



GCE MARKING SCHEME

**PSYCHOLOGY
AS/Advanced**

SUMMER 2014

INTRODUCTION

The marking schemes which follow were those used by WJEC for the SUMMER 2014 examination in GCE PSYCHOLOGY. They were finalised after detailed discussion at examiners' conferences by all the examiners involved in the assessment. The conferences were held shortly after the papers were taken so that reference could be made to the full range of candidates' responses, with photocopied scripts forming the basis of discussion. The aim of the conferences was to ensure that the marking schemes were interpreted and applied in the same way by all examiners.

It is hoped that this information will be of assistance to centres but it is recognised at the same time that, without the benefit of participation in the examiners' conferences, teachers may have different views on certain matters of detail or interpretation.

WJEC regrets that it cannot enter into any discussion or correspondence about these marking schemes.

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GCE PSYCHOLOGY - PY1

Q.1 (a) Outline **two** assumptions of the biological approach. **[4]**

Credit **could** be given for an outline of the following:

- Brain organisation (e.g. lobes, hemispheres).
- Brain chemistry (e.g. neurotransmitters).
- Hormones.
- The CNS/ANS.
- The role of genetics/evolution.
- Any other relevant material.

Marks	AO1
4	Two assumptions are outlined and explained with clear reference to psychology.
3	Two assumptions are outlined but only one is explained with clear reference to psychology OR two assumptions are outlined and explained with some reference to psychology.
2	One assumption is outlined and explained with clear reference to psychology OR two assumptions are outlined only.
1	One assumption is outlined only OR two assumptions are identified only.
0	No relevant knowledge or understanding.

(b) Describe Selye's General Adaptation Syndrome. **[8]**

Credit **could** be given for a description of the following:

- Selye's investigative techniques with rats.
- Physiological changes occurring during the Alarm stage.
- Physiological changes occurring during the Resistance stage.
- Physiological changes occurring during the Exhaustion stage.
- Any other relevant material.

Marks	AO1
7-8	Content is accurate and well detailed. Material is used in an effective manner (evidence of coherent elaboration) and is thorough. Depth and range of knowledge is displayed, although not necessarily in equal measure. Language (including grammar, punctuation and spelling) is well structured, coherent and accurate.
5-6	Content is reasonably accurate but less detailed. Material is used in an effective manner. Depth or range of knowledge is displayed. Language (including grammar, punctuation and spelling) is accurate, structured and clear.
3-4	Content is described in basic detail; material is used in a relevant manner but is limited. Language shows some inaccuracies in grammar, punctuation and spelling.
1-2	Content is superficial; material is muddled and/or incoherent. Language (including grammar, punctuation and spelling) has errors.
0	No relevant knowledge or understanding.

- Q.2** Describe how the behaviourist approach has been applied in either aversion therapy or systematic de-sensitisation. **[12]**

Credit **could** be given for a description of the following:

- The aims/underlying assumptions of aversion therapy/systematic desensitisation.
- Main features of aversion therapy/systematic desensitisation.
- Role of the therapist in aversion therapy/systematic desensitisation.
- Examples of the application of aversion therapy/systematic desensitisation.
- Findings from identifiable research into the effectiveness of aversion therapy/systematic desensitisation.
- Any other relevant material.

Marks	AO1
10-12	The assumption(s) of the approach is/are outlined and clearly linked to the aim(s) / main feature(s) of the therapy. Description of the therapy is well detailed and accurate. Language (including grammar, punctuation and spelling) is well structured, coherent and accurate.
7-9	The assumption(s) of the approach is/are outlined, with some link to the aim(s) / main feature(s) of the therapy. Description of the therapy is well detailed and accurate. OR The assumption(s) of the approach is/are outlined and clearly linked to the aim(s) / main feature(s) of the therapy. Description of the therapy is less detailed. Language (including grammar, punctuation and spelling) is accurate, logical and clear.
4-6	Description of the therapy is well detailed and accurate but no link to the approach. OR Description of the therapy is basic in detail with some link to the approach. Language (including grammar, punctuation and spelling) shows some inaccuracies.
1-3	Description of the therapy is superficial and/or muddled. Language (including grammar, punctuation and spelling) has errors.
0	No appropriate description

Q.3 (a) Evaluate **two** strengths of the cognitive approach. **[2x3]**

Credit **could** be given for a discussion of the following:

- Interactionist nature of the approach
- Practical applications / usefulness of the approach
- Scientific nature / methods used by the approach
- Recognition of free will in changing thought processes
- Any other relevant strength.

Methodology and therapy can only be credited once each.

Marks (per strength)	AO2
3	Strength is outlined, explained and has detailed reference to the approach.
2	Strength is outlined, explained and there is some link to the approach. OR Strength is outlined, briefly explained and has detailed reference to the approach.
1	Strength is outlined and briefly explained, with no link to the approach.
0	Strength identified only. OR No relevant evaluation.

(b) Evaluate **two** weaknesses of the cognitive approach. **[2x3]**

Credit **could** be given for a discussion of the following:

- Issue of reductionism
- Nomothetic methods used
- Ignorance of nature / nurture debate
- Any other relevant weakness.

Methodology and therapy can only be credited once each.

Marks (per weakness)	AO2
3	Weakness is outlined, explained and has detailed reference to the approach.
2	Weakness is outlined, explained and there is some link to the approach. OR Weakness is outlined, briefly explained and has detailed reference to the approach.
1	Weakness is outlined and briefly explained, with no link to the approach.
0	Weakness identified only. OR No relevant evaluation.