



Rewarding Learning

**ADVANCED
General Certificate of Education**

Health and Social Care

Assessment Unit A2 6

assessing

Understanding Human Behaviour

[AHC61]

Assessment

**MARK
SCHEME**

Additional Guidance for teachers for 2021 only

You will find it useful to view the EEP webinar to help you gauge the standard for this assessment.

Please read the general marking instructions that follow before you begin marking.

Some additional points that will help you use the mark scheme:

- The questions where QWC (quality of written communication) is assessed are identified on the front cover of the paper. In all other questions on the paper QWC should not influence the marking.
- Where you see “all other valid responses will be given credit”, if you think a response which is not on the mark scheme may be correct, you should check it for accuracy and award the marks if appropriate.
- Avoid awarding marks twice for repeated points in a question.
- When a question requires a specific number of points to be given (e.g. one example, two advantages, three ways), only that number of points can achieve marks. Where a student makes more points than the number required, their best points should be selected for marking. In these types of questions, compensation may be used; this means that a correct additional point in one part of the answer can be awarded marks where another part of the answer is incorrect or blank.
- For extended responses, you need to read the level descriptors carefully to help you make a judgement. There is further advice in the general marking instructions.
- You may find it useful to annotate the responses to help you decide on and justify the marks you award.

General Marking Instructions

Introduction

The main purpose of a mark scheme is to ensure that examinations are marked accurately, consistently and fairly. The mark scheme provides examiners with an indication of the nature and range of candidates' responses likely to be worthy of credit. It also sets out the criteria which they should apply in allocating marks to candidates' responses.

Assessment objectives

Below are the assessment objectives for **GCE Health and Social Care**.

Candidates should be able to:

- AO1** Demonstrate knowledge and understanding of the specified content.
- AO2** Apply knowledge, understanding and skills to a variety of health, social care and early years contexts.
- AO3** Investigate, analyse, and evaluate acquired knowledge and understanding, present arguments, make reasoned judgements and draw conclusions.

Quality of candidates' responses

In marking the examination papers, examiners should be looking for a quality of response reflecting the level of maturity which may reasonably be expected of a 17 or 18-year-old which is the age at which the majority of candidates sit their GCE examinations.

Flexibility in marking

Mark schemes are not intended to be totally prescriptive. No mark scheme can cover all the responses which candidates may produce. In the event of unanticipated answers, examiners are expected to use their professional judgement to assess the validity of answers. If an answer is particularly problematic, then examiners should seek the guidance of the Supervising Examiner.

Positive marking

Examiners are encouraged to be positive in their marking, giving appropriate credit for what candidates know, understand and can do rather than penalising candidates for errors or omissions. Examiners should make use of the whole of the available mark range for any particular question and be prepared to award full marks for a response which is as good as might reasonably be expected of a 17 or 18-year-old GCE candidate.

Awarding zero marks

Marks should only be awarded for valid responses and no marks should be awarded for an answer which is completely incorrect or inappropriate.

Types of mark schemes

Mark schemes for tasks or questions which require candidates to respond in extended written form are marked on the basis of levels of response which take account of the quality of written communication.

Other questions which require only short answers are marked on a point for point basis with marks awarded for each valid piece of information provided.

Levels of response

In deciding which level of response to award, examiners should look for the ‘best fit’ bearing in mind that weakness in one area may be compensated for by strength in another. In deciding which mark within a particular level to award to any response, examiners are expected to use their professional judgement.

The following guidance is provided to assist examiners.

- **Threshold performance:** Response which just merits inclusion in the level and should be awarded a mark at or near the bottom of the range.
- **Intermediate performance:** Response which clearly merits inclusion in the level and should be awarded a mark at or near the middle of the range.
- **High performance:** Response which fully satisfies the level description and should be awarded a mark at or near the top of the range.

Quality of written communication

Quality of written communication is taken into account in assessing candidates’ responses to all tasks and questions that require them to respond in extended written form. These tasks and questions are marked on the basis of levels of response. The description for each level of response includes reference to the quality of written communication.

For conciseness, quality of written communication is distinguished within levels of response as follows:

Level 1: Quality of written communication is basic.

Level 2: Quality of written communication is adequate.

Level 3: Quality of written communication is competent.

Level 4: Quality of written communication is highly competent.

In interpreting these level descriptions, examiners should refer to the more detailed guidance provided below:

Level 1 (Basic): The candidate makes only a limited attempt to select and use an appropriate form and style of writing. The organisation of material may lack clarity and coherence. There is little use of specialist vocabulary. Presentation, spelling, punctuation and grammar may be such that intended meaning is not clear.

Level 2 (Adequate): The candidate makes a reasonable attempt to select and use an appropriate form and style of writing. Relevant material is organised with some clarity and coherence. There is some use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are sufficiently competent to make meaning evident.

Level 3 (Competent): The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is organised with a high degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of a high standard and ensure that meaning is clear.

Level 4 (Highly competent): The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is extremely well organised with the highest degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of the highest standard and ensure that meaning is absolutely clear.

- 1 (a) (i) Use the headings below to explain **two** ways the biological perspective contributes to understanding depression. (AO1, AO2)

Neurobiology (brain chemistry)

Suitable points to be included in explanation:

- depression is linked to the disturbance of brain chemistry/ neurochemistry – this involves chemicals called neurotransmitters, some of which regulate mood. When they are not available in sufficient quantities, depression can result.
- serotonin is a monoamine neurotransmitter that is believed to play an important role in the regulation of mood, with low levels associated with depression.
- noradrenaline and dopamine have also been shown to be involved.
- the brain's response to stressful events may alter the balance of neurotransmitters and result in depression.
- people with depression have also been shown to have high levels of the hormone cortisol, linked to over-activity of the hypothalamus.
- depression can be exacerbated by substance abuse that affects brain chemistry, e.g. alcohol.

All other valid responses will be given credit

[1] basic explanation, [2] competent explanation

Genetics

Suitable points to be included in explanation:

- Eysenck argues that depression is an inherited personality characteristic of an unstable introvert.
- there is some evidence of increased risk of depression for first-degree biological relatives (parents, siblings, children) – this suggests there may be a genetic explanation – the genetic component may be a predisposing factor.
- people who have a genetic predisposition to depression may be more prone to the imbalance of neurotransmitter activity that is part of depression – they may experience depression without any particular sad or stressful event that they can point to.

All other valid responses will be given credit

[1] basic explanation, [2] competent explanation

(2 × [2])

[4]

- (ii) Name **one** type of antidepressant medication and explain how it works to treat depression. (AO1, AO2)

Name any one of the following:

- monoamine oxidase inhibitors (MAOIs)
- tricyclics (TCAs)
- selective serotonin reuptake inhibitors (SSRIs).

(1 × [1])

[1]

Explanation of how it works

Suitable points to be explained (must be correct for the type named):

- MAOIs block the action of the enzyme monoamine oxidase which normally breaks down the neurotransmitters noradrenaline and serotonin – therefore increases levels of serotonin and noradrenaline in the brain, making the individual feel happier.
- TCAs prevent the neurotransmitters noradrenaline and serotonin

- from being re-absorbed after use, thus increasing the available levels of these neurotransmitters, making the individual feel happier.
- SSRIs increase the level of the neurotransmitter serotonin by slowing down its absorption by the brain, making the individual feel happier.
- [1] basic explanation, [2] competent explanation
(1 × [2]) [2]

- (iii)** Explain two advantages and two disadvantages of using medication to treat depression. (AO1, AO2)

Examples of suitable advantages to be explained:

- effectively reduce symptoms for most patients with reasonably quick results – most people start to feel better within a few weeks
- more cost effective for the health service than patients spending long periods in talking therapies
- easily accessible for patients – no long waiting list as there often is for therapy, free prescriptions in NI, no referral time from GP

All other valid responses will be given credit

- [1] basic explanation, [2] competent explanation
(2 × [2]) [4]

Examples of suitable disadvantages to be explained:

- does nothing about the root causes of the depression such as relationship problems.
- side effects of medication, e.g. some SSRIs can suppress appetite.
- may interact with other drugs/substances.
- non-compliance can be a problem – patients may not take the drugs because they fear addiction or may stop taking them as soon as they feel better, causing relapse.

All other valid responses will be given credit

- [1] basic explanation, [2] competent explanation
(2 × [2]) [4]

- (b) (i)** Complete the table below by defining two key concepts from the psychoanalytic perspective and explaining how they apply to depression. (AO1, AO2)

The unconscious

Definition

Examples of suitable points to be included in definition:

- in Freud's iceberg theory of the mind, the unconscious is the part below the surface that the individual is unaware of.
- thoughts, feelings and childhood memories are buried there.

[1] basic definition, [2] competent definition

Application to depression

Examples of suitable points to be included in explanation:

- unhappy or disturbing thoughts, feelings and experiences from childhood that are buried in the unconscious are affecting the adult personality.
- they are having a negative impact on the mental health of the adult causing depression.

[1] basic explanation, [2] competent explanation

Fixation

Definition

Examples of suitable points to be included in definition:

- some of the energy of the libido is left behind in one of the stages of development due to the particular stage not being fully resolved in childhood.
- this shows up in the personality characteristics of the adult who is ‘stuck’ in that stage of development.

[1] basic definition, [2] competent definition

Application to depression

Examples of suitable points to be included in explanation:

- depression results from some of the energy of the libido being left behind during the oral stage of development when the erogenous zone is the mouth.
- the adult is fixated/‘stuck’ at that stage due to too little stimulation of the mouth as a young baby.

[1] basic explanation, [2] competent explanation

(4 × [2])

[8]

- (ii) Explain any **three** techniques used by a psychoanalytic therapist working with an adult who is depressed. (AO1, AO2)

Examples of suitable techniques to be explained:

- free association – depressed individuals are encouraged to relax and freely talk about anything that comes into their heads (Freud’s famous patient Anna O referred to this as ‘the talking cure’).
- word association – depressed individuals are encouraged to respond to words called out by the therapist with the first words that come to mind.
- dream analysis – individuals tell the therapist what they can remember about their dreams (Freud referred to dreams as ‘the royal road to the unconscious’).
- transference – the redirection of feelings and desires, especially those unconsciously retained from childhood, toward a new object-Freud noticed that some patients reacted to him as though he were a parent and that female patients often tended to “fall in love” with him – Freud concluded that, during therapy sessions, patients were unconsciously transferring the feelings and attitudes they had had toward early significant figures in their lives onto the analyst/therapist.
- projective tests – individuals are asked to respond to ambiguous stimuli – a well-known projective test is the Rorschach inkblot test in which an individual is shown irregular spots of ink, and asked to explain what they see.
- slips of the tongue – phrases or words that are said accidentally or mistakenly indicate unconscious thoughts and feelings linked to depression.
- the purpose of all these techniques is to allow the therapist to gain access to the unconscious – the therapist interprets the meaning of what is revealed to work out why the patient is suffering from depression.
- the therapist helps clients to work through their conflicts and fears so that they can achieve catharsis.

All other valid responses will be given credit
[1] basic explanation, [2] competent explanation
(3 × [2])

[6]

AVAILABLE
MARKS

- (c) Analyse how the cognitive perspective in psychology contributes to both understanding and treating depression. (AO1, AO2, AO3)

Examples of suitable points to be included in analysis:

Understanding

- this perspective focuses on thoughts and beliefs, suggesting that irrational thoughts and beliefs cause depression. Since depression is caused by maladjusted thinking, in order to understand an individual with depression, it is necessary to understand his thought processes.
- Aaron Beck referred to the irrational and maladaptive assumptions and thoughts that lead to depression as cognitive errors. Beck claims mental disorders like depression are rooted in the maladaptive ways people think about
 - themselves, e.g. I can't succeed at anything
 - the world, e.g. it's necessary to be successful to be a good person
 - the future, e.g. nothing will change.
- This is referred to as a “cognitive triad” of negative, automatic thoughts. These negative schemas dominate thinking and depression is the result.
- Ellis also argued that irrational thoughts are the main cause of depression as they lead to a self-defeating internal dialogue of negative self-statements, e.g. depression is caused by catastrophising self-statements like “I'll never be a happy person, my life may as well be over”. He identified 11 basic irrational beliefs that are emotionally self-defeating and commonly associated with depression, e.g.
 - I must be loved and accepted by absolutely everybody
 - I must be excellent in every respect and never make mistakes – otherwise I'm worthless.
- Sometimes referred to as the “ABC model”, Ellis claims disorders begin with an activating event (A) (e.g. a failed exam) leading to a belief (B), which may be rational (e.g. I didn't work hard enough) or irrational (e.g. I'm too stupid to pass). The belief leads to consequences (C), which can be adaptive (appropriate) for rational beliefs (e.g. I'll do more revision) or maladaptive (inappropriate) for irrational beliefs (e.g. getting depressed).

Treating

- the focus is on changing the irrational or inappropriate thoughts that are causing depression
- Beck's cognitive therapy is referred to as Cognitive Restructuring and aims to change cognitive distortions and negative thoughts by challenging them in therapy over a series of sessions, usually by considering the evidence for negative statements. The therapist will ask the individual questions, such as:
 - what is the evidence supporting the conclusion currently held by the individual, e.g. that his life is not worth living?
 - what is another way of looking at the same situation but reaching another conclusion, e.g. could life be better if some changes are made?

- what will happen if, indeed, the current conclusion/opinion is correct, e.g. if someone really doesn't have any positive relationships what could happen?
- The aim is to move the individual away from negative cognitive processes and towards positive cognition
- Ellis's Rational Emotive Therapy (RET) also aims to challenge irrational beliefs linked to depression, but the therapist is more active and directive than in Beck's therapy. Techniques include challenging individuals to prove unrealistic statements like "no-one likes me" and role playing different situations during therapy, e.g. meeting and talking to new people. His Rational Emotive Behaviour Therapy (REBT) also addresses behaviour change with behavioural tasks set by the therapist between sessions, e.g. arrange to go out with a friend this week.

All other valid responses will be given credit

[0] is awarded for a response not worthy of credit

Level 1 ([1]–[5])

Overall impression: basic

- basic knowledge and understanding of how the cognitive perspective in psychology contributes to understanding and/or treating depression—may only address one aspect.
- demonstrates a limited ability to apply appropriate knowledge and understanding to the question.
- demonstrates a limited ability to analyse how the cognitive perspective in psychology contributes to understanding and/or treating depression.
- quality of written communication is basic. The candidate makes only a limited attempt to select and use an appropriate form and style of writing. The organisation of material may lack clarity and coherence. There is little use of specialist vocabulary. Presentation, spelling, punctuation and grammar may be such that intended meaning is not clear.

Level 2 ([6]–[10])

Overall impression: adequate

- adequate knowledge and understanding of how the cognitive perspective in psychology contributes to understanding and treating depression.
- demonstrates an adequate ability to apply appropriate knowledge and understanding to the question.
- demonstrates an adequate ability to analyse how the cognitive perspective in psychology contributes to understanding and treating depression.
- answers that focus on only one part of the question cannot achieve more than 9 marks.
- quality of written communication is adequate. The candidate makes a reasonable attempt to select and use an appropriate form and style of writing. Relevant material is organised with some clarity and coherence. There is some use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are sufficiently competent to make meaning evident.

Level 3 ([11]–[14])

Overall impression: competent

- competent knowledge and understanding of how the cognitive perspective in psychology contributes to understanding and treating depression.
- demonstrates a competent ability to apply appropriate knowledge and understanding to the question.
- demonstrates a competent ability to analyse how the cognitive perspective in psychology contributes to understanding and treating depression.
- there may be some variation in the quality of analysis between understanding and treatment.
- quality of written communication is competent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is organised with a high degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of a high standard and ensure that meaning is clear.

Level 4 ([15]–[18])

Overall impression: highly competent

- highly competent knowledge and understanding of how the cognitive perspective in psychology contributes to understanding and treating depression.
- demonstrates a highly competent ability to apply appropriate knowledge and understanding to the question.
- demonstrates a highly competent ability to analyse how the cognitive perspective in psychology contributes to understanding and treating depression.
- quality of written communication is highly competent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is extremely well organised with the highest degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of the highest standard and ensure that meaning is absolutely clear.

[18]

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- 2 (a) Discuss how Pavlov developed his theory of classical conditioning through experimenting with dogs. (AO1, AO2, AO3)

Examples of suitable points to be included in discussion:

- Pavlov's theory of classical conditioning stemmed from his work on the digestive system of dogs, when he noticed that the dogs were salivating to the sound of his assistants' footsteps when they were on the way to feed them.
- the food alone would have caused the salivation reflex to occur (an unconditioned response or UCR) without learning, but salivation to the sound of the footsteps Pavlov argued was a learned behaviour (a conditioned response or CR).
- Pavlov believed that the dogs were demonstrating a learned association between the sound (a conditioned stimulus or CS) and food (an unconditioned stimulus or UCS).
- Pavlov went on to conduct a series of experiments where he paired food with bells and buzzers to show that the dogs could learn through association to respond to other sounds as well.
- Pavlov showed that this learning would be generalised in that the animals also responded to similar stimuli to the original, e.g. bells and buzzers with different tones. They could also learn to discriminate between different stimuli i.e. to tell the difference between them.

All other valid responses will be given credit

[0] is awarded for a response not worthy of credit

Level 1 ([1]–[3])

Overall impression: basic

- basic knowledge and understanding of how Pavlov developed his theory of classical conditioning through experimenting with dogs.
- demonstrates a limited ability to apply appropriate knowledge and understanding to the question.
- demonstrates a limited ability to discuss how Pavlov developed his theory of classical conditioning through experimenting with dogs.

Level 2 ([4]–[6])

Overall impression: adequate

- adequate knowledge and understanding of how Pavlov developed his theory of classical conditioning through experimenting with dogs.
- demonstrates an adequate ability to apply appropriate knowledge and understanding to the question.
- demonstrates an adequate ability to discuss how Pavlov developed his theory of classical conditioning through experimenting with dogs.

Level 3 ([7]–[9])

Overall impression: competent

- competent knowledge and understanding of how Pavlov developed his theory of classical conditioning through experimenting with dogs.
- demonstrates a competent ability to apply appropriate knowledge and understanding to the question.
- demonstrates a competent ability to discuss how Pavlov developed his theory of classical conditioning through experimenting with dogs. [9]

- (b) Discuss how Skinner developed his theory of operant conditioning through experimenting with rats. (AO1, AO2, AO3)

Examples of suitable points to be included in discussion:

- Skinner argued in his theory of operant conditioning that behaviour is learned as a result of its consequences.
- he developed the 'Skinner box', a piece of apparatus in which a hungry rat had to learn to press a lever to obtain a pellet of food. At first, the lever pressing occurred by chance. Every time the lever was pressed, food was delivered, so the behaviour of pressing the lever was reinforced.
- Skinner argued that any behaviour that is reinforced tends to be repeated, and so learning occurs. Reinforcement is anything that increases the chances of the preceding behaviour being repeated. Reinforcement may be positive reinforcement – the chance to gain something pleasurable (e.g. sweets, praise, money) increases the probability of a response/ behaviour occurring (e.g. producing good homework). Alternatively it may be negative reinforcement – the chance to escape or avoid something unpleasant (e.g. staying in after school) increases the probability of a response/behaviour occurring (e.g. working hard in class). Skinner showed that rats would learn to jump up into a compartment when a warning buzzer sounded in order to avoid electric shock in the Skinner box. Both positive and negative reinforcement aim to produce a desired behaviour. Punishment, on the other hand, decreases the chances of the preceding behaviour being repeated – it aims to stop an unwanted behaviour being produced.

All other valid responses will be given credit

[0] is awarded for a response not worthy of credit

Level 1 ([1]–[3])

Overall impression: basic

- basic knowledge and understanding of how Skinner developed his theory of operant conditioning through experimenting with rats.
- demonstrates a limited ability to apply appropriate knowledge and understanding to the question.
- demonstrates a limited ability to discuss how Skinner developed his theory of operant conditioning through experimenting with rats.

Level 2 ([4]–[6])

Overall impression: adequate

- adequate knowledge and understanding of how Skinner developed his theory of operant conditioning through experimenting with rats.
- demonstrates an adequate ability to apply appropriate knowledge and understanding to the question.
- demonstrates an adequate ability to discuss how Skinner developed his theory of operant conditioning through experimenting with rats.

Level 3 ([7]–[9])

Overall impression: competent

- competent knowledge and understanding of how Skinner developed his theory of operant conditioning through experimenting with rats.
- demonstrates a competent ability to apply appropriate knowledge and understanding to the question.
- demonstrates a competent ability to discuss how Skinner developed his theory of operant conditioning through experimenting with rats. [9]

- (c) Describe how phobias in humans develop, according to Pavlov's theory. (AO1, AO2)

Examples of suitable points to be included in description:

- classical conditioning of physiological reflexes – the phobia is a learned association between the feared stimulus (e.g. spiders) and the response (fear).
- the fear of the conditioned stimulus (CS) is learned due to it being paired with a stimulus that produced a startle response (reflex/UCR) – the experiment with Little Albert may be used to illustrate this process.
- the fear is not extinguished/unlearned because the conditioned stimulus is avoided.

[1] basic description, [2] adequate description, [3] competent description
(1 × [3]) [3]

- (d) Describe how children become aggressive, according to Skinner's theory. (AO1, AO2)

Examples of suitable points to be included in description:

- children's aggressive behaviour is learned because it is reinforced.
- one way is through positive reinforcement, e.g. getting their own way.
- another is through negative reinforcement, e.g. avoided having to do things they don't want to do.
- aggressive behaviour is learned because it has not been effectively punished, e.g. has gone unchallenged by members of the family.

[1] basic description, [2] adequate description, [3] competent description
(1 × [3]) [3]

- (e) Discuss how behaviour therapies could be used to treat an individual with a phobia of rats. (AO1, AO2, AO3)

Examples of suitable points to be included in discussion:

- behaviour therapies focus on changing responses as opposed to trying to understand reasons for them – the aim is to replace the fear response with a more appropriate response i.e. a more relaxed response.
- systematic desensitisation – the client draws up a hierarchy of fears, e.g. from a picture of a cartoon rat to a live rat in the same room – he/she is then taught relaxation techniques by the therapist – he or she goes on to practice these techniques at each point on the hierarchy in order to replace the conditioned fear response with relaxation, starting with imagining or visualising the least threatening situation and gradually working up the hierarchy.
- flooding – clients are required to remain with the feared stimulus, in this case in the presence of a rat, despite high levels of anxiety – it is physiologically impossible to maintain anxiety state so it subsides and fear is extinguished as a result.
- implosion therapy is the same process as flooding except the feared stimulus is imagined rather than present.

[0] is awarded for a response not worthy of credit

Level 1 ([1]–[4])

Overall impression: basic

- basic knowledge and understanding of how behaviour therapies could be used to treat an individual with a phobia of rats.
- demonstrates a limited ability to apply appropriate knowledge and understanding to the question.
- demonstrates a limited ability to discuss how behaviour therapies could be used to treat an individual with a phobia of rats.
- quality of written communication is basic. The candidate makes only a limited attempt to select and use an appropriate form and style of writing. The organisation of material may lack clarity and coherence. There is little use of specialist vocabulary. Presentation, spelling, punctuation and grammar may be such that intended meaning is not clear.

Level 2 ([5]–[8])

Overall impression: adequate

- adequate knowledge and understanding of how behaviour therapies could be used to treat an individual with a phobia of rats.
- demonstrates an adequate ability to apply appropriate knowledge and understanding to the question.
- demonstrates an adequate ability to discuss how behaviour therapies could be used to treat an individual with a phobia of rats.
- quality of written communication is adequate. The candidate makes a reasonable attempt to select and use an appropriate form and style of writing. Relevant material is organised with some clarity and coherence. There is some use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are sufficiently competent to make meaning evident.

Level 3 ([9]–[12])

Overall impression: competent

- competent knowledge and understanding of how behaviour therapies could be used to treat an individual with a phobia of rats.
- demonstrates a competent ability to apply appropriate knowledge and understanding to the question.
- demonstrates a competent ability to discuss how behaviour therapies could be used to treat an individual with a phobia of rats.
- quality of written communication is competent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is organised with a high degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of a high standard and ensure that the meaning is clear. [12]

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3 (a) List **four** signs that an individual may be experiencing stress. (AO1)

Answers may include four of the following:

- periods of irritability or anger
- apathy or depression
- constant anxiety
- irrational behaviour
- loss of appetite and weight loss
- comfort eating and weight gain
- lack of concentration
- loss of sex drive
- increased smoking, drinking, or taking recreational drugs
- excessive tiredness
- skin problems, such as eczema
- aches and pains resulting from tense muscles, including neck ache, backache and tension headaches
- heart palpitations
- feeling nauseous
- stomach problems
- missed periods
- sleep problems/insomnia
- hair loss
- hypertension

All other valid responses will be given credit

(4 × [1])

[4]

(b) Describe how beta blockers can help to alleviate stress. (AO1, AO2)

Examples of suitable points to be included in description:

- beta-blockers reduce the activity of the Sympathetic Nervous System and so reduce heart rate, blood pressure and levels of the hormone cortisol.
- they work by blocking the action of the neurotransmitter noradrenaline at receptors in arteries and the heart muscle, causing arteries to widen and slowing the action of the heart, resulting in falling blood pressure and reduced work by the heart, and thus reducing the physiological experience of stress.

[1] basic description, [2] adequate description, [3] competent description

(1 × [3])

[3]

(c) Discuss how poverty, education and employment might contribute to stress. (AO1, AO2, AO3)

Examples of suitable points to be included in discussion:

- poverty – poor living conditions and financial worries, e.g. about paying bills can increase the likelihood of suffering from stress. There is evidence that the highest levels of stress occur in areas with high levels of unemployment and dependence on state benefits. Where there is child poverty, parents may worry about the welfare of their children, e.g. about being able to afford enough food or healthy foods.
- education – some people have very stressful experiences in their education, e.g. suffer exam stress or are unhappy at school or university. They may feel under a great deal of pressure to achieve high grades or

struggle to meet deadlines. The cost of third level education may cause stress for university students.

- employment – many individuals who suffer from stress cite work related stress as a contributory factor. Some jobs are particularly associated with high levels of stress, e.g. working in the emergency services where workers often deal with traumatic incidents and also in routine, repetitive jobs where people have limited control over their activities. Also, for some people, shift work can contribute to stress that is attributed to disruption of their circadian rhythms. Feeling undervalued at work, being at risk of redundancy or being a victim of workplace bullying can also be a source of stress in any occupation. High-powered jobs also cause stress as high targets are often set.

All other valid responses will be given credit

[0] is awarded for a response not worthy of credit

Level 1 ([1]–[4])

Overall impression: basic

- basic knowledge and understanding of how poverty, education and employment might contribute to stress.
- demonstrates a limited ability to apply appropriate knowledge and understanding to the question.
- demonstrates a limited ability to discuss how poverty, education and employment might contribute to stress.
- answers may focus on just one aspect or list points.
- quality of written communication is basic. The candidate makes only a limited attempt to select and use an appropriate form and style of writing. The organisation of material may lack clarity and coherence. There is little use of specialist vocabulary. Presentation, spelling, punctuation and grammar may be such that intended meaning is not clear.

Level 2 ([5]–[8])

Overall impression: adequate

- adequate knowledge and understanding of how poverty, education and employment might contribute to stress.
- demonstrates an adequate ability to apply appropriate knowledge and understanding to the question.
- demonstrates an adequate ability to discuss how poverty, education and employment might contribute to stress.
- answers must address at least two factors to achieve at this level.
- quality of written communication is adequate. The candidate makes a reasonable attempt to select and use an appropriate form and style of writing. Relevant material is organised with some clarity and coherence. There is some use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are sufficiently competent to make meaning evident.

Level 3 ([9]–[12])

Overall impression: competent

- competent knowledge and understanding of how poverty, education and employment might contribute to stress.
- demonstrates a competent ability to apply appropriate knowledge and understanding to the question.

- demonstrates a competent ability to discuss how poverty, education and employment might contribute to stress.
- answers must address all three factors to achieve at this level and all three in some detail to achieve at the top of this level.
- quality of written communication is competent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is organised with a high degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of a high standard and ensure that the meaning is clear. [12]

(d) Analyse how the humanistic perspective in psychology contributes to understanding and treating stress. (AO1, AO2, AO3)

Examples of suitable points to be included in analysis:

Understanding

- individuals who are stressed are failing to self-actualise because they are not receiving/have not received unconditional positive regard. They have been influenced by conditions of worth – they got love and affection only if they behaved as others wanted them to – they experienced conditional positive regard.
- over time, individuals develop conditional positive self-regard – like themselves only if they meet the standards others have applied to them, rather than if they are truly self-actualising, making it difficult to maintain self-esteem and so stress sets in.
- the real self is the self an individual will become if he receives positive regard and develops self-regard and is self-actualising. Otherwise he develops an ideal self with high standards that are out of reach. There is a gap between the real self and the ideal self – incongruity. The more incongruity, the greater the stress the individual experiences.
- when there is incongruity between the ideal and the real self the individual is in a threatening situation and will feel anxiety. To reduce this the individual uses defences – denial and perceptual distortion. Using these defences creates more incongruence, more threat, and greater levels of anxiety. More serious stress or mental breakdown occurs when a person's defences are overwhelmed, and their sense of self becomes "shattered".

Treating

- client-centred therapy/person-centred therapy (PCT) – role of therapist is to provide unconditional positive regard for clients as the stress is associated with a lack of unconditional regard, usually from parents as an individual grows up.
- need for warmth, genuineness and empathy in the therapeutic relationship.
- focus on dealing with the present rather than the past.
- therapy is non-directive – clients should decide how to work towards self-actualisation so that behaviour becomes congruent with the self-concept, reducing feelings of anxiety.
- therapist aims to improve self-esteem and help clients develop a realistic ideal self.
- through encounter groups clients can provide positive regard for each other to raise self-esteem and reduce stress.

All other valid responses will be given credit

[0] is awarded for a response not worthy of credit

AVAILABLE
MARKS

Level 1 ([1]–[5])

Overall impression: basic

- basic knowledge and understanding of how the humanistic perspective in psychology contributes to understanding and/or treating stress.
- demonstrates a limited ability to apply appropriate knowledge and understanding to the question.
- demonstrates a limited ability to analyse how the humanistic perspective in psychology contributes to understanding and treating stress.
- quality of written communication is basic. The candidate makes only a limited attempt to select and use an appropriate form and style of writing. The organisation of material may lack clarity and coherence. There is little use of specialist vocabulary. Presentation, spelling, punctuation and grammar may be such that intended meaning is not clear.

Level 2 ([6]–[10])

Overall impression: adequate

- adequate knowledge and understanding of how the humanistic perspective in psychology contributes to understanding and/or treating stress.
- demonstrates an adequate ability to apply appropriate knowledge and understanding to the question.
- demonstrates an adequate ability to analyse how the humanistic perspective in psychology contributes to understanding and treating people who have depression.
- answers that focus on only one aspect cannot achieve more than 9 marks.
- quality of written communication is adequate. The candidate makes a reasonable attempt to select and use an appropriate form and style of writing. Relevant material is organised with some clarity and coherence. There is some use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are sufficiently competent to make meaning evident.

Level 3 ([11]–[14])

Overall impression: competent

- competent knowledge and understanding of how the humanistic perspective in psychology contributes to understanding and treating stress.
- demonstrates a competent ability to apply appropriate knowledge and understanding to the question.
- demonstrates a competent ability to analyse how the humanistic perspective in psychology contributes to understanding and treating stress.
- there may be some variation in the quality of analysis between understanding and treatment.
- quality of written communication is competent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is organised with a high degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of a high standard and ensure that meaning is clear.

Level 4 ([15]–[18])

Overall impression: highly competent

- highly competent knowledge and understanding of how the humanistic perspective in psychology contributes to understanding and treating stress.
- demonstrates a highly competent ability to apply appropriate knowledge and understanding to the question.
- demonstrates a highly competent ability to analyse how the humanistic perspective in psychology contributes to understanding and treating stress.
- quality of written communication is highly competent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is extremely well organised with the highest degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of the highest standard and ensure that meaning is absolutely clear.

[18]

Total

**AVAILABLE
MARKS**

37

120

