

**CURRICULUM MAP**

Subject	Pearson BTEC Level 3 National Extended Certificate in Applied Psychology
Lead Teacher	Jodene Bremner

SCHOOL INTENT

Rutlish School Vision: Rutlish School is committed in providing **the highest quality education and opportunities** for students.

*Through all we do, we prepare students for opportunities, responsibilities and experiences later in life. We aim to inspire, enable and facilitate lifelong learners able to build on their individual strengths and capabilities, who achieve their ambitions. We seek to support our students becoming **healthy, happy, successful** modern people young adults; knowledgeable, kind, aware, confident, capable and skilful members of society. (Curriculum Intent)*

Rutlish School Mission Statement: “Modeste, Strenue, Sancte: Be modest, be thorough, pursue righteousness”

We want students to:

succeed *(we strive to provide pathways to support their success)*

embrace challenge, *build resilience, overcome setbacks and become increasingly independent in pursuit of their goals*

be aware of their responsibilities *and feel confident to participate and contribute to society. (Curriculum Intent)*

Rutlish School: Curriculum Intent

Rutlish School provides a meaningful, broad and balanced curriculum, which is accessible to all, as well as supports and challenges all students.

The School aims to:

- ensure that the curriculum is designed for every student of every ability and every background to be supported in making the best possible progress and attainment from their starting point;
- ensure all students can successfully access the curriculum offer, making any reasonable adjustments required where particular needs are identified;
- ensure that the curriculum is accessible to all abilities and that planning and teaching aim to support, stretch and challenge all learners across a full range of abilities;
- provide a curriculum that is sequenced to build skills and knowledge throughout students’ time at Rutlish School, to equip them for their next steps in education, and careers and in life;
- provide a curriculum that promotes a deeper and wider understanding of the world outside of the classroom;
- ensure our curriculum consistently promotes high moral standards, social and self-awareness and allow students to form informed opinions on social issues such as, equality, diversity and inclusivity as well as the practical aspects of society;
- provide opportunities for students to personalise and apply learning in other contexts, including personal and cross-curricular;
- provide students with the skills and knowledge necessary to becoming independent, analytical, critical, and innovative thinkers;
- provide opportunity to encourage students’ curiosity, creativity, self-expression, resilience, and confidence;
- develop staff to deliver skills beyond their own subject specialism and incorporate cross curricular initiatives, in particular Literacy, Reading, Numeracy, ICT and Enterprise;
- ensure that our curriculum offer support for different educational and career pathways, including EBACC and vocational;
- provide consistent opportunities for students to develop and enhance their reading skills, and support is provided to ensure all students are able to access the curriculum.

DEPARTMENT INTENT

Psychology is the study of human behaviour, which strives to help us understand the way we think, act and feel in our everyday lives. Psychology challenges students to apply scientific techniques to study a variety of human phenomena such as children’s development, mental disorders, stress and many more.

As such, it is a part of our everyday lives. An understanding of human behaviour is fundamental to many jobs in society and the study of psychology at degree level and beyond remains a very popular choice.

We have constructed a curriculum that is engaging, ambitious, and it is designed to stretch and challenge all learners in our classrooms. Through excellent provision and planning, we aim to meet the needs of all learners, while still providing differentiation to support learners. We do this to ensure that all can access the curriculum and so that all can make expected progress.

KEY STAGE 5 RATIONALE/ INTENT

BTEC Level 3 National Extended Certificate in Applied Psychology provides a broad basis of study for the applied psychology sector and the course is designed to support RR6 learners’ progression to higher education when taken as part of a programme of study. It provides the knowledge, understanding and skills that will prepare learners for further study, as well as transferable skills. RR6 learners can also benefit from opportunities for deep learning where they are able to make connections among units and select areas of interest for detailed study.



YEAR 12

	Autumn 1	Autumn 2	Spring 1	Spring 2	Summer 1	Summer 2
KNOWLEDGE	Unit 1: Psychological Approaches and Applications	Unit 1: Psychological Approaches and Applications	Unit 2: Conducting Psychological Research			Unit 3: Health Psychology
	A Key psychological approaches, their assumptions and concepts: Learners must be able to understand and apply knowledge of key assumptions and key concepts as used to explain aspects of human behaviour	B Application of psychological approaches: Learners must be able to understand and apply knowledge of psychological approaches, assumptions and concepts by applying them to contemporary issues in society. Knowledge will be applied through vocationally related contexts.	Learning aim A: Understand research methods and their importance in psychological inquiry: <i>Processes, components and characteristics of psychological research methods.</i>	Learning aim B: Plan research to investigate psychological questions	Learning aim C: Carry out a pilot study to explore current issues in psychology Learning aim D: Review implications of research into psychological inquiry	A Lifestyle choice and health-related behaviour
KEY SKILLS	A1 Cognitive approach <ul style="list-style-type: none"> • Key assumptions: <ul style="list-style-type: none"> o behaviour is a product of information processing o the brain can be compared to a computer (computer analogy) – input, processing and output. • Key concepts: <ul style="list-style-type: none"> o characteristics of sensory, short term, and long-term memory (encoding, capacity, duration) o remembering (recognition, recall and the importance of cues) o reconstructive memory, including the role of schema (shortening, rationalisation and confabulation) o cognitive priming, including the role of cognitive scripts and different types of priming (repetition, semantic and associative) o the role of cognitive scripts (memory scripts, person perception) 	B1 Use of psychology to explain contemporary issues of aggression in society <p>Learners should be able to demonstrate knowledge of different types of aggression. Learners should understand and apply knowledge of how psychological concepts can be used to explain aggression in society:</p> <ul style="list-style-type: none"> • Aggression – behaviours that result in psychological or physical harm to self, others or objects in the environment; hostile, instrumental, violent aggression and verbal/non-physical aggression. • Cognitive priming for aggression, hostile attribution bias; cognitive scripts and schemas. • Influences of others, including conformity to social/group norms, stereotypes, role modelling, desensitisation, disinhibition, institutional aggression, influence of the media. • Operant conditioning. 	A1 Principles of research <p>Purpose and value of research in applied psychology</p> <ul style="list-style-type: none"> • Definitions, to include a disciplined exercise to address questions, the process of inductive and deductive reasoning to solve problems, collection and analysis of primary data to describe, explain, generalise and predict a phenomenon. • Scientific process, to include objective, empirical evidence, based on data rather than theory alone, controlled variables, replicable, cause and effect, testing theories. • Purpose of research, to include improving outcomes for individuals, informing policy and practice, extending knowledge and understanding, identifying gaps in provision. • Issues researched in applied psychology, to include: <ul style="list-style-type: none"> o effectiveness or improvement of practice and provision o health trends 	B1 Research methods <p>Advantages, disadvantages and appropriateness of methods to meet the aims and purposes of different psychological investigations.</p> <ul style="list-style-type: none"> • Qualitative research methods: <ul style="list-style-type: none"> o methods of data collection, to include questionnaires and use of closed and open questions, interviews, surveys, participant and non-participant, observations, time or event sampling o advantages and disadvantages of using these methods, e.g. time, reliability, validity, cost o issues in qualitative research, to include generalisability in terms of whether research enriches understanding and generates theory, falsification, validity, reliability o methods of data analysis, e.g. thematic, narrative, content, grounded, discourse, conversation analysis. • Quantitative research methods: 	C1 Data collection <ul style="list-style-type: none"> • Developing and refining questions or hypothesis, e.g. through identification of literature. • Recruitment of participants, to include sample size and features. • Gaining permission and consents. • Data collection using qualitative and quantitative methods. • Data collation, e.g. organisation of numerical data, coding, defining themes and trends, interpreting qualitative and quantitative data. <p>C2 Data analysis</p> <ul style="list-style-type: none"> • Quantitative data analysis techniques: <ul style="list-style-type: none"> o descriptive statistics, to include measures of central tendency, mean, mode, median, range, standard deviation o correlations and distributions, to include correlation, correlation coefficient, normal and skewed distributions 	A1 Psychological definition of health and ill health, addiction and stress <p>Definitions and characteristics of health and ill health, addiction and stress.</p> <ul style="list-style-type: none"> • Health and ill health: biomedical, biopsychosocial, health as a continuum. • Behavioural and physiological addiction: <ul style="list-style-type: none"> o Griffiths' six components of addiction: physical and psychological dependence (salience), tolerance, withdrawal, relapse, conflict, mood alteration o stress: definition of a stressor, psychological stress, stress and perceived ability to cope. <p>A2 Psychological approaches to health <p>Learners will explore psychological approaches to health and suggest how these could be applied to different scenarios.</p> <ul style="list-style-type: none"> • Biological influences – of genetic predisposition, the roles of neurotransmitter imbalances. </p>



<p>o cognitive biases, including fundamental attribution error, confirmation bias and hostile attribution bias.</p> <p>A2 Social approach Learners must be able to understand and apply knowledge of key concepts from this approach as used to explain aspects of human behaviour.</p> <ul style="list-style-type: none"> • Key assumptions: <ul style="list-style-type: none"> o behaviour occurs in a social context (influenced by people around us) o wider culture and society influence people’s behaviour. • Key concepts: <ul style="list-style-type: none"> o conformity (normative social influence and informational social influence) o types of conformity, including internalisation, identification, compliance o in and out groups – social categorisation (formation and effect of stereotypes, prejudice and discrimination) o intra group dynamics including group cohesion, roles, common goals, groupthink and social facilitation o influences of others on self-concept (self-esteem, self-image); self-efficacy. <p>A3 Behaviourist and social learning approaches</p> <ul style="list-style-type: none"> • Key assumptions: <ul style="list-style-type: none"> o behaviour is a learned response from environmental stimuli o behaviour can be learned from observation and imitation. • Key concepts: <ul style="list-style-type: none"> o classical conditioning – learning by association, to include the role of the unconditioned stimulus, unconditioned response, neutral stimulus, conditioned stimulus and conditioned response 	<ul style="list-style-type: none"> • Social learning including vicarious learning. • Biological, including evolution (survival of the fittest), brain structures (Limbic System), biochemistry (testosterone, serotonin, dopamine and cortisol), genetics (MAOA gene and SRY gene). <p>B2 Use of psychology in business to explain and influence consumer behaviour Learners should be able to demonstrate knowledge of the means used to influence behaviour.</p> <ul style="list-style-type: none"> • Schema and cognitive priming, direct and indirect attribute priming. • Cognitive biases in information processing – authority bias, confirmation bias and brand loyalty. • Use of reinforcement and association in marketing: <ul style="list-style-type: none"> o classical conditioning – emotional association with products, repetition to avoid extinction o operant conditioning – positive reinforcement (buy one get one free, loyalty points) o social learning – the use of celebrity/influencers in advertising. • Social – the role of others, including conformity to social norms (‘Bandwagon Effect’, social proof). • Neuromarketing – use of technology to measure consumer decision-making, scanning techniques to detect brain changes in: <ul style="list-style-type: none"> o fMRI – measures changes in blood flow that occur with brain activity; reveals level of engagement and emotional responses; used to set pricing and improving branding o facial coding – process of measuring human emotions through facial expressions; 	<p>o strategies for supporting ill health and mental functioning</p> <ul style="list-style-type: none"> o establishing causes and cures of disease, behaviours, advancement in treatments and medication, technologies. • Types of research process, to include a pilot study or an experiment, laboratory and field experiments, natural and quasi-experiments, correlational research, desk-based research, primary and secondary research, self-report techniques, e.g. questionnaires, interviews, case studies, content analysis. • Organisations involved in research, e.g. Office for National Statistics (ONS), British Medical Association (BMA), British Psychological Society (BPS). • Professional and personal skills required in order to carry out a pilot research study: <ul style="list-style-type: none"> o personal skills, to include possessing an enquiring mind, working autonomously, possessing good time-management and organisational skills, using a non-judgmental approach, discretion, confidentiality o professional skills, to include critical and analytical skills, note taking, record making, academic research skills, promoting and maintaining, health and safety, data protection, reading techniques, e.g. skimming, scanning. <p>A2 Key terms used in research Meanings and use of research terminology</p> <ul style="list-style-type: none"> • Hypotheses, to include directional, non-directional, alternative, null. • Variables and their operationalisation in research, to include independent, dependent, confounding, extraneous. • Sources of data and literature, to include primary and secondary sources. 	<p>o methods of data collection, including questionnaires laboratory, field, natural, quasi-experiments, controlled observations</p> <ul style="list-style-type: none"> o key features of experimentation, to include dependent and independent variables, hypothesis, casual relationships o advantages and disadvantages of using these methods, e.g. time, reliability, validity, cost o issues in quantitative research, to include generalisability, e.g. whether findings can be considered representative of a population, statistical probability, validity in terms of measurement, predictive validity, reliability o methods of data analysis, e.g. descriptive statistics, nominal, ordinal, interval levels of data, measures of central tendency and dispersion. • Mixed methods: <ul style="list-style-type: none"> o value of using mixed methodologies for conducting research using questionnaires, interviews and observations, e.g. reliability and validity in helping identify underlying causes and perceptions, beliefs, strength of feeling. <p>B2 Developing research proposals</p> <ul style="list-style-type: none"> • Identifying and developing good research topic and questions or hypothesis, to include: <ul style="list-style-type: none"> o identifying sound empirical focus, accessible evidence, significance to practice or provision, ethical, practical, awareness of political implications, relationship to previous research, awareness of implicit values, engaging, answerable. • Developing research proposals, including research aim, target population and sample, research questions or hypothesis, methodology, procedure, expected outcomes and impact. 	<ul style="list-style-type: none"> • Qualitative data analysis techniques, e.g. thematic and narrative analysis, coding. <p>C3 Presenting findings to an audience</p> <ul style="list-style-type: none"> • Summarising data using different formats, to include tables, graphs, pie charts, bar charts, histograms, scattergrams, other pictorial representations, video, narratives. • Feedback from others, e.g. opinions on approaches taken, findings, outcomes and possible future developments. <p>D1 Reviewing research process and findings</p> <ul style="list-style-type: none"> • Review success of research on answering research questions, confirming hypothesis. • Factors relating to the interpretation, discussion and presentation of research findings and the evaluation of the success and usefulness of the research. • Issues encountered during the research process, e.g. research design, participants, implementation, findings. • Review research process in identifying and promoting change, and promoting healthy psychological wellbeing. <p>D2 Implications of research into psychological inquiry</p> <ul style="list-style-type: none"> • Identifying key elements for future research. • Impact on practice and provision. • Impact on improving life chances, advancements in technologies, treatments, understanding of phenomenon. • How research subject can be developed for future research. • Self-reflection on research process and future personal professional development 	<ul style="list-style-type: none"> • Behaviourist approaches – the role of cues, positive reinforcement and negative reinforcement to explain healthy and unhealthy behaviours; using operant conditioning to encourage and incentivise behaviour. • Social learning approach – effects of parental and peer role models on healthy and unhealthy behaviours; role models in health education. • Cognitive approach – decisions to engage in behaviours to provide relief from stress, anxiety, boredom or to mitigate impacts of other health problems, resolving cognitive dissonance for behaviour change, professional biases in diagnoses and treatments. <p>A3 Theories of stress, behavioural addiction and physiological addiction Learners will explore theories of stress, behavioural addiction and physiological addiction, and apply these theories to different scenarios.</p> <ul style="list-style-type: none"> • Theories: key concepts of psychological theories of stress, behavioural addiction and physiological addiction, to include: <ul style="list-style-type: none"> o health belief model concepts of perceived seriousness, susceptibility, cost-benefit analysis, how demographic variables such as age, gender, culture and external/internal cues affect behaviour o locus of control: internal and external locus of control, the role of attributions in determining health behaviour o theory of planned behaviour: concepts of personal attitude to behaviour, subjective norms, perceived behavioural control and their effect on behaviour
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<p>o operant conditioning – learning by consequences, to include the role of positive reinforcement, negative reinforcement and punishment, motivation (extrinsic and intrinsic rewards) o social learning theory – learning through observation, imitation, modelling and vicarious learning.</p> <p>A4 Biological approach</p> <ul style="list-style-type: none"> • Key assumptions: <ul style="list-style-type: none"> o behaviour is influenced by central nervous system (CNS), genes and neurochemistry o behaviour is a product of evolution. • Key concepts: <ul style="list-style-type: none"> o the influence of biology on behaviour and traits, including introversion and extroversion o genetics and inheritance including genes, genotype, phenotype and the SRY gene o neuroanatomy, including basic localisation of function, lateralization and plasticity of the brain o organisation of the nervous system, including the central nervous system and autonomic nervous system (parasympathetic and sympathetic divisions) o neurochemistry, including the role of hormones in the stress response (adrenaline and cortisol), neurotransmitters o evolutionary psychology, including the environment of evolutionary adaptation, survival of the fittest, the fight, flight, freeze response, sexual selection and genome lag. 	<p>reveals emotional responses o eye tracking – measures eye movements, reveals what captures attention, speed of recognition, what grabs attention, what confuses consumers; used to improve adverts and packaging.</p> <p>B3 Application of psychology to explain gender Learners should understand key terms associated with gender, including binary, non-binary, gender fluid, androgyny, transgender, masculinity, femininity, gender dysphoria. Learners should understand and apply knowledge of how psychological approaches and concepts can be used to understand the typical and atypical gender of individuals in society.</p> <ul style="list-style-type: none"> • The influence of the following on gender: <ul style="list-style-type: none"> o definition of the terms ‘sex’ and ‘gender’ o cognitive – role of biases (alpha, beta and confirmation bias), influence on gender identity, affects on equality, discrimination and prejudice; schema in gender (gender schema theory) o cognitive priming – sex-role stereotypes, gender roles, gender priming o social – influence of culture, cultural bias towards gender and roles, peer influences (normative and informational), conformity to gender roles o behavioural and social learning including the influence of the media, operant conditioning o biological – role of sex hormones (before and after birth: testosterone, oestrogen and oxytocin), evolutionary explanations for masculinity/femininity, role of chromosomes 	<ul style="list-style-type: none"> • Reliability and validity, to include internal, external, inter-observer reliability, face, concurrent, ecological, temporal validity. • Sampling techniques used to select participants, to include stratified, random, opportunity, volunteer, snowballing. • Other commonly used terms, e.g. design flexibility, grounded theory, narrative inquiry, probability. <p>A3 Research process</p> <ul style="list-style-type: none"> • Key steps to conducting research, to include justification of research, potential impact and audience. • Research design, to include participants, sample size, sampling methods, procedure, data analysis tools. • Ethical considerations: <ul style="list-style-type: none"> o use of ethical codes of conduct, e.g. British Psychological Society (BPS), British Medical Association (BMA), own institution’s codes of conduct o ensuring participants have provided informed consent, to include physical and psychological health and wellbeing, mental capacity, understanding of requirements o obtaining permission to conduct research, to include gatekeeper consent, consent from adults, parents or carers of participants who lack mental capacity or participants under 18 o data protection, to include confidentiality, using research for stated purpose, storage of data, protecting identity of participants and locations when reporting research o human and animal rights o professional approach towards conducting research, e.g. ensuring participants are fully informed, duty of care to report health and safety concerns. 	<ul style="list-style-type: none"> • Rationale and content of data collection methods, to include questionnaires, interviews, observations. • Rationale for research, to include conducting literature review, identifying primary and secondary sources, e.g. journal articles, print and electronic media, assessing reliability and validity of sources. • Ethical considerations, to include gaining informed consent, gatekeeper and adult consent, mental capacity, age, ensuring physical safety and psychological wellbeing of participants, confidentiality, data protection and safeguarding participants. • Management strategies including developing specific, measurable, achievable, reliable, time-bound (SMART) targets. 	<p>o self-efficacy theory: mastery experiences, vicarious reinforcement, the effect of social persuasion and emotional state on self-efficacy and likelihood of behavioural change o transtheoretical model: precontemplation, contemplation, preparation, action, maintenance</p>
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HOW DO WE BUILD ON SKILLS AND KNOWLEDGE?	<p>Learners will explore four key approaches in psychology – social, cognitive, learning and biological – and apply these approaches to issues relevant to contemporary society.</p> <p>Psychology will be a new field of study for our learners but we draw upon GCSE Maths, Science and literacy skills.</p>	Learners should build on their knowledge of psychological approaches and their applications from Unit 1: Psychological Approaches and Applications.			<p>Learners explore psychological approaches and theories related to lifestyle choices, unhealthy behaviours and behavioural change, linking them to their specific contexts</p> <p>This unit links to:</p> <ul style="list-style-type: none"> • Unit 1: Psychological Approaches and Applications • Unit 6: Introduction to Psychopathology. 	
LINKS TO THE WORLD i.e. links to careers; equality; gender, class, ethnicity, etc.; different subjects	<p>This unit gives the knowledge, understanding and skills relevant to higher education courses such as a BSc in Psychology. The unit is also useful to help progress to a range of vocational sectors where knowledge of psychology is helpful, including law enforcement, business and marketing, education and health care.</p>	<p>This unit will provide important knowledge and skills that will help to prepare learners for a higher-education course such as a BSc in Criminology and Psychology, or combined, joint honour degrees in Psychology, Health and Social Care.</p>			<p>This unit places an emphasis on applying health psychology in a vocational setting and gives learners the opportunity to develop their understanding of the work of health psychologists and other healthcare practitioners. The unit is also a basis for study at higher education, for example a BSc in Health Psychology. It will also help learners to progress to employment in a healthcare profession such as nursing or social care and to a role that supports the motivation of others, such as teacher, life coach and sports coach</p>	



ASSESSMENTS Summative and Formative as applicable	<p>Formative: constant AFL; self and peer assessment of tasks; divider in folder to track progress. Exam questions to re-cap prior learning. Comprehension tasks and quizzes to consolidate knowledge.</p> <p>Summative: Pupils sit a test at end of each learning aim to consolidate and assess knowledge and understanding</p> <p>Assessment fortnight (October).</p> <p>Pearson formal exam – January. Resit option in May/June</p>	A report discussing the importance of research in informing and improving practice and provision, detailing the way in which research is organised and giving an evaluation of the importance of research in answering specific questions.	A report discussing a proposal for a pilot study that takes account of research questions, methods, participants, procedures, time and organisational management.	A pilot study, including: <ul style="list-style-type: none"> • a report on procedures followed for conducting research and collecting and analysing data • a report that discusses the findings and success of the pilot study, the implications of research on practice and provision, and the impact, through self-reflection and feedback from others, on personal and professional development. 	<p>Formative: constant AFL; self and peer assessment of tasks; divider in folder to track progress. Exam questions to re-cap prior learning. Comprehension tasks and quizzes to consolidate knowledge.</p> <p>Summative: Pupils sit a test at end of each learning aim to consolidate and assess knowledge and understanding</p> <p>Pearson formal exam – January. Resit option in May/June</p>
FEEDBACK LESSONS PLANNED	<p>Opportunity for students to reflect on learning, respond to feedback, improve work, etc. after each assessment.</p> 				
SPECIALIST VOCABULARY	Each unit has an extensive list of key terms; students are provided with glossaries and textbook provides definitions for all	Each unit has an extensive list of key terms; students are provided with glossaries and textbook provides definitions for all		Each unit has an extensive list of key terms; students are provided with glossaries and textbook provides definitions for all	
QUALITY FIRST TEACHING	<ul style="list-style-type: none"> ✓ Strategies to learn more, remember more (metacognition) used in lessons e.g. retrieval, elaboration, interleaving, dual coding, etc. ✓ Differentiation and reasonable adjustments for students with SEND, EAL, etc. such as scaffolding, visual aids, audio, physical resources, planned questioning, etc. ✓ Opportunities for Literacy, Numeracy and Oracy, including a focus on reading ✓ Opportunities to apply key concepts and address misconceptions 				

YEAR 13		Autumn 1	Autumn 2	Spring 1	Spring 2	Summer 1	Summer 2
KNOWLEDGE	Unit 3: Health Psychology			Unit 4: Criminal and Forensic Psychology			Unit of Work: Revision
	B Stress, behavioural addiction and physiological addiction	C Promotion of positive behavioural change	<p>Learning aim A: Understand different psychological approaches to explaining criminal behaviour</p> <p><i>Key concepts of theories and research used to explain a variety of types of criminal behaviour.</i></p>	<p>Learning aim B: Investigate punishment strategies and behaviour modification of criminal behaviour</p> <p><i>Benefit to the individual and society of the application of behaviour modification strategies and punishment of the criminal.</i></p>	<p>Learning aim C:</p> <p>Apply different methods to create an offender profile</p> <p><i>Methods of offender profiling, advantages disadvantages and ethical considerations</i></p>	Retakes of Exams if required (Unit3)	
KEY SKILLS	<p>B1 Stress</p> <p>Learners demonstrate an understanding of the key concepts of the causes and responses to stress, making judgments on the relative importance and effectiveness of these. Learners apply the key concepts of the causes and the physiological response to stress to given scenarios.</p> <ul style="list-style-type: none"> Causes of stress: <ul style="list-style-type: none"> definition and role of life events and daily hassles in stress role of the workplace in stress: role conflict, effect of the environment, level of control definition and role of personality in stress. Physiological responses to stress, to include: <ul style="list-style-type: none"> general adaptation syndrome (GAS) the role of the sympathomedullary (SAM) and the hypothalamic-pituitary-adrenal (HPA) system in chronic and acute stress role of adrenaline in the stress response. Limitation of viewing stress as a purely physiological response: <ul style="list-style-type: none"> gender differences in physiological responses more than two responses, the 'freeze' response and role of cognitions 	<p>C1 Theories of persuasion</p> <p>Learners demonstrate a knowledge and understanding of the key concepts of these theories and explore their effectiveness in predicting behavioural change. Learners apply these theories to scenarios.</p> <ul style="list-style-type: none"> Hovland-Yale theory of persuasion: the role of the communicator, communication and the recipient in persuasion. Fear arousal theory of persuasion: low, medium and high levels of arousal and their impact on behavioural change. Elaboration-likelihood model of persuasion: use of peripheral or central route to persuasion, factors of influence (role of celebrity), individuals' differences in influence. <p>C2 Treatment and management of addiction and stress</p> <p>Learners demonstrate knowledge and understanding of key physiological and psychological methods of and professional approaches to, managing stress and addiction, exploring their effectiveness, including ethical and practical factors. Learners select and apply appropriate methods to scenarios, justifying decisions.</p>	<p>A1 Biological explanations of criminality</p> <ul style="list-style-type: none"> Inherited criminality, twin family and adoption studies, and diathesis – stress model. Low activity in genes MAOA and CDH13. Role of the amygdala and aggression – intermittent explosive disorder and reactive aggression. <p>A2 Individual differences explanations of criminality</p> <ul style="list-style-type: none"> Eysenck's theory of criminality, including three dimensions/traits of personality – extroversion, neuroticism and psychoticism. Cognitive factors and criminality: Kohlberg stages of moral development – moral reasoning and lack of opportunity to develop moral thinking beyond the pre-conventional level. <p>A3 Social psychological explanations of criminality</p> <ul style="list-style-type: none"> Social learning theory – Bandura, modelling, gender differences, as applied to criminality. Differential association model – what, how, and from whom criminal behaviour is learned. The effects of upbringing on criminal behaviour: <ul style="list-style-type: none"> disrupted families maternal deprivation poverty. 	<p>B1 Punishing criminal behaviour</p> <p>Effectiveness, and social and ethical implications of punishment methods.</p> <ul style="list-style-type: none"> Imprisonment – incapacitation, punitive punishment or rehabilitation, deterrence, i.e. recidivism rates, effect of institutionalisation when released, mental health and suicide rates in prison. Zero tolerance – US model, 'war on drugs', possibilities for system abuse. Offender disclosure schemes. Community sentences – effective alternative to custodial sentences, types of community sentences, i.e. probation, recidivism rates, reduction in stigma. Fines and discharges. <p>B2 Modifying criminal behaviour</p> <p>Effectiveness and social and ethical implications of methods of modifying criminal behaviour.</p> <ul style="list-style-type: none"> Anger management – reducing anger and aggression in prisons, rehabilitation and reduction of recidivism: <ul style="list-style-type: none"> cognitive approach, e.g. hostile attribution bias, irrational ways of thinking stress inoculation training, conceptualisation, skills acquisition and application of skills learned. Restorative justice – rehabilitation of offenders, atonement for wrong doing, 	<p>C1 Methods of offender profiling</p> <ul style="list-style-type: none"> Top-down US Federal Bureau of Investigation (FBI) approach techniques: <ul style="list-style-type: none"> classification of offenders – the organised/disorganised typology of serial murder, Canter et al (2004), the lust murderer, Hazelwood and Douglas (1980). Bottom-up British behavioural evidence analysis approach techniques: <ul style="list-style-type: none"> based on key psychological theories how and why criminal behaviour occurs consistencies of offender actions (behavioural consistency) factors, e.g. interpersonal coherence, significance of time and place, forensic awareness. C2 Offender profiling, purpose and techniques <ul style="list-style-type: none"> Aims of profiling: <ul style="list-style-type: none"> narrowing range of suspects predicting future crimes, e.g. times, locations establishing appropriate techniques for police interviews of suspect. Building a psychological portrait of a suspect, e.g. personality, age, gender, habits, behavioural consistency, intellect, health. Building a social portrait of a suspect, e.g. religion, ethnicity, social class, 	Revisit Unit 3	



<p>o fight or flight response is maladaptive in modern society o role of personality, variation in level and type of hormones released.</p> <ul style="list-style-type: none"> • The link between stress and physical ill health – short term (headache, stomach upset, fatigue) and long term (heart attack, stroke, hypertension). <p>B2 Physiological addiction Learners demonstrate an understanding of key principles of physiological addiction, including initiation, maintenance and relapse, and make judgements on the effectiveness of approaches to explain behaviour. Learners apply these key principles of physiological addiction to scenarios.</p> <ul style="list-style-type: none"> • Smoking: <ul style="list-style-type: none"> o biological approach – initiation: genetic predisposition to addiction, dopamine receptors, heritability of smoking initiation and nicotine dependence – maintenance and relapse: role of dopamine, nicotine regulation, tolerance, withdrawal symptoms o learning approach – initiation: parental and peer role models, positive reinforcement – maintenance: negative reinforcement, i.e. removal of withdrawal symptoms, classical conditioning and association between sensory information and nicotine effects – relapse: classical conditioning, conditioned cues, self-efficacy. • Alcohol: <ul style="list-style-type: none"> o cognitive approach – self-medication model – initiation – use of alcohol as mitigation for current issue, use of substances for specific effects 	<ul style="list-style-type: none"> • Physiological and psychological treatment of stress management and addiction: <ul style="list-style-type: none"> o mindfulness – attending to and regulating thoughts, feelings and emotions; being in the present; promoting healthy behaviours o talking therapies including counselling, guided self-help, cognitive behavioural therapy (CBT) and stress inoculation training (cognitive preparation, skill acquisition, application and follow-through) o social support – instrumental (practical), emotional (comfort), esteem (self-esteem) o biofeedback – physiological feedback, relaxation training o skills training o physiological treatments – nicotine substitutes (patches, gum, tablets, inhalers, sprays); drug treatments for detoxification and withdrawal from alcohol; over the counter remedies for stress (valerian, chamomile and lavender) o exercise – release of endorphins. <p>C3 Maintenance of behavioural change Learners demonstrate knowledge and understanding of key concepts of theories and methods of behavioural change in relation to non-adherence and improved adherence to medical advice and explore their effectiveness. Learners apply these key concepts of theories and methods of behavioural change to scenarios.</p> <ul style="list-style-type: none"> • Reasons for non-adherence: <ul style="list-style-type: none"> o stress – the perceived inability to cope as a threat to behaviour change o rational non-adherence, including cost-benefit analysis, financial barriers, patient-practitioner relationship 		<p>victim’s perspective.</p> <ul style="list-style-type: none"> • Token economy based on the principles of behaviourism, used in prisons 	<p>marital status, occupation, possible substance abuse, possible crime history and area where they live.</p> <ul style="list-style-type: none"> • Crime scene data collection features, including: <ul style="list-style-type: none"> o type of victim o type of crime committed o location o time o frequency of similar crimes in the area o physical evidence at the crime scene. <p>C3 Limitations of offender profiling</p> <ul style="list-style-type: none"> • Problems and issues associated with offender profiling, including: <ul style="list-style-type: none"> o appropriateness for particular crimes, e.g. Holmes and Holmes 1996 o insufficient empirical investigation o reductionist o police analysis bias – Barnum effect o ethics 	
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<p>– maintenance – assumption about management of the problem, stress relief</p> <p>– relapse – counterproductive, increase of stress levels, ‘solving’ problem causes relapse</p> <p>o learning approach – operant conditioning</p> <p>– initiation – positive reinforcement, positive consequences such as relaxation, increased dopamine; negative reinforcement, relief from stress, influence of role models</p> <p>– maintenance – negative reinforcement, relief from withdrawal symptoms</p> <p>– relapse – reduction of withdrawal symptoms, negative reinforcement.</p> <p>B3 Non-substance-related addiction</p> <p>Learners demonstrate and apply a knowledge and understanding of the key principles of approaches to non-substance related addiction, including initiation, maintenance and relapse, and explore their effectiveness in explaining behaviour. Learners apply these key principles of physiological addiction to scenarios.</p> <ul style="list-style-type: none"> • Gambling: <ul style="list-style-type: none"> o cognitive approach – expectancy theory – initiation – cost-benefit analysis – maintenance – irrational thoughts, cognitive biases, illusions of control, exaggeration of ability – cognitive bias in gambling – relapse – recall bias and overestimation of success o learning approach <ul style="list-style-type: none"> – initiation – association between gambling and pleasure/excitement therefore 	<p>o learned helplessness – control over behavior and outcomes</p> <p>o lack of support – significant others, health professionals.</p> <ul style="list-style-type: none"> • Methods used to improve adherence: <ul style="list-style-type: none"> o health education/promotion – relevant to target group, improved access to information o reduction of perceived threats – resistance, fears, understanding of needs, safety and security o lifestyle changes – replacing unhealthy behaviours with healthy behaviours; reduction in stress, improved self-esteem and self-confidence, emotional resilience, insight into own behaviour, improved outlook on life o support for behavioural change including provision of incentives, persuasive health reminders (texts, self-tracking, progress monitoring) and social prescribing 				
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	<p>behaviour strengthened – maintenance – variable reinforcement schedules, behaviour strengthened due to variable success – relapse – cue reactivity, cues associated with behaviour increase likelihood of relapse, i.e. walking past betting shops, gambling advertisements.</p> <ul style="list-style-type: none"> • Shopping: <ul style="list-style-type: none"> o learning approach <ul style="list-style-type: none"> – initiation – role models guide on how to behave, vicarious reinforcement, role of celebrity and advertisements – maintenance – association with excitement and pleasure, adrenaline rush and rewards, positive reinforcement – relapse – cues associated with shopping are seen, advertisements, need to shop, relief from withdrawal symptoms/negative reinforcement o cognitive approach – self-medication <ul style="list-style-type: none"> – initiation – relief from boredom, psychological problem, distress, lack of self-esteem, excitement – maintenance – reduction of anxiety associated with spending, continuation of boredom/anxiety relief – relapse – withdrawal causes lack of excitement/boredom, increase of anxiety (due to financial worries), breakdown of coping strategies. 					
<p>HOW DO WE BUILD ON SKILLS AND KNOWLEDGE?</p>	<p>Learners explore psychological approaches and theories related to lifestyle choices, unhealthy behaviours and behavioural change, linking them to their specific contexts</p> <p>This unit links to:</p> <ul style="list-style-type: none"> • Unit 1: Psychological Approaches and Applications • Unit 6: Introduction to Psychopathology. 	<p>Criminal and forensic psychology is a specialist branch of psychology that uses psychological theories to explain criminal behaviour, and examines the research generated by these theories.</p> <p>This unit links to:</p> <ul style="list-style-type: none"> • Unit 1: Psychological Approaches and Applications • Unit 2: Conducting Psychological Research 				



LINKS TO THE WORLD i.e. links to careers; equality: gender, class, ethnicity, etc.; different subjects	This unit places an emphasis on applying health psychology in a vocational setting and gives learners the opportunity to develop their understanding of the work of health psychologists and other healthcare practitioners. The unit is also a basis for study at higher education, for example a BSc in Health Psychology. It will also help learners to progress to employment in a healthcare profession such as nursing or social care and to a role that supports the motivation of others, such as teacher, life coach and sports coach	This unit gives the knowledge, understanding and skills relevant to higher education courses such as the BSc in Psychology, Law and Criminology. The unit is also useful for progression to a range of occupations in the criminal justice system, for example the police service, offender management			
FEEDBACK LESSONS PLANNED	Opportunity for students to reflect on learning, respond to feedback, improve work, etc. after each assessment. 				
ASSESSMENTS Summative and Formative as applicable	<p>Formative: constant AFL; self and peer assessment of tasks; divider in folder to track progress. Exam questions to re-cap prior learning. Comprehension tasks and quizzes to consolidate knowledge.</p> <p>Summative: Pupils sit a test at end of each learning aim to consolidate and assess knowledge and understanding</p> <p>Assessment fortnight (October).</p> <p>Pearson formal exam – January. Resit option in May/June</p>	A report detailing different theories and research used to explain criminal behaviour	A report exploring the effectiveness of different methods and punishments of criminal behaviour.	An offender profile based on a case study of a real or imagined event. This should include the different profiling methods and an evaluation of the methods used when creating the profile	
SPECIALIST VOCABULARY	Each unit has an extensive list of key terms; students are provided with glossaries and textbook provides definitions for all	Each unit has an extensive list of key terms; students are provided with glossaries and textbook provides definitions for all			
QUALITY FIRST TEACHING	<ul style="list-style-type: none"> ✓ Strategies to learn more, remember more (metacognition) used in lessons e.g. retrieval, elaboration, interleaving, dual coding, etc. ✓ Differentiation and reasonable adjustments for students with SEND, EAL, etc. such as scaffolding, visual aids, audio, physical resources, planned questioning, etc. ✓ Opportunities for Literacy, Numeracy and Oracy, including a focus on reading ✓ Opportunities to apply key concepts and address misconceptions 				