



A-level
PSYCHOLOGY
7182/1

Paper 1 Introductory topics in psychology

Mark scheme

June 2021

Version: 1.1 Final Mark Scheme

Mark schemes are prepared by the Lead Assessment Writer and considered, together with the relevant questions, by a panel of subject teachers. This mark scheme includes any amendments made at the standardisation events which all associates participate in and is the scheme which was used by them in this examination. The standardisation process ensures that the mark scheme covers the students' responses to questions and that every associate understands and applies it in the same correct way. As preparation for standardisation each associate analyses a number of students' scripts. Alternative answers not already covered by the mark scheme are discussed and legislated for. If, after the standardisation process, associates encounter unusual answers which have not been raised they are required to refer these to the Lead Examiner.

It must be stressed that a mark scheme is a working document, in many cases further developed and expanded on the basis of students' reactions to a particular paper. Assumptions about future mark schemes on the basis of one year's document should be avoided; whilst the guiding principles of assessment remain constant, details will change, depending on the content of a particular examination paper.

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Level of response marking instructions

Level of response mark schemes are broken down into levels, each of which has a descriptor. The descriptor for the level shows the average performance for the level. There are marks in each level.

Before you apply the mark scheme to a student's answer read through the answer and annotate it (as instructed) to show the qualities that are being looked for. You can then apply the mark scheme.

Step 1 Determine a level

Start at the lowest level of the mark scheme and use it as a ladder to see whether the answer meets the descriptor for that level. The descriptor for the level indicates the different qualities that might be seen in the student's answer for that level. If it meets the lowest level then go to the next one and decide if it meets this level, and so on, until you have a match between the level descriptor and the answer. With practice and familiarity you will find that for better answers you will be able to quickly skip through the lower levels of the mark scheme.

When assigning a level you should look at the overall quality of the answer and not look to pick holes in small and specific parts of the answer where the student has not performed quite as well as the rest. If the answer covers different aspects of different levels of the mark scheme you should use a best fit approach for defining the level and then use the variability of the response to help decide the mark within the level, ie if the response is predominantly level 3 with a small amount of level 4 material it would be placed in level 3 but be awarded a mark near the top of the level because of the level 4 content.

Step 2 Determine a mark

Once you have assigned a level you need to decide on the mark. The descriptors on how to allocate marks can help with this. The exemplar materials used during standardisation will help. Answers in the standardising materials will correspond with the different levels of the mark scheme. These answers will have been awarded a mark by the Lead Examiner. You can compare the student's answer with the standardised examples to determine if it is the same standard, better or worse than the example. You can then use this to allocate a mark for the answer based on the Lead Examiner's mark on the example.

You may well need to read back through the answer as you apply the mark scheme to clarify points and assure yourself that the level and the mark are appropriate.

Indicative content in the mark scheme is provided as a guide for examiners. It is not intended to be exhaustive and you must credit other valid points. Students do not have to cover all of the points mentioned in the indicative content to reach the highest level of the mark scheme.

An answer which contains nothing of relevance to the question must be awarded no marks.

Section A

Social influence

0 1 Describe how Zimbardo investigated conformity to social roles.

[4 marks]

Marks for this question: AO1 = 4

Level	Marks	Description
2	3–4	The description of how Zimbardo investigated conformity to social roles is clear and detailed. The answer is generally coherent with effective use of specialist terminology.
1	1–2	The description of how Zimbardo investigated conformity to social roles is limited or muddled. Specialist terminology is not always used appropriately or is absent.
	0	No relevant content.

Possible content:

- set up mock prison in the basement of Stanford University
- observational study – controlled, participant, overt
- emotionally stable volunteers were assigned to roles of either prisoner or guard
- prisoners 'arrested', blindfolded, strip searched, etc
- guards given a night stick, dark glasses, uniform etc and told to maintain order
- prisoners' daily routines were heavily regulated by guards working in shifts
- dehumanisation of prisoners, eg wearing nylon stocking caps and numbered smocks, etc
- the study was planned to run for two weeks, but was stopped early.

Credit other valid points.

Note there is no credit for description of aims, or findings/conclusions.

0 2 Using your knowledge of social influence processes in social change, explain why fewer and fewer people are using single-use plastic items.

[6 marks]

Marks for this question: AO2 = 6

Level	Marks	Description
3	5–6	Application of knowledge of social influence processes in social change is clear and generally well detailed. The answer is generally coherent with appropriate use of terminology.
2	3–4	Application of knowledge of social influence processes in social change is evident. The answer lacks clarity in places. Terminology is used appropriately on occasions.
1	1–2	Application of knowledge of social influence processes in social change is limited. The answer as a whole lacks clarity and has inaccuracies. Terminology is either absent or inappropriately used.
	0	No relevant content.

Possible content/application

Minority influence processes:

- examples of the influence of environmental campaign groups/celebrities and how they may convince the majority through consistency, commitment (augmentation principle), flexibility
- the snowball effect – how behaviour/views on use of plastic change gradually over time.

Conformity processes:

- normative social influence/compliance – the group norm among young people particularly is to care about the environment; people who go against this norm (by ignoring the costs to the planet) risk rejection from the group/are less likely to fit in
- informational social influence/internalisation – more is now known about the harmful effects of single-use plastic items on the environment/climate change, people may have become convinced by such evidence.

Obedience processes:

- rules on single-use plastic items have changed, eg charges for plastic shopping bags, etc.

Credit other relevant material.

If there is no application, maximum mark of 2

0 3

Why would the researcher's questionnaire produce primary data? Suggest **one** limitation of primary data.

[2 marks]

Marks for this question: AO2 = 1, AO3 = 1

1 mark for a brief explanation of why the researcher's questionnaire would produce primary data.

Possible content:

- the questionnaire will be used to collect data specifically for the purpose of the investigation
- the questionnaire data will be gathered first-hand from the participants themselves.

Accept alternative wording.

PLUS

1 mark for one limitation of primary data.

Possible limitations:

- requires time and effort on the part of the researcher (to develop resources, etc)
- may be costly compared to secondary data which can be easily accessed.

Accept other valid limitations.

0 4 Explain how the validity of the researcher’s questionnaire could be improved.

[4 marks]

Marks for this question: AO3 = 4

Level	Marks	Description
2	3–4	The explanation of how the validity of the researcher’s questionnaire could be improved is clear and detailed. The answer is generally coherent with effective use of specialist terminology.
1	1–2	The explanation of how the validity of the researcher’s questionnaire could be improved is limited or muddled. Specialist terminology is not always used appropriately or is absent.
	0	No relevant content.

Possible content:

- the researcher could compare the two questionnaires and note any differences
- the researcher could (identify and) remove/deselect any items on his questionnaire that are problematic
- items might be problematic because they are leading, ambiguous, too complex, double-barrelled etc
- the researcher could incorporate a lie scale, so respondents are less aware that locus of control is being tested.

Accept other valid improvements.

Suggestions regarding the design of the study are not creditworthy.

0 5 Discuss legitimacy of authority as an explanation for obedience.

[8 marks]

Marks for this question: AO1 = 3, AO3 = 5

Level	Marks	Description
4	7–8	Knowledge of legitimacy of authority is accurate with some detail. Discussion is thorough and effective. Minor detail and/or expansion of argument is sometimes lacking. The answer is clear, coherent and focused. Specialist terminology is used effectively.
3	5–6	Knowledge of legitimacy of authority is evident but there are occasional inaccuracies/omissions. Discussion is mostly effective. The answer is mostly clear and organised but occasionally lacks focus. Specialist terminology is used appropriately.
2	3–4	Limited knowledge of legitimacy of authority is present. Focus is mainly on description. Any discussion is of limited effectiveness. The answer lacks clarity, accuracy and organisation in places. Specialist terminology is used inappropriately on occasions.
1	1–2	Knowledge of legitimacy of authority is very limited. Discussion is limited, poorly focused or absent. The answer as a whole lacks clarity, has many inaccuracies and is poorly organised. Specialist terminology is either absent or inappropriately used.
	0	No relevant content.

Possible content:

- when a person recognises their own and other’s positions in a social hierarchy
- leading to recognition of the authority figure’s right to issue a demand
- legitimacy is increased by visible symbols of authority, eg uniform
- legitimacy of setting, order, system
- description of relevant evidence, eg Milgram variations (location), Bickman (uniform).

Accept other valid points.

Possible discussion:

- use of evidence to support/contradict the explanations, eg Milgram variations, Bickman, Hofling
- use of real-life examples to illustrate explanations, eg My Lai massacre
- explanation cannot account for rates of disobedience in studies
- obedience may be dispositional, not situational, eg authoritarian personality
- discussion of difficulty measuring and/or explaining why obedience occurs
- cultural differences in respect for and responses to authority.

Accept other valid points.

Section B

Memory

0 6 Apart from the central executive, name and briefly outline **two other** components of the working memory model.

[4 marks]

Marks for the question: AO1 = 4

For **each** component:

1 mark for name of component.

1 mark for brief outline of component.

Possible content:

- visuo-spatial sketch/scratch pad – temporary storage of visual and spatial information; inner eye; visual coding; can hold 3–4 items; visual cache, visual scribe
- phonological store/loop/articulatory loop/control process/primary acoustic store – limited capacity temporary storage system; holds acoustic information according to tone, volume, pitch, etc; inner ear; verbal rehearsal loop, sub-vocal speech; duration 1.5–2 secs; inner voice
- episodic buffer – integrates/synthesises information from other stores; link to LTM; modality free.

Credit components as identified/offered by the candidate whether global components or sub-components (eg visual cache).

0 7 Evaluate the central executive as part of the working memory model.

[4 marks]

Marks for the question: AO3 = 4

Level	Marks	Description
2	3–4	The evaluation of the central executive is clear and detailed. The answer is generally coherent with effective use of specialist terminology.
1	1–2	The evaluation of the central executive is limited or muddled. Specialist terminology is not always used appropriately or is absent.
	0	No relevant content.

Possible evaluation:

- Central executive is vague and untestable (despite being the component in overall charge)
- Central executive itself may be divided into separate sub-components
- links with attention research – allocation of resources/divided attention/dual-tasking
- use of evidence to support or contradict the central executive, eg Hunt (1980).

Accept other relevant points.

0 8 Discuss retrieval failure **and** interference as explanations for forgetting. Refer to Natasha’s drama performance in your answer.

[16 marks]

Marks for this question: AO1 = 6, AO2 = 4, AO3 = 6

Level	Marks	Description
4	13–16	Knowledge of retrieval failure and interference is accurate and generally well detailed. Application is effective. Discussion is thorough and effective. Minor detail and/or expansion of argument is sometimes lacking. The answer is clear, coherent and focused. Specialist terminology is used effectively.
3	9–12	Knowledge of retrieval failure and interference is evident but there are occasional inaccuracies/omissions. Application and/or discussion is mostly effective. The answer is mostly clear and organised but occasionally lacks focus. Specialist terminology is used appropriately.
2	5–8	Limited knowledge of retrieval failure and/or interference is present. Focus is mainly on description. Any discussion and/or application is of limited effectiveness. The answer lacks clarity, accuracy and organisation in places. Specialist terminology is used inappropriately on occasions. OR one theory only at Level 3/4.
1	1–4	Knowledge of retrieval failure and/or interference is very limited. Discussion and/or application is limited, poorly focused or absent. The answer as a whole lacks clarity, has many inaccuracies and is poorly organised. Specialist terminology is either absent or inappropriately used. OR one theory only at Level 1/2.
	0	No relevant content.

Possible content

Retrieval failure:

- forgetting is due to the absence of cues/tip-of-the-tongue forgetting
- lack of external contextual cues – where environment for learning and recall is different (eg different room)
- lack of internal contextual cues – where physical state for learning and recall is different (eg mood)
- encoding specificity principle
- description of relevant evidence, eg Godden and Baddeley.

Note that focus of description should be on forgetting rather than recall.

Interference:

- when two memories conflict/confuse/become mixed up with each other
- more likely when material is similar (creates response competition)
- proactive interference – when an older memory disrupts a newer memory
- retroactive interference – when a newer memory disrupts an older memory
- description of relevant evidence, eg Baddeley and Hitch.

Accept other valid points.

Possible application:

- retrieval failure – Natasha is not in the same context as when she learnt the material for her drama exam – on stage vs in her room; Natasha is unlikely to be in the same physical, emotional state as when she learnt the material – in her room alone vs in front of the teacher and examiner
- interference – Natasha has mixed up/confused words from another exam which has caused her to forget; interference is likely in this case because the A-level and GCSE performances/plays may be similar.

Accept other valid points.

Possible discussion

Retrieval failure:

- use of evidence to support or contradict, eg Godden and Baddeley suggests that retrieval failure/absence of cues is a valid explanation of forgetting
- application of explanation, eg improving memory using mnemonics, category headings
- context has to be very different in real-life to have any effect
- context effect only occurs when memory is tested in particular ways – free recall vs recognition.

Interference:

- use of evidence from lab studies, eg McGeoch and McDonald and real-life, eg Schmidt supports the effects of interference
- application of explanation, eg avoiding similar material when revising for exams
- use of artificial materials in lab studies, eg recall of word lists
- deliberate attempt to induce interference in lab studies, eg by limiting time between learning and recall
- evidence suggests interference can be overcome using cued recall
- interference tends not to occur with experts.

Accept other valid points.

Section C

Attachment

0 | 9 According to the learning theory of attachment, before any attachment had been formed, the milk Annie gives her baby is best described as: **[1 mark]**

Marks for this question: AO2 = 1

D – an unconditioned stimulus.

1 | 0 According to the learning theory of attachment, now she has formed an attachment with her baby, Annie is best described as: **[1 mark]**

Marks for this question: AO2 = 1

A – a conditioned stimulus.

1 | 1 Outline **one** difference in attachment behaviours shown by infants who have an insecure-avoidant attachment and infants who have an insecure-resistant attachment. **[2 marks]**

Marks for this question: AO1 = 2

2 marks for a clear and coherent outline.

1 mark for a limited/muddled outline.

Possible differences:

- level of separation anxiety – low (avoidant) vs high (resistant)
- level of stranger anxiety – low (avoidant) vs high (resistant)
- response on reunion – indifference (avoidant) vs ambivalence (resistant)
- proximity seeking – low/independent behaviour (avoidant) vs high/clingy (resistant).

Accept other relevant differences.

If more than one difference is outlined, the best one should be credited.

1 mark can be awarded for correct identification of a possible difference in attachment behaviour that is not linked to the correct attachment styles.

1 2 Evaluate the procedure known as the 'Strange Situation'.

[5 marks]

Marks for this question: AO3 = 5

Level	Marks	Description
3	4–5	The evaluation of the strange situation procedure is clear and detailed. The answer is generally coherent with effective use of specialist terminology.
2	2–3	The evaluation of the strange situation procedure lacks some detail/accuracy. Specialist terminology is not always used appropriately or is absent.
1	1	The evaluation of the strange situation procedure is very limited/muddled. Specialist terminology is absent.
	0	No relevant content.

Possible evaluation:

- controlled observation lacks ecological validity
- standardised procedure allows for replication
- sole focus on the mother-child relationship
- evidence, eg Bick et al, suggests inter-rater reliability is high
- culture-bound test/imposed etc
- original study used only three attachment types
- procedure may measure something other than attachment type, eg temperament
- discussion of the ethics of the study.

Accept other valid points.

1 3

Which statistical test would be most suitable to analyse the data in this investigation? With reference to this investigation, explain **three** reasons for your choice of test.

[7 marks]

Marks for this question: AO2 = 7

1 mark for Chi-Squared test.

PLUS

For **each** of the following bullet points award:

2 marks for a clear and coherent reason linked to the investigation.

1 mark for a limited/partial reason e.g. naming an accurate reason (e.g. nominal data/categorical data)

Possible content:

- test of difference/association – analysing the difference in experience of bullying between teenagers who had a secure or insecure attachment/the association between attachment type and experience of bullying. Test of correlation would not be creditworthy
- independent/unrelated design – each teenager cannot appear in more than one category ie secure/insecure; experience of bullying/no experience of bullying
- nominal/categorical – the data refers to the number of teenagers in each of the four categories.

Note: appropriate reason can be credited even if an incorrect test is named or no test is given.

Note: where more than three reasons are given, only the first three should be marked.

1 4 Discuss the influence of early attachment on childhood relationships. Refer to the likely results of the study in **Question 13** in your answer.

[8 marks]

Marks for this question: AO1 = 3, AO2 = 2, AO3 = 3

Level	Marks	Description
4	7–8	Knowledge of the influence of early attachment on childhood relationships is accurate with some detail. Application is effective. Discussion is thorough and effective. Minor detail and/or expansion of argument is sometimes lacking. The answer is clear, coherent and focused. Specialist terminology is used effectively.
3	5–6	Knowledge of the influence of early attachment on childhood relationships is evident but there are occasional inaccuracies/omissions. Application/discussion is mostly effective. The answer is mostly clear and organised but occasionally lacks focus. Specialist terminology is used appropriately.
2	3–4	Limited knowledge of the influence of early attachment on childhood relationships is present. Focus is mainly on description. Any application/discussion is of limited effectiveness. The answer lacks clarity, accuracy and organisation in places. Specialist terminology is used inappropriately on occasions.
1	1–2	Knowledge of influence of early attachment on childhood relationships is very limited. Application/discussion is limited, poorly focused or absent. The answer as a whole lacks clarity, has many inaccuracies and is poorly organised. Specialist terminology is either absent or inappropriately used.
	0	No relevant content.

Possible content:

- Bowlby’s internal working model (IWM) – early attachment provides blueprint/prototype for later attachment; formation of mental representation/schema of first attachment relationship; affects later relationships during childhood
- attachment type associated with quality of peer relationships in childhood – studies of friendship patterns, bullying, etc
- knowledge of relevant studies, eg Myron-Wilson and Smith
- material on maternal deprivation is creditworthy if made relevant to the question.

Possible application:

- securely attached children are less likely to be involved in bullying than insecurely attached children or vice versa
- evidence, eg Myron-Wilson and Smith suggests that avoidant children are more likely to be victims of bullying, resistant children are more likely to be bullies themselves
- children who were securely attached have developed a positive template (IWM) for future and so are less likely to be involved in bullying
- children who formed an insecure attachment in childhood are more likely to have difficulty fitting in with peers and so may be more inclined to have experienced bullying.

Possible discussion:

- use of evidence in discussion. Research on adult relationships (e.g. Hazan & Shaver) is not creditworthy unless explicitly linked to childhood relationships
- discussion of theory, eg Bowlby’s IWM and issue of determinism; negative implications of assumption that the relationship is cause and effect
- discussion of use of self-report techniques to assess quality of childhood/adult relationships – subjectivity, social desirability, etc – as well as retrospective assessment of early attachment patterns
- difficulty of measuring the IWM – hypothetical concept.

Accept other valid points.

Section D

Psychopathology

1 | 5 Identify **two** behavioural characteristics of depression.

[2 marks]

Marks for this question: AO1 = 2

1 mark each for two of the following:

- changes in sleep patterns: sleeping less (insomnia)/sleeping more (hypersomnia)
- changes in eating patterns: eating more/eating less
- social withdrawal
- reduced movement
- reduced speech.

Accept alternative wording.

Accept other valid characteristics. If more than two characteristics are identified, only the first two should be marked.

1 | 6 Briefly outline **one** way that a cognitive psychologist might treat depression by challenging irrational thoughts.

[2 marks]

Marks for this question: AO1 = 2

2 marks for a clear and coherent outline.

1 mark for a limited/muddled outline.

Possible content:

- rational confrontation; ABCDE model – D for dispute, E for effect (reduction of irrational thoughts); shame attacking exercises; empirical and logical argument (Ellis)
- patient as scientist; data gathering to test validity of irrational thoughts; reinforcement of positive beliefs (Beck).

Accept other valid points.

Simply naming a model e.g. ABCDE, with no elaboration, is not creditworthy.

1 7 Describe the biological approach to treating obsessive-compulsive disorder (OCD). **[4 marks]**

Marks for this question: AO1 = 4

Level	Marks	Description
2	3–4	Knowledge of the biological approach to treating OCD is clear and detailed. The answer is generally coherent with effective use of specialist terminology.
1	1–2	Knowledge of the biological approach to treating OCD is limited or muddled. Specialist terminology is not always used appropriately or is absent.
	0	No relevant content.

Possible content:

- use of drug therapy to ‘correct’ imbalance of neurochemicals, eg serotonin, to reduce symptoms associated with OCD
- SSRIs – prevent the reabsorption and breakdown of serotonin in the brain, continue to stimulate the postsynaptic neuron
- timescale – 3–4 months of daily use for SSRIs to impact upon symptoms
- alternatives to SSRIs – tricyclics, SNRIs
- other drugs – benzodiazepines for general relaxation and reduction of anxiety

Credit other valid points.

1 8 Discuss statistical infrequency **and** deviation from social norms as definitions of abnormality. **[16 marks]**

Marks for this question: AO1 = 6, AO3 = 10

Level	Marks	Description
4	13–16	Knowledge of statistical infrequency and deviation from social norms is accurate and generally well detailed. Discussion is thorough and effective. Minor detail and/or expansion of argument is sometimes lacking. The answer is clear, coherent and focused. Specialist terminology is used effectively.
3	9–12	Knowledge of statistical infrequency and deviation from social norms is evident but there are occasional inaccuracies/omissions. Discussion is mostly effective. The answer is mostly clear and organised but occasionally lacks focus. Specialist terminology is used appropriately.
2	5–8	Limited knowledge of statistical infrequency and/or deviation from social norms is present. Focus is mainly on description. Any discussion is of limited effectiveness. The answer lacks clarity, accuracy and organisation in places. Specialist terminology is used inappropriately on occasions. OR one definition only at Level 3/4.
1	1–4	Knowledge of statistical infrequency and/or deviation from social norms is very limited. Discussion is limited, poorly focused or absent. The answer as a whole lacks clarity, has many inaccuracies and is poorly organised. Specialist terminology is either absent or inappropriately used. OR one definition only at Level 1/2.
	0	No relevant content.

Possible content

Statistical infrequency:

- abnormality is defined as behaviour or characteristics that are rare/uncommon/unusual
- occupies the extreme ends of a normal distribution curve, eg low IQ defined as intellectual disability disorder
- relies on the use of up-to-date statistics.

Deviation from social norms:

- all societies make collective judgments about what counts as ‘normal’/usual/typical behaviour
- any behaviour that does not conform to accepted/expected standards is abnormal
- norms vary from culture to culture.

Accept other valid points.

Possible discussion:

- many diagnoses of illness involve some reference to statistics
- difficult to know where the line is between statistically normal and abnormal/subjective interpretation
- some statistically infrequent behaviour is desirable/highly regarded, eg high IQ
- not all behaviour that deviates from social norms is a sign of illness, eg speeding
- norms are culturally relative so difficult to determine universal signs of illness
- social norms definition could be used/abused as an instrument of social control
- social norms change over time (lack of temporal validity)
- neither definition is satisfactory on its own – comparison with alternatives, eg failure to function, deviation from ideal mental health.

Accept other valid points.