



**2025 specification**  
first exams in 2027 (2026 for AS)

# Topic Tests

## for AS and A Level AQA Psychology

### Paper 1: Introductory Topics to Psychology

- (AS 3.1.1) 4.1.1 Social Influence
- (AS 3.1.2) 4.1.2 Memory
- (AS 3.1.3) 4.1.3 Social Attachment
- (AS 3.2.2\*) 4.1.4 Clinical Psychology and Mental Health

*\* Paper 2 for AS Level*

Update v1.1, November 2025

[zigzageducation.co.uk](https://www.zigzageducation.co.uk)

**POD**  
**13057**

Publish your own work... Write to a brief...  
Register at [publishmenow.co.uk](https://www.publishmenow.co.uk)

# Contents

<b>Product Support from ZigZag Education .....</b>	<b>iii</b>
<b>Terms and Conditions of Use .....</b>	<b>iv</b>
<b>Teacher’s Introduction.....</b>	<b>1</b>
<b>Topic Tests – Non-write-on .....</b>	<b>3</b>
1. Conformity – Types, Explanations and Variables .....	3
2. Obedience – Milgram’s Research and Situational Variables .....	5
3. Obedience – Dispositional and Social Psychological Explanations.....	6
4. Resisting Social Influence.....	7
5. Minority Influence .....	8
6. The multi-store model of memory .....	9
7. The working memory model.....	10
8. Explanations for forgetting.....	12
9. Eyewitness testimony .....	14
10. Animal studies of attachment, and explanations of attachment .....	16
11. Ainsworth’s strange situation, and types of attachment .....	17
12. Bowlby’s theory of maternal deprivation, and the influence of early attachment .....	18
13. Definitions in the field of mental health and characteristics of phobias, depression and obsessive-compulsive disorder (OCD)....	19
14. The behavioural approach to explaining and treating phobias .....	20
15. The cognitive approach to explaining and treating depression .....	21
16. The biological approach to explaining and treating OCD .....	22
<b>Topic Tests – Write-on .....</b>	<b>23</b>
1. Conformity – Types, Explanations and Variables .....	23
2. Obedience – Milgram’s Research and Situational Variables .....	27
3. Obedience – Dispositional and Social Psychological Explanations.....	30
4. Resisting Social Influence.....	33
5. Minority Influence .....	37
6. The multi-store model of memory .....	40
7. The working memory model.....	42
8. Explanations for forgetting .....	45
9. Eyewitness testimony .....	48
10. Animal studies of attachment, and explanations of attachment .....	51
11. Ainsworth’s strange situation, and types of attachment .....	54
12. Bowlby’s theory of maternal deprivation, and the influence of early attachment .....	57
13. Definitions in the field of mental health and characteristics of phobias, depression and obsessive-compulsive disorder (OCD)....	60
14. The behavioural approach to explaining and treating phobias .....	63
15. The cognitive approach to explaining and treating depression .....	66
16. The biological approach to explaining and treating OCD .....	70
<b>Answers .....</b>	<b>73</b>
1. Conformity – Types, Explanations and Variables .....	73
2. Obedience – Milgram’s Research and Situational Variables .....	75
3. Obedience – Dispositional and Social Psychological Explanations.....	77
4. Resisting Social Influence.....	79
5. Minority Influence .....	81
6. The multi-store model of memory .....	83
7. The working memory model.....	85
8. Explanations for forgetting .....	87
9. Eyewitness testimony .....	89
10. Animal studies, and explanations of attachment .....	91
11. Ainsworth’s strange situation, and types of attachment .....	93
12. Bowlby’s theory of maternal deprivation, and the influence of early attachment .....	95
13. Definitions in the field of mental health and characteristics of phobias, depression and obsessive-compulsive disorder (OCD)....	97
14. The behavioural approach to explaining and treating phobias .....	100
15. The cognitive approach to explaining and treating depression .....	103
16. The biological approach to explaining and treating OCD .....	106

# Teacher's Introduction

This resource is for use with the A Level AQA Psychology and covers 4.1.1 Social Influence, 4.1.2 Memory, 4.1.3 Social Attachment and 4.1.4 Clinical Psychology and Mental Health which are examined in Paper 1: Introductory Topics in Psychology.

## Remember!

Always check the exam board website for new information, including changes to the specification and sample assessment material.

**Please note:** In line with the A Level AQA co-teachable scheme of work, these topic tests will require some prior knowledge of 'Approaches in Psychology' and 'Biopsychology' in order to answer all questions comprehensively. Additionally, some 'data handling' and 'scientific processes' are covered in the question styles, so students will also need to have been taught 'Research Methods' before completing the tests covered in this pack.

Each topic test starts with quick, short-answer questions that test whether the core fundamental ideas of each topic are understood by the student. Questions then increase in difficulty and culminate with either exam-style questions or detailed activities which are engaging and help consolidate learning, and give students the opportunity to practise applying their research methods knowledge to various scenarios. Some tests feature 'A Level only' questions. These have been highlighted to indicate that these questions either cover content that only A Level students are required to complete (and that may be covered in Year 2 of the course) or question styles that may not feature in the AS exam.

A range of question styles has been used to expose students to different question types and to give variety in the activities, and some questions are in an exam-style format. There are questions embedded in the tests which assess students' research methods knowledge, which would be expected in their exams. Mark allocations and answers are provided, which are useful for peer- and self-assessment as well as providing you, the teacher, with an opportunity to assess students' strengths and weaknesses in order to inform the teaching and learning process. With 16-mark exam-style questions, space is provided for students to plan their answer, but students will need to write their answers on another set of sheets.

Note that the research scenarios used and data provided are fictional.

## Specification reference table

This table can be used to identify which specification points you are teaching and select the appropriate topic test to suit your needs. Note that the resource generally follows the specification order, with related content covered in the same test. Where necessary, there are two totals provided to reflect the questions that are A Level only. This allows you to use each test when co-teaching AS and A Level students.

Tests are 19–55 marks in total and should take approximately 20–60 minutes to complete. However, some tests are slightly longer or shorter, depending on the content covered.

Topic test	Topic test title	Spec. points covered:	Total marks
1	Conformity – Types, Explanations and Variables	4.1.1 (AS 3.1.1)	33
2	Obedience – Milgram's Research and Situational Variables		26
3	Obedience – Dispositional and Social Psychological Explanations		30
4	Resisting Social Influence		34
5	Minority Influence and Social Change		25
6	The multi-store model of memory	3.1.2 (AS 3.1.2)	19
7	The working memory model		32
8	Explanations for forgetting		36
9	Eyewitness testimony		31
10	Animal studies of attachment, and explanations of attachment	4.1.3 (AS 3.1.3)	32
11	Ainsworth's strange situation, and types of attachment		33

Continued overleaf

Topic test	Topic test title	Spec. points covered:	Total marks
12	Bowlby's theory of maternal deprivation, and the influence of early attachment		28
13	Definitions in the field of mental health and characteristics of phobias, depression and obsessive-compulsive disorder (OCD)	4.1.4 (AS 3.2.2)	25 (AS Level) 45 (A Level)
14	The behavioural approach to explaining and treating phobias		30 (AS Level) 51 (A Level)
15	The cognitive approach to explaining and treating depression		39 (AS Level) 52 (A Level)
16	The biological approach to explaining and treating OCD		31 (AS Level) 47 (A Level)

Many of the tests cover some aspects of research methods (4.2.3), knowledge of which is required throughout all Psychology modules. Test 2 (Question 3d) also covers issues and debates (4.3.1); although this unit is mostly covered in the second year of the A Level course, beta bias is touched on in many modules from the first year.

November 2025

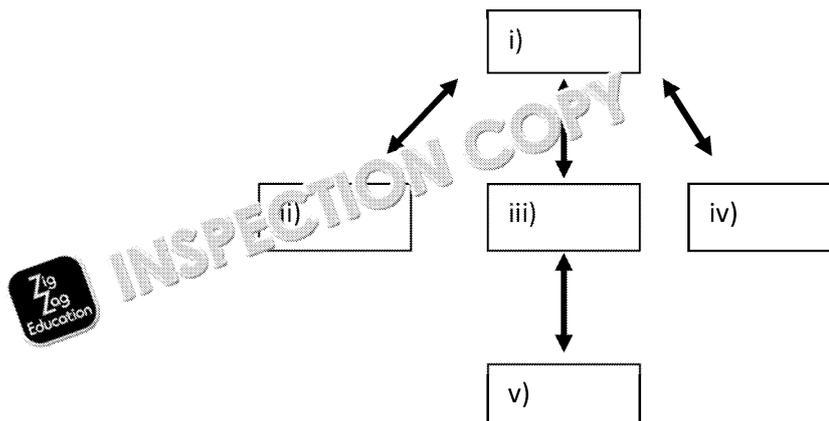
**Update v1.1, October 2025 (to match specification changes for first teaching September 2025)**

- Removal of 'Identification' as a type of conformity:
  - Deleted Q1b in test titled 'Conformity – Types, Explanations and Variables'
  - Updated option (d) in Q1c, tests titled 'Conformity – Types, Explanations and Variables' and Q2a 'Minority Influence and Social Change'
- Removed 'Conformity to social roles as investigated by Zimbardo' (test titled 'Obedience – Milgram's Research and Situational Variables'), plus answers
- Removed 'The role of social influence processes in social change' by deleting Q6 from test titled 'Minority Influence and Social Change', plus answers
- Replaced 'Zimbardo et al.' with 'Moscovici et al.' in Q1a from test titled Obedience – Dispositional and Social Psychological Explanations
- Removed 'Types of LTM' from test titled 'The multi-store model of memory' (deleted Q2a–c and Q6, plus corresponding answers)
- Removed references to 'misleading information' from 'Eyewitness testimony' (deleted Q1d, plus answers)
- Removed 'Caregiver-infant interactions in humans' (test titled 'Animal studies of attachment, and explanations of attachment')
- Reworded 'Romanian orphans' to 'English and Romanian adoptees' in test titled 'Bowlby's theory of maternal deprivation, and the influence of early attachment', Q5, plus answers
- Reworded test titled 'Definitions of abnormality' to 'Definitions in the field of mental health'
- Reworded 'deviation from social norms' to 'deviation from social/cultural norms' in Q7 of test titled 'Definitions in the field of mental health and characteristics of phobias, depression and obsessive-compulsive disorder (OCD)' plus answers

## 7. The working memory model

1. a) Who created the working memory model?
  - a) Baddeley and Hitch
  - b) Bahrick et al.
  - c) Atkinson and Shiffrin
  - d) Miller
  
- b) The central executive can process information in which modality?
  - a) Acoustic
  - b) Sensory modality
  - c) Auditory
  - d) Visual
  
- c) The 'inner voice' is also known as...
  - a) Visuospatial sketchpad
  - b) Maintenance rehearsal
  - c) Phonological store
  - d) Articulatory control system

- d) Copy and complete the diagram below with the components of the working memory model.



- e) Look at the components of the working memory model below and match them to the descriptions in the table.

i)	Holds information in speech-based form
ii)	Communicates with the long-term memory
iii)	Holds visual and spatial information
iv)	Responsible for allocating information to the slave systems

INSPECTION COPY

**COPYRIGHT  
PROTECTED**



2. A researcher put up an advert to recruit 20 students to take part in his experiment. 10 students took part in condition A – to complete two visual tasks. Another 10 students took part in condition B – to complete a visual task and a verbal task at the same time.

The researcher found that students in condition B performed better than students in condition A. The researcher repeated the experiment six months later to assess reliability of the results and found that the results were similar.

Answer the questions below:

- Write a non-directional hypothesis for this experiment.
  - State an example of a visual task and one verbal task which could have been used in this experiment.
  - Identify the sampling method used in this experiment and explain **one** advantage and **one** disadvantage of this method.
  - Identify the method the researcher has used to assess reliability.
  - Explain the findings of this experiment using the working memory model.
3. Copy and complete the table below by explaining how each point can be used to support the working memory model.

Point	
<p>a) <i>Case study of brain-damaged patient KF – he had memory impairment for verbal information, but his visual memory was largely unaffected.</i></p> 	
<p>b) <i>A large amount of research for the working memory model is conducted in lab-based settings.</i></p> 	
<p>c) <i>Berz (1995) found that participants could listen to instrumental music (music without words) without impairing performance on other acoustic tasks.</i></p> 	

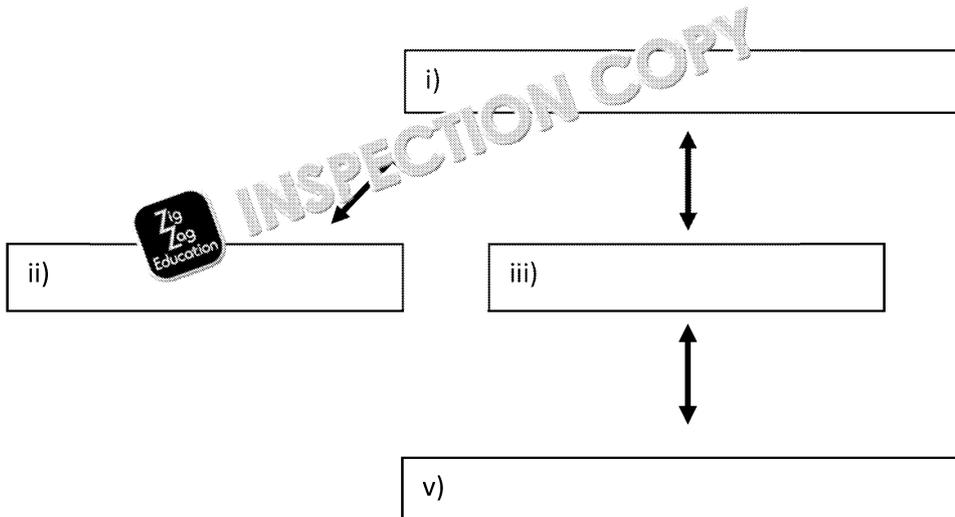
**COPYRIGHT  
PROTECTED**



## 7. The working memory model

1. a) Who created the working memory model?
- a) Baddeley and Hitch
  - b) Bahrick et al.
  - c) Atkinson and Shiffrin
  - d) Miller
- b) The central executive can process information in which modality?
- a) Auditory
  - b) Any sensory modality
  - c) Semantic
  - d) Visual
- c) The 'inner voice' is also known as...
- a) Visuospatial sketchpad
  - b) Maintenance rehearsal
  - c) Phonological store
  - d) Articulatory control system

- d) Complete the diagram below with the components of the working memory model.



- e) Look at the components of the working memory model below and match them to the descriptions.

i)	Holds information in speech-based form
ii)	Communicates with the long-term memory
iii)	Holds visual and spatial information
iv)	Responsible for allocating information to the slave systems

INSPECTION COPY

**COPYRIGHT  
PROTECTED**



2. A researcher put up an advert to recruit 20 students to take part in his experiment.

10 students took part in condition A – to complete two visual tasks. Another 10 students took part in condition B – to complete a visual task and a verbal task at the same time.

The researcher found that students in condition B performed better than students in condition A. The researcher repeated the experiment six months later to assess reliability of the results and found the same findings.



Answer the questions below:

a) Write a non-directional hypothesis for this experiment.

.....  
.....  
.....  
.....

b) State an example of one visual task and one verbal task which could have been used.

Visual: .....

Verbal: .....

c) Identify the sampling method used in this experiment and explain **one** advantage of this method.

.....  
.....  
.....  
.....  
.....  
.....

d) Identify the method the researcher has used to assess reliability.

.....

**COPYRIGHT  
PROTECTED**



e) Explain the findings of this experiment using the working memory model

.....

.....

.....

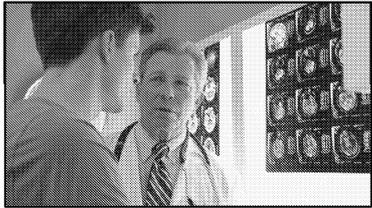
.....

.....



INSPECTION COPY

3. Complete the table below by explaining how each point can be used to evaluate

Point	Evaluation
<p>a) <i>Case study of brain-damaged patient KF – he had memory impairment for verbal information, but his visual memory was largely unaffected.</i></p> 	
<p>b) <i>A large amount of research for the working memory model is conducted in computer-based settings.</i></p> 	
<p>c) <i>Berz (1995) found that participants could listen to instrumental music (music without words) without impairing performance on other acoustic tasks.</i></p> 	

INSPECTION COPY

**COPYRIGHT  
PROTECTED**



## **Preview of Questions Ends Here**

---

This is a limited inspection copy. Sample of questions ends here to avoid students previewing questions before they are set. See contents page for details of the rest of the resource.

## 16. The biological approach to explaining and

1. **1 mark for correctly identifying each statement as true or false; 1 mark for each appropriate explanation.**  
**For example:**

- True (1)** – This is known as the ‘serotonin deficit hypothesis’ and has also been linked to other mental health conditions such as depression and anxiety (1).
- False (1)** – Too much dopamine has been associated with OCD, which is supported by research. Tourette’s syndrome and OCD share similar characteristics (too much dopamine) (1).
- True (1)** – The caudate nucleus (part of the basal ganglia) is associated with processing and storing information while planning actions, which helps to control compulsions and anxiety (1).
- False (1)** – The basal ganglia are located in deeper brain regions and may play a role in compulsions. The frontal cortex (controls voluntary behaviour) (1).

2. **1 mark for each sentence completed appropriately. For example:**

- In general, genetic explanations suggest that disorders are caused by** inheritance of a gene which either directly causes a disorder or makes developing a disorder more likely (1).
- Twin studies are used to investigate the genetic explanation of OCD by comparing** monozygotic (identical) and dizygotic (non-identical) twins, which gives an indication of how much a disorder (and how much is attributable to the environment) (1).
- Some research has suggested that variations on the COMT gene are related to** the development of OCD, as it is responsible for an enzyme which helps to control dopamine levels (1).
- One problem with twin studies is** that they are very hard to carry out, as there is a risk that one twin where one or more of them has the disorder (1).
- Genetic theories cannot explain why** some people who inherit an OCD-related gene develop the disorder and why some do not (1).

3. **This exam-style question is marked with a levelled mark scheme. This involves the following steps:**

- Determine the answer’s overall ‘level’ by assessing whether the answer meets the level’s criteria (1).
- Determine the specific mark within the level by judging against the specific criteria (1).

An example levelled mark scheme for a 4-mark question:

Level	Marks	Description
2	3–4	Clear, accurate outline of how drug therapy is used to treat the disorder. The answer is written coherently and specialist terminology is used appropriately.
1	1–2	Outline of drug therapy is evident but may lack accuracy. Specialist terminology is sometimes used inappropriately.
	0	No rewardable content.

### Indicative content for answer:

#### AO1 possible content

- General rationale of drug therapy, i.e. aims to rebalance levels of neurotransmitters (1).
- Selective serotonin reuptake inhibitors (SSRIs) – antidepressants which work by blocking the reuptake of serotonin into the presynaptic terminal, which leaves a greater quantity of serotonin in the synaptic gap (1).
- OCD has been linked to serotonin deficits, so taking a medication which can reduce serotonin levels can help to treat symptoms of OCD (1).

Accept suitable alternative answers (1).

INSPECTION COPY

**COPYRIGHT  
PROTECTED**



4. a. **2 marks for a clearly outlined advantage. For example:**
- Drug therapy may be viewed as efficient (1) as it is less time-consuming than sessions such as CBT (1).
  - Drug therapy in some ways may place less of a burden on clients (1) than require a high level of participation and motivation (1).
  - It is possible to test the effectiveness of drug therapies, e.g. in a randomised trial that using them can be based on research evidence (1).

Accept suitable alternatives

- b. **2 marks for a clearly outlined disadvantage. For example:**
- Drug therapy may produce some unpleasant side effects (1), which can cause people to drop out of treatment (1).
  - Medication may treat the symptoms rather than cause of OCD (1), which leaves issues that are left unresolved and relapse may be likely (1).
  - Medication is not an effective option for some people (1), which means that CBT is considered such as CBT (1).

Accept suitable alternatives

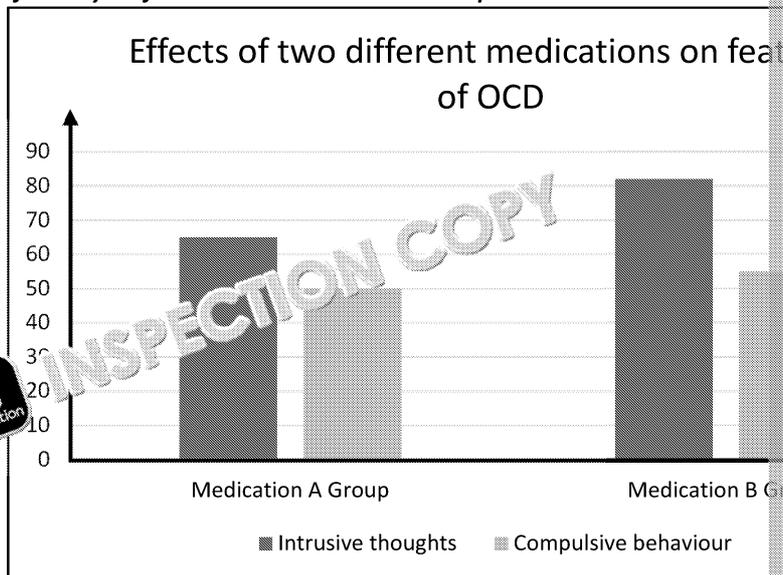
5. **1 mark for each ethical issue appropriately identified (sub-max. 3 marks);**  
**1 mark for each appropriate way to overcome an identified issue (sub-max. 3 marks);**  
**For example:**

- Confidentiality – there is a need to protect the privacy and dignity of participants
  - Researcher should anonymise data in write-up (e.g. use of pseudonyms, remove identifying details)
- Risk of harm – some sensitive, upsetting material relating to OCD is likely to be discussed
  - The researcher should be vigilant for signs of distress during the support group and debrief the participant if need be
- Informed consent – are participants aware that a member of the support group will be conducting research?
  - Participants must sign a consent form which clearly outlines the purpose and procedures of the research
- Right to withdraw – this becomes complex in a group setting where one participant's withdrawal affects the group
  - Researcher must clearly explain the extent of participants' right to withdraw and take all reasonable steps to remove data if requested

6. **1 mark for each of the following:**

- Appropriate title which accurately refers to the independent and dependent variables
- Accurately plotted data, with bars that do not touch
- Y-axis is labelled correctly (intrusive thoughts and compulsive behaviours), with a scale and maybe a key
- X-axis is labelled correctly (medication groups)

**An example of the style of bar chart that would be acceptable:**



**COPYRIGHT  
PROTECTED**



7. **Long-answer exam questions are marked with a levelled mark scheme. This involves:**
1. Determine the answer's overall 'level' – assess whether the answer meets the level. Continue until you have a match between the answer and the level.
  2. Determine the specific mark within the level by judging against the specific criteria.

An example levelled mark scheme for a 16-mark question:

Level	Marks	Description
4	13–16	Detailed, accurate knowledge of the biological approach. Evaluation/application is rigorous, missing only minor points. The answer is written clearly and correct terminology is used appropriately.
3	9–12	Knowledge of the biological approach to explaining OCD. Some mistakes or omissions. Evaluation/application is general. The answer is generally written clearly. Terminology is mostly used appropriately.
2	5–8	The answer demonstrates limited knowledge of the biological approach to explaining OCD. Some evaluation/application is apparent, but it is general. The answer sometimes lacks focus and clarity, and specialist terminology is used inappropriately.
1	1–4	The answer demonstrates very limited knowledge of the biological approach to explaining OCD. Evaluation/application is either non-existent or very general. The answer is unclear and contains inaccuracies. Specialist terminology is either used inappropriately or entirely absent.
	0	No rewardable content.

**Indicative content for answer:**

*Possible content*

- General rationale of biological explanation, i.e. neurobiological approach; considers role of neurotransmitters in causing OCD
- Outline key features of genetic explanation – inheriting gene / set of genes related to OCD and impact on neurotransmitter levels (e.g. reduction in control of dopamine levels)
- Outline key features of neural explanation – role of frontal cortex and basal ganglia and how they are involved in OCD

*Possible discussion points*

- Supported by research from family studies, e.g. concordance rates between MZ twins are high, indicating high heritability, at least to a degree
- However – genetic explanation cannot explain why some people with the relevant genes do not develop OCD
- Doesn't consider the influence of other factors, such as cognitive patterns and environmental factors
- Biological explanations have led to biological treatments such as drug therapy, but not all people with OCD respond to these treatments
- Credit any critical comparisons to other explanations, e.g. cognitive, behavioural, environmental

*Accept suitable alternatives*

**COPYRIGHT  
PROTECTED**



INSPECTION COPY



## **Preview of Answers Ends Here**

---

This is a limited inspection copy. Sample of answers ends here to stop students looking up answers to their assessments. See contents page for details of the rest of the resource.