PSYCHOLOGY **9698/33**

Paper 3 Specialist Choices **May/June 2016**

MARK SCHEME

Maximum Mark: 80

Published

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 May/June 2016 series for most Cambridge IGCSE®, Cambridge International A and AS Level components and some Cambridge O Level components.

This document consists of **22** printed pages.

Each option has three questions:

Section A: A short answer question: (a) ∇ 2 marks, (b) ∇ 4 marks

Section B: An essay question: (a) ∇ 8 marks, (b) ∇ 12 marks

Section C: An applications question (a) ∇ 6 marks, (b) ∇ 8 marks [choice of questions]

In order to achieve the same standard across all options, the same mark schemes are used for each option. These mark schemes are as follows.

Section A: Short answer question: (a) ∇ 2 marks	
No answer or incorrect answer.	0
Basic or muddled explanation. Some understanding but brief and lacks clarity.	1
Clear, accurate and explicit explanation of term.	2

Section A: Short answer question: (b) ∇ 4 marks	
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: Essay question: (a) ∇ 8 marks	
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

Section B: Essay question: (b) ∇ 12 marks	
No answer or incorrect answer.	0
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.	1–3
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.	4–6
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.	7–9
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.	10–12

Section C: Application question (a) ∇ 6 marks	
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

Section C: Application question (b) ∇ 8 marks	
Suggestion is wrong.	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 *description* 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

Psychology and Education

Section A

1 (a) Explain, in your own words, what is meant by 'specific learning difficulty or disability'.
[2]

Typically: in general a learning disability includes a significantly reduced ability to understand new or complex information, to learn new skills with a reduced ability, and to cope independently. However, this is too general because the term 'learning difficulty' also includes people who have 'specific learning difficulties' (e.g. dyslexia), but who do not have a significant general impairment in intelligence. Each answer should be considered in relation to its individual merits.

Marks: 1 mark basic/partial; 2 marks full/basic with elaboration.

(b) Describe the effects of <u>one</u> specific learning difficulty or disability. **[4]**

Syllabus:
- **causes and effects of one specific learning difficulty or disability.** Most likely: dyslexia or attention deficit hyperactivity disorder, autistic spectrum or any other need.

Most likely:
- **dyslexia:** letter reversal or rotation, transposition of letters; misspelling; problems keeping place when reading; problems pronouncing unfamiliar words.
- **attention deficit hyperactivity disorder:** impulsive behaviour; inattention; hyperactivity (e.g. fidgets, leaves seat)
- **autism spectrum disorder:** resists change in routine, no theory of mind; echolalia; problems with verbal and non-verbal communication; problems with social relationships.

Marks: up 4 marks for description determined by quality of answer.

Section B

2 (a) Describe what psychologists have discovered about motivation and educational performance. **[8]**

Candidates are likely to include some of the following details from the 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).
- **improving motivation.** Behavioural: effective praise (e.g. Brophy, 1981); cognitive: McClelland (1953) need for achievement and need to avoid failure; cognitive-behavioural: self-efficacy (Bandura, 1977).
- **motivational issues: attribution theory and learned helplessness.** Attributing causes to behaviours (Weiner, 1984); learned helplessness (Dweck et al., 1978); changing attributions (e.g. Charms, 1972).

(b) Evaluate what psychologists have discovered about motivation and educational performance and include a debate about different theories of motivation. **[12]**

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

<u>Evaluation of theory:</u>
internal strengths and weaknesses;
theoretical issues: reductionism, determinism, ethnocentrism.
Supporting/contradicting evidence;
Comparisons and contrasts with alternative theory.

<u>Evaluation of research:</u>
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> **Different theories:** Candidates should compare and/or contrast the different explanations or theories of motivation such as behavioural, cognitive and humanistic (or Brophy v Maslow v McClelland).

Section C

3   You are a teacher supervising young children who are playing during their lunch break. You see one child bullying another. You decide to apply your psychological knowledge and conduct an observational study to categorise different types of bullying behaviour.

(a) Suggest how <u>you</u> would conduct an observation in a playground using categories of different types 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: The named method is an observation, so candidates are expected to show knowledge of the type (controlled, natural, participant, etc.), where the observation will be conducted, coding/response categories and sampling type (event, time, etc.). Finally, whether or not there are two or more observers.
NB not all these features are needed for a max mark.

(b) Describe <u>two</u> causes of 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.
- **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 violence behaviour.
- Children with ADHD or oppositional defiant disorder are more likely to bully because they find it difficult to control their behaviour.
- Peer influences are possible, gang membership may play a role.
- Desire for attention and control; or envy and resentment of another child.

Marks: 3 marks for each appropriate explanation.

4 **If I am good at one thing, then maybe I am good at everything.**

(a) **Suggest how <u>you</u> could investigate the relationship between different types of intelligence.** **[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 logically a correlation may be used. Marks awarded for methodological knowledge and how the methodology is applied to this topic area.

(b) Describe Gardner's theory of multiple intelligences. **[6]**

Candidates are likely to include some of the following details from the syllabus:
- **theories of intelligence:** Factor-analytic approach (Cattell, 1971); multiple intelligences (Gardner, 1983); triarchic theory (Sternberg, 1988).

Expansion:
- Gardner (1983) proposes multiple intelligences which are: Spatial, Linguistic, Logical-mathematical, Bodily-kinesthetic, Musical, Interpersonal, Intrapersonal and Naturalistic.

Marks: up to 6 marks for description determined by quality of answer.

Psychology and Health

Section A

5 (a) Explain, in your own words, what is meant by 'stress caused by life events'. **[2]**

Marks: 1 mark basic/partial; 2 marks full/basic with elaboration.

Needs expansion such an example of what a life event is for 2 marks.

(b) Describe <u>one</u> study which has used a questionnaire to measure life events. **[4]**

Syllabus:
- **causes/sources of stress.** Physiology of stress and effects on health. The GAS Model (Selye, 1936). 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).

Most likely:
- **Holmes and Rahe** (1967) devised the **social readjustment rating scale** (SRRS) to examine the **life events** and experiences (both positive and negative) that cause stress such as 'death of spouse'. They found that people scoring 300 life change units (over 12 months) more were more susceptible to illness ranging from sudden cardiac death to athletics injuries. The questionnaire allocates points to events, ranging in severity.

Marks: up to 4 marks for description determined by quality of answer.

Section B

6 (a) Describe what psychologists have learned 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. Lewis, 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 e.g. McVey and Stapleton, 2000).

  (b) Evaluate what psychologists have learned about health promotion and include a discussion about studies involving children. [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: **children:** Candidates should pick up on studies which use children in schools, such as those listed above. They should link this to what they know about children in psychological studies from Papers 1 and 2; indeed 'children' is a syllabus issue. At very least candidates should write about informed consent, for example.

Section C

7   **Consider the hypothesis: as people get older they are less likely to adhere to medical requests.**

   (a)   **Suggest how <u>you</u> would test the hypothesis that as people get older they are less likely to adhere to medical requests.**   **[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 any method they wish, but logically a longitudinal study would be best. This could track a period of time and levels of adherence. A questionnaire is also a possibility. Each answer credited on its individual merits, but marks are awarded for methodological knowledge and how the methodology is applied to this topic area. Studies using a correlation are also acceptable.

   (b)   **Describe <u>one</u> study of rational non-adherence.**   **[6]**

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

   Most likely:
   *   **Rational non-adherence:** The patient is making a rational decision not to comply. Bulpitt (1988) found that medication improved hypertension by reducing the symptoms of depression and headache. However it had side effects of increased sexual problems, so some men decided this was not a price worth paying and made a rational decision not to take the medication.

   Marks: up to 6 marks for description determined by quality of answer.

8 There have been a number of accidents in the workplace you manage and you want to promote safer working for everyone. You decide to try a token economy programme.

(a) Suggest how <u>you</u> would use a token economy in your workplace to improve work safety. **[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 suggest how they would use token economy applied in this particular location i.e. workplace. Marks awarded for methodological knowledge and how the methodology is applied to this topic area.

(b) Describe <u>one</u> study which has used a token economy to reduce accidents at work. **[6]**

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:
- **Fox et al.** (1987) used a **token economy** system at an open cast mine. Employees could earn stamps/tokens (to gain rewards) for working without time lost for injury; not being involved in accidental damage to equipment; and behaviour that prevented accidents or injuries. Stamps were lost for unsafe behaviour that could cause accidents. Result: there was a dramatic decrease in days lost through injury and the number of accidents was reduced.

Marks: up 6 marks for description determined by quality of answer.

Psychology and Environment

Section A

9 (a) Explain, in your own words, what is meant by 'community environmental design'. **[2]**

Typically: this is the design of public places for public use. Elaboration and/or example needed for 2 marks.

Marks: 1 mark basic/partial; 2 marks full/basic with elaboration/example.

(b) Describe <u>one</u> study about a designed community environment. [4]

Syllabus:
- **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).

Most likely:
- **Whyte et al.** (1980) observed and filmed 18 plazas in New York City counting usage on pleasant days and related usage to various features of the plaza. Whyte (1980) suggested that urban plazas should promote positive social interaction and include: places to sit, trees, amenities such as food outlets, and things to see and to do.
- **Brower** (1980) extended this work, adding that a successful design should take into account: the reduction of cars; give residents things to do and places to be; keeping the street front alive and making places like parks more attractive to adults.

NB: the study by Finlay et al. also acceptable because they studied 'designed' casino environments.

Marks: up 4 marks for description determined by quality of answer.

Section B

10 (a) Describe what psychologists have found out about density and crowding. [8]

Candidates are likely to include some of the following details from the syllabus:
- **definitions, measurements and animal studies:** Social and spatial density; crowding. Animal studies (e.g. Dubos, 1965, lemmings; Christian, 1960, deer; Calhoun, 1962, rats).
- **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).
- **preventing and coping with effects of crowding:** Preventing: modify architecture: visual escape (e.g. Baum et al., 1976) and other aspects. Coping (e.g. Langer and Saegert, 1977; Karlin et al., 1979).

(b) Evaluate what psychologists have found out about density and crowding, including a discussion about ecological validity. **[12]**

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

<u>Evaluation of theory:</u>
internal strengths and weaknesses;
theoretical issues: reductionism, determinism, ethnocentrism.
Supporting/contradicting evidence;
Comparisons and contrasts with alternative theory.

<u>Evaluation of research:</u>
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> **ecological validity:** whether the study can be generalised to different locations. It is likely that many candidates will go for the 'true to real life' explanation. This should also receive credit.

Section C

11 Many different methods can be used to investigate how people behave in emergency situations arising from a natural disaster or technological catastrophe.

(a) Suggest how <u>you</u> would conduct an interview with survivors of an emergency event.
[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 named method, an **interview**, is required so candidates should show some knowledge of types of interview techniques (e.g. face-to-face; telephone). Fixed questions could be asked (structured interview) or it could be open-ended to gain additional information. Knowledge of **PTSD** should also be evident.

NB: credit interviews with survivors both during and after an event.

(b) Describe <u>two</u> studies investigating emergency situations using methods <u>other than</u> an interview. [6]

Syllabus:
- **behaviours during events, and methodology:** Contagion (LeBon, 1895); scripts (Shank and Abelson, 1977). Laboratory experiments (e.g. Mintz, 1951), simulations and real life examples.
- **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:
- **Laboratory experiments:** Mintz (1951) conducted a study where participants pull on a string attached to a cone in a bottle. Only one cone can be removed at a time and cones must be removed before water fills the bottle. The problem is solved if participants take turns, but they do not and instead they all rush to get their cone out first. Mintz believes this replicated, safely, the behaviour of people in a real emergency situation. It had psychological realism.
- **Simulation:** the Civil Aviation Authority (UK) had students seated on a real aeroplane and on the word 'go' they all tried to escape, the first out being given a reward of money. To be passed as safe, any aeroplane world-wide must be able to evacuate all passengers within 90 seconds. **Kugihara (2007)** used a computer generated 'game' to investigate how people behave. **Cocking et al. (2005)** have used **virtual reality** to investigate how people behave when told to evacuate the London underground.

Marks: 3 marks for each study. 1 mark for basic and 2 further marks for elaboration/example.

12 **Little (1968) investigated cultural differences in personal space using a simulation with dolls. This study lacked ecological validity.**

(a) **Suggest how <u>you</u> would investigate cultural differences in personal space using real people.** [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 any method except for one using dolls (or equivalent). Logically this would be an experiment using stop-distance, but a questionnaire could also be used. Observation is another option. Marks awarded for methodological knowledge and how the methodology is applied to this topic area.

(b) Describe <u>one</u> study which has used the simulation method to measure personal space and describe <u>one</u> study which has used a different method. **[6]**

Syllabus:

*   **definitions, types and measures.** Defining space (e.g. Hall, 1966) and territory (e.g. Altman, 1975). Alpha space and beta space. Measuring space: simulation (e.g. Little, 1968); stop-distance; space invasions (see below).
*   **invading space and territory.** Invasions (e.g. Middlemist et al., 1976; Fisher and Byrne, 1975; Brodsky et al., 1999).

Most likely:

*   **The simulation method** (as used by Little) involved use of grey plastic dolls placed at an appropriate distance from each other on a piece of newsprint (paper). Little measured the distance between the dolls and assumed that .5 inch equated to 1 inch in real life. Little compared 5 national groups: Greek, Scottish, Swedish, Southern Italian and USA.

Other methods:

*   **Felipe and Sommer** (1966). At a 1500-bed mental institution an experimental confederate approached and sat next to lone patients.
*   **Middlemist, Knowles, and Matter** (1976) looked at the effects of invasion on physiological arousal, performing a study in a three-urinal men's lavatory.
*   **Konecni et al.** (1975) and in a similar study Smith and Knowles (1979) stood close to pedestrians waiting to cross a road.
*   **Brodsky et al.** (1999) conducted naturalistic observation in a courtroom and found that attorneys invaded the personal space of witnesses more during cross-examination compared to direct examination.
*   **Fisher and Byrne** (1975) studied gender differences in the invasion of personal space in a library and how such invasions were defended.

Marks: 3 marks for each study. 1 mark for basic and 2 further marks for elaboration/example.

Psychology and Abnormality

Section A

13 (a) Explain, in your own words, what is meant by 'the biomedical/genetic explanation of phobias'. **[2]**

Typically: answer needs to be related to phobias and/or what an explanation is; needs to include biomedical/genetic too.

Marks: 1 mark basic/partial; 2 marks full/basic with elaboration/example.

(b) **Describe a biomedical/genetic explanation of phobias, using a study as an example.** [4]

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).

Most likely:
- 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.
- Kendler et al. (1992) adds that the genetic factor common to all phobias strongly predisposes a person to specific phobias.

Marks: up 2 marks for description and 2 marks for example.

Section B

14 (a) **Describe what psychologists have learned about abnormal affect.** [8]

Candidates are likely to include some of the following details from the syllabus:
- **types, characteristics, examples of and sex differences:** Types: depression (unipolar) and mania (bipolar); causes and treatments for manic depression; sex differences in depression.
- **explanations of depression:** Biological: genetic and neurochemical; cognitive: Beck's cognitive theory; learned helplessness/attributional style (Seligman, 1979).
- **treatments for depression:** Biological: chemical/drugs (MAO, SSRIs); electro-convulsive therapy. Cognitive restructuring (Beck, 1979); rational emotive therapy (Ellis, 1962).

(b) **Evaluate what psychologists have learned about abnormal affect and include a discussion about competing 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: **competing explanations:** candidates should compare and/or contrast one or more different explanations. Explanations include: genetic, e.g. Oruc et al. (1998); neurochemical e.g. Schildkraut (1965); cognitive (e.g. Beck, 1979). Learned helplessness (Seligman et al.) is also creditworthy.

Section C

15 **Mrs Oliveira developed schizophrenia three years ago and is currently being treated. As a psychologist you want to find out about her symptoms, behaviour and treatment.**

(a) **Suggest how you would conduct a case study to investigate Mrs Oliveira's schizophrenia.** **[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 should know about the case study method from Paper 1. They should also know about a case study in relation to schizophrenia because it is on the syllabus (see part (b) below). What the case study involves is the decision of the candidate but as the question suggests we would expect details about symptoms, causes and treatment. This information can be gathered through interview, questionnaire, medical records, etc.

(b) Describe the underlying explanation on which <u>one</u> treatment of schizophrenia is based. [6]

Syllabus:
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-behavioural therapy (Sensky, 2000).

Most likely:
- ECT – based on medical/biological approach;
- Drugs – also based on medical/biological approach;
- Token economy (e.g. Paul and Lentz, 1977) based on learning theory;
- Cognitive behaviour therapy (e.g. Sensky et al., 2000) based on behaviourism and cognitive approaches.

Marks: up 6 marks for description determined by quality of answer.

16 Your patient tells you: "I close the door and walk along the road. 'Did I close the door?' I think I did, but I have to go and check that I did. I did close it. Confirmed. I walk along the road again, then I stop and I think 'Did I *really* close the door?' I have to go back and check."

(a) Suggest what <u>you</u> would do to reduce your patient's obsessive-compulsive behaviour. [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: This is an 'application' question, so some form of therapy must be described. This could be the use of biochemicals, cognitive-behaviour therapy, psychodynamic therapy or some other appropriate suggestion (see syllabus details below).

(b) Describe the main features of the explanation on which your suggestion is based. [6]

Syllabus:
- **explanations of obsessive/compulsive disorder.** Biomedical; cognitive-behavioural; psychodynamic.
- **treatments for obsessive/compulsive disorder.** Drug therapy; cognitive-behavioural therapy; psychoanalytic therapy.

Most likely:
- Here the candidate should describe the explanation on which the therapy suggested in part (a) is based.

Marks: up 6 marks for description determined by quality of answer.

Psychology and Organisations

Section A

17 (a) Explain, in your own words, what is meant by 'performance appraisal techniques'. [2]

Typically: appraisal is the process of assessing workers (needed for 1 mark) but how this is done, the performance techniques, needs to be mentioned for 1 further mark. Techniques such as rating scales, check-lists or interview.

Marks: 1 mark basic/partial; 2 marks full/basic with elaboration.

(b) Describe two ways in which performance can be appraised. [4]

Syllabus:
- performance appraisal. Performance appraisal: reasons for it and performance appraisal techniques (e.g. rating scales, rankings, checklists). Appraisers, problems with appraisal and improving appraisals (e.g. effective feedback interviews).

Most likely:
- check lists: tick boxes to determine whether a worker has met a standard/skill or not.
- rating scales: as above, but with rankings or scales to assess how good (or not) a worker is.
- Interviews: standard formal or informal. May be done after a 'critical incident' to assess competence.
- BARS (behaviourally anchored rating scales) combines ratings with critical incidents.

Marks: 2 marks for each way. 1 mark for basic and 1 further mark for elaboration/example.

Section B

18 (a) Describe what psychologists have learned about motivation to work. **[8]**

Candidates are likely to include some of the following details from the syllabus:
- Need theories of motivation: Need theories: Needs-hierarchy (Maslow, 1970), ERG theory (Aldefer, 1972), achievement motivation (McClelland, (1965).
- 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.
- Motivators at work: Intrinsic and extrinsic motivation. Types of rewards systems: e.g. pay, bonuses, profit sharing. Performance-related pay. Non-monetary rewards: praise, respect, recognition, empowerment and a sense of belonging. Career structure and promotion prospects.

(b) **Evaluate what psychologists have learned about motivation to work and include a discussion of the issue of individual versus 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 (dispositional) motivation influenced by the situation we are in?

Section C

19 **Some of your workers have suggested that they should be allowed to work flexitime rather than a traditional working week. You decide to design a questionnaire to find out what people think about this change.**

    (a) **Suggest how <u>you</u> would use a questionnaire to investigate attitudes toward flexitime.**

        [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 named method is a questionnaire so candidates are expected to show knowledge of questionnaire type/design (e.g. open or closed), examples of questions (that clearly relate to ethics and personal space), any rating scale that may be used, possibly where the questionnaire will be conducted, on whom, and how the answers will be scored. NB not all these features are needed for a max mark.

    (b) **Describe <u>two</u> ways in which a 'working week' can be organised.** **[6]**

        Syllabus:
        • **Temporal conditions of work environments**: Shiftwork: rapid rotation theory (e.g. metropolitan rota and continental rota); slow rotation theory. Compressed work weeks and flexitime.

        Expansion:
        Many people work for 8 hours per day for 5 days per week (40 hour week).

        • **A compressed working week** is where people work longer hours than average each day and so can complete a full week in less than a full week.
        • An **'on-call system'** is where people such as doctors work as needed or all the time over a period of time.
        • A **flexi-time system** is where people work the same hours per week but can work whenever they choose (e.g. 7 am to 3 pm or 11 am to 7 pm)
        • Shift-work is another way in which a working week can be organised, but an answer must be explained in terms of a working week, rather than a shift pattern over several weeks.

        Marks: up to 3 marks for each way, 1 mark basic and 2 further marks for elaboration.

20 **Craig, the workplace leader, thinks he is popular but some workers disagree.**

(a) **Suggest how <u>you</u> would investigate the popularity of a leader in a workplace.** **[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 **any method**. The choice of method should be appropriate and the answer should include the essential features of that method. Marks awarded for methodological knowledge and how methodology is applied to this topic area. Logically here a questionnaire or an interview may be best.

(b) **Describe a leader-member exchange model such as that proposed by Danserau.** **[6]**

Syllabus:
- **leaders and followers:** Leader-member exchange model (e.g. Danserau, 1994). Normative decision theory (Vroom and Yetton, 1973).

Expansion:
- **Danserau** et al. (1975) proposed *the leader-member exchange model* suggesting that it is the quality of interaction between leaders and group members that is important. This model has received much acclaim due to the success it has achieved when applied to real life situations. E.g. Scandura and Graen (1984) found that following a training programme, where the aim was to improve the quality of leader-member relationships, both group productivity and satisfaction increased significantly. Some candidates may distinguish between the vertical dyad linkage (VDL theory) and the alternative 'Individualised leadership' model by Danserau et al. (1995).

Marks: up 6 marks for description determined by quality of answer.