



Rewarding Learning

**ADVANCED
General Certificate of Education
2023**

Health and Social Care

Assessment Unit A2 6

assessing

Understanding Human Behaviour

[AHC61]

THURSDAY 15 JUNE, AFTERNOON

**MARK
SCHEME**

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) Identify **four** symptoms Janeen may have exhibited during the recent incident on the escalator. (AO1)

Any four of the following:

- shaking and trembling
- rapid heartbeat
- intense sweating
- difficulty breathing/rapid breathing
- suffer chest pain or tightness
- feeling or being sick
- feeling dizzy
- crying/screaming
- paling of the skin
- freezing/unable to move
- dry mouth

All other valid responses will be given credit

(4 × [1])

[4]

- (b) Use these two concepts to describe how the psychoanalytic perspective views phobias. (AO1, AO2).

The unconscious

Suitable points to be included in description:

- 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, so phobias are viewed as unconscious fears as opposed to conscious thought processes – these may be explained by traumatic childhood experiences
- an example is Freud's case study of Little Hans – his fear of horses related to his unconscious fear of his father – the basis of Freud's Oedipus Complex
- fear appears to be irrational because there is no conscious explanation

All other valid responses will be given credit

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

Defence mechanisms

Suitable points to be included in description:

- defence mechanisms are unconscious processes that are used to protect the psyche from harm
- phobias operate through the defence mechanisms, particularly repression and displacement – the original source of fear is repressed into the unconscious and fear is displaced onto another object or situation – this presents itself as a phobia, e.g. Little Hans' fear of horses

All other valid responses will be given credit

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

(2 × [3])

[6]

- (c) (i) Bandura uses social learning theory to explain how people develop phobias. Summarise Bandura's explanation of phobias. (AO1, AO2)

Suitable points to be included in summary:

- SLT claims that phobic behaviour is learned by imitating and modelling the behaviour of others, i.e. through observational learning
- identification is a progression from simply imitating a role model's fear that involves 'internalising' the behaviour, i.e. the fear becomes part of the individual and is no longer simply being imitated

All other valid responses will be given credit

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

(1 × [3])

[3]

- (ii) From Bandura's perspective, modelling therapy can be used to treat phobias. Discuss how this therapy could be used to help Janeen overcome her acrophobia. (AO1, AO2, AO3)

Suitable points to be included in discussion:

- modelling therapy would involve a psychologist getting Janeen to observe someone else dealing with their fear of heights in a more productive way – Janeen would learn by imitating this role model
- Janeen could watch this actor go through a slow and painful approach to being at a height – the actor would act terrified at first, but shake herself out of it, tell herself to relax and breathe normally, and take one step at a time ascending the height, e.g. up a ladder
- ultimately, the actor would get to the point where she is at a height, all the while giving herself calming instructions
- after Janeen sees this she would be invited to try it
- the model could be live and actually present or observed indirectly as on TV

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 Bandura's modelling therapy could be used to help Janeen overcome her acrophobia
- demonstrates a limited ability to apply appropriate knowledge and understanding to the question
- demonstrates a limited ability to discuss how Bandura's modelling therapy could be used to help Janeen overcome her acrophobia.

Level 2 ([4]–[6])

Overall impression: adequate

- adequate knowledge and understanding of how Bandura's modelling therapy could be used to help Janeen overcome her acrophobia
- demonstrates an adequate ability to apply appropriate knowledge and understanding to the question
- demonstrates an adequate ability to discuss how Bandura's modelling therapy could be used to help Janeen overcome her acrophobia.

Level 3 ([7]–[9])

Overall impression: competent

- competent knowledge and understanding of how Bandura's modelling therapy could be used to help Janeen overcome her acrophobia
- demonstrates a competent ability to apply appropriate knowledge and understanding to the question
- demonstrates a competent ability to discuss how Bandura's modelling therapy could be used to help Janeen overcome her acrophobia.

[9]

- (d) (i) From the behaviourist perspective, Pavlov developed his theory of classical conditioning through his experiments with dogs. Discuss how Pavlov's experiments contribute to understanding phobias. (AO1, AO2, AO3)

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 and was able to show that the dogs could learn associations
- Pavlov's experiments therefore contribute to understanding phobias as a learned association between a stimulus and a fear response through 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

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's experiments contribute to understanding phobias
- demonstrates a limited ability to apply appropriate knowledge and understanding to the question
- demonstrates a limited ability to discuss how Pavlov's experiments contribute to understanding phobias.

Level 2 ([4]–[6])

Overall impression: adequate

- adequate knowledge and understanding of how Pavlov's experiments contribute to understanding phobias
- demonstrates an adequate ability to apply appropriate knowledge and understanding to the question
- demonstrates an adequate ability to discuss how Pavlov's experiments contribute to understanding phobias.

Level 3 ([7]–[9])

Overall impression: competent

- competent knowledge and understanding of how Pavlov's experiments contribute to understanding phobias
- demonstrates a competent ability to apply appropriate knowledge and understanding to the question
- demonstrates a competent ability to discuss how Pavlov's experiments contribute to understanding phobias.

[9]

- (ii) Analyse how phobias can be treated from the behaviourist perspective. (AO1, AO2, AO3)

Suitable points to be included in analysis:

- therapies from the behaviourist perspective 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 where the phobia is about rats – he/she is then taught relaxation techniques by the therapist – he or she goes on to practise 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 – it may not be necessary for the client to achieve total relaxation at the top of the hierarchy as long as the phobia subsides enough to live a normal life
- flooding – clients are required to remain with the feared stimulus, for example in a room with a spider in the case of arachnophobia, despite high levels of anxiety – it is physiologically impossible to maintain this level of anxiety response, 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

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 phobias can be treated from the behaviourist perspective
- demonstrates a limited ability to apply appropriate knowledge and understanding to the question
- demonstrates a limited ability to analyse how phobias can be treated from the behaviourist perspective
- 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 phobias can be treated from the behaviourist perspective
- demonstrates an adequate ability to apply appropriate knowledge and understanding to the question
- demonstrates an adequate ability to analyse how phobias can be treated from the behaviourist perspective
- 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 phobias can be treated from the behaviourist perspective
- demonstrates a competent ability to apply appropriate knowledge and understanding to the question
- demonstrates a competent ability to analyse how phobias can be treated from the behaviourist perspective
- 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.

[12]

43

- 2 (a) (i) Describe how **one** type of antidepressant works to alleviate depression. (AO1, AO2)

Suitable points to be included in description:

- monoamine oxidase inhibitors (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
- tricyclics (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
- selective serotonin reuptake inhibitors (SSRIs) increase the level of the neurotransmitter serotonin by slowing down its absorption by the brain, making the individual feel happier

All other valid responses will be given credit

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

- (ii) Explain **one** advantage and **one** disadvantage of using drug therapies for depression. (AO1, AO2)

An advantage

Examples of suitable advantages to be explained:

- effectively reduce symptoms for most patients with reasonably quick results – most people start to feel better within 3 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

A disadvantage

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
- may become less effective in the longer term (tachyphylaxis) perhaps because receptors in the brain become less receptive to the medication

All other valid responses will be given credit

[1] basic explanation, [2] competent explanation

(2 × [2])

[4]

(iii) Describe ECT. (AO1, AO2)

Suitable points to be included in description:

- ECT involves the passage of an electrical current through the brain to desensitise the patient and alleviate symptoms of depression
- patients have electrodes placed on their head and attached to a machine that can deliver varying levels of electric current
- this therapy produces unconsciousness and seizures so patients are sedated before the treatment to reduce the severity of the seizure – it tends to be used for severe depression where medication is not working.

All other valid responses will be given credit

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

(1 × [3]) [3]

(b) Name **two** well-known psychologists from the cognitive perspective. (AO1)

Answers:

- Aaron Beck
- Albert Ellis

(Accept surnames only)

All other valid responses will be given credit

(2 × [1]) [2]

(c) Analyse how the cognitive perspective in psychology contributes to 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. becoming 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. life could 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 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/or treating depression – answers that address only one aspect can achieve mid-band at best
- 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
- 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]

- (d) Explain **two** strengths and **two** weaknesses of cognitive therapies. (AO1, AO2)

Strengths

Examples of suitable strengths to be explained:

- they take account of clients' thinking behaviour and how they view the world
- the treatment has clear goals – to change maladaptive thinking to more positive thinking
- they teach clients how to try to think differently, which they can use to recognise and change their own negative thoughts in the future
- they are relatively quick compared to other talking therapies like psychoanalysis with many clients showing more positive thinking after just a few sessions, making them more cost effective
- they work well for a range of problems as shown by outcome studies, for example they have been used successfully to treat general anxiety, depression, eating disorders and stress

All other valid responses will be given credit

[1] basic explanation, [2] competent explanation

(2 × [2])

[4]

Weaknesses

Examples of suitable weaknesses to be explained:

- they are only useful for clients who are well enough to have insight and reflect on their own thoughts, so those who are very unwell may not benefit
- they ignore hidden reasons for problems, like unconscious thoughts, so don't really get to the root of some problems
- changing thinking patterns may not be enough to remove some severe problems, for example they are less successful than behavioural techniques for agoraphobia
- individuals have to be determined to address their problems and for REBT they have to be willing to do 'homework' and practise new behaviours, which can require a considerable commitment of time and effort

All other valid responses will be given credit

[1] basic explanation, [2] competent explanation

(2 × [2])

[4]

38

- 3 (a) Complete the table below to describe **three** different ways of managing stress. (AO1, AO2)

Time management

Suitable points to be included in description:

- time management sets out to remove the environmental stressor of lack of time by setting specific and realistic targets for getting tasks completed and this can help to improve an individual's sense of control
- the focus is on changing the behaviours that have become associated with the stress response, e.g. rushing to complete tasks at work
- the aim is to extinguish the stress response caused by not having enough time to complete tasks
- the stress response is therefore replaced with more relaxed behaviour

All other valid responses will be given credit

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

Meditation

Suitable points to be included in description:

- meditation involves getting into a comfortable position and repeating a mantra of a single syllable
- this can reduce oxygen consumption and induce electrical activity in the brain indicative of a calm mental state; it also reduces blood pressure
- this means the physiological symptoms of stress are reduced and so the individual feels calmer

All other valid responses will be given credit

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

Biofeedback

Suitable points to be included in description:

- biofeedback involves individuals using a machine that provides information about autonomic functions, such as heart rate and blood pressure
- the client is then taught to use a technique such as relaxation to reduce the readings on the machine
- the improved readings can be regarded as positively reinforcing the relaxation behaviour

All other valid responses will be given credit

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

(3 × [3])

[9]

- (b) Socio-economic factors are known to influence stress. Discuss how unemployment, education and housing can contribute to stress. (AO1, AO2, AO3)

Examples of suitable points to be included in discussion:

- unemployment – the highest rates of stress are amongst the unemployed – unemployment is associated with reduced or low income so individuals worry about household bills and providing food and clothing for their families. People who are unemployed can feel very alienated from a society in which others have work and are able to provide better for themselves and their families – this can cause feelings of stress
- People who have lost their jobs may feel very stressed about losing social contact with colleagues. Searching for jobs involving filling out applications and attending interviews can also be stressful for the unemployed as can the stigma of having no job

- 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
- housing – poor housing conditions such as living in a damp house can make people very stressed and worried about their health and the health of their family. Living in an overcrowded house can put stress on all who live there as they cannot have any privacy. Some individuals may be worried that their house being in poor repair is dangerous for their family, which can contribute to feeling very stressed

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 unemployment, education and housing can contribute to stress – may focus on only one factor
- demonstrates a limited ability to apply appropriate knowledge and understanding to the question
- demonstrates a limited ability to discuss how unemployment, education and/or housing can contribute to 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 ([5]–[8])

Overall impression: adequate

- adequate knowledge and understanding of how unemployment, education and housing can contribute to stress – must address at least two factors to achieve at this level
- demonstrates an adequate ability to apply appropriate knowledge and understanding to the question
- demonstrates an adequate ability to discuss how unemployment, education and housing can contribute to stress
- 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 unemployment, education and housing can contribute to stress – all three factors must be addressed to achieve at this level
- demonstrates a competent ability to apply appropriate knowledge and understanding to the question
- demonstrates a competent ability to discuss how unemployment, education and housing can contribute to stress
- 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. [12]

AVAILABLE
MARKS

- (c) Analyse how Roger's humanistic theory and therapeutic approach contribute 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

All other valid points 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 Roger's humanistic theory and therapeutic approach contribute to understanding and/or treating stress– 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 Roger's humanistic theory and therapeutic approach contribute 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 Roger's humanistic theory and therapeutic approach contribute to understanding and treating stress
- demonstrates an adequate ability to apply appropriate knowledge and understanding to the question – answers that address only one aspect can achieve mid-band at best
- demonstrates an adequate ability to analyse how Roger's humanistic theory and therapeutic approach contribute to understanding and treating stress
- 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 Roger's humanistic theory and therapeutic approach contribute 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 Roger's humanistic theory and therapeutic approach contribute 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 Roger's humanistic theory and therapeutic approach contribute 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 Roger’s humanistic theory and therapeutic approach contribute 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**

39

120