

MARK SCHEME for the October/November 2015 series

9698 PSYCHOLOGY

9698/31

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 2015 series for most Cambridge IGCSE[®], Cambridge International A and AS Level components and some Cambridge O 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

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
	<p>Evaluation (positive and negative points) is basic. Range of evaluative points, <u>which may or may not include the named issue</u>, is sparse and may be only positive or negative. Evaluative 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.</p>	1–3
	<p>Evaluation (positive and negative points) is limited. Range of evaluative points, <u>which may or may not include the named issue</u>, is limited. Points hint at issues/debates, methods or approaches but with little or no organisation into issues. Poor use of supporting examples. Analysis (key points and valid generalisations) is sparse. Evaluation is lacking in detail and understanding is sparse. NB If evaluation is ‘by study’ with same issues identified repeatedly with no positive or negative points of issues, however good examples are, maximum 6 marks. NB If the issue stated in the question is not addressed, maximum 6 marks. NB If only the issue stated in the question is addressed, maximum 4 marks.</p>	4–6
	<p>Evaluation (positive and negative points) is good. Range of evaluative issues/debates, methods or approaches, <u>including the named issue</u>, is good and is balanced. The answer has some organisation of evaluative issues (rather than ‘study by study’). 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.</p>	7–9
	<p>Evaluation (positive and negative points) is comprehensive. Selection and range of evaluative issues/debates, methods or approaches, <u>including the named issue</u>, is very good and which 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.</p>	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 largely appropriate to the question and is vaguely based on psychological knowledge. Answer is mainly inaccurate, often incoherent and lacks detail. Understanding is lacking. If applicable, methodological knowledge is basic or absent. For methodology question <i>description</i> of a study/other authors' work 2 marks max if related to question.	1–2
	Suggestion is appropriate to the question and based on psychological knowledge. Answer has some accuracy, some coherence and some detail. Understanding is limited. If applicable, methodological knowledge is adequate. Max mark if no method is suggested (beyond identification).	3–4
	Suggestion is appropriate to the question and is based on psychological knowledge. Answer is accurate, largely coherent and detailed. Understanding is good. If applicable, methodological knowledge is good.	5–6
	Suggestion is appropriate to the question and is clearly based on psychological knowledge. Answer is accurate, is coherent and has appropriate detail. Terminology is used appropriately. Understanding is very good. Methodological knowledge 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 ‘extrinsic motivation’. [2]

Typically: Extrinsic motivation is the desire to do something because of an external reward/ positive reinforcement (e.g. praise from a teacher) or to avoid a punishment.

- (b) Describe one theory of motivation based on extrinsic motivation. [4]

Syllabus:

- **Definitions, types and theories of motivation.** Types such as extrinsic and intrinsic. Theories: behaviourist (e.g. Brophy, 1981); humanistic (e.g. Maslow, 1970); cognitive (e.g. McClelland, 1953).

Most likely:

The definition of extrinsic motivation means that it is based on the behaviourist perspective which assumes that behaviour is determined by its consequences, that positive reinforcement increases the probability of a behaviour happening again, for example. Motivation stems from the way behaviour is reinforced – good behaviour is rewarded, and bad behaviour reprimanded. Brophy (1981) looks at the use of praise, for example. Skinner and Pavlov may be used and examples are legitimate **if they are related to motivation**.

Marks: up to 4 marks for increasing quality of answer. 1 mark maximum for a description that is anecdotal or just describes motivation.

NB descriptions of Maslow’s hierarchy can only score credit if the theory is related to education.

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Section B

- 2 (a) Describe what psychologists have found out about intelligence. [8]

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

- **concept, types and tests of intelligence:** concept of intelligence and IQ; types of intelligence tests Stanford-Binet; Wechsler (WAIS & WISC; BAS). Reliability, validity and predictive validity. Intelligence and educational performance
- **theories of intelligence:** Factor-analytic approach (Cattell, 1971); multiple intelligences (Gardner, 1983); triarchic theory (Sternberg, 1988)
- **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.

- (b) Evaluate what psychologists have found out about intelligence and include a discussion about the use of 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.

Evaluation of issues and debates:

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.

Named issue: Quantitative data. Quantitative involves describing human behaviour and experience using numbers and statistical analysis. (Qualitative refers to results of a study that consist of description or words, rather than numbers). Most research on intelligence has been quantitative, but is this a good thing? Can we assess intelligence in other ways? What about Gardner's or Sternberg's work?

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Section C

3 You have a new class of A Level psychology students and you want to improve their learning effectiveness.

(a) Describe two study skills that can improve learning effectiveness. [6]

Syllabus:

- **improving learning effectiveness (study skills)** the 4-mat system (McCarthy, 1990); PQRST method: learning from textbooks; Strategies for effective learning and thinking (SPELT) Mulcahy et al. (1986).

Expansion:

As question part (a) is a free choice, then the study skill technique can be one of a number; most likely one of the three included on the syllabus (although credit must be given for any other appropriately psychologically referenced technique). These are:

- McCarthy's (1990) **4-MAT** system. Includes: motivation, concept development, practice and application. This is teacher-based, who matches teaching styles with learning styles.
- **PQRST**: preview, question, read, self-recitation, test. Intended to improve ability to study and remember material in a textbook.
- **SPELT** (Mulcahy, 1986) Strategies for Effective Learning, Thinking. This is concerned with learning how to learn.

(b) Suggest how you would investigate which study skill is the most effective for your students. [8]

General: In this question part each candidate is free to suggest a way in which the assessment request could be investigated; the 'you' is emphasised to show that in this question it is not *description* that is being assessed, but an individual *suggestion*. The question may be in the form of a suggestion for research, or an application. The question may allow a candidate a free choice of method to design their own study. It might be that a specific method is named in the question, and if it is this method must be addressed. Each answer should be considered individually as it applies to the mark scheme. Marks are awarded for methodological knowledge and how the methodology is applied to this topic area.

Specific: logically candidates will choose an appropriate technique (as detailed in (a) above) and apply it to their psychology students. There must be detailed evidence in the answer of how this will be done.

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4 A child in a class is bullying other children. You decide to conduct an observation to determine the type and frequency of the bullying behaviour.

(a) Suggest how you would design and conduct your observational study of bullying. [8]

General: In this question part each candidate is free to suggest a way in which the assessment request could be investigated; the 'you' is emphasised to show that in this question it is not *description* that is being assessed, but an individual *suggestion*. The question may be in the form of a suggestion for research, or an application. The question may allow a candidate a free choice of method to design their own study. It might be that a specific method is named in the question, and if it is this method must be addressed. Each answer should be considered individually as it applies to the mark scheme. Marks are awarded for methodological knowledge and how the methodology is applied to this topic area.

Specific: Candidates must use observation, so inclusion of the type (controlled, natural, participant, etc.), coding/response categories and sampling type (event, time, etc.) and whether or not there are two or more observers are important.

(b) Describe two explanations for bullying.

[6]

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.
- **causes and effects of one disruptive behaviour.** Any disruptive behaviour (e.g. one from above) but not attention deficit hyperactivity disorder.

Expansion:

There are four main explanations for bullying (although any appropriate answer is acceptable):

- Dysfunctional family where parents set poor examples of behaviour; show little warmth or interest in their children; use force, threats, humiliation or intimidation with their children; ignore or do not punish when their child shows aggressive or violent behaviour.
- Children with ADHD or oppositional defiant disorder are more likely to bully because they find it difficult to control their behaviour.
- Peer influences and possible gang membership may play a role.
- Desire for attention and control; or envy and resentment of another child.
- Any other appropriate suggestion to receive credit.

Marks: up to 3 marks for each explanation of bullying.

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PSYCHOLOGY AND HEALTH

Section A

- 5 (a) Explain, in your own words, what is meant by 'shift work'. [2]

Typically: shift work is the division of a 24-hour work schedule into smaller 'workable' time periods, such as 8 hours. Each time period is a shift.

Marks: 1 for statement of obvious i.e. repeat of question. 2 marks for answer with elaboration/psychological knowledge.

- (b) Describe one way in which shift work can be organised and suggest an alternative way of organising shift work. [4]

Syllabus:

- **Reducing accidents and promoting safety behaviours.** Reducing accidents at work: token economy (e.g. Fox et al., 1987); reorganising shift work; safety promotion campaigns (e.g. Cowpe, 1989).

Most likely:

- **Slow rotation theory** has **infrequent** shift change (the same shift for a least a month). This minimises health effects but is not popular for social reasons.
- **Rapid rotation theory** has **frequent** shift change (e.g. once per week) so is preferred for social reasons. There are two types (and the rota continues giving an equal balance of working all 7 days per week over time):
 1. *Metropolitan rota*: work 2 early (6am to 2pm), 2 late (2pm to 10pm), 2 night (10pm to 6am), 2 rest.
 2. *Continental rota*: work 2 early, 2 late, 3 night, 2 rest, then 2 early, 3 late, 2 night, 3 rest.

Marks: 1 mark for identification of an appropriate shift and 1 mark for description/elaboration of it.

Marks: 1 mark for identification of an **alternative** shift and 1 mark for description/elaboration of it.

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Section B

6 (a) Describe what psychologists have found out about health promotion. [8]

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

- **methods for promoting health.** Fear arousal (e.g. Janis and Feshbach, 1953; Leventhal et al., 1967). Yale model of communication. Providing information (e.g. Lewin, 1992).
- **health promotion in schools, worksites and communities.** Schools (e.g. Walter, 1985; Tapper et al., 2003). Worksites (e.g. Gomel, 1983). Communities (e.g. three community study, Farquhar et al., 1977).
- **promoting health of a specific problem.** Any problem can be chosen (e.g. cycle helmet safety: Dannenberg, 1993; self-examination for breast/testicular cancer; obesity and diet: Tapper et al., 2003; smoking: McVey and Stapleton, 2000).

(b) Evaluate what psychologists have found out about health promotion and include a discussion of the use of snapshot and longitudinal studies. [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.

Evaluation of issues and debates:

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.

Named issue: Snapshot and longitudinal. Snapshot is when a study is performed in a short period of time and contrasts with a longitudinal study, done over a period of time on the same individual/group. A number of health promotion studies are conducted in a laboratory and many claim effectiveness as participants say they will 'give up' as they exit the study. A few weeks later it is not known whether the participants have maintained the abstinence or not. A longitudinal study would inform of this.

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Section C

7 Some patients do not adhere to medical advice because they customise their treatment.

- (a) Suggest how you would use a questionnaire to investigate the different ways in which patients customise treatment. [8]

General: In this question part each candidate is free to suggest a way in which the assessment request could be investigated; the 'you' is emphasised to show that in this question it is not *description* that is being assessed, but an individual *suggestion*. The question may be in the form of a suggestion for research, or an application. The question may allow a candidate a free choice of method to design their own study. It might be that a specific method is named in the question, and if it is this method must be addressed. Each answer should be considered individually as it applies to the mark scheme. Marks are awarded for methodological knowledge and how the methodology is applied to this topic area.

Specific: Candidates must design a questionnaire, so inclusion of question type (open ended, closed, etc.), answer format (yes/no, rating scale, etc.) and scoring (meanings of points scored) are essential features. The questionnaire must also show knowledge of customising treatment.

- (b) Describe one study that has investigated how patients customise their treatment. [6]

Syllabus:

- **types of non-adherence and reasons why patients don't adhere.** Types and extent of non-adherence. Rational non-adherence (e.g. Bulpitt, 1988); customising treatment (e.g. Johnson and Bytheway, 2000).

Most likely:

- Johnson and Bytheway (2000) found that participants' use of prescribed medicines varied according to their perceptions of: effectiveness, likely dependence, side-effects, and whether they might interact adversely with other medicines being taken.
- Any other study of customising treatment to receive credit.

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8 A person has had a limb amputated and is suffering from phantom limb pain.

(a) Suggest how you would measure phantom limb pain. [8]

General: In this question part each candidate is free to suggest a way in which the assessment request could be investigated; the 'you' is emphasised to show that in this question it is not *description* that is being assessed, but an individual *suggestion*. The question may be in the form of a suggestion for research, or an application. The question may allow a candidate a free choice of method to design their own study. It might be that a specific method is named in the question, and if it is this method must be addressed. Each answer should be considered individually as it applies to the mark scheme. Marks are awarded for methodological knowledge and how the methodology is applied to this topic area.

Specific: Candidates are free to choose a method and then use it to investigate phantom limb pain. Marks awarded for methodological knowledge and how the methodology is applied to this topic area.

(b) Describe psychogenic pain using an example. [6]

Syllabus:

- **types and theories of pain** Definitions of pain. Acute and chronic organic pain; psychogenic pain (e.g. phantom limb pain). Theories of pain: specificity theory, gate control theory (Melzack, 1965)

Most likely:

- Psychogenic pain occurs as the result of an underlying psychological disorder, rather than in response to an immediate physical injury.
- Phantom limb pain is the feeling that a missing body part is still attached. Most amputees have at least some phantom limb pain after limb loss.
- Any appropriate example of psychogenic pain to receive credit.

Marks: 3 marks maximum if there is no example (or 3 max if no description).

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PSYCHOLOGY AND ENVIRONMENT

Section A

- 9 (a) Explain, in your own words, what is meant by the term ‘effects of crowding on human health’. [2]

Typically: crowding is the perception of restrictions of physical space. One effect of this is that it can have a negative effect on health. Candidates must address both ‘crowding’ and ‘health’ to score full marks.

Marks: 1 for statement of obvious i.e. repeat of question. 2 marks for answer with elaboration/psychological knowledge.

- (b) Describe one study investigating the effects of crowding on human health. [4]

Syllabus:

- **effects on human health, pro-social behaviour and performance.** Pro-social behaviour (e.g. Dukes and Jorgenson, 1976; Bickman et al., 1973). Health (e.g. Lundberg, 1976). Performance (e.g. Mackintosh, 1975).

Most likely:

- Lundberg (1976) studied commuter passengers travelling to Stockholm. He measured stress hormones contained in a urine sample and found that those travelling for 72 minutes had less stress than those travelling for 38 minutes. The explanation for this difference was those starting the journey had ‘cognitive control’ over where they sat on the train, whereas those getting on half-way has less or no choice, resulting in more stress.

Any other appropriate example to receive credit.

Marks: up to 4 marks for increasing quality of answer.

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Section B

10 (a) Describe what psychologists have discovered about architecture. [8]

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

- **theories and effects of urban living on health and social behaviour.** Theories: adaptation level, behaviour constraint, environmental stress and overload. Effects on health (e.g. Soderberg et al., 1994) and social behaviour (e.g. Amato, 1983).
- **urban renewal and housing design.** Renewal and building design: (e.g. Pruitt-Igoe, 1954–1972); Newman (e.g. Clason Point and Five Oaks, 1994).
- **community environmental design.** Shopping mall atmospherics (e.g. Michon et al., 2003); casino environments (Finlay et al., 2006); public places (e.g. Whyte, 1980 or Brower, 1983).

(b) Evaluate what psychologists have discovered about architecture and include a discussion about individual and situational explanations. [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.

Evaluation of issues and debates:

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.

Named issue: Individual versus situational explanations. An individual (dispositional) explanation for an event will look to some feature or characteristic of the person. A situational explanation will look at the wider context – the social group; the physical environment. For this question, to what extent is our behaviour influenced by the situation we are in?

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Section C

11 A new airport is planned for construction near to your home. If you can provide evidence that transportation noise causes psychological harm, the airport may not be built.

(a) Suggest how you would investigate the effects of transportation noise caused by aircraft. [8]

General: In this question part each candidate is free to suggest a way in which the assessment request could be investigated; the 'you' is emphasised to show that in this question it is not *description* that is being assessed, but an individual *suggestion*. The question may be in the form of a suggestion for research, or an application. The question may allow a candidate a free choice of method to design their own study. It might be that a specific method is named in the question, and if it is this method must be addressed. Each answer should be considered individually as it applies to the mark scheme. Marks are awarded for methodological knowledge and how the methodology is applied to this topic area.

Specific: Candidates are free to choose a method and then use it to investigate transportation noise caused by aircraft. Marks awarded for methodological knowledge and how the methodology is applied to this topic area.

(b) Describe two studies showing the negative effects of transportation noise on performance. [6]

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).

Most likely:

- **Bronzaft** (1981) found that noisy elevated subway trains were affecting the reading abilities of children at a local school. When sound-proofing and rubber tracks were installed, reading ages improved.
- **Haines et al.** (2002) and in similar studies of airport noise by Evans et al. (1993) and Evans and Maxwell (1997), it was found that children attending schools near airports suffered from lower memory and reading performance; were easily distracted and less motivated; had learned helplessness and (although not performance) had higher blood pressure when compared to children not near airports.

Marks: 3 marks for each description of an appropriate study.

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12 A study conducted three weeks after the London bombings of 2005 found that only 1% of the sample consulted a psychologist for help with symptoms of post-traumatic stress disorder.

(a) Suggest how you would use an interview to investigate why so few people asked for help. [8]

General: In this question part each candidate is free to suggest a way in which the assessment request could be investigated; the 'you' is emphasised to show that in this question it is not *description* that is being assessed, but an individual *suggestion*. The question may be in the form of a suggestion for research, or an application. The question may allow a candidate a free choice of method to design their own study. It might be that a specific method is named in the question, and if it is this method must be addressed. Each answer should be considered individually as it applies to the mark scheme. Marks are awarded for methodological knowledge and how the methodology is applied to this topic area.

Specific: An interview is required so candidates should show some knowledge of interview techniques. Fixed questions could be asked (structured interview) to determine numbers of participants experiencing particular circumstances or it could be open-ended to gain specific information about why so few asked for help.

(b) Describe the study of the London bombings conducted by Rubin et al. [6]

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).

Most likely:

- Rubin et al. (2005) used a telephone interview to investigate the effects of the London bombings on travel intentions and desire to seek or use psychological services.

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PSYCHOLOGY AND ABNORMALITY

Section A

13 (a) Explain, in your own words, what is meant by ‘a case study of a phobia’. [2]

Typically: A case study is usually an in-depth study of a single person. A phobia is an irrational fear of some object or thing. Both components need to be addressed to score full marks.

(b) Briefly describe two case studies of phobias. [4]

Syllabus:

- **definitions, types/examples (case studies) of phobias.** Types: e.g. agoraphobia, blood phobia, dog phobia.
- **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).

Most likely:

- Little Albert as studied by Watson (1920) was conditioned to be fearful of various items including Albert’s favourite white rat.
- Little Hans as studied by Freud (1909) who had a phobia of horses because Hans was in the Oedipus complex and associated horses with his father.

Marks: 1 mark for each identification of an appropriate example and 1 mark for each description/elaboration of it. 0 marks for anecdotal examples.

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Section B

14 (a) Describe what psychologists have discovered about models of abnormality. [8]

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

- **definitions of abnormality.** Definitions: deviation from statistical norms, social norms, ideal mental health, failure to function adequately. Problems with defining and diagnosing abnormality.
- **models of abnormality.** Medical/biological, behavioural, psychodynamic, cognitive. Assumptions and applications of models.
- **treatments of abnormality.** Treatments derived from models: biological/medical; psychotherapies; cognitive-behavioural. Effectiveness and appropriateness of treatments.

(b) Evaluate what psychologists have discovered about models of abnormality, including a discussion about the usefulness of models. [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.

Evaluation of issues and debates:

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.

Named issue: Usefulness of models. Is it useful to have competing explanations, models and/or approaches? If there were just one then we would have 'fact'; if we have different models then it is because 'the answer'/fact isn't yet known. Maybe models exist because a topic area is more holist and reductionism does not apply. Debate over the usefulness of models, particularly in relation to abnormality is an interesting one.

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Section C

15 The DSM-V (the United States classification of mental illnesses) no longer categorises schizophrenia into types.

- (a) Suggest how you would investigate how many psychiatrists know about this change in definition. [8]

General: In this question part each candidate is free to suggest a way in which the assessment request could be investigated; the 'you' is emphasised to show that in this question it is not *description* that is being assessed, but an individual *suggestion*. The question may be in the form of a suggestion for research, or an application. The question may allow a candidate a free choice of method to design their own study. It might be that a specific method is named in the question, and if it is this method must be addressed. Each answer should be considered individually as it applies to the mark scheme. Marks are awarded for methodological knowledge and how the methodology is applied to this topic area.

Specific: Candidates are free to choose a method but an interview or questionnaire is a likely choice. Marks awarded for methodological knowledge (e.g. type of questionnaire or interview, scoring, etc. and how the methodology is applied to investigate knowledge of DSM-V and schizophrenia).

- (b) Describe the symptoms and characteristics of schizophrenia. [6]

Syllabus:

- **types, symptoms and characteristics of schizophrenia.** Types (e.g. catatonic, paranoid); characteristics; case studies/examples.

Most likely:

- Description of any symptoms and characteristics (and types). Also credit 'positive symptoms' and 'negative symptoms'.

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16 Kleptomania and other impulse control disorders can be treated successfully with cognitive behaviour therapy.

- (a) Suggest how you would use cognitive behaviour therapy to treat a person with kleptomania (or any other impulse control disorder). [8]

General: In this question part each candidate is free to suggest a way in which the assessment request could be investigated; the 'you' is emphasised to show that in this question it is not *description* that is being assessed, but an individual *suggestion*. The question may be in the form of a suggestion for research, or an application. The question may allow a candidate a free choice of method to design their own study. It might be that a specific method is named in the question, and if it is this method must be addressed. Each answer should be considered individually as it applies to the mark scheme. Marks are awarded for methodological knowledge and how the methodology is applied to this topic area.

Specific: The task is to suggest a treatment for kleptomania using CBT and logically an explanation of how the treatment would progress will be given. The candidate must show knowledge of CBT and of kleptomania in his/her answer.

- (b) Describe the underlying theory on which this therapy is based. [6]

Syllabus:

- **coping with and reducing addiction and impulse control disorders.** Behavioural, e.g. token economy; aversion therapy (for alcoholism). Cognitive-behavioural therapy (e.g. Kohn, 2000) for kleptomania.

Most likely:

- Candidates should describe the underlying theory of CBT, i.e. a cognitive component and a behavioural component based on behaviourist principles. A study can be used as an example, such as that by Kohn and Antonuccio (2002) but this is an example and not underlying theory. Kohn and Antonuccio used kleptomania-specific covert sensitisation.

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PSYCHOLOGY AND ORGANISATIONS

Section A

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

Typically: ergonomics is 'human engineering', or more specifically it is the applied science of equipment design to maximise comfort and ease of use for the employee and to maximise efficiency and productivity for the employer.

Marks: 1 for statement of obvious i.e. repeat of question. 2 marks for answer with elaboration/psychological knowledge.

(b) Describe two important ergonomic features of machines in operator-machine systems, using examples. [4]

Syllabus:

- **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).

Expansion:

- Chapanis (1976) outlines the 'operator-machine system' where the 'machine' includes its controls, the way it is operated and its displays. More specifically:
 1. Controls (such as knobs, switches, buttons, pedals, levers) should match the operator's body; be clearly marked and should mirror the actions they produce.
 2. Visual displays (e.g. a clock, car speedometer) need to be appropriate, legible, with optimal luminance and not cause eye strain. Auditory displays (e.g. bell, buzzer) must have an appropriate tone and volume.

Any appropriate example receives credit.

Marks: 1 mark for identification of an appropriate example and 1 mark for description/elaboration of it.

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Section B

18 (a) Describe what psychologists have discovered about leadership and management. [8]

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

- **theories of leadership.** Universalist: great person theory, charismatic and transformational leaders. Behavioural: Ohio state studies (initiating structure and consideration), University of Michigan studies (task and relationship-oriented behaviours).
- **leadership style and effectiveness.** Effectiveness: contingency theory (Fiedler, 1976); situational leadership (Hersey and Blanchard, 1988), path-goal theory (House, 1979). Styles: permissive versus autocratic (e.g. Muczyk and Reimann, 1987). Leadership training and characteristics of effective leaders.
- **leaders and followers.** Leader-member exchange model (e.g. Danserau, 1994). Normative decision theory (Vroom and Yetton, 1973).

(b) Evaluate what psychologists have discovered about leadership and management, including a discussion of nature versus nurture. [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.

Evaluation of issues and debates: *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.

Named issue: Nature and nurture. This refers to the long standing debate of whether behaviour is due to nature (i.e. inherited, genetic, innate) or whether it is due to nurture (i.e. learning, environment, upbringing etc.). The age-old question of whether leaders are born or made is central to this topic area.

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Section C

19 Effective goals should be ‘SMART’ (e.g. specific, measurable, assignable, realistic and time-related).

(a) Suggest how you could use an experiment to investigate whether any goal-setting strategy is effective. [8]

General: In this question part each candidate is free to suggest a way in which the assessment request could be investigated; the ‘you’ is emphasised to show that in this question it is not *description* that is being assessed, but an individual *suggestion*. The question may be in the form of a suggestion for research, or an application. The question may allow a candidate a free choice of method to design their own study. It might be that a specific method is named in the question, and if it is this method must be addressed. Each answer should be considered individually as it applies to the mark scheme. Marks are awarded for methodological knowledge and how the methodology is applied to this topic area.

Specific: Candidates must use an experiment (laboratory or field), and inclusion of IV and DV, controls, setting and design, task to be completed and sample are essential features.

(b) Describe the goal-setting theory proposed by Latham and Locke. [6]

Syllabus:

- **motivation and goal-setting.** Theories: goal-setting theory (Latham and Locke, 1984), setting effective goals. Cognitive/rational theories: VIE (expectancy) theory (Vroom, 1964). Managerial applications of expectancy theory.

Most likely:

- Locke originally suggested that working toward a goal provided a major source of motivation to reach the goal. With appropriate feedback this improved performance. Latham proposed similar ideas and when the two combined, the goal-setting theory by Latham and Locke became popular. They believe goal-setting has five principles: clarity, challenge, commitment, be effective, and be achievable.

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20 Job design can involve enrichment, rotation and enlargement. Each can affect the psychological state of workers in different ways.

- (a) Suggest how you would assess the change in psychological state of workers following the implementation of job rotation. [8]

General: In this question part each candidate is free to suggest a way in which the assessment request could be investigated; the 'you' is emphasised to show that in this question it is not *description* that is being assessed, but an individual *suggestion*. The question may be in the form of a suggestion for research, or an application. The question may allow a candidate a free choice of method to design their own study. It might be that a specific method is named in the question, and if it is this method must be addressed. Each answer should be considered individually as it applies to the mark scheme. Marks are awarded for methodological knowledge and how the methodology is applied to this topic area.

Specific: Candidates are free to choose a method and then use it to investigate the success of the job rotation. Marks awarded for methodological knowledge and how the methodology is applied to this topic area.

- (b) Describe a job characteristics model, such as that proposed by Hackman and Oldham. [6]

Syllabus:

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

Most likely:

- The job characteristics model Hackman and Oldham (1976) looks at the characteristics of a job and the psychological states of workers. Core **job characteristics** include: (a) skills variety, task identity and task significance; (b) responsibility (autonomy) and (c) knowledge of outcome (feedback) from the job. These job characteristics lead to the calculation of a motivating potential score (MPS). **Psychological states** include: (a) experiencing the work as meaningful; (b) experiencing personal responsibility and (c) having knowledge of actual result or outcome of the work.