GradeMax



Mark Scheme (Results)

Summer 2019

Pearson Edexcel International A Level
In Psychology - Unit 4: Clinical psychology and psychological skillsCombined Science - (WPS04) Paper 01

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General Marking Guidance

- All candidates must receive the same treatment. Examiners must mark the first candidate in exactly the same way as they mark the last.
- Mark schemes should be applied positively. Candidates must be rewarded for what they have shown they can do rather than penalised for omissions.
- Examiners should mark according to the mark scheme not according to their perception of where the grade boundaries may lie.
- There is no ceiling on achievement. All marks on the mark scheme should be used appropriately.
- All the marks on the mark scheme are designed to be awarded. Examiners should always award full marks if deserved, i.e. if the answer matches the mark scheme. Examiners should also be prepared to award zero marks if the candidate's response is not worthy of credit according to the mark scheme.
- Where some judgement is required, mark schemes will provide the principles by which marks will be awarded and exemplification may be limited.
- When examiners are in doubt regarding the application of the mark scheme to a candidate's response, the team leader must be consulted.
- Crossed out work should be marked UNLESS the candidate has replaced it with an alternative response.

Question Number	Answer	Mark
1(a)	**AO1 (3 marks)** Credit up to **three** marks for description of the symptoms and/or features of schizophrenia. For example: • One symptom is auditory hallucinations, which is where sufferers hear something that is not there (1) such as if they hear voices telling them that they are useless (1). Another symptom may be where sufferers are delusional, believing something that is not true (1). **Look for other reasonable marking points.**	**(3)**

Question Number	Answer	Mark
1(b)	**AO1 (2 marks), AO3 (2 marks)** Credit **one** mark for accurate identification of each strength (AO1) Credit **one** mark for justification/exemplification of each strength (AO3) For example: **Unipolar depression** Strength one • Geddes et al. (2003) found that antidepressants which increase serotonin were effective in reducing relapse which links depression to neurotransmitter levels (1) and showed an 18% relapse vs. 41% for a placebo group which lasted up to three years so gives the monoamine hypothesis validity (1). Strength two • Emslie et al. (1997) found that fluoxetine was significantly more effective than placebo in two RCTs with children and adolescents which supports the monoamine hypothesis (1) as it shows that SSRIs like fluoxetine which increase serotonin gives the theory validity with different populations (1). **Anorexia nervosa** Strength one • Kortegaard et al. (2001) found concordance for twins was higher in MZ than DZ twins which supports the view that genes contribute to anorexia (1) with heritability estimates of 0.48 for narrow definitions of self-reported anorexia of 34,142 young Danish twins, giving the theory validity (1). Strength two • Bulik et al. (2006) found heritability of narrowly defined anorexia of 0.56 which supports at least part genetic basis for the disorder (1) and suggests that more than half of the cause of disorder is heritable when assessing 31,406 twins in Sweden so the explanation has validity (1). **Look for other reasonable marking points.**	**(4)**

Question Number	Answer	Mark
2(a)	**AO1 (1 mark)** Credit **one** mark for an accurate statement of an aim. For example: • To see whether sane people could be distinguished from the insane using the DSM (1). **Look for other reasonable marking points.**	**(1)**

Question Number	Answer	Mark
2(b)	**AO1 (2 marks), AO3 (2 marks)** Credit **one** mark for accurate identification of strength/weakness (AO1) Credit **one** mark for justification/exemplification of strength/weakness (AO3) For example: Strength • Rosenhan (1973) has high ecological validity as it is in a real life context of hospitals (1) and the pseudo patients were admitted to real psychiatric units so results have validity (1). Weakness • Rosenhan (1973) can be considered unethical due to deception (1) because the staff at the hospitals were deceived about patient symptoms and were not told they were being studied (1). **Look for other reasonable marking points.**	**(4)**

Question Number	Answer	Mark
2(c)	**AO1 (1 mark), AO3 (1 mark)** Credit **one** mark for accurate identification of one improvement (AO1) Credit **one** mark for justification/exemplification of the improvement (AO3) For example: • Rosenhan could have gained consent from the staff within the hospitals not just the person in charge (1) which would have meant Rosenhan gave the staff a choice about whether to participate as they could not give this in the original study (1). **Look for other reasonable marking points.**	**(2)**

Question Number	Answer	Mark
3	**AO2 (3 marks), AO3 (3 marks)** Credit **one** mark for accurate identification of each point in relation to the scenario (AO2) Credit **one** mark for justification/exemplification of each point (AO3) For example: • Henima does not need to be overly concerned as Brown et al. (2001) found good reliability in the diagnosis using the DSM-IV in 362 outpatients (1) as there was good-to-excellent consistency for most of the DSM categories for anxiety and mood disorders (1). • As Henima received two different diagnosis, she might be concerned about the reliability of clinical diagnosis (1). Goldstein (1998) found that depending on the version of the DSM used there could be differences in diagnosis (1). • Andrews et al. (1999) found agreement in diagnosis for depression, substance dependence and anxiety, highlighting good criterion validity (1) when assessing 1500 people with the DSM-IV and ICD-10 so Henima should not be worried about the validity of the DSM or ICD (1). **Look for other reasonable marking points.** **Generic answers score 0 marks.**	**(6)**

Question Number	Answer	Mark
4	**AO2 (4 marks)** Credit up to **four** marks for an accurate description in relation to the scenario. For example: • Sadiah would need to give her main impression of the article about family therapy and say whether the research adds to the knowledge base (1). She would have to check that the article adheres to the standards of 'Super Psychology Research' and point out any areas that need to be updated to make them consistent (1). Within her review Sadiah would have to give specific comments and suggestions regarding the method the authors may have used in their family therapy study (1). Sadiah would make a recommendation to the editor in terms of whether the articles would be accepted without revision, rejected with her reasons, or accepted if certain revisions are made (1). **Look for other reasonable marking points.** **Generic answers score 0 marks.**	**(4)**

Question Number	Answer	Mark
5(a)	**AO1 (2 marks)** Credit **one** mark for an accurate statement of each feature of the ICD. For example: • The ICD covers all health conditions and not only mental disorders (1). • The ICD is multilingual and not restricted to a single country or language (1). **Look for other reasonable marking points.**	**(2)**

Question Number	Answer	Mark
5(b)	**AO3 (2 marks)** Credit up to **two** marks for comparison of the DSM IVR and DSM V. At least one similarity **and** one difference is required for full marks. For example: • Both the DSM IVR and DSM V use a categorical classification of separate disorders with lists of symptoms for each (1). However, one difference is that there is a single condition called autism spectrum disorder in the DSM V which includes four separate disorders from the DSM IVR (1). **Look for other reasonable marking points.**	**(2)**

Question Number	Answer	Mark
6(a)	**AO2 (1 mark), AO3 (1 mark)** Credit **one** mark for an accurate identification of a conclusion in relation to the scenario (AO2) Credit **one** mark for justification/exemplification of the conclusion (AO3) For example: • Young people held more positive attitudes towards people who had been diagnosed with a mental health issue (1) as there were 13 with positive attitudes compared to 3 with neutral and 5 with negative attitudes (1). **Look for other reasonable marking points.** **Generic answers score 0 marks.**	**(2)**

Question Number	Answer	Mark
6(b)	**AO2 (1 mark), AO3 (1 mark)** Credit **one** mark for an accurate identification of a weakness in relation to the scenario (AO2) Credit **one** mark for justification/exemplification of the weakness (AO3) For example: • The young people may have lied in their responses so the results may not be valid regarding their attitudes to people diagnosed with a mental health disorder (1) as they may have given a more positive attitude than what they really thought due to social desirability bias (1). **Look for other reasonable marking points.** **Generic answers score 0 marks.**	**(2)**

Question Number	Indicative content	Mark
7	**AO1 (6 marks), AO3 (10 marks)** **AO1** • A biological treatment is the use of anti-psychotic drugs which aim to change the chemistry in the brain. • Drug therapy is based on biological explanations of schizophrenia, such as the dopamine hypothesis. • Anti-psychotic drugs block dopamine receptors so minimising the effect of dopamine. • Drug therapy consists of anti-psychotic medication which suppresses hallucinations and delusions, and can be used with anti-depressants. • A patient can take the anti-psychotic medication in syrup or tablet form. • If patients forget to take them then medical practitioners could inject the anti-psychotic drugs. **AO3** • Anti-psychotic drugs allow patients to stay in society rather than become institutionalised. • Phenothiazine drugs block dopamine receptors and patients show signs of improvement and a reduction in schizophrenic symptoms. • Bustillo et al. (2001) found that Assertive Community Treatments (ACT) have clear effects on the prevention of psychotic relapse and rehospitalisation, so drug therapy based on biological explanations is not sufficient on its own. • Meltzer et al. (2004) found patients using haloperidol had reduced symptoms of schizophrenia and showed improvements in day to day functioning. • Emsley (2008) found that risperidone injections reduced both positive and negative symptoms of schizophrenia, with 64% of patients having no symptoms two years on. • Adityanjee and Kaizad (2005) found that in 0.05% of patients, anti-psychotic drugs lead to neuroleptic malignant syndrome which causes nausea, high blood pressure, confusion, coma, and in 10% of cases, death. • Anti-psychotics have serious side effects such as a decrease in motivation so schizophrenics may prefer not to take them. • Rosa et al. (2005) found only 50% of patients complied with taking their anti-psychotics. • Pickar et al. (1992) showed clozapine was most effective with the placebo least effective when 21 schizophrenic patients were given either a placebo, clozapine or fluphenazine. • A meta-analysis (Hartling et al., 2012) reviewed 114 studies and found it difficult to reach overall conclusions of antipsychotic effectiveness due to possible bias, brief follow-up trials, and use of selective populations. **Look for other reasonable marking points.**	**(16)**

Level	Mark	Descriptor
AO1 (6 marks), AO3 (10 marks) Candidates must demonstrate a greater emphasis on evaluation/conclusion vs knowledge and understanding in their answer. Knowledge & understanding is capped at maximum 6 marks.		
	0	No rewardable material.
Level 1	1-4 Marks	Demonstrates isolated elements of knowledge and understanding. (AO1) A conclusion may be presented, but will be generic and the supporting evidence will be limited. Limited attempt to address the question. (AO3)
Level 2	5-8 Marks	Demonstrates mostly accurate knowledge and understanding. (AO1) Candidates will produce statements with some development in the form of mostly accurate and relevant factual material, leading to a superficial conclusion being made. (AO3)
Level 3	9-12 Marks	Demonstrates accurate knowledge and understanding. (AO1) Arguments developed using mostly coherent chains of reasoning leading to a conclusion being presented. Candidates will demonstrate a grasp of competing arguments but evaluation may be imbalanced. (AO3)
Level 4	13-16 Marks	Demonstrates accurate and thorough knowledge and understanding. (AO1) Displays a well-developed and logical evaluation, containing logical chains of reasoning throughout. Demonstrates an awareness of competing arguments, presenting a balanced conclusion. (AO3)

Question Number	Answer	Mark
8(a)	**AO2 (4 marks)** Credit up to **four** marks for an accurate description in relation to the scenario. For example: • PET scanning would allow Arina to see active parts of the brain during a joke being told, as it is a functional scanning technique (1). Arina would have to inject the patient with a radioactive tracer substance before they are told jokes (1). When they watch a video of comedians telling jokes the tracer would break down, emitting positrons (1). The positrons would collide with electrons to create gamma rays which the scanner picks up and would give Arina a colour map of the brain when jokes were being told (1). **Look for other reasonable marking points.** **Generic answers score 0 marks.**	**(4)**

Question Number	Answer	Mark
8(b)	**AO1 (2 marks), AO3 (2 marks)** Credit **one** mark for an accurate identification of strength/weakness (AO1) Credit **one** mark for justification/exemplification of strength/weakness (AO3) For example: Strength • PET scanning is an objective method which can be interpreted by multiple researchers (1) which is a strength because the interpretation of brain activity is reliable due to consistency between the researchers (1). Weakness • PET scanning takes place in artificial surroundings where participants lie down on a table in a laboratory (1) which means brain activity of participants could be different to that in the real world where they are active so lacks ecological validity (1). **Look for other reasonable marking points.**	**(4)**

Question Number	Answer	Mark
9(a)	**AO2 (2 marks)** Credit **one** mark for each appropriate estimation of the total score. For example: Condition A • 100 (1) (20+20+15+25+20) Condition B • 70 (1) (10+15+10+20+15) **Look for other reasonable marking points.**	**(2)**
Question Number	Answer	Mark
9(b)	**AO2 (1 mark)** Credit **one** mark for calculating the mean score to four significant figures. For example: • 13.99 (1) **Reject all other answers.**	**(1)**
Question Number	Answer	Mark
9(c)	**AO2 (3 marks)** Credit **one** mark for an accurate identification of the appropriate statistical test. Credit up to **two** marks for appropriate reasoning for using the statistical test. For example: • Skylar would use a Wilcoxon signed ranks test for the rat study (1). This is because she is using a repeated measures design as each rat did the maze with and without a reward (1) and she is using interval/ratio data with the number of seconds it took the rats to complete the maze (1). **Look for other reasonable marking points.** **Generic answers score 0 marks.**	**(3)**

Question Number	Answer	Mark
10(a)	**AO2 (1 mark), AO3 (1 mark)** Credit **one** mark for an accurate identification of a possible extraneous variable in relation to the scenario (AO2). Credit **one** mark for justification/exemplification of the extraneous variable (AO3). For example: • Ahmed should have made sure that the participants played the violent and non-violent game for the same amount of time, such as 20 minutes (1) because if they played the violent game for longer, this might mean they are more aggressive just because of the amount of time spent playing the game (rather than the content) (1). **Look for other reasonable marking points.** **Generic answers score 0 marks.**	**(2)**

<table>
<tr><th>Question Number</th><th>Answer</th><th>Mark</th></tr>
<tr><td>10(b)</td><td>
AO2 (4 marks)

Credit one mark for accurate completion of O-E column to one decimal place

Credit one mark for accurate completion of (O-E)^2 column one decimal place

Credit one mark for accurate completion of (O-E)^2/E column to one decimal place

Credit one mark for correct chi-squared to one decimal place = 8.4

<table>
<tr><th></th><th></th><th>Observed</th><th>Expected</th><th>O-E</th><th>(O-E)^2</th><th>(O-E)^2/E</th></tr>
<tr><td rowspan="2">Violent video game</td><td>Less than 10 aggressive thoughts</td><td>7</td><td>11.5</td><td>-4.5</td><td>20.3</td><td>1.8</td></tr>
<tr><td>More than 10 aggressive thoughts</td><td>13</td><td>8.5</td><td>4.5</td><td>20.3</td><td>2.4</td></tr>
<tr><td rowspan="2">Non-violent video game</td><td>Less than 10 aggressive thoughts</td><td>16</td><td>11.5</td><td>4.5</td><td>20.3</td><td>1.8</td></tr>
<tr><td>More than 10 aggressive thoughts</td><td>4</td><td>8.5</td><td>-4.5</td><td>20.3</td><td>2.4</td></tr>
<tr><td colspan="4"></td><td colspan="2">Chi squared =</td><td>8.4</td></tr>
</table>
Look for other reasonable marking points.
</td><td>(4)</td></tr>
</table>

Question Number	Indicative Content	Mark
11	**AO1 (4 marks), AO2 (4 marks)** **AO1** • The dopamine reward system is stimulated when individuals perform rewarding actions. • Personality has been shown to affect obedience / prejudice so could be influential in drug taking. • Genetic factors are linked to the likelihood of certain behaviours such as aggression so could be influential in drug taking. • Social learning theory would assume individuals observe and imitate role models. **AO2** • Pleasure seeking was cited by Newton et al. (2009) which could be the dopamine reward system being stimulated. • Impulsivity is cited by Newton et al. (2009) and is part of an individual's personality so shows biological factors contribute to drug taking. • A genetic predisposition to drug taking may make an individual vulnerable to drug taking but does not definitely mean they will take drugs and so indicates there must be more than just biological factors involved. • Role models such as musicians may sing and show drug taking in videos so they could be imitated and as such this could be a viable alternative to biological factors. **Look for other reasonable marking points.**	**(8)**

Level	Mark	Descriptor
AO1 (4 marks), AO2 (4 marks) Candidates must demonstrate an equal emphasis between knowledge and understanding vs application in their answer.		
	0	No rewardable material
Level 1	1–2 Marks	Demonstrates isolated elements of knowledge and understanding. (AO1) Provides little or no reference to relevant evidence from the context (scientific ideas, processes, techniques and procedures). (AO2)
Level 2	3–4 Marks	Demonstrates mostly accurate knowledge and understanding. (AO1) Discussion is partially developed, but is imbalanced or superficial occasionally supported through the application of relevant evidence from the context (scientific ideas, processes, techniques and procedures). (AO2)
Level 3	5–6 Marks	Demonstrates accurate knowledge and understanding. (AO1) Arguments developed using mostly coherent chains of reasoning. Candidates will demonstrate a grasp of competing arguments but discussion may be imbalanced or contain superficial material supported by applying relevant evidence from the context (scientific ideas, processes, techniques and procedures (AO2)
Level 4	7–8 Marks	Demonstrates accurate and thorough knowledge and understanding. (AO1) Displays a well-developed and logical balanced discussion, containing logical chains of reasoning. Demonstrates a thorough awareness of competing arguments supported throughout by sustained application of relevant evidence from the context (scientific ideas, processes, techniques or procedures). (AO2)

Question Number	Indicative content	Mark
12	**AO1 (8 marks), AO3 (12 marks)** **AO1** • Psychological understanding of obedience has developed over time through repeated testing in a variety of research settings. • Theories of prejudice focused on personality factors such as fascism but have developed over time to encompass numerous personality types. • The modifications made to the Working Memory Model have developed psychological understanding of working memory over time. • A simplified view of the memory process was offered by the multi-store model which was later developed by other theories such as the WMM. • Dissatisfaction over body image and weight could arguably be due to technological advances over time which has increased exposure to Western TV. • Research in the 1960s showed role models could increase violence through modelling with more recent studies showing humanness is a factor in violence. • Brain scanning has developed with the invention of fMRI over time to enable different and further investigation into brain structure and function. • The DSM-V has changed diagnostic features to account for changes in mental health issues over time to narrow some categories and broaden others. **AO3** • Burger (2009) found blind obedience to authority is still similar to that of Milgram's research in the 1960s, which shows individuals are still willing to blindly obey authority figures and commit harmful acts. • Cohrs (2012) found RWA, SDO, Agreeableness, and Openness to Experience were all related to prejudice which shows that psychological understanding of prejudice has developed over time. • Baddeley added the episodic buffer and linked working memory and LTM so has developed understanding of memory over time. • Later theories developed understanding of memory further by splitting the STM and LTM into further forms of STM and LTM when the MSM only considered a single unitary store for both short-term memory and	**(20)**

	long-term memory. • Becker et al. (2002) increased the understanding of causes of eating disorders as they found that over time Fijian women began to develop eating disorders after exposure to Western TV channels. • Bandura's research showed imitation of role models increased violence and more recently Bastian et al. (2011) found violent video games diminish humanity which can increase violence which has further developed psychological understanding of aggression. • fMRI shows both the structure and function of the brain during a scan which has developed over time from only the structure with MRI. • fMRI scans can give a greater understanding of human behaviour and development as they have enabled safe scanning of brains without the risk of exposure to radiation so studies can now be done on children and pregnant women. • Understanding of mental health issues has developed over time which is shown by the DSM V modifying ADHD to show it can continue into adulthood. • By integrating scientific findings from the latest research in genetics and neuroimaging the DSM V has improved clinicians' ability over time to identify diagnoses based on common causes. **Look for other reasonable marking points.**	

Level	Mark	Descriptor
AO1 (8 marks), AO3 (12 marks) Candidates must demonstrate a greater emphasis on assessment/conclusion vs knowledge and understanding in their answer. Knowledge & understanding is capped at maximum 8 marks.		
	0	No rewardable material.
Level 1	1–4 Marks	Demonstrates isolated elements of knowledge and understanding. (AO1) Generic assertions may be presented. Limited attempt to address the question. (AO3)
Level 2	5–8 Marks	Demonstrates mostly accurate knowledge and understanding. (AO1) Candidates will produce statements with some development in the form of mostly accurate and relevant factual material, leading to a generic or superficial assessment being presented. (AO3)
Level 3	9–12 Marks	Demonstrates accurate knowledge and understanding. (AO1) Arguments developed using mostly coherent chains of reasoning, leading to an assessment being presented which considers a range of factors. Candidates will demonstrate understanding of competing arguments/factors but unlikely to grasp their significance. The assessment leads to a judgement but this will be imbalanced. (AO3)
Level 4	13–16 Marks	Demonstrates accurate and thorough knowledge and understanding. (AO1) Displays a logical assessment, containing logical chains of reasoning throughout which consider a range of factors. Demonstrates an understanding of competing arguments/factors but does not fully consider the significance of each which in turn leads to an imbalanced judgement being presented. (AO3)
Level 5	17–20 Marks	Demonstrates accurate and thorough knowledge and understanding. (AO1) Displays a well-developed and logical assessment, containing logical chains of reasoning throughout. Demonstrates a full understanding and awareness of the significance of competing arguments/factors leading to a balanced judgement being presented. (AO3)

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