



# A2 Exam Essays

## APPLIED PSYCHOLOGY ESSAYS

How to evaluate & elaborate well

# Part A:

- **Describe research**
- Usually **one** in detail or more in less detail
- Questions relate to one sub-section to each unit (eg; **Adherence** from 'Healthy Living' unit)
- Respond to the request:
  - 'a study'
  - 'a theory'
  - 'a strategy'
  - 'a measure'
  - 'a way'
- **Know the difference** between these!

# PART B

- **Evaluate Research:**
- Use **issues & debates** to evaluate:
  - reductionism - holism
  - determinism - free will
  - nature-nurture
  - usefulness
  - validity
  - reliability
  - ethnocentrism
  - psychology as science
  - ethics
  - sample

## Part b always evaluates:

- \* Show a range of issues (2 - 3)
- \* **Elaborate** (evidence, examples)
  - \* Analysis & argument
- **Structure:**
  - point
  - example
  - comment (x3)
- Introduce **issue** (eg: validity) & **define**
- Refer to **relevant evidence** (theory/study)
- **Explain & give specific example:** this must discuss the topic of the question (eg: promotion/stress/disorders, etc)
- **Comment:** show understanding/meaning

# Part B: Elaboration

- Demonstrate understanding; **EXTRA:**
- **Analysis, Argument, Comparison:**
  1. **Compare or contrast** with other evidence including elaboration.
  2. **Ask 'so what?':** Explain **consequences** (of eg; low ecological validity...etc.)
  3. **Take alternative view:** weaknesses often have strengths. (eg; reductionism, eco.validity, ethics, etc)
- Ensure there is **fluency** between paragraphs (it should *not* read like a list!)

# Examples of Evaluation: **Comparison**

- One way to evaluate cognitive theories of health is in terms of their usefulness. This refers to how far these can be applied to real life to improve human welfare. For example the HBM clarifies how increasing 'perceived seriousness' & 'perceived vulnerability' to ill health can encourage positive changes to health behaviour. This strategy has been used in health campaigns such as anti-smoking adverts which illustrate dangers of cancer & lung disease, and/or vulnerability of children to cigarette smoke.

Similarly, the concept of self-efficacy has been found to be crucial in changing health behaviours. For example, high self-efficacy successfully aided desensitisation to snake phobia (Bandura & Adams, 1977).

## Evaluation 2: **Alternative view:**

- The **validity** of evidence can also be considered: cognitive theories vary in how accurate they are or how much they account for behaviours. Here the HBM successfully emphasizes the importance of rational evaluations when considering health protective behaviours such as compliance to medical regime for asthma (Becker, 1978):
- Eg;

However, the HBM cannot account for all behaviours: EG; people may smoke due to habit or because of the reinforcement of feeling less stressed. This is a problem because....

# Evaluation 3:

## Consequences.../Alternative view

- Ethics can be problematic in Janis & Feshbeck's study of the effects of fear arousal. Here the welfare of some participants is compromised by showing them a strong fear appeal which intentionally included distressing and painful consequences of poor dental hygiene. This can be criticized for not following ethical guidelines, and may result in fewer participants agreeing to take part in further research.

However, it could be argued that.....

Topic: Promotion... Introduce **issue**... Sample....

- **Define** issue: Samples should be representative of and generalisable to the population...

- Evidence

.....

- **Explain**

- **Elaborate** (specific example related to topic)

\* **Extra:** (comparison/consequence/alternative)

Topic.....Introduce **issue**.....

- **Define** issue:
- Evidence

.....

- **Explain**

- **Elaborate (specific example related to topic)**

- **Extra: (comparison/consequences/alternative view)**

## Example of one issue: **reductionism**

- Physiological theories of substance abuse can be seen as **reductionist**; that is they reduce the reason why people smoke to a purely biological explanation. This is evident in the theory of 'pleasure centres' in the brain and Olds & Milner's focus on stimulation of a specific neurological area linked to excitation. However, this ignores the fact that social influences such as peer-pressure, and behaviourist influences such as imitation of celebrities also contributes to the reason why people smoke & become addicted.

A more **holistic** view is shown in The theory of reasoned action as this recognises that both personal & social beliefs affect the way we behave. It suggests that cognitions & beliefs about behaviours will affect smoking (eg; 'fitting in' with others, or looking 'cool').