CAMBRIDGE INTERNATIONAL EXAMINATIONS

GCE Advanced Level

MARK SCHEME for the October/November 2012 series

9698 PSYCHOLOGY

9698/32

Paper 3 (Specialist Choices), maximum raw mark 80

This mark scheme is published as an aid to teachers and candidates, to indicate the requirements of the examination. It shows the basis on which Examiners were instructed to award marks. It does not indicate the details of the discussions that took place at an Examiners' meeting before marking began, which would have considered the acceptability of alternative answers.

Mark schemes should be read in conjunction with the question paper and the Principal Examiner Report for Teachers.

Cambridge will not enter into discussions about these mark schemes.

Cambridge is publishing the mark schemes for the October/November 2012 series for most IGCSE, GCE Advanced Level and Advanced Subsidiary Level components and some Ordinary Level components.



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SECTION A

Q	Description	Marks
(a)	No answer or incorrect answer.	0
	Basic or muddled explanation. Some understanding but brief and lacks clarity.	1
	Clear and accurate and explicit explanation of term.	2
(b)	No answer or incorrect answer.	0
	Anecdotal answer with little understanding of question area and no specific reference to study.	1
	Basic answer with some understanding. Reference to named study/area only. Minimal detail.	2
	Good answer with good understanding. Study/area included with good description.	3
	Very good answer with clear understanding of study/area with detailed and accurate description.	4

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SECTION B

Q	Description	Marks
(a)	No answer or incorrect answer.	0
	Definition of terms and use of psychological terminology is sparse or absent. Description is mainly inaccurate, lacks coherence and lacks detail. Understanding is poor. The answer is unstructured and lacks organisation.	1–2
	Definition of terms is basic and use of psychological terminology is adequate. Description is often accurate, generally coherent but lacks detail. Understanding is reasonable. The answer is lacking structure or organisation.	3–4
	Definition of terms is mainly accurate and use of psychological terminology is competent. Description is mainly accurate, coherent and reasonably detailed. Understanding is good. The answer has some structure and organisation.	5–6
	Definition of terms is accurate and use of psychological terminology is comprehensive. Description is accurate, coherent and detailed. Understanding is very good. The answer is competently structured and organised.	7–8

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(b)	No answer or incorrect answer.	0
	Evaluation (positive and negative points) is basic. Range of points is sparse and may be only positive or negative. Points are not organised into issues/debates, methods or approaches. Sparse or no use of appropriate supporting examples which are peripherally related to the question. Analysis (key points and valid generalisations) is very limited or not present. Evaluation is severely lacking in detail and understanding is weak. There is no mention of the issue stated in the question.	1–3
	Evaluation (positive and negative points) is limited . Range of points is limited. Points hint at issues/debates, methods or approaches. Poor use of supporting examples. Analysis (key points and valid generalisations) is sparse. Evaluation is lacking in detail and understanding is sparse. The issue stated in the question is addressed according to mark scheme requirements for this band. If the issue stated in the question is not addressed, maximum 6 marks.	4–6
	Evaluation (positive and negative points) is good . Range of issues/debates, methods or approaches is good and is balanced with some organisation. Good use of appropriate supporting examples which are related to the question. Analysis (key points and valid generalisations) is often evident. Evaluation has good detail and understanding is good. The issue stated in the question is addressed according to mark scheme requirements for this band.	7–9
	Evaluation (positive and negative points) is comprehensive . Selection and range of issues/debates, methods or approaches is very good and are competently organised. Effective use of appropriate supporting examples which are explicitly related to the question. Analysis (valid conclusions that effectively summarise issues and arguments) is evident throughout. Evaluation is detailed and understanding is thorough. The issue stated in the question is addressed according to mark scheme requirements for this band.	10–12

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SECTION C

Q	Description	Marks
(a)	No answer or incorrect answer.	0
	Vague attempt to relate anecdotal evidence to question. Understanding limited.	1–2
	Brief description of range of appropriate evidence with some understanding.	3–4
	Appropriate description of good range of appropriate evidence with clear understanding.	5–6
(b)	No answer or incorrect answer.	0
	Suggestion is mainly inappropriate to the question and vaguely based on psychological knowledge. Description of explanation is mainly inaccurate, lacks coherence and lacks detail. Understanding is poor.	1–2
	Suggestion is largely appropriate to the question and based largely on psychological knowledge. Description of explanation is often accurate, generally coherent but lacks detail. Understanding is limited.	3–4
	Suggestion is appropriate to the question and based on psychological knowledge. Description of explanation is mainly accurate, coherent and reasonably detailed. Understanding is good.	5–6
	Suggestion is appropriate to the question and based explicitly on psychological knowledge. Description of explanation is accurate, coherent and detailed. Understanding is very good	7–8

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PSYCHOLOGY AND EDUCATION

Section A

1 (a) Explain, in your own words, what is meant by 'learned helplessness'.

[2]

Typically: According to Dweck (1978), learned helplessness refers to the expectation, based on previous experience, that one's actions cannot possibly lead to success.

(b) Describe one explanation of learned helplessness.

[4]

Syllabus:

 motivation issues: attribution theory and learned helplessness: attributing causes to behaviours (Weiner, 1984); learned helplessness (Dweck et al., 1978); changing attributions (e.g. Charms, 1972).

Expansion:

Learned helplessness is a disruption in motivation, affect, and learning following exposure to uncontrollable outcomes. Seligman and Meier's (1975) 'dog experiment' may be mentioned. This is an explanation and so should be credited even though it is not human or education. Attribution theory and Weiner (1984) may be mentioned. A description of attributions should score no marks, but if this explicitly relates to learned helplessness then it should receive credit. Dweck (1978) distinguishes between those children who have a mastery orientation (a growth mindset) and those who have a fixed mindset. A mastery orientation leads to increased motivation in the face of failure and such children view failure as a challenge and as a learning opportunity, not as an negative of their ability. On the other hand there are those who experience negative feelings, including anxiety, and a helpless pattern to failure leading them to give up. Another explanation is that learned helplessness is caused by the feedback given by a teacher about work and the subsequent attribution a child makes about it

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2 (a) Describe what psychologists have found out about disruptive behaviour in schools. [8]

Candidates are likely to include some of the following details from the syllabus:

- types, explanations and effects of disruptive behaviours. Types: conduct (e.g. distracting, attention-seeking, calling out, out-of-seat); immaturity and verbal and physical aggression (bullying), attention deficit hyperactivity disorder. Explanations and effects for one or more of above types. Poor teaching style.
- causes and effects of one disruptive behaviour. Any disruptive behaviour (e.g. one from above) but not attention deficit hyperactivity disorder.
- corrective and preventive strategies. Effective preventive discipline (Cotton, 1990); effective classroom management behaviour (Kounin, 1990). Corrective: behaviour modification techniques (Presland, 1990); cognitive behaviour modification e.g. self instructional training (Meichenbaum, 1971).
- (b) "If we reward and punish we can control disruptive behaviour." Evaluate what psychologists have found out about disruptive behaviour in schools including a discussion about the behaviourist approach to controlling disruptive behaviour. [12]

NOTE: any evaluative point can receive credit; the hints are for guidance only.

Evaluation of theory:

Internal strengths and weaknesses.

Theoretical issues: reductionism, determinism, ethnocentrism.

Supporting/contradicting evidence.

Comparisons and contrasts with alternative theory.

Evaluation of research:

Strengths and weaknesses of methods, sample, controls, procedure.

Evaluation of and comparisons and/or contrasts with alternative methodologies.

<u>Evaluation of issues and debates</u>: *Any relevant debate can be raised*, such as qualitative versus quantitative data, snapshot versus longitudinal studies, extent of ecological validity, nature versus nurture; freedom versus determinism; reductionism versus holism. Issues can be raised such as ethics, validity, ethnocentrism, effectiveness, application to real life.

<u>Named issue</u>: Behaviourism. This is the belief that all behaviours are learned and with applications of classical and operant conditioning disruptive behaviour can be modified.

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3 (a) Outline Grasha's six styles of learning.

[6]

Syllabus:

 learning styles and teaching styles. The onion model (Curry, 1983); Grasha's (1996) six styles of learning. Teaching styles: formal and informal styles (Bennett, 1976); Highinitiative and low-initiative (Fontana, 1995).

Expansion:

Grasha's (1996) six categories for learning: independent, dependent, competitive, collaborative, avoidant and participant. Each needs expansion for full marks.

(b) Suggest how you would conduct a study to compare Grasha's styles with an alternative explanation of learning styles. [8]

In this question part candidates are free to suggest any way in which the assessment request could be investigated. This may be in the form of a number of suggestions for research, application or development of a theoretical approach, or it may be that candidates design their own study to investigate the assessment request. Such an approach can include any appropriate method. Each answer should be considered individually as it applies to the mark scheme.

Most likely comparison:

- An alternative is to consider Kolb's (1976) learning styles whereby a preferred learning style can be identified through a learning kite. Four styles are possible: dynamic, imaginative, analytical and common-sense.
- Curry's onion model (1983): instructional preference, informational processing style and cognitive personality style.

4 (a) Suggest an alternative way of measuring creativity without asking questions. [8]

In this question part candidates are free to suggest any way in which the assessment request could be investigated. This may be in the form of a number of suggestions for research, application or development of a theoretical approach, or it may be that candidates design their own study to investigate the assessment request. Such an approach can include any appropriate method. Each answer should be considered individually as it applies to the mark scheme.

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(b) Describe two alternatives to intelligence.

[6]

Syllabus:

• alternatives to intelligence. Emotional intelligence (e.g. Goleman, 1995); creativity and unusual uses test (e.g. Guilford, 1950); problem solving: means-end analysis, planning strategies and backwards searching.

Expansion (most likely):

Emotional intelligence e.g. Goleman (1995) two major components: Understanding yourself, your goals, intentions, responses, behaviour and all. Understanding others, and their feelings. There are five factors: Knowing your emotions, Managing your own emotions, Motivating oneself, Recognising and understanding other people's emotions and Managing relationships, i.e., managing the emotions of others.

Gardner (1983) proposed 9 types of intelligence: 1. Naturalist Intelligence ("Nature Smart"), 2. Musical Intelligence ("Musical Smart"), 3. Logical-Mathematical Intelligence (Number/Reasoning Smart), 4. Existential Intelligence, 5. Interpersonal Intelligence (People Smart"), 6. Bodily-Kinesthetic Intelligence ("Body Smart"), 7. Linguistic Intelligence (Word Smart), 8. Intra-personal Intelligence (Self Smart"), 9. Spatial Intelligence ("Picture Smart").

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PSYCHOLOGY AND HEALTH

Section A

5 (a) Explain, in your own words, what is meant by 'practitioner style'.

[2]

Typically: the approach the practitioner adopts during a consultation with a patient. Needs elaboration/example for 2 marks.

(b) Describe one explanation of practitioner style.

[4]

Syllabus:

• Patient and practitioner diagnosis and style. Practitioner style: doctor and patient centred (Byrne and Long, 1976; Savage and Armstrong, 1990). Practitioner diagnosis: type I and type II errors. Disclosure of information (e.g. Robinson and West, 1992).

Expansion (most likely):

Byrne & Long (1976) distinguish between a **doctor-centred style** and a **patient-centred style**.

Savage & Armstrong (1990) compared a sharing consulting style (patient-centred) with a directive consulting style (doctor-centred).

Marks:

One explanation can be just one style: doctor-centred or patient-centred, or sharing or directive style.

One explanation can be that by Byrne & Long or Savage & Armstrong with **both** styles, or any appropriate alternative.

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6 (a) Describe what psychologists have learned about stress.

[8]

Candidates are likely to include some of the following details from the syllabus:

- causes/sources of stress. Physiology of stress and effects on health. The Gas model (Selye). Causes of stress: lack of control (e.g. Geer and Maisel, 1972), work (e.g. Johansson, 1978), life events (Holmes and Rahe, 1967), personality (e.g. Friedman and Rosenman, 1974), daily hassles (e.g. Lazarus, 1981).
- measures of stress. Physiological measures: recording devices and sample tests (e.g. Geer and Maisel, 1972; Johansson, 1978), self report questionnaires (Holmes and Rahe, 1967; Friedman and Rosenman, 1974; Lazarus, 1981).
- management of stress. Medical techniques (e.g. chemical). Psychological techniques: biofeedback (e.g. Budzynski et al., 1973) and imagery (e.g. Bridge, 1988). Preventing stress (e.g. Meichenbaum, 1985).

(b) "But what about how I feel?" Evaluate what psychologists have learned about stress and include a discussion about the physiological approach to stress. [12]

NOTE: any evaluative point can receive credit; the hints are for guidance only.

Evaluation of theory:

Internal strengths and weaknesses.

Theoretical issues: reductionism, determinism, ethnocentrism.

Supporting/contradicting evidence.

Comparisons and contrasts with alternative theory.

Evaluation of research:

Strengths and weaknesses of methods, sample, controls, procedure.

Evaluation of and comparisons and/or contrasts with alternative methodologies.

<u>Evaluation of issues and debates</u>: *Any relevant debate can be raised*, such as qualitative versus quantitative data, snapshot versus longitudinal studies, extent of ecological validity, nature versus nurture; freedom versus determinism; reductionism versus holism. Issues can be raised such as ethics, validity, ethnocentrism, effectiveness, application to real life.

<u>Named issue</u>: Physiological approach. This approach looks at the interrelationship between our physiology (genes, hormones, neurotransmitters, nervous system etc.) and our psychology (mind, behaviour, thought processes, emotion, mental states etc. There are a number of physiological theories (e.g. Selye) and a number of physiological measures.

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7 (a) Suggest how you would measure non-adherence to medical requests using biochemical/physiological tests. [8]

In this question part candidates are free to suggest any way in which the assessment request could be investigated. This may be in the form of a number of suggestions for research, application or development of a theoretical approach, or it may be that candidates design their own study to investigate the assessment request. Such an approach can include any appropriate method. Each answer should be considered individually as it applies to the mark scheme.

Most likely:

Biochemical tests such as urine or blood sample. This followed by analysis to determine whether any drug is present.

(b) Describe <u>two</u> ways to measure non-adherence that do not involve biochemical/physiological tests. [6]

Syllabus:

• measuring adherence/non-adherence. Subjective: self reports (e.g. Riekart and Droter, 1999) objective: pill counting (e.g. Chung and Naya, 2000); biochemical tests (e.g. Roth, 1987); repeat prescriptions (e.g. Sherman, 2000).

Expansion:

Self-reports: people (such as patients, doctors and family) can be asked to estimate. Objective pill counting is a possibility and the use of devices such as medication dispensers and trac-cap e.g. Chung and Naya (2000) are common. Asking for repeat prescriptions (e.g. Sherman et al., 2000) is another possibility as is simply determining whether people arrive for an appointment.

8 (a) Describe research on accident proneness and personality.

[6]

Syllabus:

 accident proneness and personality. Accident prone personality; personality factors e.g. age, personality type. Human error (e.g. Riggio, 1990), illusion of invulnerability (e.g. The Titanic), cognitive overload (e.g. Barber, 1988).

Expansion:

Greenwood and Woods (1913) found people had more accidents that normal. Robertson et al. (2000) devised a questionnaire to measure accident prone personality and three features identified were openness, agreeableness and dependability. Some people suggest age is a factor and others suggest introverts are more accident prone although others say it is extroverts. Yet others argue that it is type A personality that is accident prone and some even believe it is astrological star sign!

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(b) Suggest how you could investigate accident prone personality using a questionnaire to gather quantitative data. [8]

In this question part candidates are free to suggest any way in which the assessment request could be investigated. This may be in the form of a number of suggestions for research, application or development of a theoretical approach, or it may be that candidates design their own study to investigate the assessment request. Such an approach can include any appropriate method. Each answer should be considered individually as it applies to the mark scheme.

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PSYCHOLOGY AND ENVIRONMENT

Section A

9 (a) Explain, in your own words, what is meant by the term 'wayfinding'. [2]

Typically: to wayfind is to successfully follow a route from point A to point B.

(b) Describe <u>two</u> studies which have investigated wayfinding in a laboratory rather than in a real situation. [4]

Syllabus:

• designing better maps; wayfinding: map design (Levine, 1982); wayfinding (Maguire et al., 1997); virtual wayfinding (Janzen et al., 2001).

Expansion:

Maguire et al. (1997 and 2000) studied taxi drivers, quoting a wayfinding route, in an MRI scanner, finding the hippocampus is the brain centre responsible for wayfinding. Janzen et al. (2001) created a virtual maze and had a mouse follow a route to find food.

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10 (a) Describe what psychologists have found out about noise.

[8]

Candidates are likely to include some of the following details from the syllabus:

- definitions and sources. Definitions of noise (e.g. Kryter, 1970); transportation noise and occupational noise. Factors that make noise annoying.
- negative effects on social behaviour in adults and performance in children. Anti-social behaviour: (e.g. Geen and O'Neal, 1969; Donnerstein and Wilson, 1970). Pro-social behaviour (e.g. lab: Mathews and Canon, 1975; field: Mathews and Canon, 1975). Performance: (e.g. Bronzaft, 1981; Haines et al., 2002).
- positive uses of sound (music). Consumer behaviour (e.g. North, 2003; North, 1999); stress reduction (e.g. Chafin, 2004); performance (e.g. Mozart effect).

10 (b) "Numbers may be scientific but they can't explain anything." Evaluate what psychologists have found out about noise and include a discussion of the strengths and weaknesses of using quantitative data. [12]

NOTE: any evaluative point can receive credit; the hints are for guidance only.

Evaluation of theory:

Internal strengths and weaknesses.

Theoretical issues: reductionism, determinism, ethnocentrism.

Supporting/contradicting evidence.

Comparisons and contrasts with alternative theory.

Evaluation of research:

Strengths and weaknesses of methods, sample, controls, procedure.

Evaluation of and comparisons and/or contrasts with alternative methodologies.

<u>Evaluation of issues and debates</u>: *Any relevant debate can be raised*, such as qualitative versus quantitative data, snapshot versus longitudinal studies, extent of ecological validity, nature versus nurture; freedom versus determinism; reductionism versus holism. Issues can be raised such as ethics, validity, ethnocentrism, effectiveness, application to real life.

<u>Named issue</u>: Quantitative data involves describing human behaviour and experience using numbers and statistical analysis. All studies in this topic area involve quantitative data. But is this good or less so?

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11 (a) Suggest how you would gather data on how prepared people are for a disaster / catastrophe. [8]

In this question part candidates are free to suggest any way in which the assessment request could be investigated. This may be in the form of a number of suggestions for research, application or development of a theoretical approach, or it may be that candidates design their own study to investigate the assessment request. Such an approach can include any appropriate method. Each answer should be considered individually as it applies to the mark scheme.

(b) Describe evacuation principles such as those outlined by Loftus (1972).

Syllabus:

psychological intervention before and after events. Before: preparedness (e.g. Sattler et al 2000) evacuation plans (e.g. Loftus, 1972). After: treating PTSD: Herald of free Enterprise – Belgium (Hodgkinson and Stewart, 1991). London Bombing (Rubin et al, 2005).

[6]

Expansion:

Features of good message: it must get attention but NOT cause panic (DO NOT use the word 'fire!' etc.); it must be short; it must have most important instructions repeated; it must give people confidence that some authority is in charge; it must use simple words, spoken in an accent that everyone can understand.

12 (a) Describe one study which has looked at how people defend public territory. [6]

Syllabus:

• defending territory and space. Defending primary territory (e.g. Newman, 1976) and public territory (e.g. Ruback, 1997) territorial markers e.g. Hoppe et al. (1972).

Expansion:

in various places.

The work by Newman applies to primary territory and so is not relevant.

Ruback suggests people defend territory by occupying it for longer if someone is waiting to occupy the same space. This was shown in studies of car parks and public telephones. Hoppe et al. studied the use of territorial markers such as bags, books, coats etc. on chairs

(b) Suggest how the observation method could be used to study how people use territorial markers. [8]

In this question part candidates are free to suggest any way in which the assessment request could be investigated. This may be in the form of a number of suggestions for research, application or development of a theoretical approach, or it may be that candidates design their own study to investigate the assessment request. Such an approach can include any appropriate method. Each answer should be considered individually as it applies to the mark scheme.

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PSYCHOLOGY AND ABNORMALITY

Section A

13 (a) Explain, in your own words, what is meant by 'biological explanations of depression'. [2]

Typically: An explanation is a reason for something. 'Biological explanation' incorporates genetic and biochemical functioning, and depression is the abnormality being examined. In other words, depression may have a genetic or biochemical cause.

(b) Describe <u>two</u> biological explanations of depression.

[4]

Syllabus:

• explanations of depression. Biological: genetic and neurochemical; cognitive: Beck's cognitive theory; learned helplessness/attributional style (Seligman, 1979).

Expansion:

Genetic: Depression runs in families and the closer the genetic relationship, the more likely people are to be diagnosed with the disorder. Close family members, such as brothers, sisters, sons, daughters, fathers and mothers – share 50% of their genes. According to Oruc et al. (1998) first degree relatives of people diagnosed with depression are two or three times more likely to be diagnosed with depression than those who are not first degree relatives. Biochemical: In 1965 Schildkraut published the catecholamine hypothesis of affective disorders where the chemical imbalance hypothesis for mental health disorders, especially for depression was outlined.

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14 (a) Describe what psychologists have discovered about schizophrenia.

[8]

Candidates are likely to include some of the following details from the syllabus:

- types, symptoms and characteristics of schizophrenia. Types (e.g. catatonic, paranoid); characteristics; case studies/examples.
- explanations of schizophrenia. Genetic (e.g. Gottesman and Shields, 1972); biochemical (dopamine hypothesis); cognitive (e.g. Frith, 1992).
- treatments for schizophrenia. Biochemical (antipsychotics and atypical antipsychotics); electro-convulsive therapy. Token economy (Paul and Lentz, 1977); cognitive-behaviour therapy (Sensky, 2000).
- (b) Some people believe that schizophrenia is inherited whilst others argue that it is learned. Evaluate what psychologists have discovered about schizophrenia and include a discussion of the nature-nurture debate. [12]

NOTE: any evaluative point can receive credit; the hints are for guidance only.

Evaluation of theory:

Internal strengths and weaknesses.

Theoretical issues: reductionism, determinism, ethnocentrism.

Supporting/contradicting evidence.

Comparisons and contrasts with alternative theory.

Evaluation of research:

Strengths and weaknesses of methods, sample, controls, procedure.

Evaluation of and comparisons and/or contrasts with alternative methodologies.

<u>Evaluation of issues and debates</u>: Any relevant debate can be raised, such as qualitative versus quantitative data, snapshot versus longitudinal studies, extent of ecological validity, nature versus nurture; freedom versus determinism; reductionism versus holism. Issues can be raised such as ethics, validity, ethnocentrism, effectiveness, application to real life.

<u>Named issue</u>: Nature and nurture. This refers to the long standing debate of whether behaviour (or schizophrenia) is due to nature (i.e. inherited, genetic, innate) or whether it is due to nurture (i.e. learning, environment, upbringing etc.).

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15 (a) Describe the genetic explanation for phobias.

[6]

Syllabus:

 explanations of phobias: behavioural (classical conditioning, e.g. Watson, 1920); psychoanalytic (Freud, 1909); biomedical/genetic (e.g. Ost, 1992); cognitive (e.g. DiNardo et al., 1988).

Expansion:

There is some evidence for a genetic explanation for specific phobias. For example, Ost (1992) found those with a specific phobia for blood injuries had 60% of first degree relatives also having a specific phobia for blood injuries. For any genetic explanation it is important to realise that people do not inherit a specific gene for an illness, such as schizophrenia or depression. Rather, people inherit the vulnerability to it.

(b) Suggest how you would investigate whether phobias are inherited.

[8]

In this question part candidates are free to suggest any way in which the assessment request could be investigated. This may be in the form of a number of suggestions for research, application or development of a theoretical approach, or it may be that candidates design their own study to investigate the assessment request. Such an approach can include any appropriate method. Each answer should be considered individually as it applies to the mark scheme.

16 (a) Describe one cognitive-behavioural treatment.

[6]

Syllabus:

• treatments of abnormality. Treatments derived from models: biological/medical; psychotherapies; cognitive-behavioural. Effectiveness and appropriateness of treatments.

Expansion:

It is likely that candidates will describe 'cognitive-behaviour therapy' (or treatment) in general terms. This is perfectly acceptable. Candidates may also relate it to some specific abnormality e.g. OCD and this is also acceptable.

(b) Suggest how you would test the long-term effectiveness of this treatment. [8]

In this question part candidates are free to suggest any way in which the assessment request could be investigated. This may be in the form of a number of suggestions for research, application or development of a theoretical approach, or it may be that candidates design their own study to investigate the assessment request. Such an approach can include any appropriate method. Each answer should be considered individually as it applies to the mark scheme.

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PSYCHOLOGY AND ORGANISATIONS

Section A

17 (a) Explain, in your own words, what is meant by the term 'job enlargement'.

Typically: this is as its name suggests, and is where a job is expanded (or enlarged) to give the worker either more tasks or more varied tasks. It is different from job enrichment (see 17(b)).

[2]

[4]

(b) Describe job enrichment and job rotation giving an example of each.

Syllabus:

• job design. Job characteristics (e.g. Hackman & Oldham, 1980). Job design: enrichment, rotation and enlargement. Designing jobs that motivate.

Expansion:

Job rotation is where workers are moved from one task to another to avoid boredom. This may be done on a daily, weekly or even a monthly basis depending on the task.

Job enrichment is where workers are given more responsibility in the task they do. This may also include redesigning the task (as they are the user, the expert) or it may involve being responsible for a team of workers completing a task.

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18 (a) Describe what psychologists have learned about organisational work conditions. [8]

Candidates are likely to include some of the following details from the syllabus:

- physical and psychological work conditions. Physical: illumination, temperature, noise, motion (vibration), pollution, aesthetic factors. Psychological: feelings of privacy or crowding, excessive or absence of social interaction, sense of status or importance/anonymity or unimportance.
- temporal conditions of work environments. Shiftwork: rapid rotation theory (e.g. metropolitan rota and continental rota); slow rotation theory. Compressed work weeks and flexitime.
- Ergonomics. Operator-machine systems: visual and auditory displays, controls. Errors and accidents in operator-machine systems. Reducing errors: theory A and theory B (Reason, 2000).
- (b) "We can study one organisation and then say all others are exactly the same". Evaluate what psychologists have learned about organisational work conditions and include a discussion about generalisations. [12]

NOTE: any evaluative point can receive credit; the hints are for guidance only.

Evaluation of theory:

Internal strengths and weaknesses.

Theoretical issues: reductionism, determinism, ethnocentrism.

Supporting/contradicting evidence.

Comparisons and contrasts with alternative theory.

Evaluation of research:

Strengths and weaknesses of methods, sample, controls, procedure.

Evaluation of and comparisons and/or contrasts with alternative methodologies.

<u>Evaluation of issues and debates</u>: *Any relevant debate can be raised*, such as qualitative versus quantitative data, snapshot versus longitudinal studies, extent of ecological validity, nature versus nurture; freedom versus determinism; reductionism versus holism. Issues can be raised such as ethics, validity, ethnocentrism, effectiveness, application to real life.

<u>Named issue</u>: Generalisations. This is the extent to which we can generalise to most people most of the time. However, this applies to not all people all of the time because of individual and cultural differences. So what about organisational work conditions?

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19 (a) Suggest how you would gather data on the characteristics of effective leaders. [8]

In this question part candidates are free to suggest any way in which the assessment request could be investigated. This may be in the form of a number of suggestions for research, application or development of a theoretical approach, or it may be that candidates design their own study to investigate the assessment request. Such an approach can include any appropriate method. Each answer should be considered individually as it applies to the mark scheme.

(b) Describe the path-goal theory of leadership (House, 1979).

[6]

Syllabus:

• Leadership style and effectiveness. Effectiveness: contingency theory (Fiedler, 1976); situational leadership (Hersey & Blanchard, 1988), Path-goal theory (House, 1979). Styles: permissive versus autocratic (e.g. Muczyk & Reimann, 1987). Leadership training and characteristics of effective leaders.

Expansion:

House proposes that the leader can affect the performance, satisfaction, and motivation of a group in different ways: offering rewards for achieving performance goals; clarifying paths towards these goals; removing obstacles to performance. A person may perform these by adopting a certain leadership style: Directive leadership; Supportive leadership; Participative leadership; and Achievement-oriented leadership.

20 (a) Suggest what the problems of appraisal are and what can be done to improve appraisals. [8]

In this question part candidates are free to suggest any way in which the assessment request could be investigated. This may be in the form of a number of suggestions for research, application or development of a theoretical approach, or it may be that candidates design their own study to investigate the assessment request. Such an approach can include any appropriate method. Each answer should be considered individually as it applies to the mark scheme.

(b) Describe one quantitative appraisal technique.

[6]

Syllabus:

• Performance appraisal. Reasons for and performance appraisal techniques (e.g. rating scales, rankings, checklists). Appraisers, problems with appraisal and improving appraisals (e.g. effective feedback interviews).

Expansion:

The emphasis is on *quantitative*, so what is described must include the rating scale or ranking or checklist or whatever quantitative technique is used. Most likely described is BARS (behaviourally anchored rating scale) or behavioural observation scales.