3.3 Stages of Attachment and the Role of the Father: Test Pack

Total Marks

AQA 7182 · about 15 minutes

Name: _____ Date: ____ / ____ / _____

Answer ALL questions.

1 Outline the asocial stage of attachment in Schaffer and Emerson's model, giving two characteristic features.

(Total for Question 1 is 2 marks)

2 Summarise three findings about fathers: primary attachment frequency, play quality link, and ability to act as primary caregiver.

(Total for Question 2 is 3 marks)

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3 Explain a bias from retrospective maternal reports and suggest a way to reduce it in future studies.

(Total for Question 3 is 4 marks)

4 Outline Field's finding on fathers as primary caregivers and two implications for parental role understanding.

(Total for Question 4 is 4 marks)

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Mark scheme · 3.3 Stages of Attachment and the Role of the Father: Test Pack

Question 1

names the stage as the asocial stage or describes it as the first stage of attachment (around birth to a few weeks) oe	**B1**
gives one characteristic such as: infant shows similar responses to social and non-social stimuli, forms few clear social attachments yet may show a preference for faces or familiar stimuli oe	**B1**

Answer: The asocial stage, the first phase after birth, where the infant shows similar responses to people and objects and has not formed clear social attachments, though they may prefer faces or familiar stimuli.

Question 2

states that research finds fathers are rarely the infant's primary attachment figure in many samples, with mothers most often being the primary caregiver oe	**B1**
states Grossmann's longitudinal finding that the quality of a father's play is related to later adolescent attachment quality or outcomes oe	**B1**
states Field's finding that fathers can adopt the more expressive, caregiving style typical of mothers when they take on the role of primary caregiver, forming secure attachments oe	**B1**

Answer: Research shows fathers are rarely the primary attachment figure in many samples, Grossmann found that the quality of a father's play relates to later adolescent attachment, and Field found that fathers can adopt an expressive caregiving style and act as effective primary caregivers.

Question 3

identifies a problem such as recall bias or social desirability in mothers' retrospective reports oe	**M1**
explains how this affects validity, e.g. inaccurate recall of the timing of behaviours or embellishing attachment behaviours, leading to biased measures of stage onset oe	**A1**
suggests a method to reduce bias, e.g. prospective longitudinal observation, using multiple informants or video recordings to collect behavioural data contemporaneously oe	**M1**
explains why this reduces bias, e.g. contemporaneous observation avoids memory errors and cross-checking multiple sources increases reliability of attachment measures oe	**A1**

Answer: Mothers' retrospective reports can suffer from recall bias and social desirability, producing inaccurate timing or exaggerated accounts of attachment behaviours. Using prospective longitudinal observation, video recordings, or multiple informants would reduce these biases by collecting data contemporaneously and enabling cross-checks for greater reliability.

Question 4

states Field's finding that fathers can adopt the more expressive, affectionate caregiving behaviours typical of mothers when they act as the primary caregiver oe	**M1**
explains implication 1: caregiving style, not biological sex, may determine the formation of secure attachment, suggesting flexibility in parental roles oe	**A1**
explains implication 2: policy and practice could support fathers as primary carers, e.g. parental leave and encouragement of active caregiving, because fathers can form secure attachments if they provide sensitive care oe	**A1**
explains that this challenges a purely biological explanation that mothers alone are suited to be primary attachment figures, emphasising role of behaviour and experience oe	**A1**

Answer: Field found that fathers acting as primary caregivers adopt more expressive caregiving and can form secure attachments. Implications are that caregiving behaviour, not biological sex, is crucial, that policy should support fathers as carers, and that biological-only accounts are challenged by fathers behaving sensitively.

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