ESSAY WRITING & ASSESSMENT OBJECTIVES FOR AQA A-LEVEL

The longest and highest-value questions you might be asked by AQA in the A-level are 16-mark essay questions which you should spend 20-25 minutes on.

To achieve the highest grade possible in your A-level it’s vital that you score as highly as possible in these long essays. Whereas it’s fairly easy to score full marks on shorter questions (1-6 marks) it is far more difficult to score full marks on these long essay questions.

TYPES OF ESSAY QUESTION
There are 2 type of essay question you might be asked.
1. ‘Discuss’ questions – straightforward essays where you describe and evaluate theory and research. (16-marks)
2. ‘Context’ questions. You’ll be asked to read a short passage about behaviour in a real-life situation and relate psychological theory/research to this behaviour/situation. To score well you must relate psychological theory/research to the behaviour/situation described. (16-marks)

HOW OFTEN ESSAY QUESTIONS COME UP
Although the new A-level has only been running for a couple of years we can see what AQA are likely to ask in terms of how often and what type of essay questions will come up.

Paper 1. Out of the 4 topics (Memory, Social Influence, Attachment, Psychopathology) you will usually be asked 1 ‘discuss’ 16-mark question and 1 ‘context’ 16-mark question.

Paper 2. Out of the 2 topics (Approaches and Biopsychology) you will usually be asked 1 ‘discuss’ 16-mark question. You will then usually be asked 1 ‘design a study question’ in the Research Methods section.

Paper 3. Out of the 4 topics (Issue & Debates and whatever 3 options you’ve studied) you will usually be asked 1 ‘discuss’ 16-mark question and 1 ‘context’ 16-mark question.

HOW YOUR ESSAYS ARE MARKED
Examiners use mark schemes to mark your essays.
- For 16-mark ‘Discuss’ questions they can award x/6 for AO1 skills and x/10 for AO3 skills.
- For 16-mark ‘Context’ questions they can award x/6 6 for AO1 skills, x/6 for AO3 skills and x/4 for AO2 skills (linking knowledge to the context)
16-mark ‘Discuss’ question mark scheme

Mark scheme

<table>
<thead>
<tr>
<th>Level</th>
<th>Marks</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>13–16</td>
<td>Knowledge of research is accurate and generally well detailed. Evaluation 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.</td>
</tr>
<tr>
<td>3</td>
<td>9–12</td>
<td>Knowledge of research is evident but there are occasional inaccuracies/omissions. Evaluation is mostly effective. The answer is mostly clear and organised but occasionally lacks focus. Specialist terminology is used appropriately.</td>
</tr>
<tr>
<td>2</td>
<td>5–8</td>
<td>Limited knowledge of research is present. Focus is mainly on description. Any evaluation is of limited effectiveness. The answer lacks clarity, accuracy and organisation in places. Specialist terminology is used inappropriately on occasions.</td>
</tr>
<tr>
<td>1</td>
<td>1–4</td>
<td>Knowledge of research is limited. Evaluation 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.</td>
</tr>
<tr>
<td>0</td>
<td></td>
<td>No relevant content</td>
</tr>
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AO1 content

Knowledge of research (theories and/or studies) into the effects of misleading information on EWT.

Leading questions:
- Loftus and Zanni (1975) – ‘Did you see the/a broken headlight?’
- Loftus (1975) – ‘How fast was the car going when it passed the white barn?’
- response-bias explanation – leading questions do not affect memory, just choice of answer
- substitution bias/explanation – question wording actually distorts memory.

Post-event discussion:
- memory contamination – co-witnesses mix (mis)information
- memory conformity – witnesses go along with others for social approval.

Accept other relevant theories/studies.
AO3 content

Evaluation/discussion of research into misleading information:
- real-life application – links to cognitive interview
- use of artificial materials in studies, eg films – less anxiety-inducing than in real-life
- demand characteristics in lab studies reduce validity
- lack of consequences in lab studies compared to real-life – Foster et al (1994)
- memory for important events/details is less susceptible to distortion
- credit other methodological issues in studies, eg sample bias
- credit ethical issues if made relevant to discussion
- use of evidence to support/challenge effects of misleading information.

Accept other valid evaluation points.

16-mark ‘context question’

Outline and evaluate failure to function adequately and deviation from ideal mental health as definitions of abnormality. Refer to the experiences of Rob in your answer. [16 marks]

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

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<td>13–16</td>
<td>Knowledge of failure to function adequately and deviation from ideal mental health is accurate and generally well detailed. Application is effective. Evaluation 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.</td>
</tr>
<tr>
<td>3</td>
<td>9–12</td>
<td>Knowledge of failure to function adequately and deviation from ideal mental health is evident but there are occasional inaccuracies/omissions. Evaluation/application is mostly effective. The answer is mostly clear and organised but occasionally lacks focus. Specialist terminology is used appropriately.</td>
</tr>
<tr>
<td>2</td>
<td>5–8</td>
<td>Limited knowledge of failure to function adequately and/or deviation from ideal mental health is present. Focus is mainly on description. Application/evaluation is of limited effectiveness. The answer lacks clarity, accuracy and organisation in places. Specialist terminology is used inappropriately on occasions.</td>
</tr>
<tr>
<td>1</td>
<td>1–4</td>
<td>Knowledge of failure to function adequately and/or deviation from ideal mental health is very limited. Application is limited, poorly focused or absent. Evaluation 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.</td>
</tr>
<tr>
<td>0</td>
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</table>

AO1 content

Failure to function adequately:
- abnormality judged as inability to deal with the demands of everyday living
- behaviour is maladaptive, irrational or dangerous
- behaviour causes personal distress and distress to others.

Deviation from ideal mental health:
- absence of signs of mental health used to judge abnormality
- description of (Jahoda’s) criteria – accurate perception of reality; self-actualisation; resistance to stress; positive attitude towards self; autonomy/independence; environmental mastery
- the more criteria someone fails to meet, the more abnormal they are.

Accept other valid points.
AO2 possible application

Failure to function adequately:
- evidence that Rob is not coping with everyday tasks – cannot complete homework; he is untidy
- Rob is causing others’ distress – his parents and teachers
- personal distress – feelings of anxiety, he is frightened.

Deviation from ideal mental health:
- Rob’s perception of reality is not accurate – hearing voices
- voices are preventing Rob from fulfilling potential/achieving self-actualisation – may affect his chances of going to university.

Accept other relevant application points.

AO3 possible evaluation/discussion points

Failure to function:
- recognises the patient’s perspective
- judging person as distressed or distressing relies on subjective assessment
- not all abnormal behaviour is associated with distress/failure to cope eg psychopathy
- not all maladaptive behaviour is an indicator of mental illness.

Deviation from ideal mental health:
- positive, holistic approach to diagnosis
- criteria for mental health are too demanding/unrealistic
- culture bias in some criteria, eg value placed on independence/autonomy
- use of evidence to support/challenge definitions
- comparison/overlap with other definitions – deviation from social norms, statistical infrequency.

Accept other relevant evaluation points.
SKILLS/ASSESSMENT OBJECTIVES (AOs)
Exam papers are marked by examiners according to ‘assessment objectives’ – skills you are supposed to show in your answers.

AO1: Describing knowledge and understanding of psychological theories, terminology, concepts, studies and methods.

AO2: This skill area tests
- Knowledge of research design and data analysis
- Applying knowledge and understanding of psychological theory and research to everyday/real-life examples.

AO3: Analysis, interpretation and evaluation of psychological theory and research.
- Whether or not theories are supported by valid research evidence. After describing a theory go on to describe a piece of research evidence saying, ‘X’s study supports/refutes this theory...’ and then describe the research study.
- Weighing up strengths and weaknesses of theories and research studies, describing whether research studies support or refute theories, making intelligent links between different areas of the syllabus, and relating the topic in hand to broader issues and debates in Psychology as a whole. Is the study valid and/or reliable? Is the sample biased and can we generalise the findings to other populations? What are the strengths and limitations of the method used and data obtained?
- General criticisms and/or strengths of theories and studies.
- Criticisms of the methodology used to study a topic: e.g. Bandura’s Bobo Doll studies are laboratory experiments and therefore criticisable on the grounds of lacking ecological validity: i.e. the violence the children witnessed was on television and was against a doll not a human. To gain marks for criticising study’s methodologies the criticism must be contextualised: i.e. say why this is a problem in this particular study.
- Issues, Debates and Approaches. Describing how the topic in question relates to broader debates in Psychology. For example:
  - Nature vs. Nurture
  - Determinism vs. Free-Will
  - Reductionism vs. Holism
  - Idiographic vs. Nomothetic
  - Ethical issues & human participants
  - Gender/Culture/Historical bias
  - Real world applications
  - Contextualising what you are describing in reference to the Approach it is based on: e.g. Biological, Psychodynamic, Behavioural, Cognitive and Humanistic.
- Compare and/or contrast different theories - outline how theories are similar and how they differ.
- What value does the theory/study have for wider society?

Note: Using Research Studies in your Essays
Research studies can be used as either AO1 or AO3.
If you refer to the procedures and findings of a study, this shows knowledge and understanding (AO1). If you comment on what the studies shows, and what it supports and challenges about the theory in question, this shows evaluation (AO3).
HOW MUCH OF EACH SKILL AREA TO INCLUDE

In 16-mark ‘Discuss’ essays the split should be approx. 37% AO1 to 63% AO3. So if your essay was 25-minutes long the split would be approx. 9 minutes AO1, 16 minutes AO3.
In the real exam to make thing more manageable go for a 33% to 66% split. To make it even easier – if you could normally write 3 sides in 25 minutes – 1 side should be AO1 the other 2 should be AO3.

In 16-mark ‘Context’ essays the split should be approx. 37% AO1 to 26% AO2 to 37% AO3. So if your essay was 25-minutes long the split would be approx. 9 minutes AO1, 7 minutes AO2, 9 minutes AO3.

The timing for these questions is a little tricky but the main point is to make 4 good links to the context described.

HOW TO ANSWER 16-MARK CONTEXT QUESTIONS

These questions are basically the same as Discuss questions (i.e. you need to describe and evaluate) but you also need to try to make 4 good links to the context at some point during your essay.
It’s easiest to show how to do this using an example.

Read the item and then answer the question that follows.

Polly always checks what her friends are going to wear before she gets ready to go out because she does not like to be the odd one out.
Jed watches his colleagues carefully when he starts a new job so that he can work out where to put his things and how long to take for lunch.

Discuss two explanations for conformity. Refer to Polly and Jed in your discussion.
(Total 16 marks)
6 marks for knowledge (AO1) of informational and normative social influence.
6 marks for evaluation/analysis/discussion (AO3) of informational and normative social influence.
4 marks for application (AO2) – i.e. how research can be related to Polly and Jed. As you go through the essay when you come across a point which relates to either of them simply say, “Normative social influence relates to Polly always checking what her friends are wearing as she wants to be approved of and liked by the group and fears disapproval and embarrassment if she thinks she’s not dressed like the rest of her friends”, etc. Try and relate material back to Polly 2 times and Jed 2 times. For example, expand on the points: Polly (i) checks what her friends are wearing –, (ii) doesn’t like to be the odd one out; Jed (i) watches his colleagues carefully, (iiii) so that he can work out where to put things and how long to take for lunch (both of which relate to informational social influence).

Rob is a sixth-form student who has started hearing voices in his head. The voices come often, are usually threatening and make Rob feel frightened. The voices are making it difficult for Rob to complete his homework properly and he is worried about how this may affect his chances of going to university. Rob has not told anyone about his experiences, but his parents and teachers have noticed that he appears distracted, anxious and untidy.
Outline and evaluate failure to function adequately and deviation from ideal mental health as definitions of abnormality. Refer to the experiences of Rob in your answer.
(Total 16 marks)
6 marks for knowledge of these 2 definitions of abnormality (AO1).
6 marks for evaluation/discussion of these 2 definitions of abnormality (AO3).
4 marks for application – i.e. how definitions and evaluation of these definitions can be related to Rob's behaviour.
As you go through the essay relate relevant material to Rob's behaviour. Try and do this at least twice for each definition. For example, “Rob’s difficulty in completing homework fit with the failure to function adequately definition of abnormality as his emotional state and experiences are starting to interfere with his ability to work”. Other points you could expand on include: (i) he is hearing voices – Deviation from Ideal Mental Health – he does not have an accurate perception of reality; (ii) he is anxious – Deviation from Ideal Mental Health – he does not have positive attitudes to the self; (iii) he is ‘untidy’ – Failure to Function Adequately – his experiences mean he cannot longer look after/care for himself.