Scott
Scott Medical and Healthcare College

Spring Term
Term 2

Psychology

Year 11

Name: _____

Tutor: _____

Care to Learn

Learn to Care

Year 11 Homework Timetable

GREENSHAW LEARNING TRUST

Monday	English Task 1	Option A Task 1	Option C Task 1
Tuesday	Sparx Science	Option B Task 1	Sparx Maths
Wednesday	Sparx Maths	Science Task 1	Option C Task 2
Thursday	Option A Task 2	Sparx Catch Up	Option B Task 2
Friday	Science Task 2	English Task 2	

Sparx Science

- **Complete 100% of their assigned homework each week**

Sparx Maths

- **Complete 100% of their assigned homework each week**

Option A
Geography
History

Option B
Geography
Health and Social Care

Option C
Childcare
Psychology
Sport

Half Term 3 (6 weeks) - Year 11		
Week / Date	**Homework task 1 Cornell Notes**	**Homework task 2 Exam Question**
Week 1 5th January 2026	**Cornell Notes on:** Function and benefits of sleep	**Question**: Explain one benefit of sleep that may help Aditi to do well during her interview. (2 marks)
Week 2 12th January 2026	**Cornell Notes on:** Siffre	**Question**: Explain two reasons why David's suggestions may help Nick with his sleep pattern. You must refer to zeitgebers to justify your answer. (4 marks)
Week 3 19th January 2026	**Revision Cards on:** Insomnia	**Question**: Describe how one lifestyle factor could cause insomnia. (2 marks)
Week 4 26th January 2026	**Cornell Notes on:** Narcolepsy	**Question**: Describe the effect that narcolepsy may have on an individual. (2 marks)
Week 5 2nd February 2026	**Revision Cards on:** Freudian Theory of Dreaming	**Question:** Explain two weaknesses of Marcel using the Freudian theory of dreaming to analyse his client's dream. You must use concepts or research evidence to justify your answer.(4 marks)
Week 6 9th February 2026	**Cornell Notes on:** Little Hans	**Question**: Explain two ways that the case study of 'Little Hans' (Freud, 1909) can support Barbara's belief that the dreams represent Amy's fears.(4 marks)

Half Term 4 (6 weeks) - Year 11		
Week / Date	**Homework task 1 Cornell Notes**	**Homework task 2 Exam Question**
Week 7 23rd February 2026	**Revision Cards on:** Activation Synthesis Theory	**Question**: Explain one reason why Archie may have had this dream. You must use Activation Synthesis Theory to justify your answer (2 marks)
Week 8 2nd March 2026	**Mock week** - independent revision	**Mock week** - independent revision
Week 9 9th March 2026	**Mock week** - independent revision	**Mock week** - independent revision
Week 10 16th March 2026	**Cornell notes on:** Bandura (Evaluation)	**Questions:** Explain one reason why Jayne may have started a fight with her sister. You must use social learning theory to justify your answer. (2 marks)
Week 11 23rd March 2026	**Revision Cards on:** Charlton (Knowledge)	**Question**: Explain one reason for Bella's pro-social behaviour. You must use Charlton et al. (2000) to justify your answer. (2 marks)
Week 12 30th March 2026	**Cornell Notes on:** Operant Conditioning (Criminal Psychology)	**Question**: Describe how negative reinforcement could encourage criminal behaviour. (2 marks)

TERM 2 Knowledge organiser		
Session	**Key words**	**Knowledge**
Week 1: Function and Benefits of Sleep	REM sleep: part of the sleep cycle with rapid eye movements caused by eyes moving a lot behind the eyelids when dreaming occurs. Sleep cycle: a nightly pattern of deep sleep, light sleep and dreaming. NREM sleep: non-rapid eye movement sleep (rapid eye movements do not occur). Sensory blockade: in REM sleep, all incoming sensory information is stopped. Neuron: a nerve cell that transmits information. Movement inhibition: in REM sleep, when movement is prevented.	There are four stages of sleep, with REM sleep forming a fifth part of the sleep cycle. These stages appear more than once throughout a night's sleep. Differences in brain activity help to characterise sleep stages. This brain activity can be measured using an EEG (electroencephalograph). <u>The four stages of sleep</u> Our sleep starts by taking us from stage 1 of the sleep cycle to stage 4. After this, there is normally a repetition of the stages, mainly of stages 3 and 4, and also of REM sleep. Sleep in stages 1–4 is called NREM sleep. Through the night, we move through the different stages. • Stage 1 (sleep onset): this is light sleep and you can be easily woken up during this stage. Muscles are less active, eye movements slow and you can twitch suddenly. You go through alpha and theta brainwaves. Alpha brain activity is restful ('idling') and theta waves characterise a period between wake and sleep. • Stage 2 (called the 'late night stage'): your brainwaves are slower, mainly theta waves, eye movements stop, and there are bursts of brain activity (spindles). Body temperature starts to drop and heart rate slows. This stage is found as you move into sleep from light sleep (stage 1). Stages 3 and 4 are often merged (some say there are just three stages of sleep). • Stage 3 (deep sleep): there are slow delta brainwaves, but also some faster waves. This stage is between light and deep sleep. • Stage 4 (deep sleep): almost all waves are slow delta waves. It is very hard to wake you in stages 3 and 4, as this is deep sleep. There are no eye movements and when woken up, you can feel disoriented. Children can experience sleepwalking or night terrors when they are in deep sleep. <u>REM sleep</u> REM sleep is when there is rapid eye movement – the eyelids can be seen flickering quickly. Dreaming seems to occur during this time. Each night, we tend to spend about 2 hours of our sleep dreaming. During REM sleep, incoming information from the senses (sight, sound, touch, taste and smell) is blocked. This is known as sensory blockade. REM sleep starts with signals in the pons, at the base of the brain, which shuts off neurons in the spinal cord, preventing movement. This is known as movement inhibition. REM sleep is characterised as having rapid, shallow and irregular breathing with eyes jerking and muscles paralysed. Heart rate and blood pressure rise and dreaming can occur.

Week 2: Siffre	Sleep–wake cycle: a circadian/ daily rhythm generally triggered by the day–night cycle. Zeitgebers: external cues that synchronise our biological rhythms; for example, to a 24- hour clock. Sleep deprivation: not having enough sleep; this can affect physical functioning such as weight and brain functioning.	Aim: To see how people would get on when travelling through space, where they could be isolated and would not have zeitgebers such as daylight to set their biological clock. Procedure: Siffre went into Midnight Cave, Texas, USA, on 14 February 1972 and came out in September of the same year, spending more than 6 months without seeing daylight. He lived in a large chamber that was about 130 metres from the entrance of the cave, down a 30 metre vertical shaft. He had very little in the cave with him. He had a tent on a wooden platform, with a bed, a table and a chair. He had frozen food to eat and 780 gallons of water to sustain him. He undertook experiments while in the cave. It was important that there was nothing to indicate time of day or even what day it was. The point was to remove zeitgebers in his environment so that his natural bodily rhythms could be found. He was living outside of time, without a calendar, clocks, sun or moon. Every time Siffre woke up and thought it was 'day', he phoned his team of researchers above ground to say he was awake and they put lights on before he began his daily experiments. He took his blood pressure and then went through memory and physical tests, recording his results. His exercise was riding on an exercise bicycle and he also did target practice with a pellet gun. He kept a diary of when he thought it was day and night. He called ‘night’ the period when he felt tired. When he was ready for sleep, the team of researchers above ground turned the lights off. Results: Siffre was keen at the start of the study but became depressed and upset at his lack of freedom. He became desperate for companionship; this was demonstrated when he wanted to trap a mouse he could hear nearby, to end his loneliness. His record player broke and his books were damaged by damp and he began to think about suicide. Clearly the effects of dark and loneliness were severe. He came out of the cave with worse eyesight and psychological problems. He realised that living in isolation as he had was not a success. During the stay, he had thoughts about abandoning the study and wanting to leave the cave immediately but he realised that this was not rational. During the study, he found that his short-term memory was affected. A similar effect was reported by astronauts when in space. He did not get the ‘days and nights’ right. His periods of sleep–wake were longer than 24 hours. At first, his sleep–wake cycle was just longer than 24 hours. However, as the study went on, the cycles became very varied. His sleep–wake cycle could range from 18 hours to 52 hours. He had two periods where his sleep–wake cycle was 48 hours, which he was expecting from his studies of other people before 1972. At that point, he had 36 hours awake and 12 hours asleep but he could not tell the difference between these days and other days when the sleep–wake cycle was different.

Week 3: Insomnia	Insomnia: problems with sleeping at night that cause difficulties during the day.	Insomnia refers to problems with sleeping. It can affect around one in three people and is often found in older people. Acute insomnia refers to a brief period of problems with sleep. Chronic insomnia is when difficulty with sleep occurs three or more nights a week, lasting at least 3 months. This pattern of insomnia may need treatment. <u>Symptoms</u> Insomnia is characterised by issues such as: • difficulty with falling asleep • waking up a lot during the night • frequently lying awake during the night • not feeling refreshed on waking • finding it hard to fall asleep in the day when tired • feeling irritable and unable to concentrate. <u>Explaining insomnia</u> Insomnia can be caused by lifestyle, including issues with environment, health conditions and what is taken into the body. • Lifestyles that include flying frequently and having jet lag or working shifts can affect bodily rhythms. • Health conditions: mental and physical ill health, such as depression or heart problems, can contribute to insomnia. • Medication, food and drink: being awake and being asleep mean we are under the influence of different neurotransmitters and hormones. Anything that affects these, such as medication, food or drink, can affect sleep and wake patterns. Caffeine and diet pills, for example, can contribute to insomnia. Antidepressants can stop REM sleep and smoking cigarettes can also affect sleep. Alcohol keeps people in the light sleep stages where they can easily wake up.
Week 4: Narcolepsy	Narcolepsy: inability to control sleeping and waking, so experiencing involuntary daytime sleeping. Hallucinations: seeing, hearing, smelling, tasting or feeling something that is not there, such as seeing monsters. Cataplexy: a loss of muscle power and tone, triggered by an onset of strong emotions such as laughter.	Narcolepsy is a disorder where a person has no control over their sleep–wake cycle. Not only is there daytime sleepiness, but also a person with narcolepsy can fall asleep suddenly at any time without being able to control such attacks. Narcolepsy affects both males and females equally and is found in about one person in every 2000 people. It is a neurological disorder – it seems to come from problems with neurological (brain) functioning. <u>Symptoms</u> • Excessive daytime sleepiness (EDS): someone with narcolepsy feels extreme sleepiness and can fall into an uncontrollable daytime sleep at any time.

		• Hallucinations and vivid dreams: hallucinations involve experiencing something that is not there, such as a feeling of danger. Narcolepsy can also bring vivid dreaming and separating dreams from reality can become difficult. • Around 70 percent of people with narcolepsy experience cataplexy, which means they experience loss of muscle power (in their arms, for example) and a loss of muscle tone due to an onset of strong emotions, such as laughter. • Sleep paralysis and abnormal REM sleep: cataplexy often occurs with sleep paralysis, which is the prevention of movement that happens in REM sleep, but cataplexy can occur at any time – while awake or asleep. <u>Explaining narcolepsy</u> Narcolepsy is explained by: a lack of hypocretin, genetic influences, stress and evolution. • Brain chemicals: hypocretin, also called orexin, is a chemical in the brain that keeps us awake and regulates the sleep–wake cycle. In narcolepsy, the cells in the hypothalamus that produce hypocretin are damaged or missing, which can lead to EDS and other symptoms of narcolepsy. • Genes: in about 10 percent of people with narcolepsy, there are other family members who also have the disorder. This may relate to the hypothalamus problem. Variations in chromosome 6, called the HLA complex, appear to be involved in narcolepsy. • Stress or trauma: Wayne Barker (1948) looked at situational stress and narcolepsy and made a link between them. • Evolution: it might be advantageous for an animal (and human) to stay very still to stay alive, so muscle paralysis can be a survival characteristic. Narcolepsy might relate to human REM sleep, which has a survival value.
Week 5: Freudian Theory of Dreaming	Unconscious mind: an inaccessible part of the mind that affects behaviour and feelings. Manifest content: the story the dreamer tells of what happens in a dream. Latent content: the deeper meaning behind what it is said the dream is about. Dreamwork: the transformation of unconscious thoughts into dream content.	Dreams, according to Freud, involve symbols that mean something to the dreamer and need to be analysed by a professional (psychoanalyst) to uncover that meaning. The conscious mind is what we are already aware of and the preconscious is what we can make ourselves aware of with some thinking. According to Freud, the unconscious mind accounts for about 90 percent of our thinking and holds all thoughts and wishes not in the conscious or preconscious. We repress thoughts that challenge us into our unconscious. Dreaming can uncover unconscious wishes. When we understand these wishes they are released from our unconscious. At this point, they no longer take up our energy, which has been used to hide or repress them. This then frees us from anxiety and mental health issues. The manifest content of a dream is the story of the dream that the dreamer tells. It is the dream

		content (the things you see in the dream). The latent content is the meaning of the dream, hidden behind the manifest content. It is the latent content that uncovers unconscious thinking and on which dream analysis focuses. Dreamwork refers to the way the mind keeps unconscious thoughts hidden during dreaming. This is to protect the individual and to keep them asleep by disguising repressed thoughts and ideas. Dreamwork has also been used as a term for uncovering meaning behind dreams Freud interpreted individual dreams using symbols that had meaning for the individual, so the same feature could have different symbolic meaning for different people. The psychoanalyst has to know the person's history and situation in order to interpret their dreams.
Week 6: Little Hans	Obedience: complying with the orders of an authority figure. Authoritarian personality: a type of personality that is respectful of authority, right-wing in attitude and rigid in beliefs. F-Scale: a questionnaire designed to identify authoritarian personalities or traits. Anti-Semitic: negative attitudes, prejudice or discrimination against Jews.	As a way to cure patients with mental health issues, Freud listened to them while they talked and analysed any underlying thoughts and wishes they held in their unconscious. One of his studies focused on Little Hans, whose parents logged his development from when he was 3 years old. Freud only met Little Hans a few times, but the boy was aware that Freud was studying him and sent messages to Freud through his parents. Aim: Freud had two aims in his case study work. One aim was to help the individual; the other was to build evidence for his theory of how children develop. His study of Little Hans was an opportunity for him to read about a child's actual development with the intention of seeing his theory in practice. Procedure: Freud studied Little Hans by gathering a lot of detailed information from the regular reports sent to him by the boy's parents. He also had some information directly from Little Hans. There was a lot to the study so just three features are focused on here. As well as studying Hans's dreams, Freud looked at Hans's phobia of horses, a main problem analysed in the study. Around the age of 5, Hans was afraid to go out of the house and was particularly frightened of horses. Freud analysed what Little Hans said and the reports about him, including his dreams, to find out what was in Hans's unconscious that was causing the phobia. The idea was to reveal to Hans his own unconscious wishes and desires so the phobia could be cured. Freud used traditional psychoanalysis: he listened to what was said and dreamed, considered how these issues are symbols of hidden unconscious desires and then interpreted the symbols to uncover the desires. The analysis was done using Freud's ideas about how children develop. Results: These results focus on the phobia of horses, two dreams and some of Freud's interpretations.
Week 7: Activation	REM sleep: part of the sleep cycle with rapid eye movements caused by eyes	J. Allan Hobson and Robert McCarley's (1977) theory is neurobiological in that it uses brain functioning to explain dreaming.

Synthesis Theory	moving a lot behind the eyelids when dreaming occurs. Sleep cycle: a nightly pattern of deep sleep, light sleep and dreaming. NREM sleep: non-rapid eye movement sleep (rapid eye movements do not occur).	Hobson and McCarley put forward the activation-synthesis theory of dreaming. They pointed out that the brain is active during REM sleep where our muscles are not working and so there is paralysis (movement inhibition). Also, during REM sleep, sensory information is not coming into the brain (sensory blockade). However, random thoughts are sent. These random thoughts form the 'activation' part of the theory. They come from neurons in the brain being randomly activated and 'firing', which means an electrical impulse in a neuron releases neurochemicals. These cross the synaptic gap and messages (thoughts) are sent. For Hobson and McCarley, random thoughts are what we dream and these dreams seem to make sense. This is the 'synthesis' (putting together) part of the theory. The firing of the neurons, which send the random thoughts, is seen as internally generated information. The brain generates 'nonsense' and then automatically works to make sense of it (as it would work to make sense of externally generated information from the senses).
Week 8: Mock Week	Mock week - independent revision	Mock week - independent revision
Week 9: Mock week	Mock week - independent revision	Mock week - independent revision

Week 10: Bandura (Evaluation)	Social learning theory: behaviour is learned through the observation and imitation of role models. Modelling: learning a new behaviour through paying attention to, retaining and reproducing the behaviour of a role model. Observational learning: learning new behaviours through watching and modelling a role model. Role model: a person who we admire or with whom we share similar characteristics. Demand characteristics: when the behaviour of participants changes because they use cues from the experimenter about the nature of the study and conform to those expectations.	One weakness of this experiment is that the children were tested in an unfamiliar environment and may have guessed the aims of the research. One child was said to have remarked to their mother: 'That was the adult we were supposed to copy.' This indicates that the children may have believed that they were expected to copy the aggressive role model rather than spontaneously imitate them. This is known as responding to demand characteristics. A further weakness is that the researchers deliberately exposed small children to aggression and could not predict the long-term effects on behaviour for the child. They can therefore be accused of not protecting the participants involved, presenting ethical issues. However, the researchers were able to control the environments and use a standardised procedure to ensure that all children experienced exactly the same conditions of the experiment. This means that the procedure was replicable and should have resulted in reliable findings, which are strengths of the study. Another strength of the study was that the children were matched in groups according to their normal levels of aggression. This was to ensure that one group was not naturally more or less aggressive than another group. The researchers compared the ratings of the experimenter and the children's teacher and found a high level of agreement.
Week 11: Charlton et al (Knowledge)	Independent variable: what a researcher changes to see the effects of such a change. Dependent variable: what a researcher measures to see what effects come from their changes to the independent variable.	Aim: To investigate the effects of television on children's behaviour. The researchers were particularly interested to see whether television would cause the children to become more aggressive. Procedure: The study was a natural experiment because the researchers did not directly manipulate the independent variable – the introduction of television. The dependent variable was the behaviour of the children before and after television was introduced. This was measured in terms of prosocial and antisocial acts that were displayed in the playground. The researchers went to the island in 1994 and recorded the behaviour of children 4 months before satellite television was introduced. They set up video cameras in two primary schools to observe the playground behaviour of the children, aged between 3 and 8 years old, over a 2-week period. The researchers recorded 256 minutes of children's free play and used the Playground Behaviour Observation Schedule (PBOS) to code prosocial and antisocial acts. Five years after television was introduced, the researchers returned to the island and filmed similar-aged children at the primary schools once more. Over a 2-week period, the researchers gathered 344 minutes of footage that they coded using the same PBOS. The researchers also noted whether the act was displayed by a single girl/boy, pairs of girls/boys, groups of more than three girls/boys or mixed groupings. The researchers analysed the recordings using the PBOS and made a tally of the acts displayed by the children in 60-second intervals. They then

		averaged the mean number of acts displayed by children in every 30-minute period. Results: Of the 64 pre- and post-television comparisons made, only nine significant differences were found. Overall, the researchers found five declines in prosocial behaviour of both boys and girls in single gender pairs/ groups and mixed groups/pairs. They also found two increases in prosocial behaviour of boys playing alone, and two decreases in antisocial behaviour of boys and girls. Interestingly, there was no change in antisocial behaviour observed in children's playgrounds, such as fighting, hitting, kicking and pushing, after television was introduced. Further analysis revealed that boys had a tendency to display more antisocial acts than girls (around four times more), and girls were slightly more likely to show prosocial behaviour, although this was not significant. Both boys and girls displayed twice as much prosocial behaviour compared to antisocial behaviour, and this changed very little between the observations.
Week 12: Operant Conditioning (Criminal Psychology)	Operant conditioning: learning from the consequences of actions. Positive reinforcement: receiving something pleasant for a behaviour, so we repeat it. Negative reinforcement: the avoidance of something unpleasant, so we do it again. Positive punishment: receiving something unpleasant for a behaviour, so we do not do it again. Negative punishment: removing something pleasant so we do not repeat the behaviour again. Primary reinforcer: a reinforcer that satisfies a biological need. Secondary reinforcer: a reinforcer of no survival value, but we have learned to associate it with a primary reinforcer.	Operant conditioning explains that there are two types of reinforcement – positive and negative – the consequences of which encourage us to repeat a behaviour we have displayed. In operant conditioning there is reinforcement (which achieves desired behaviour) and punishment (which prevents undesired behaviour). Reinforcements work well when given when the behaviour has been displayed. • Positive reinforcement – we receive a pleasurable or rewarding consequence for our behaviour. We are then likely to repeat the behaviour to get something nice again. In terms of criminal behaviour, if someone receives praise from their family for fighting or for vandalism, or financial reward from committing fraud, then they are likely to commit the crime again. • Negative reinforcement – when a behaviour we display is strengthened by the avoidance of an aversive or unpleasant experience. We are likely to repeat a behaviour that gets rid of something unpleasant. In terms of criminal behaviour, if someone is able to stop a bully by punching them, it is likely that they will use their fists to solve problems in the future. Operant conditioning also explains that punishment is a consequence of behaviour, which means we are less likely to repeat the behaviour again. There are two types of punishment. • Positive punishment – receiving a negative consequence for a behaviour, such as a child being told off by a parent for not keeping their bedroom tidy. This is often the way that we treat criminal behaviour. If someone does a criminal act and is fined or imprisoned, they are being positively punished. • Negative punishment – taking away something pleasant as a consequence of a behaviour that is not desired. For example, if a child is disruptive at a birthday party, which they are really enjoying, a parent can remove them from the party to sit in the corner. In terms of criminal

		behaviour a person may enjoy being part of a gang. The gang may start to vandalise public property but because the person does not want to join in, they are told to leave the gang. The undesired behaviour of not vandalising property is punished. Operant conditioning explains that there are two types of positive reinforcers that can be used as a consequence for behaviour to strengthen behaviour. • Primary reinforcers – these satisfy a basic biological need, such as food and water. A parent may reward a child with food treats for behaving well, for example. Although it is unlikely that most criminals commit crime for primary reinforcers, people who are in extreme poverty or are starving may resort to committing a crime, such as theft, in order to satisfy a basic need. • Secondary reinforcers – these are common reinforcers, such as school grades and tokens. These reinforcers often have no survival value, but we have learned to associate them with a primary reinforcer. A good example of a secondary reinforcer is a credit card. The card itself has no intrinsic value but it can be used to buy goods, which are rewarding or satisfy a basic need, such as food and warmth.

STEP 2: CREATE CUES

What: Reduce your notes to just the essentials.

What: Immediately after class, discussion, or reading session.

How:

- **Jot down key ideas, important words and phrases**
- **Create questions that might appear on an exam**
- **Reducing your notes to the most important ideas and concepts improves recall. Creating questions that may appear on an exam gets you thinking about how the information might be applied and improves your performance on the exam.**

Why: Spend at least ten minutes every week reviewing all of your previous notes. Reflect on the material and ask yourself questions based on what you've recorded in the Cue area. Cover the note-taking area with a piece of paper. Can you answer them?

STEP 1: RECORD YOUR NOTES

What: Record all keywords, ideas, important dates, people, places, diagrams and formulas from the lesson. Create a new page for each topic discussed.

When: During class lecture, discussion, or reading session.

How:

- **Use bullet points, abbreviated phrases, and pictures**
- **Avoid full sentences and paragraphs**
- **Leave space between points to add more information later**

Why: Important ideas must be recorded in a way that is meaningful to you.

STEP 3: SUMMARISE & REVIEW

What: Summarise the main ideas from the lesson.
What: At the end of the class lecture, discussion, or reading session.
How: In complete sentences, write down the conclusions that can be made from the information in your notes.
Why: Summarising the information after it's learned improves long-term retention.

WEEK 1: Cornell Notes (Homework task 1)

Topic: Function and Benefits of Sleep	Revision guide page:

Links **Questions**	**Notes**

Summary

WEEK 1: Exam Question (Homework task 2)

Question: Aditi has an interview for a job as a nurse in three days' time. She is required to take part in some decision-making activities during the interview. Aditi will also need to take a test to show she knows about medication, patient care and her legal responsibilities.

Explain one benefit of sleep that may help Aditi to do well during her interview. (2 marks)

Answer:

WEEK 1: Exam Question review and improvement (Classwork)

Question:

Answer:

WEEK 2: Cornell Notes (Homework task 1)

Topic: Siffre	Revision guide page:

Links **Questions**	**Notes**

Summary

WEEK 2: Exam Question (Homework task 2)

Question: Nick works night shifts. He is struggling to sleep during the day and stay awake at night. His friend David has suggested Nick should buy dark curtains to block light during the day. He also suggested a special daylight lamp to help wake Nick up for work at night.

Explain two reasons why David's suggestions may help Nick with his sleep pattern. You must refer to zeitgebers to justify your answer. (4 marks)

Answer:

WEEK 2: Exam Question review and improvement (Classwork)

Question:

Answer:

WEEK 3: Exam Question (Homework task 2)

Question: Describe how one lifestyle factor could cause insomnia. (2 marks)

WEEK 3: Exam Question review and improvement (Classwork)

Question:

Answer:

WEEK 4: Cornell Notes (Homework task 1)

Topic: Narcolepsy	Revision guide page

Links **Questions**	**Notes**

Summary

WEEK 4: Exam Question (Homework task 2)

Question: Describe the effect that narcolepsy may have on an individual. (2 marks)

Answer:

WEEK 4: Exam Question review and improvement (Classwork)

Question:

Answer:

WEEK 5: Exam Question (Homework task 2)

Question: Marcel is a therapist using the Freudian theory of dreaming to analyse the dreams of his clients. One client has described a dream of being chased by someone. Whilst running away she has to avoid dangers, such as large gaps in the path and objects falling from above. She describes being afraid but knows that she has to keep running because there is someone she needs to save. Marcel is analysing her description of the dream for meaning.

Explain two weaknesses of Marcel using the Freudian theory of dreaming to analyse his client's dream. You must use concepts or research evidence to justify your answer.(4 marks)

Answer:

WEEK 5: Exam Question review and improvement (Classwork)

Question:

Answer:

WEEK 6: Cornell Notes (Homework task 1)

Topic: Little Hans	Revision guide page

Links **Questions**	**Notes**

Summary

WEEK 6: Exam Question (Homework task 2)

Question: Barbara is a therapist who analyses people's dreams. Amy goes to see Barbara to help her understand her dreams. Amy dreams that her parents have abandoned her in a shop, which causes her to feel alone and afraid. Barbara believes that the dreams represent Amy's fear of living independently for the first time, as she has just moved into a new flat away from her family home.

Explain two ways that the case study of 'Little Hans' (Freud, 1909) can support Barbara's belief that the dreams represent Amy's fears.(4 marks)

Answer:

WEEK 6: Exam Question review and improvement (Classwork)

Question:
Answer:

WEEK 7: Exam Question (Homework task 2)

Question: Archie dreamt that he was running through a forest with his best friend and his grandma. As they came towards the end of the forest there was a large office building in front of them with a gorilla sitting in the doorway eating a pizza. The gorilla waved at Archie, who then fell through a hole that appeared in the floor. He then woke up.

Explain one reason why Archie may have had this dream. You must use Activation Synthesis Theory to justify your answer (2 marks)

Answer:

WEEK 7: Exam Question review and improvement (Classwork)

Question:

Answer:

WEEK 8: Cornell Notes (Homework task 1)

Topic: Mock Week - Independent Revision	Revision guide page

Links **Questions**	**Notes**

Summary

WEEK 8: Exam Question (Homework task 2)

Question: Mock Week - Independent Revision

Answer:

WEEK 8: Exam Question review and improvement (Classwork)

Question:

Answer:

WEEK 9: Exam Question (Homework task 2)

Question: Mock Week - Independent Revision

Answer:

WEEK 9: Exam Question review and improvement (Classwork)

Question:

Answer:

WEEK 10: Cornell Notes (Homework task 1)

Topic: Bandura (Evaluation)	Revision guide page

Links **Questions**	**Notes**

Summary

WEEK 10: Exam Question (Homework task 2)

Question: Harriet was excluded from school for starting a fight during which she punched another girl and swore at a teacher. Jayne was watching Harriet. Two days later Jayne started a fight with her sister.

Explain one reason why Jayne may have started a fight with her sister. You must use social learning theory to justify your answer. (2 marks)

Answer:

WEEK 10: Exam Question review and improvement (Classwork)

Question:

Answer:

WEEK 11: Exam Question (Homework task 2)

Question: Bella lives in a small village. She is known to be a kind and considerate girl, and she volunteers with the fire service in her local community. Bella likes to watch action films, and some of these contain scenes of aggression, violence, and criminal behaviour. Bella has never been in trouble.

Explain one reason for Bella's pro-social behaviour. You must use Charlton et al. (2000) to justify your answer. (2 marks)

Answer:

WEEK 11: Exam Question review and improvement (Classwork)

Question:

Answer:

WEEK 12: Cornell Notes (Homework task 1)

Topic: Operant Conditioning (Criminal Psychology)	Revision guide page

Links **Questions**	**Notes**

Summary

WEEK 12: Exam Question (Homework task 2)

Question: Describe how negative reinforcement could encourage criminal behaviour. (2 marks)

Answer:

WEEK 12: Exam Question review and improvement (Classwork)

Question:

Answer:

Week 3

Revision Card on Insomnia	Answers
1. Define insomnia. 2. Name two symptoms of insomnia. 3. What is acute insomnia? 4. What is chronic insomnia? 5. How can lifestyle factors cause insomnia?	

Week 5

Revision Card on Freudian Theory of Dreaming	Answers
1. What is meant by the unconscious? 2. What do dreams uncover? 3. What is manifest content? 4. What is hidden by manifest content? 5. What does Freud refer to as the protective of the mind during dreaming?	

Week 7

Revision Card on Activation Synthesis Model	Answers
1. What area of psychology does this theory relate to? 2. What does not function during REM sleep? 3. What are dreams made up of according to this theory? 4. What does activation refer to? 5. What does synthesis refer to?	

Week 11

Revision Card on Charlton et al	**Answers**
1. What is an independent variable? 2. What is a dependent variable? 3. What was the aim in Charlton's study? 4. What type of experiment was this? 5. How many significant differences were found?	