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# A-level PSYCHOLOGY 7182/1

Paper 1 Introductory topics in psychology

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**Mark scheme**

June 2023

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Version: 1.0 Final



2 3 6 A 7 1 8 2 / 1 / M S

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** Which **two** of the following best describe Zimbardo's prison study?

**[2 marks]**

**Marks for this question: AO1 = 2**

**A** – Controlled observation

**E** – Participant observation

**0 2** Using your knowledge of obedience research, explain possible reasons why the students failed to obey their teacher.

**[6 marks]**

**Marks for this question: AO2 = 6**

| Level | Marks | Description                                                                                                                                                                         |
|-------|-------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 3     | 5–6   | Application as to why the students fail to obey is mostly clear and effective. The answer is generally coherent with appropriate use of terminology.                                |
| 2     | 3–4   | There is some effective application as to why the students fail to obey. The answer lacks clarity in places. Terminology is used appropriately on occasions.                        |
| 1     | 1–2   | There is limited application as to why the students fail to obey. The answer, as a whole, lacks clarity and has inaccuracies. Terminology is either absent or inappropriately used. |
|       | 0     | No relevant content.                                                                                                                                                                |

**Possible content:**

- social support/disobedient role models/diffusion of responsibility – Tanya and Natasha have support from each other which gives them the confidence to disobey/defy Mr Boat
- proximity of the authority figure – Mr Boat is at the far end of a queue/relatively far away so disobedience/defiance is more likely
- (lack of) legitimacy of the setting/order/system – Mr Boat and the students are not at school and so the order lacks legitimacy in this setting (the supermarket), Mr Boat is not wearing his work clothes, making disobedience/defiance more likely
- use of evidence as application and/or other valid points, eg Natasha and Tanya are in an autonomous, rather than agentic, state.
- dispositional factors eg. Natasha and/or Tanya have an internal locus of control so disobey Mr Boat

Credit other relevant application points.

No explicit application to the scenario **maximum** of 1 mark

**0 3** Discuss research into minority influence.

**[16 marks]**

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

| Level | Marks | Description                                                                                                                                                                                                                                                                    |
|-------|-------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 4     | 13–16 | Knowledge of minority influence research 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 minority influence research 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 minority influence research 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     | 1–4   | Knowledge of minority influence research 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.                                                                                                                                                                                                                                                           |

Note that 'research' refers to theories and/or studies of minority influence.

**Possible content:**

- knowledge of factors affecting minority influence including consistency/persistence, commitment (the augmentation principle), flexibility
- knowledge of other factors, eg confidence
- synchronic (consistency between members of minority) and/or diachronic consistency (consistency over time)
- process of conversion/internalisation
- accept minority influence processes involved in social change, such as the 'snowball effect', social cryptoamnesia
- description of studies of minority influence, eg Moscovici et al (1969), Wood et al (1994), Nemeth and Brilmayor (1987).

Accept other valid points.

**Possible discussion:**

- use of research to support/contradict minority influence factors/processes, eg Moscovici et al (blue-green slides) the importance of consistency; Nemeth and Brilmayor (jury situation) support for flexibility
- use of real-life examples of social change (eg. Women's rights movement), to illustrate processes
- evidence suggests conversion to minority influence involves deeper thought, eg Martin et al (2003), Wood et al (1994)
- artificiality of tasks/evidence vs struggle of real minorities
- majorities in real-life have power and status, not just numbers
- methodological strengths and weaknesses of research into minority influence, including ethics

Accept other valid points.

**Section B**

**Memory**

|   |   |
|---|---|
| 0 | 4 |
|---|---|

Outline what is meant by standardisation **and** suggest **one** way standardisation could have been used in this experiment.

**[2 marks]**

**Marks for this question: AO1 = 1, AO2 = 1**

**Outline content**

**1 mark** for an outline of standardisation – ways in which procedures/materials/instructions within an investigation are kept the same for all participants.

Accept alternative wording.

**Possible application:**

**1 mark** for one way in which standardisation could have been used in this experiment.

**Possible ways:**

- the same word list for both groups/conditions
- the same order of words for all participants
- the same instructions for all participants **in the same group**
- the same timings for all participants **in the same group**
- the same room for each condition
- the same book for all participants in **Group B**.

Accept other valid ways.

|   |   |
|---|---|
| 0 | 5 |
|---|---|

Outline what is meant by randomisation **and** suggest **one** way randomisation could have been used in this experiment.

**[2 marks]**

**Marks for this question: AO1 = 1, AO2 = 1**

**Outline content**

**1 mark** for an outline of randomisation – the use of ‘chance’ in setting up the investigation

**Possible application**

**1 mark** for one way in which randomisation could have been used in this experiment.

**Possible ways:**

- the order of words in the list should have been decided randomly
- the allocation of participants to each condition/group should have been decided randomly.

Accept other valid ways.

**0 6**

Explain the results of this experiment with reference to the multi-store model of memory.  
**[4 marks]**

**Marks for this question: AO2 = 4**

| Level | Marks | Description                                                                                                                                                                              |
|-------|-------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 2     | 3–4   | The explanation of the results is clear and detailed with appropriate reference to the multi-store model. The answer is generally coherent with effective use of specialist terminology. |
| 1     | 1–2   | The explanation of the results is limited. The reference to the multi-store model is partial or includes inaccuracies. Terminology is either absent or inappropriately used.             |
|       | 0     | No relevant content.                                                                                                                                                                     |

**Possible content:**

- in Group B, the disruption of the reading task prevented maintenance rehearsal
- in Group B, the reason the last few words are not available (recency effect) is because the duration of STM (18–30 secs) has been exceeded.
- in Groups A and B, the first few words are rehearsed and transferred to long-term memory (primacy effect)
- in Groups A and B, the poor recall of words in the middle of the list is due to displacement from the later words/decay of earlier words in the list
- in Groups A and B, poor recall of words in the middle of the list is due to the limited capacity of STM (7+/-2)
- in Group A, due to immediate recall the last few words are still available in short-term memory (recency effect).

**Note**

- **naming of the primacy effect or the recency effect is not required for full marks**
- **to gain full marks the response must address the results of both Group A and Group B**

**0 7** Discuss research into the effects of anxiety on the accuracy of eyewitness testimony.

**[16 marks]**

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

| Level | Marks | Description                                                                                                                                                                                                                                                                                                     |
|-------|-------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 4     | 13–16 | Knowledge of research into the effects of anxiety on eyewitness testimony 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 research into the effects of anxiety on eyewitness testimony 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 research into the effects of anxiety on eyewitness testimony 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     | 1–4   | Knowledge of research into the effects of anxiety on eyewitness testimony 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.                                                                                                                                                                                                                                                                                            |

Note that 'research' refers to theories and/or studies of the effects of anxiety on EWT.

**Possible content:**

- knowledge of studies of the effects of anxiety on EWT, eg Johnson and Scott (1976), Yuille and Cutshall (1986), Deffenbacher, Christiansen and Hubinette, Loftus and Burns
- knowledge of theories/explanations that account for the effects of anxiety, eg weapon focus; tunnel theory
- the inverted U hypothesis (Yerkes-Dodson) – concept of optimal arousal
- understanding that anxiety/arousal may have an enhancing or deleterious effect upon the reliability of EWT.

Accept other valid points.

**Possible discussion:**

- use of evidence to support/contradict the effects of anxiety on EWT, eg Johnson and Scott (knife/pen) supports weapon focus/tunnel theory; Christiansen and Hubinette – higher anxiety, superior recall
- the element of surprise, rather than anxiety, may account for findings, eg Pickel (scissors, handgun, wallet, chicken)
- cognitive factors in recall may be more important than emotional factors
- methodological strengths and weaknesses of research into anxiety and EWT eg demand characteristics vs real life
- discussion of contradictory findings of lab vs more real-life investigations
- ethical issues associated with manipulation of anxiety in studies
- alternative explanations for (un)reliability of EWT, eg misleading information.

Accept other valid points.

**Section C****Attachment****0 8**

Outline the learning theory of attachment.

**[4 marks]****Marks for this question: AO1 = 4**

| Level | Marks | Description                                                                                                                                                                                                   |
|-------|-------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 2     | 3–4   | Knowledge of the learning theory of attachment is clear and detailed. The answer is generally coherent with effective use of specialist terminology.                                                          |
| 1     | 1–2   | Knowledge of the learning theory of attachment is limited or muddled. There may be limited reference to how it accounts for attachment. Specialist terminology is not always used appropriately or is absent. |
|       | 0     | No relevant content.                                                                                                                                                                                          |

**Possible content:**

- emphasises the importance of food in attachment – ‘cupboard love’
- the role of classical conditioning – the caregiver (eg mother) starts as a neutral stimulus (NS), over time becomes associated with ‘food’ and produces the conditioned response (CR) of pleasure
- role of operant conditioning – crying leads to a response from the caregiver (eg feeding), the caregiver receives negative reinforcement when the crying stops
- hunger is a primary drive, attachment is a secondary drive – learned by an association between the caregiver and satisfaction
- credit reference to stimulus generalisation (eg. multiple attachments) if used to help explain learning theory of attachment.
- credit reference to other learning theories, eg SLT.

Credit other valid points.

**Note**

- Response can gain full credit for just outlining classical OR operant theory of attachment.
- Learning theory per se is **not creditworthy**, answers must be shaped towards explaining attachment.

**0 9**

Outline Van Ijzendoorn's investigation of cultural variations in attachment.

**[4 marks]****Marks for this question: AO1 = 4**

| Level | Marks | Description                                                                                                                                                                        |
|-------|-------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 2     | 3–4   | Knowledge of Van Ijzendoorn's investigation of cultural variations is clear and generally detailed. The answer is generally coherent with effective use of specialist terminology. |
| 1     | 1–2   | Knowledge of Van Ijzendoorn's investigation of cultural variations is limited or muddled. Specialist terminology is not always used appropriately or is absent.                    |
|       | 0     | No relevant content.                                                                                                                                                               |

**Possible content:**

- meta-analysis of 32 studies of attachment across 8 countries
- use of Strange Situation data to classify infants as either secure, insecure-avoidant, insecure-resistant
- secure attachment was the most common (50% in China to 75% in the UK)
- in collectivist cultures (China, Japan, Israel) rates of insecure-resistant attachments were higher (over 25%) (than findings in the US)
- in Germany, rates of insecure-avoidant were higher (than findings in the US)
- variations between results of studies within the same country were (1.5 times/150%) greater than those between countries.

Credit other valid points.

**Note**

- to achieve full marks students need to address more than one element of the investigation ie. aim / methods / findings / conclusions

**1 0** Discuss Bowlby's theory of maternal deprivation. Refer to Ryan in your answer.

**[16 marks]**

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

| Level | Marks | Description                                                                                                                                                                                                                                                                                                          |
|-------|-------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 4     | 13–16 | Knowledge of Bowlby's theory of maternal deprivation 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 Bowlby's theory of maternal deprivation 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 Bowlby's theory of maternal deprivation 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.                  |
| 1     | 1–4   | Knowledge of Bowlby's theory of maternal deprivation 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.                       |
|       | 0     | No relevant content.                                                                                                                                                                                                                                                                                                 |

**Possible content:**

- idea that the absence of a mother figure will lead to poor psychological development
- concept of the critical period
- concept of deprivation – prolonged/accumulated separation from the mother figure
- consequences of deprivation – reduced intelligence/IQ; emotional problems; delinquency; affectionless psychopathy.

Credit reference to internal working model and monotropy if presented as part of maternal deprivation.  
Accept other valid points that relate to maternal deprivation

**Possible application:**

- it is likely that Ryan has experienced maternal deprivation/lack of a mother figure during the critical period, having spent his first five years in care
- Ryan is demonstrating some of the consequences of deprivation – emotional problems, 'difficult relationship' with parents and friends; reduced intelligence, 'below average in most subjects'; delinquency – 'anti-social behaviour'; relationship with others/delinquency may be due to lack of empathy/affectionless psychopathy.

Accept other valid application points.

**Possible discussion:**

- use of evidence to support/contradict the effects of deprivation, including evidence that suggests the effects are reversible/not long-term, eg Bowlby (1944), Goldfarb (1955), Romanian orphan studies, Koluchova – Czech twins
- Bowlby's failure to distinguish between deprivation and privation (Rutter)
- wider implications of the theory, eg for institutional care
- issue of social sensitivity/gender bias
- economic implications of Bowlby's theory.

Methodological evaluation of studies is only creditworthy if linked back to maternal deprivation

Accept other valid points.

**Section D**

**Psychopathology**

**1 1**

Briefly outline the deviation from ideal mental health definition of abnormality. Refer to Dave in your answer.

**[4 marks]**

**Marks for this question: AO1 = 2, AO2 = 2**

**Outline content:**

**First mark is essential for any credit for the outline**

**1<sup>st</sup> mark** for stating abnormality is the absence of criteria for good mental health (as in physical illness)

Accept alternative wording

**1 further mark** for any valid elaboration eg.

- Jahoda proposed criteria of 'optimal living'
- identification/knowledge of criteria, eg. resistance to stress; accurate perception of reality; working towards self-actualisation; positive view of self; lack of dependence on others; ability to adapt
- the more criteria are absent, the more serious the abnormality.

Credit other valid points.

**Possible application**

**2 marks** for clear and effective application to the scenario

**1 mark** for limited / muddled application to the scenario

- Dave's difficulty concentrating at work may affect his ability to reach his potential/self-actualise
- Dave does not share his friends' view which suggests his perception of reality/himself may not be accurate
- Dave is experiencing anxiety which suggests he does not easily cope with stress.
- Dave does not seem to have a positive view of self eg. about his body shape

Credit other valid application points.

**1 2** Evaluate the failure to function adequately definition of abnormality.

**[5 marks]**

**Mark for this question: AO3 = 5**

| Level | Marks | Description                                                                                                                                                                  |
|-------|-------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 3     | 4–5   | The evaluation of failure to function adequately is clear and generally detailed. The answer is generally coherent with appropriate use of terminology                       |
| 2     | 2–3   | The evaluation of failure to function adequately is evident. The answer lacks clarity in places. Terminology is used appropriately on occasions.                             |
| 1     | 1     | The evaluation of failure to function adequately is limited. The answer as a whole lacks clarity and has inaccuracies. Terminology is either absent or inappropriately used. |
|       | 0     | No relevant content.                                                                                                                                                         |

**Possible evaluation:**

- recognises the patient's perspective/experience is important in defining abnormality
- provides a threshold for professional help for those who need it most
- failure to function may be a normal reaction to a traumatic event, eg a bereavement
- can rely on a subjective assessment (though there have been attempts to make judgements more objective, eg Global Assessment of Functioning)
- can use more objective measures of failing to function adequately eg. poor attendance data at school/work
- some people appear to function perfectly normally despite being seriously ill/disturbed, eg Harold Shipman; some depressed patients
- overlap/comparison with other definitions, eg deviation from social norms.

Credit other valid points.

**1 3** What is content analysis?

**[1 mark]**

**Marks for this question: AO1 = 1**

**1 mark** for an outline of content analysis

- a method of quantifying qualitative content via coding/categorisation
- a form of (indirect) observation that examines artefacts/communications/form of media that people produce

Accept alternative wording

**1 4**

Explain **one** way in which the researchers could have used content analysis to analyse diary extracts in this investigation.

**[2 marks]****Marks for this question: AO2 = 2**

**1 mark** for describing the number of times a 'word/phrase/theme' could be counted/tallied/categorised

**1 mark** for identifying relevant words/phrases that relate to depression eg. 'isolation'; 'loneliness'; 'sadness' within the diary

**1 5**

Explain how the reliability of this content analysis could be improved.

**[4 marks]****Marks for this question: AO3 = 4**

| Level | Marks | Description                                                                                                                                                |
|-------|-------|------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 2     | 3–4   | The explanation of how reliability 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 reliability could be improved is limited or muddled. Specialist terminology is not always used appropriately or is absent.          |
|       | 0     | No relevant content.                                                                                                                                       |

The answer should be focused on improving the reliability of the content analysis to gain level 2 marks

**Possible content:**

- researchers should clarify/establish/agree/review operationalised codes/categories etc
- researchers could create new categories if necessary (that are mutually exclusive)
- researchers should be trained carefully in using these identified codes/categories (words/phrases)
- they should analyse a small number of diary extracts using the same analytic/coding system
- any improvement in reliability could be determined by establishing inter-rater/inter-observer reliability (between the two researchers); test-retest reliability.
- the two researchers' results are compared for similarity to check improvements (+0.8 or above would indicate reliability).

Accept other valid points

No credit given for reference to including an additional researcher.

**1 6**

Ellis proposed an ABC model of depression. Outline and evaluate the ABC model of depression. Refer to this diary extract in your answer.

**[8 marks]**

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

| Level | Marks | Description                                                                                                                                                                                                                                                                     |
|-------|-------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 4     | 7–8   | Knowledge of the ABC model is accurate with some detail. 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. |
| 3     | 5–6   | Knowledge of the ABC model is evident but there are occasional inaccuracies/omissions. There is some effective application and/or evaluation. The answer is mostly clear and organised but occasionally lacks focus. Specialist terminology is used appropriately.              |
| 2     | 3–4   | Limited knowledge of the ABC model is present. Focus is mainly on description. If application/evaluation is present it 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 the ABC model is very limited. If application/evaluation is present it 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:**

- knowledge of the ABC model – activating event; beliefs, which are irrational; consequence – anxiety and depression
- examples of irrational beliefs, eg musturbation, utopianism.

Accept other valid points.

**Possible application:**

- activating event – dropping change at the till
- examples of irrational beliefs – ‘they all knew I was useless’, ‘no-one else does such stupid things’
- consequence – continued cycle of depression, eg I’ll never leave the house again.

Accept other valid points.

**Possible evaluation:**

- use of evidence to support/contradict the ABC model, eg Alloy et al
- practical application to therapy – REBT and the ABCDE model
- the link between cognitions and depression may be correlational, not causal
- the ABC model best describes reactive, rather than endogenous depression
- comparison with alternatives, eg Beck’s model, biological modes of depression.

Accept other valid points.