FREE PREVIEW

Cambridge International AS & A Level • Psychology 9990 • Paper 3

CLINICAL PSYCHOLOGY · SECTION A

Describe & Evaluate

Essay model answer booklet

Every clinical **6-mark** and **10-mark** essay question from the 2024–2026 papers and the specimen paper, answered in full and annotated.

June 2026 | Mar 2026 | Nov 2025 | June 2025 | Mar 2025 | Nov 2024 | June 2024 | Mar 2024 | Specimen 2024

14
Full-mark essays, both parts

221
Annotations showing what earns marks

(a)(b)
Describe and evaluate, answered in full

★
Examiner tips and mistakes to avoid

Describe and Evaluate packs for all four options

Clinical | Consumer | Health | Organisational

PAPER 3 · SECTION A · CLINICAL PSYCHOLOGY

The essay question is worth 16 marks. This pack shows you how to earn every one.

Every Clinical Psychology describe and evaluate question from 2024 to 2026, plus the specimen paper, answered in full and annotated mark by mark.

14	62	221	4
questions	pages	annotations	options available

14

Every essay, 2024 to 2026

All 14 Clinical Psychology essay questions, every variant, plus the specimen paper. The most recent paper comes first, including March 2026.

6+10

Both parts written in full

A full part (a) description and a full part (b) evaluation for every question, the way an A* student writes in the exam.

221

Annotations that show the marks

Colour-coded comments show where the description earns credit, where each issue lands and how the conclusion is reached.

3

Three issues, both topics each time

Every part (b) covers three issues, the named one included, and each issue is applied to both topics in the question.

NEW

A guide before you start

Two new pages up front: how the essay is marked, and what each part needs. Syllabus terms only.

★

Examiner tips and traps

Every question flags the mistakes that cost candidates marks, so you avoid them on the day.

> “Most students know the studies. What they lack is a clear picture of what a **top-band essay** looks like. Each answer here gives you that picture, then shows you **why** each sentence earns its place.

Jyotika Varmani
Cambridge A Level Psychology teacher and subject expert. Her blog is cited in the official Cambridge teachers’ manual.

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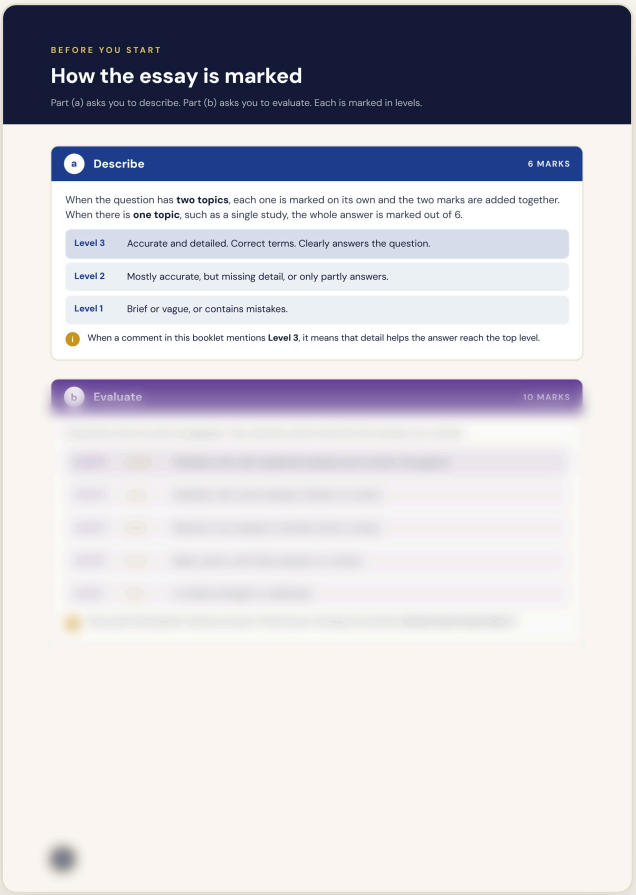
NEW IN EVERY PACK

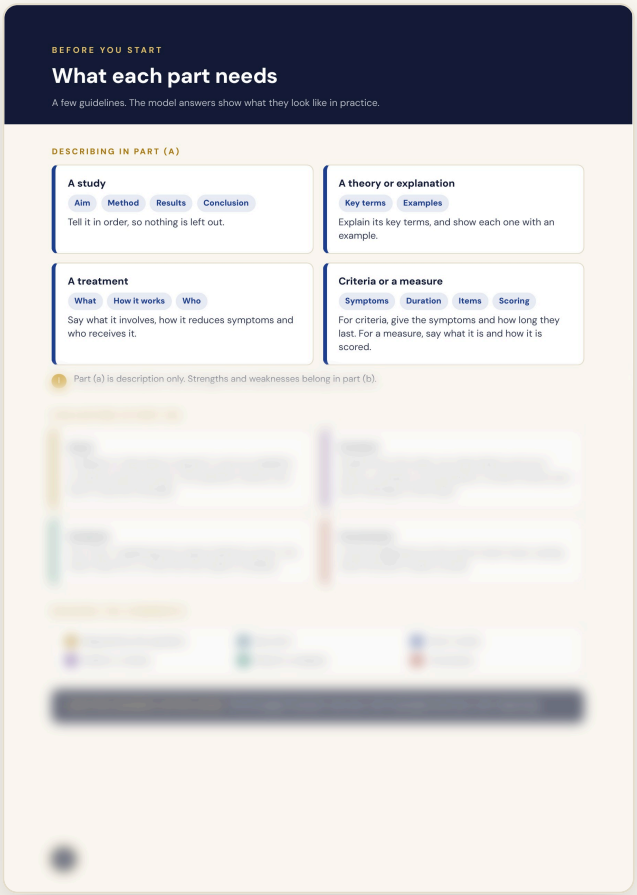
Before you start: a two-page guide

Before the first model answer, two pages set out the standard every essay is marked against. Here is a glimpse.



How the essay is marked

What separates the levels in part (a) and part (b), and the one rule about the named issue.



What each part needs

How to describe a study and a theory, and how to build an issue from point to conclusion.

COVERED IN THE GUIDE

- Part (a) levels
- Part (b) levels
- The named issue
- Describing a study
- Describing a theory
- Context and analysis
- Reaching a conclusion

The full guide is in the pack. Both pages in full, at the front of the booklet. **Unlock →**

ONE SERIES · FOUR OPTIONS

Describe and Evaluate packs are available for all four options

Whichever two options you are sitting, the same full-mark approach is waiting for you. Every pack covers every essay question from 2024 to 2026 and the specimen paper.

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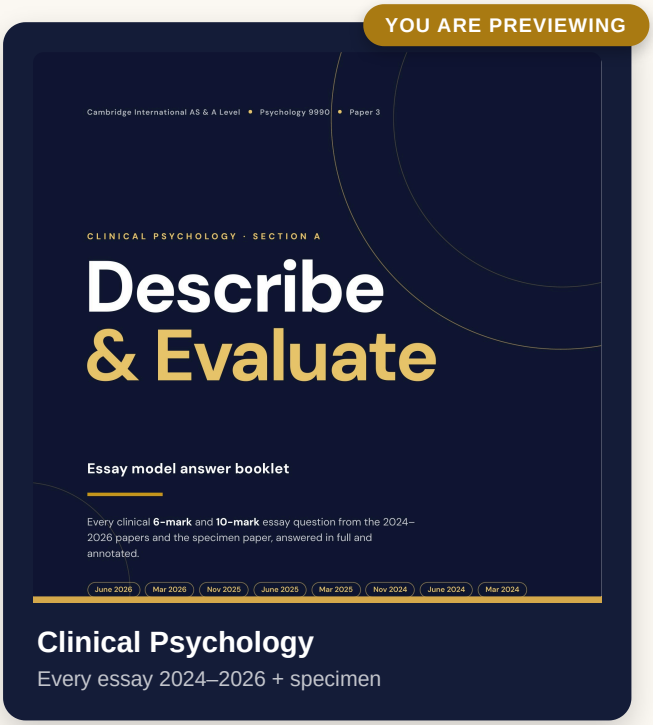

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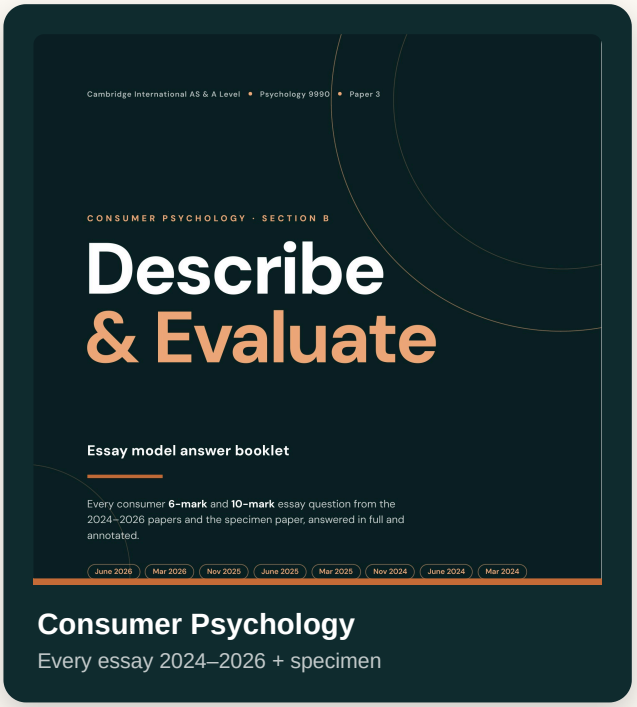

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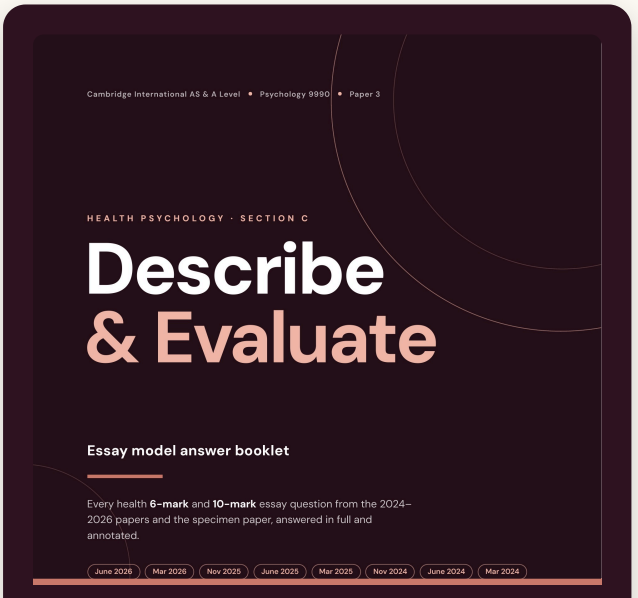

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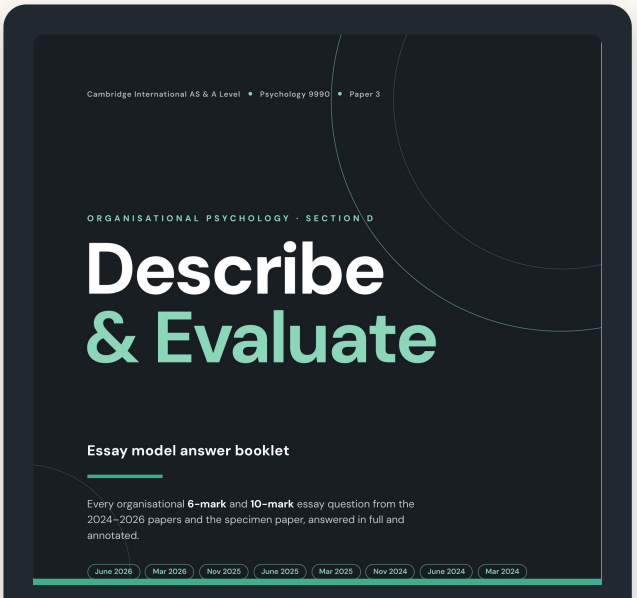

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CONTENTS OF THE FULL PACK

14 essays. Here is what you can see today.

In this preview · Sneak peek · In the full pack

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02	June 2026 Paper 32	Kleptomania, pyromania and the K-SAS Questionnaires	9	Full pack
03	March 2026 Paper 32	Diagnosing mood disorders and the BDI Quantitative and qualitative data	13	Full pack
04	November 2025 Paper 31 & 33	MAOIs and REBT for depression Reductionism versus holism	17	Sneak peek p. 18
05	November 2025 Paper 32	CBT and applied tension for phobias Generalisations	21	Full pack
06	June 2025 Paper 31 & 33	SSRIs and ERP for OCD Use of children in research	25	Full pack
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13	March 2024 Paper 32	Oruč et al.: serotonin genes and bipolar disorder Reliability	53	Full pack
14	Specimen 2024 Paper 3	Psychological explanations of OCD Individual and situational explanations	57	Full pack

01

June 2026 · Paper 31 & 33 · Question 4

An OCD case study and the Y-BOCS

SYLLABUS 1.5 Obsessive-compulsive disorder · 1.5.1 Diagnostic criteria

Named issue: psychometrics

The question

a Describe the following: [6]

- a study about obsessive-compulsive disorder (OCD) that includes a description of obsessions and compulsions
- the Yale-Brown Obsessive-Compulsive Scale (Y-BOCS).

b Evaluate the following, including a discussion about **psychometrics**: [10]

- a study about OCD that includes a description of obsessions and compulsions
- the Y-BOCS.

Evaluation in your answer can include strengths, weaknesses and a discussion of issues and debates.

a	Describe	6 marks	6	b	Evaluate	10 marks	7

Preview · full pack p. 5

Describe

6 marks

(a) Describe the following: 6 marks

- a study about obsessive-compulsive disorder (OCD) that includes a description of obsessions and compulsions
- the Yale-Brown Obsessive-Compulsive Scale (Y-BOCS).

Rapoport (1989) described the case of Charles, a boy with OCD. The aim 1 was to show how obsessions and compulsions develop and affect a child's life. The method was a case study over several years. The results showed that his main obsession was contamination 2, a belief that something sticky was on his skin. At 12 he began to wash, and by 14 he spent three or more hours a day washing. His soap ritual 3 was fixed: he held the soap in his right hand under the tap for a minute, then moved it to his left, for an hour. He left school, and his mother banned visitors who might bring "germs". Clomipramine helped, but after a year he developed tolerance 4. Rapoport concluded that compulsions reduce anxiety only briefly, so they take over the child's life.

The **Yale-Brown Obsessive-Compulsive Scale (Y-BOCS)** is a semi-structured interview 5. First, a checklist identifies the patient's obsessions and compulsions, using categories such as contamination and religious 6 obsessions, or washing, counting and hoarding compulsions. Then a 10-item severity scale rates obsessions and compulsions on time, distress, interference and resistance, each from 0 to 4. For example, one item asks how much time is spent on compulsions, from 0 (none) to 4 (more than 8 hours a day). Scores range from 0 to 40, and 16 or above 7 is in the clinical range, so the Y-BOCS can diagnose OCD and track change during treatment.

1 **AIM** The study begins with its **aim**: what Rapoport set out to show.

2 **OBSESSION** Names Charles's **type of obsession**, which the question asks for.

3 **COMPULSION** Says exactly **what he did**. Detail like this reaches Level 3.

4 **RESULT** A **result**: what happened after treatment.

5 **MEASURE** Naming the type alone gets **no credit**. The detail that follows does.

6 **EXAMPLE** Real **categories** from the checklist show how it is used.

7 **SCORING** Gives the **score range and cut-off**, so a score has meaning.

EXAM TIP

Write the study as **aim, method, results, conclusion**.

AVOID THIS

Saying only that the Y-BOCS is an **interview**. That scores 0.

Preview · full pack p. 6

b Evaluate

10 marks

(b) Evaluate the following, including a discussion about **psychometrics**: 10 marks

- a study about OCD that includes a description of obsessions and compulsions
- the Y-BOCS.

Evaluation in your answer can include strengths, weaknesses and a discussion of issues and debates.

One relevant issue is **psychometrics** 1. The Y-BOCS is a psychometric measure, as it gives every patient a standardised score out of 40. This is a strength, because a score can be compared with the cut-off of 16 and checked again after treatment. If Charles had scored 30 before clomipramine and 18 after a year, the fall would show improvement, and the rise again would show his tolerance to the drug 2. However, a score misses detail. Two patients scoring 24 might be a washer like Charles and a hoarder, wh different therapy. P ins what a

1 **NAMED ISSUE** Starts with the issue the question names. Without it, (b) is capped at **4**.

2 **CONTEXT** Uses a **detail from Charles's case**, so the point is not general.

The rest of this evaluation is in the full pack

Each issue applied to both topics, with the analysis and every annotation.

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Partly locked · full pack p. 7

A final issue is **generalisations from findings**. The Y-BOCS was tested on large groups of patients, so its cut-off of 16 can be used with most adults with OCD. Its checklist also covers many types, such as hoarding and checking. Rapoport's case cannot be generalised 8 in the same way, as Charles was one boy with contamination fears. A woman whose compulsion is checking that the oven is off may have a very different daily routine and response to clomipramine 9. Therefore, the Y-BOCS generalises better 10, w ase helps

8 ANALYSIS Explains **who** the case may not apply to, and why.

9 CONTEXT A specific **detail** from the case.

The third issue and the conclusion

As full as the first two issues, then a conclusion that weighs them up.

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Describe

6 marks

(a) Describe what psychologists investigating the treatment and management of mood (affective) disorders have discovered about:

- MAOI anti-depressants, and
- Ellis's rational emotive behaviour therapy (REBT).

6 marks

MAOIs (monoamine oxidase inhibitors) are antidepressants. They inhibit the enzyme monoamine oxidase [1], which normally breaks down noradrenaline, serotonin and dopamine in the synapse. By blocking this breakdown, MAOIs keep more of these neurotransmitters available, which improves mood and reduces symptoms such as low energy. MAOIs, such as phenelzine, have been used since the 1950s, but today they are usually given only when oth ressants, such as S

[1] MECHANISM Explains **how** MAOIs work in the synapse.

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b

June 2024 · Paper 32 · Question 4

Evaluate

10 marks

(b) Evaluate ECT and CBT for the treatment and management of schizophrenia, including a discussion about the **idiographic versus nomothetic** approach.

10 marks

Evaluation in your answer can include strengths, weaknesses and a discussion of issues and debates.

One relevant issue is **idiographic versus nomothetic** 1. ECT is mainly nomothetic, as every patient receives the same procedure of anaesthetic, electrodes and a brief seizure, so outcomes can be compared between hospitals that give the same course of sessions 2. However, it has an idiographic side[illegible]ors decide for each pati[illegible]

more idi[illegible]

1 **NAMED ISSUE** Starts with the issue the question names. Without it, (b) is capped at **4**.

2 **CONTEXT** A detail from part (a) that is the **same for**

Evaluation, done properly

Every issue explained, applied to both topics and brought to a conclusion.

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2024

Sneak peek · full pack p. 51



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