Depression:

Characteristics, explanations and treatments

Q1.

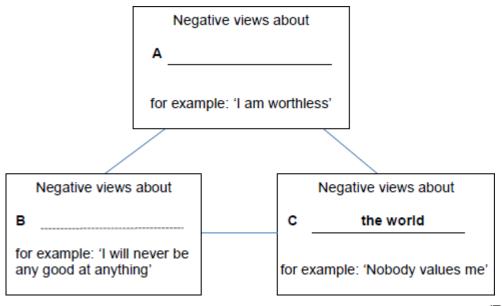
Outline **at least two** ways in which a cognitive psychologist might explain depression in a person who has recently become unemployed.

(Total 4 marks)

Q2.

Complete the diagram below, by filling in **A** and **B**, to show Beck's negative triad as it is used to explain depression.

Beck's negative triad



(Total 2 marks)

Q3.

Which **two** of the following are cognitive characteristics of depression? Choose **two** from the options A, B, C, D and E.

Α	A change in sleeping patterns	0
В	Negative schema	0
С	Poor concentration	0
D	Low mood	0
Е	Aggression	0

(Total 2 marks)

Q4.

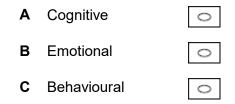
A researcher studying depression wanted to see whether or not there was a relationship between level of self-esteem and negative schema score. She constructed two questionnaires and asked ten people who had been diagnosed with depression to complete them.

One questionnaire measured the participant's level of self-esteem. A low score (out of 50) indicated low self-esteem.

The other questionnaire measured whether the participant showed evidence of negative schema. A low score (out of 50) indicated evidence of negative schema. The two sets of results for each participant are shown in the table below.

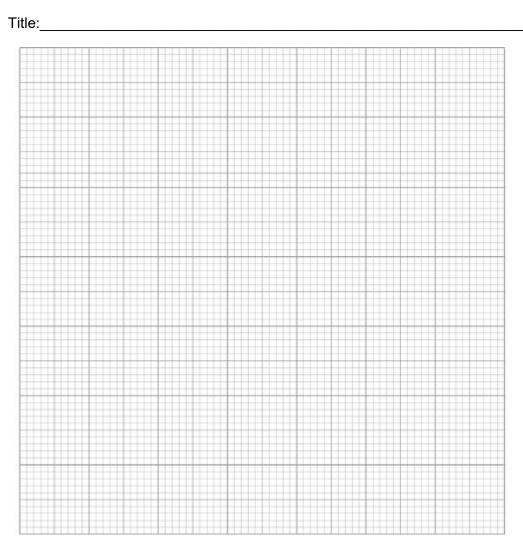
Participant	1	2	3	4	5	6	7	8	9	10
Self-esteem score	8	9	9	11	13	17	18	18	20	22
Negative schema score	11	15	13	18	12	14	20	16	17	19

(a) Is negative schema score best described as measuring a cognitive, emotional or behavioural characteristic of depression? Shade **one** box only.



(1)

(b) Draw a suitable graphical display to represent the data in **Table 1**. Label your graph appropriately.



(4)

The researcher analysed the data in **Table 1** using a Spearman's rho statistical test.

(c) With reference to level of measurement, explain why Spearman's rho is an appropriate statistical test for this data.

(2)

(d) Estimate the correlation coefficient most likely to result from analysis of the data in **Table 1**. Shade **one** box only.

The correlation coefficient would be approximately

+0.95	0
+0.70	0
+0.30	0
+0.15	0

(1) (Total 8 marks)

Q5.

Briefly outline **one** strength of the cognitive explanation of depression.

(Total 2 marks)

Q6.

Describe **at least one** strategy that might be used in cognitive behaviour therapy for depression.



(Total 4 marks)

Q7.

Below are four evaluative statements about the cognitive behaviour therapy. Which statement is correct?

Shade one box only.

Cognitive behaviour therapy...

Α	can only be used in group situations.	0
в	allows the client some control over the therapy.	0
С	has many side effects.	$^{\circ}$
D	does not need a trained therapist.	0

(Total 1 mark)

Q8.

Explain how findings of psychological research into the treatment of depression could have implications for the economy.

(Total 2 marks)

Q1.

[AO2 = 4]

Up to 4 marks to be awarded for application of two different concepts or ideas from the cognitive explanation for depression to the novel situation. Many different aspects of cognitive theory can be applied here. Credit should be given for any valid application. Candidates may focus on just two concepts or ideas in some detail or on several separate points in less detail. Possible content will probably come from Beck's theory:

- cognitive triad person will have negative thoughts about self, world, future eg I'm useless, the world is horrid, I'll never get a job
- the person may overgeneralise 'no-one wants me'
- person may show selective perception of negatives eg focus on loss of job and ignore the many good things in life
- person may magnify significance / catastrophise eg loss of job will take on extraordinary significance and will be seen as major disaster
- person makes negative attributions person will blame themselves for loss of job and negate the influence of external factors eg world economy
- person shows absolutist thinking 'if I can't have that job then it's a disaster, no other job will do'.

Up to 2 marks if the explanation is relevant to depression but relevance to unemployment may not have been made explicit.

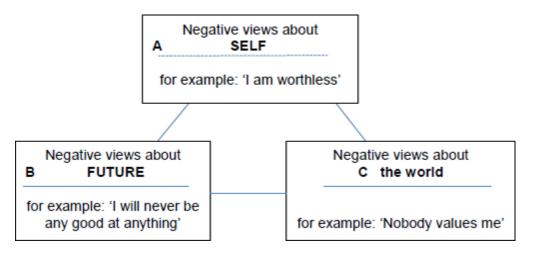
Maximum 2 marks if only one concept or idea is offered

Q2.

[AO1 = 2]

- A self 1 mark
- B future 1 mark

Terms must be in the correct position for credit.



Q3.

[AO1 = 2]

B and C

Q4.

(a) **[AO2 = 1]**

1 mark for: A Cognitive

(b) **[AO2 = 4]**

1 mark for each of the following:

• a title that includes both co-variables and reference to correlation / relationship

1

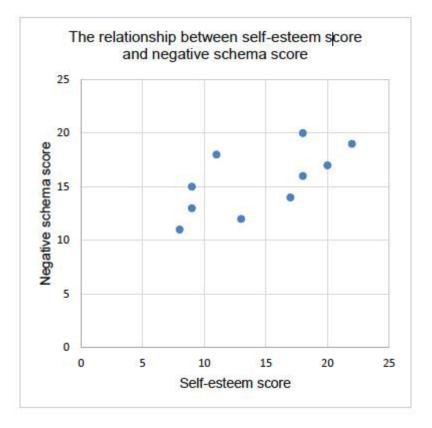
- appropriately labelled X axis
- appropriately labelled Y axis
- accurately plotted points

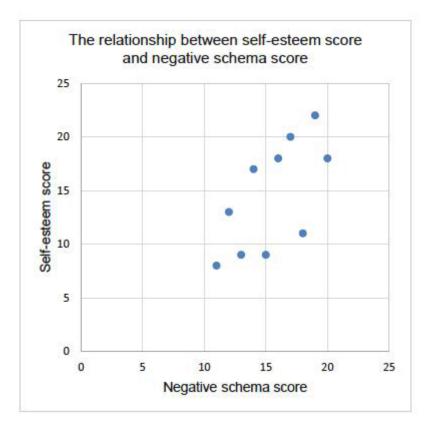
Note: co-variables should be operationalised ('score') either in the title or on the axes.

Accept: line of best fit.

Do not accept: points connected by lines (e.g. frequency polygon); this is an inappropriate graphical display, so maximum 1 mark for Title (bullet 1 above).

If maximum 1 for Title, Title does not need to include 'score'. Must include both co-variables and reference to correlation / relationship.





(c) **[AO2 = 2]**

1 mark for stating that the level of measurement is ordinal data.

PLUS

1 mark for an explanation:

Possible content:

- the co-variables (self-esteem and negative schema) have been measured using an 'unsafe' nonstandardised scale / the researcher constructed the scales herself
- the co-variables cannot be measured objectively / mathematically / may not be 'real things'
- because units of measurement are not of equal size / of unknown size

Accept alternative wording.

(d) **[AO2 = 1]**

+0.70.

2

4

1

Q5.

[AO3 = 2]

2 marks for a clear and coherent outline of one strength of the cognitive explanation of depression with some elaboration.

1 mark if the strength is briefly outlined / vague / muddled.

Possible content:

- based on sound experimental research
- have provided effective treatments for depression
- acknowledges role of thoughts in behaviour / disorders.

Credit other relevant strengths.

Q6.

[AO1 = 4]

Level	Marks	Description
2	3 – 4	Knowledge of at least one strategy in CBT used to treat depression is clear, mostly accurate and detailed. The answer is generally coherent with effective use of terminology.
1	1 – 2	There is limited/partial knowledge of at least one strategy in CBT used to treat depression. The answer may lack coherence. Use of terminology may be either absent or inappropriate.
	0	No relevant content.

Possible strategies:

- Challenging irrational thoughts by requiring the client to gather evidence of behaviours/incidents etc and then comparing the evidence with the thought expressed to check whether they match or not.
- The client as scientist/reality testing homework assignments where the client's hypothesis/negative thinking is tested and the evidence evaluated.
- Diary records to monitor events and identify situations in which negative thinking occurs so these can be targeted.

Credit other appropriate strategies.

Q7.

[AO3 = 1]

Answer: B allows the client some control over the therapy.

[AO2 = 2]

Q8.

2 marks for a clear and coherent explanation of how research into treating depression might have implications for the economy.

1 mark for a vague or muddled explanation.

Possible content:

- psychological research findings into psychopathology may lead to improvements in psychological health/treatment programmes which may mean that people manage their health better and take less time off work. This would reduce costs to the economy
- psychological research findings may lead to better ways of managing people who are prone to mental health issues whilst they are at work which could improve their individual productivity, again boosting the economy overall
- 'cutting-edge' scientific research findings into treatments for mental health issues carried out in UK may encourage investment from overseas companies into this country which could boost the economy
- providing effective treatments might be a significant financial burden to an NHS service already under huge financial strain
- discovering that new treatments may be more effective than older therapies and that these may be more expensive so could increase the financial burden to the economy.

Credit other relevant explanations.

Examiner reports

Q1.

There were some very detailed answers to this question, with many full-mark responses. In some of the less well-organised answers to this question it was difficult to see exactly which two ways were being outlined; students offered multiple cognitive concepts with applications that could not be unambiguously linked to any of the concepts or sometimes no application at all. Students offering Seligman did not always remember to focus on the cognitive aspect.

Q4.

Part (a) was very straightforward and answered very well.

In part (b) many students were able to provide appropriate scattergrams, with accurate title, axes, and plotting. Others missed out on one or two marks with vague titles and / or axes. However some students, despite the questions in this section mentioning 'relationship', Spearman's rho and 'correlation', provided completely inappropriate graphical displays e.g. histograms and bar charts. A small minority did not attempt this question at all.

Part (c) required reference to 'level of measurement'. Although the majority of answers could identify ordinal data for 1 mark, very few went on to characterise ordinal data or why this studyproduced ordinal data, which would have fully justified the use of Spearman's rho.

Part (d) was very straightforward if the scattergram was plotted accurately, but a significant minority of students were clearly unaware that 0.15 is a negligible correlation and 0.95 a virtually perfect correlation (straight line).

Q6.

Unfortunately, students often wasted time and effort outlining theory in response to this question. When answers mentioned therapy, the focus was not always on describing one or more strategies used in Cognitive Behavioural Therapy (CBT), but instead on offering superficial points such as homework tasks, activities, disputing and so on, but without any expansion of these to show practical usage.

Q7.

There were many correct answers to this question although a significant number of students struggled with the instructions about how to indicate their choice of response in the appropriate mark box and even more with how to amend their choices correctly. Also, some students provided two answers rather than one when the instruction clearly stated 'Shade **one** box only'.

Q8.

This question was generally answered well by most students. Many responses focused on the fact that people could go back to work and generate money for the economy. A number of responses also focused on the cost implications to the NHS, such as a comparison of drugs being cheaper than CBT or the cost of training therapists for CBT compared to drugs. In some responses the link to the economy was not clearly explained and these responses were only awarded one mark. Responses that were not linked to the

treatment of depression did not gain any marks.