knowledge about other studies where animals were used (please note that this would be AO1 as the AO2 needs to be from the scenario alone). Consequently, the AO1 element of the response was often the strongest though many a really good attempt at both the AO1 and AO2 elements.

For AO1 acceptable responses could include:

- The housing of the animals
- The stress that the animals may be under
- Other research which highlights specific ethical issues such as Skinner and Pavlov.
- That animal use is governed by the scientific procedures Act
- That researchers need a license to use animals.
- The use of a cost benefit analysis to see whether the research will be of benefit to society, and worth the cost to the animal
- That in some research circumstances humans could not be used.

For AO2 acceptable responses could include:

- That the Monkeys in Harlow's study suffered distress/as did the rats in Van den Oever
- That you could not use humans in the Van den Oever study as you cannot make someone addicted to drugs.
- That benefits such as drug therapy/understanding of the attachment bond may outweigh the costs.
- The benefits of drug treatments which may outweigh the costs to the rats.

This response achieved level 3 and 5 marks

- The AO1 contains some relevant information about housing/stress/ skinner's study and so is level 2
- The AO2 is stronger with the two thoughtful paragraphs about Harlow and van den Oever which are linked well to ethical issues. This is strong level 3

The stronger AO2 allows this response to remain in level 3 but at the bottom and 5 marks.

→ Just like how humans have BPS, code of ethics and etc, there are a set of rules and regulations which are to be followed by the researchers while conducting an experiment which involves the use of animals.

→ The animals must not be caged through out the experiment and also, ~~the~~ their basic needs like food and water must be provided.

→ The animals used in the experiment or research place, they should not ^{be troubled} ~~be troubled~~ in anyway.

→ In Skinner's experiment, the pigeons and rats were given an electric shock as a negative reinforcement. Even though it was causing distress it later contributed in understand more about the

operant conditioning, so it can outweigh the unethical.
→ To study the different parts of brain, animals such as rats are used instead of humans because the value of a life of a human is greater. And moreover, the study will later be the reason for new theories and more. So apart from it being unethical, it outweighs it.

→ In the context, Harlow separates rhesus monkeys from infancy upto a certain age. This would mean that the monkeys are distressed and caged. So, according to the code of ethics, this should be considered ~~an~~ unethical. But here, it is necessary and can not be avoided. The results of the study can later be generalised to humans as well. So the benefits to the society outweighs the unethical of this study.

→ Similarly, in the second study of van den Oever et al, he made the rats to get addicted to heroin, a drug. This would again cause distress to the rats. But here drugs to reduce or get rid of this particular addiction is being made. So here again it is necessary to do this. So here also, the benefits of to the society outweighs the cost of the rats.

Question 10

Question introduction.

This 20-mark extended open response asked candidates to assess the extent to which the use of psychological knowledge can be used for social control. This question was comprised of 8AO1 and 12AO3 marks meaning that candidates needed to focus slightly more on the AO3 assessment element of the question, which many candidates did do through the use of appropriate research. Candidates answered this question well, with many achieving more than half marks for this question. Where candidate responses performed less well it was often due to candidates just describing everything, they had learned in psychology without actually answering the question. These types of response tended to be maximum level 2 responses. To achieve into the higher bands' candidates needed to

Look at different areas of psychology and how they can be used for social control. In addition, what is meant by social control can also be used as (AO1), such as:

- Definitions of social control.
- How social psychology can inform social control in terms of power/obedience.
- How arguments such as holism would suggest it's about nature as well as nurture which cannot always be controlled.
- How biological psychology can suggest some negative behaviours may be pre-determined and therefore may need controlling in some way.
- How social control is a positive in some areas such as treatments, during an emergency situation.
- How social learning theory and the influence of media can lead to some forms of control such as the watershed

Evidence from areas of psychology which could show the extent to which it is used for social control (AO3)

- How operant conditioning (Skinner) can be used to reduce undesirable behaviours which are determined by those in power.
- How the majority can influence the minority to behave in a certain way.
- Milgram and how authority figures can ensure people obey through saying they are not responsible for their actions.
- How Bowlby's research can be used to suggest mothers need to stop at home and look after children
- Rosenhan and how people with mental ill health can be labelled and controlled in psychiatric institutions
- How controls over TV and Games can actually be a positive and reduce aggressive and violent behaviours.
- How the powerful ensured that people obeyed during the Covid pandemic through the use of fear and punishment.
- How aversion therapy can be used to remove undesired behaviours (with some citing how homosexuality was seen as undesired in the past)

There of course is many more, and candidates really did seem to understand this question and produced some really thoughtful responses, with a number of judgements throughout.

This response achieved level 4 and 14 marks.

- The AO1 has accurate knowledge and understanding of social control i.e. why genocide occurs/optimum levels of authority/biological treatment and is top level 3.
- The AO3 has a breadth of studies across many areas of psychology with some nice links back to the question. This is bottom level 4 and just needed a little more depth on some of the evidence to achieve level 5.

The excellent AO3 allows this response to remain in level 4 but at the bottom end and 14 marks.

~~Milgram's~~ Some argue that psychological knowledge is often used for social control, and this can be used negatively and positively. For example Milgram study on obedience provided basis for why ~~per~~ individual ~~is~~ followed orders of an authority figure. This provides us context to why the holocaust happened and helps us prevent further atrocities such as Mei Lai massacre, as ~~more~~ precautions can be taken place in order to reduce such obedience. However, further theories developed on obedience such as social power allow some individuals exploit this. By understanding the optimum level required to become an authority figure, individuals can exploit those in vulnerable position and exert their power over them.

Further more theories such as minority influence brought forth by Moscovici can be used to exert influence on the majority. ~~##~~ Understanding this knowledge can allow a person or a minority group to influence a larger group by being consistent, firm and flexible, promoting their ideologies to them.

~~Furthermore~~ ~~Therefore~~ Theories such as conformity studied by Asch can be used to influence ~~a~~ group. By creating a social norm and acting on it, an individual can manipulate another to conform to such behaviour. This shows how those in power can exploit others in vulnerable positions in order to create what is they feel or see is desirable.

Moreover, in clinical psychology, clinicians have social control as they have the power to ~~do~~ diagnose a person with a mental disorder. This may create stigma around the person. Clinicians have the power to classify them as such and they are done through subjective interpretation. If they happen to be wrong, the individual may change his/her behaviour pattern due to the labelling. Rosenhan ~~et~~ studied this and concluded that clinicians may not be accurate in diagnosis and once diagnoses, there is a possibility that patient is dehumanised and are not treated equally.

Bowlby's theory on maternal deprivation hypothesis allows us to understand that quality and time ~~given~~ provided for the

Infant is important in order to form a secure attachment and benefit from a full development. ~~If~~ If not looked after, this cause affectlessness psychopathy.

He proved this theory through the 44 juvenile thieves study. However due to these mothers, especially working mothers, are pressured to spend time with the baby which they may not be able to afford causing them to feel guilty.

~~For~~ On the other hand Milgram's Study on obedience can be used in education, context and society overall. For example police and teachers. The teachers can exert authority over students in order to get the work done and help with ~~for~~ her students' development, and teaching of skill. The theory on authority figure and use of uniforms is used by police, commanders and higher-ups in general, and this can be used positively in order to maintain rules and regulation. Furthermore, this allows individuals to better train soldiers and make them follow commands as required.

Theories such as classical conditioning and operant condition can be used as a method of social

control. ~~This~~ ~~is~~ The reward and punishment system can be used to enforce and eliminate certain behaviours in people. This used especially in context such as children and the education field.

~~Further~~ However biological explanation such as brain damage and testosterone on aggression may cause aggressive individual to exert violence on others. These biological explanation are supported by Raine et al, and these individual who are proved to be aggressive by nature, may use it as a defence to inflict harm on other.

Theories such as social learning help us understand that ~~these~~ aggression can be learnt through exposure to media, ~~and this~~ looking up at criminals as role models and playing violent video games. Carriers can use such information in order to limit or stop these influences from affecting these child altogether.

Biological explanation on aggression also allow individual who truly are suffering from brain

damage or ~~testosterone~~ cortisol imbalance from being convicted ~~as~~ guilty of their behaviour. These ~~being~~ ^{individual} allow them to be not guilty by reason of insanity allowing them to ~~go~~ receive treatment by psychiatric wards where they can improve their mental health. Additionally psychology ~~can~~ develop treatments such as drug therapy and ECT allow individuals suffering from mental health to carry out day to day activities normally without distress. This indicates social control on their own self, as they gain free will. ~~However~~ ^{For example} some individual prefer not to take the treatment. Rosa found that 50% of schizophrenic patient preferred not to take the medicine, indicating that they have social control on themselves.

Paper Summary

Based on their performance on this paper candidates are offered the following advice:

- Within their extended open responses, candidates should give balanced arguments and elaborated points which lead to making informed conclusions or judgements (where appropriate) in relation to the question content.
- Where candidates are asked for improvements, they should focus on an improvement and justify how or why this would be an improvement. Many are still presenting a weakness of the study/scenario/practical rather than a justified improvement.
- Generic points should be avoided, candidates need to give specific responses that are clearly linked to the question content and command word, especially in scenario-based questions.
- Candidates should write in full sentences in responses that require detailed information in the answers. Bullet pointed lists of key terms or brief phrases are not appropriate and are unlikely to get to the higher bands in extended open responses,
- Six mark analyse/explain questions are still proving to be difficult for candidates. This is an area that teachers should focus on, especially in terms of structure of responses through the use of novel scenarios and past paper questions
- When working through calculation questions working out should always be shown to allow for marks to be given even if the end result is incorrect.
- Ensure candidates understand the expectations for different command words especially when asked to explain a weakness or a strength as some are still just describing here and therefore would not achieve marks.
- Ensure when using terminology such as reliability/objectivity/validity that they are explained properly within the context of the question. Just stating a term is not enough to achieve marks.

