UNIVERSITY OF CAMBRIDGE INTERNATIONAL EXAMINATIONS

GCE Advanced Level

MARK SCHEME for the May/June 2012 question paper

for the guidance of teachers

9698 PSYCHOLOGY

9698/33 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 must be read in conjunction with the question papers and the report on the examination.

- Cambridge will not enter into discussions or correspondence in connection with these mark schemes.

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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 lack clarity.	1
Clear and 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

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

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Section C: Application question (b) = 8 marks	
No answer or incorrect answer.	0
Suggestion is mainly inappropriate to the question and vaguely based on psychological knowledge. Description of explanation is mainly inaccurate, lacks coherence and lacks detail. Understanding is poor.	1–2
Suggestion is largely appropriate to the question and based largely on psychological knowledge. Description of explanation is often accurate, generally coherent but lacks detail. Understanding is limited.	3–4
Suggestion is appropriate to the question and based on psychological knowledge. Description of explanation is mainly accurate, coherent and reasonably detailed. Understanding is good.	5–6
Suggestion is appropriate to the question and based explicitly on psychological knowledge. Description of explanation is accurate, coherent and detailed. Understanding is very good	7–8

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PSYCHOLOGY AND EDUCATION

1 (a) Explain, in your own words, what is meant by 'special educational need'. [2]

Typically: Either where a child has a significantly greater difficulty in learning than most children of the same age OR a child has a disability that needs different educational facilities from those that schools generally provide OR educational ability of those who are statistically not normal being at the top end of the normal distribution curve (gifted).

(b) Describe the causes and effects of attention deficit hyperactive disorder (ADHD). [4]

Syllabus:

- causes and effects of one specific learning difficulty or disability.

Expansion:

Most likely: dyslexia or attention deficit hyperactive disorder, autistic spectrum disorder or any other need.

- research has found a strong genetic link in ADHD. In identical twins, there is a 72-83% probability that both will have ADHD, but in non-identical same-sex twins the probability is 21-45%
- ADHD may be caused by a chemical imbalance such as dopamine and noradrenaline. Both these neurotransmitters are involved in 'executive' functions which allow self-control. hyperactivity, impulsiveness and inattention – may all arise due to problems with executive functions.
- other possibilities: diet, poor parenting and family environment.

A child is likely to show:

- Hyperactivity: fidgets with hands or feet; leaves seat; runs about is always 'on the go'; talks excessively.
- Impulsivity: blurts out answers; cannot wait for his or her turn; interrupts others.
- Inattention: poor attention to detail and makes careless mistakes; difficulty in sustaining attention; does not follow instructions; is easily distracted

2 (a) Describe what psychologists have found out about learning and teaching styles. [8]

Syllabus:

- learning styles and teaching styles: teaching styles: The onion model (Curry, 1983); Grasha's (1996) six styles of learning. Teaching styles: formal and informal styles (Bennett, 1976); high-initiative and low-initiative (Fontana, 1995)
- measuring learning styles and teaching styles: Learning: Approaches to study Inventory (ASI) (Entwistle, 1981). Teaching: teacher-centred and student-centred styles (Kyriacou and Williams, 1993); Kolb's (1976) learning styles.
- 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)

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(b) We know that students have different learning styles and that teachers have different teaching styles, but there are different ways to measure these styles. Evaluate what psychologists have found out about learning and teaching styles including a discussion of the methods used to gather 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: methods. Candidates should include discussion of one or more methods and their strengths or limitations in relation to teaching and learning styles. For example, most measures use a questionnaire to assess styles.

You are meeting your friend Eric for the first time in several years. You know he believes in the humanist approach to education and you are looking forward to hearing all about it.

3 (a) Outline the main features of the humanistic approach to education. [6]

Syllabus:
- humanistic applications to learning: underlying theory (Rogers, 1951); applications such as co-operative learning, learning circles and the open classroom. Summerhill School

Expansion:
For the **humanistic approach** (e.g. Rogers, 1951) every individual is the centre of a continually changing world of experience. Four features are at the heart: **affect** (emphasis on thinking and feeling, not just information acquisition); **self concept** (children to be positive about themselves); **communication** (attention to positive human relationships) and **personal values** (recognition and development of positive values).
- Maslow (1970) advocates **student-centred teaching** where teachers are learning facilitators rather than didactic instructors.
- Dennison (1969) advocates the **open classroom**.
- Dunn & Griggs (1988) propose that each child has a **personal and unique learning style** and so traditional education should change radically providing a 'staggering range of options'.
- Johnson et al (1984) believe students see education to be competitive when it should be **co-operative**, involving circles of knowledge, learning together and student team learning.

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(b) Suggest how Eric can use the humanistic approach to prepare students for examinations. [8]

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

A child in your class is an attention-seeker. Every time you turn away she is out of her seat and every time you talk to the class she interrupts. It is becoming a problem as it is disruptive to the class.

4 (a) Suggest a behaviour modification technique that would help you control this attention-seeking behaviour. [8]

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(b) Explain the psychology on which your suggestion is based. [6]

Syllabus:

- **behaviourist applications to learning:** underlying theory (classical and operant conditioning); applications such as programmed learning and behaviour modification techniques (controlling disruptive behaviour)
- **corrective and preventive strategies:** preventive: effective preventive discipline (Cotton, 1990); effective classroom management behaviour (Kounin, 1990). Corrective: behaviour modification techniques (Presland, 1990); cognitive behaviour modification e.g. self instructional training (Meichenbaum, 1971)

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PSYCHOLOGY AND HEALTH

5 (a) Explain, in your own words, what is meant by 'accident proneness'. [2]

Typically: a personal idiosyncrasy predisposing the individual who possesses it to a relatively high accident rate. Greenwood and Woods (1919) found a small number of people were having a disproportionately large number of accidents.

(b) Using an example, describe the 'illusion of invulnerability' explanation of human error. [4]

Syllabus:

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

Expansion:

- Accidents are often caused by errors of judgement – those concerned took a risk and should not have done. We take a risk when we believe we can 'get away with it'. This belief is often based on experience and we do often 'get away with it'. But, successful risk taking may lead to the illusion of invulnerability, i.e. the belief that 'it will not happen to me!' The Titanic sank because the captain had the illusion of invulnerability.

6 (a) Describe what psychologists have discovered about pain. [8]

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)
- measuring pain: Self report measures (e.g. clinical interview); psychometric measures and visual rating scales (e.g. MPQ, visual analogue scale), behavioural/observational (e.g. UAB). Pain measures for children (e.g. paediatric pain questionnaire, Varni and Thompson, 1976)
- managing and controlling pain: Medical techniques (e.g. surgical; chemical). Psychological techniques: cognitive strategies (e.g. attention diversion, non-pain imagery and cognitive redefinition); alternative techniques (e.g. acupuncture, stimulation therapy/tens)

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(b) "How can I get the doctor to understand how much pain I'm in?" Evaluate what psychologists have discovered about pain and include a discussion of the usefulness of self reports. [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: self reports. A self report can be a questionnaire or a subjective verbal response to a question. Pain has been measured using both these and so candidates should consider the strengths and weaknesses of either or both forms of self reports in relation to pain.

Munchausen syndrome derives from Baron Münchausen (1720–1797) who apparently told many exaggerated anecdotes about himself. Asher applied the name to people who misuse health services.

7 (a) Describe the main features of Munchausen syndrome. [6]

Syllabus:
- mis-using health services: Delay in seeking treatment (e.g. Safer, 1979). Misuse: hypochondriasis (e.g. Barlow and Durand, 1995), Munchausen syndrome (e.g. Aleem and Ajarim, 1995)

Expansion:
- according to Aleem and Ajarim, (1995) Munchausen syndrome has the following.
- **essential features**: Pathologic lying (pseudologia fantastica); peregrination (traveling or wandering); recurrent, feigned or simulated illness
- **supporting features:** borderline and/or antisocial personality traits; deprivation in childhood; equanimity for diagnostic procedures; equanimity for treatments or operations**;** evidence of self-induced physical signs; knowledge of or experience in a medical field; most likely to be male; multiple hospitalizations; multiple scars; (usually abdominal)**;** a police record; unusual or dramatic presentation.

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(b) Suggest how data can be gathered on the behaviour of a person with Munchausen Syndrome. [8]

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Imagine there are reports that breast and testicular cancer are on the increase. You have been asked to devise a strategy to encourage people to examine themselves because it is known that the discovery of a lump through self-examination significantly increases the chances of full recovery.

8 (a) Describe one study which has used the 'providing information' technique. [6]

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)

Expansion:

- providing information via media (e.g. Flay, 1987) 3 approaches: 1] provide negative info only; 2] for those who want to be helped provide first steps; 3] self help via tv audience. Study by Lewin (1992) healthy heart manual also relevant.

(b) Suggest a suitable health promotion campaign to encourage breast and testicular self-examination. [8]

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PSYCHOLOGY AND ENVIRONMENT

9 (a) Explain, in your own words, what is meant by 'personal space invasion'. [2]

Typically: According to Hall (1966) Personal space is "the region surrounding a person which they regard as psychologically theirs." Invasion of personal space often leads to discomfort, anger, or anxiety on the part of the victim.

(b) Describe a study that has used the simulation method of measuring personal space. [4]

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

Expansion:
- 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: Greeks, Scottish, Swedish, Southern Italian and USA.

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

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) Environmental determinism, biological determinism and now architectural determinism! Evaluate what psychologists have found out about architecture and include a discussion of the issue of determinism. [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,

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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: determinism. Determinism represents the view that all behaviours, all mental acts (thoughts, judgements, decisions etc), are determined by factors out of our control. For this question candidates should consider the extent to which architectural determinism applies.

How do people behave when they have to escape from an aeroplane in an emergency? You decide to investigate this for yourself, but you want to make the situation as true to real life as you can.

11 (a) Describe a laboratory experiment of how people behave in emergency situations. [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

Expansion:
- **Mintz** (**1951**) each participant pulls on a string attached to a cone in a bottle. Only one cone can be removed at a time. Cones must be removed before water fills bottle. Problem solved if participants take turns but they do not. All rush to get cone out first.
- **Kelley (1965)** also acceptable who used electric shocks to 'encourage' participants to escape quickly.
- **Kugihara (2007)** used a computer generated 'game' to investigate how people behave.

(b) Suggest how you would investigate how people behave in the emergency evacuation of an aeroplane. [8]

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

There have been a number of studies investigating crowding in animals. You decide to conduct a study of your own using an animal of your choice.

12 (a) Describe one laboratory study and one non-laboratory study of animal crowding done by psychologists. [6]

Syllabus:
- definitions, measurements and animal studies: Social and spatial density; crowding. Animal studies (e.g. Dubos, 1965 lemmings; Christian, 1960 deer; Calhoun, 1962 rats)

Expansion:
Dubos (1965) (field expt) claimed that lemmings jumped of cliff to reduce high social density.
Christian (1960) (field expt) deer put on James Island. Years later social density too high, so half herd died of stress.

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Calhoun (1962) rats in a behavioural sink. Much abnormal behaviour due to high social density.

Marks: 2 marks for description of each study.

(b) Suggest how you would investigate the effect of spatial density on animals in a laboratory. [8]

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

Comment:
Candidates cannot use Calhoun because he investigated high social density. Spatial density involves keeping number of animals the same and changing the physical space.

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PSYCHOLOGY AND ABNORMALITY

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

Typically: a phobia is an irrational, intense and persistent fear of 'things'. Things can be objects (such as buttons), animals, etc but phobias can also be fear of open spaces (agoraphobia). A mention of the word treatment is needed for both marks.

(b) Describe two ways in which phobias can be treated. [4]

Syllabus:

- treating phobias: Systematic desensitisation (Wolpe, 1958); flooding; applied tension (Ost et al, 1989); cognitive-behaviour therapy (Ost and Westling, 1995)

Expansion: (most likely)

- Ost and Westling (1995) investigated the effectiveness of **cognitive behavior therapy** (CBT), in the treatment of panic disorder. The out-patients in their sample were treated over 12 weekly sessions. The results revealed a significant reduction in the number of panic attacks in the patients, who were also panic free at the follow-up. They also found that the treatment led to reductions in generalized anxiety, depression and cognitive misinterpretations.
- Systematic desensitisation is a therapy based on the principles of classical conditioning. It was developed by Wolpe in 1958, specifically for the counter-conditioning fears, phobias and anxieties. The idea behind systematic desensitisation is to replace the conditioned fear which is maladaptive, with one of relaxation, which is an adaptive and desirable response. The pairing of the feared stimulus with relaxation induces the desensitisation.
- Applied tension (Ost et al, 1989).
- Flooding.

Marks: 2 marks for description of each treatment.

14 (a) Describe what psychologists have discovered about addiction and impulse control disorders. [8]

Syllabus:

- definitions, types and characteristics of addictions: Definitions (e.g. Griffiths, 1995); types e.g. alcoholism; impulse control (e.g. kleptomania, pyromania, compulsive gambling); physical and psychological dependence
- causes of addiction and impulse control disorders: Genetic (alcohol): Schuckit, 1985; Peters and Preedy, 2002; Biochemical: dopamine; behavioural: positive reinforcement; cognitive/personality
- coping with and reducing addiction and impulse control disorders: Behavioural e.g. token economy; aversion therapy (for alcoholism). Cognitive behaviour therapy (e.g. Kohn, 2000) for kleptomania

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(b) "No single explanation of impulse control disorders is adequate". Evaluate what psychologists have discovered about addiction and impulse control disorders 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 the different explanations of addiction and impulse control disorders.

You are a practising psychotherapist and you know how to treat patients and the underlying causes of disorders. One of your patients is a male who has a fear of women.

15 (a) Describe the main features of psychotherapy. [6]

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

Expansion:
- **psychoanalytic** psychotherapy encourages the verbalization of all the patient's thoughts, including **free associations**, fantasies, and dreams, from which the analyst formulates the nature of the unconscious conflicts which are causing the patient's symptoms and character problems.

(b) Suggest how you would use psychotherapy to help your patient to resolve his fear of women. [8]

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

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There are various competing explanations of schizophrenia, one of which is the biochemical explanation.

16 (a) Describe the biochemical explanation of schizophrenia. [6]

Syllabus:

- explanations of schizophrenia: genetic (e.g. Gottesman and Shields, 1972); biochemical (dopamine hypothesis); cognitive (e.g. Frith, 1992)

Expansion:

- schizophrenia is caused by changes in dopamine function in the brain. An excess of dopamine causes the neurones that use dopamine to fire too often and therefore transmit too many messages, overloading the system and causing the symptoms of schizophrenia.

(b) Suggest how you would investigate whether the cause of schizophrenia is genetic or biochemical. [8]

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

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PSYCHOLOGY AND ORGANISATIONS

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

Typically: this is as its name suggests and involves theories which looked at the actual behaviour shown by leaders to determine what behaviours were successful and what behaviours were not.

(b) Describe two behavioural theories of leadership. [4]

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).

Expansion:
- researchers at Ohio State University Halpin and Winer (1957) suggested *initiating structure* and *consideration*
- researchers at the University of Michigan identified *task-oriented behaviours* and *relationship-oriented behaviours.* This extended into Blake and Moulton's (1985) *Managerial Grid*.

Marks: 2 marks for description of each theory.

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

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 & 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.

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(b) We can motivate ourselves or the job can motivate us. Evaluate what psychologists have found out 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.

Workers in your organisation have a bad attitude towards work. Absenteeism is high and you need to know why. You decide to give the workers a questionnaire with a rating scale to find out if there bad attitude is related to poor job satisfaction.

19 (a) Suggest how you would measure job satisfaction in your organisation. [8]

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

(b) Explain the psychology on which your suggestion is based. [6]

Syllabus:
- measuring job satisfaction: Rating scales and questionnaires: e.g. job description index, Minnesota satisfaction questionnaire. Critical incidents: e.g. critical incidents technique. Interviews.
- attitudes to work: Theories of job satisfaction and dissatisfaction (e.g. Herzberg, 1959). Job withdrawal, absenteeism and sabotage. Organisational commitment. Promoting job satisfaction.

Expansion:
- job description index: measures satisfaction on: the job itself, promotion, pay, supervision and co-workers. It uses words or phrases and the answer is a yes, no or undecided.

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- Minnesota satisfaction questionnaire: uses a five point scale, very satisfied to very dissatisfied on twenty aspects of a job.
- Candidates can also focus on different types of questionnaire and scoring/rating scales.

As the manager of a large organisation you are concerned that there may be bias in the personnel selection procedure.

20 (a) Suggest how biases might be avoided in personnel selection decisions. [8]

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

Most likely:
Riggio (1990) suggests six possibilities:
- use structured (formal) interviews;
- make sure that the interview and questions are job related;
- ensure there is a rating or scoring system for applicant responses;
- use trained interviewers;
- use a team of interviewers rather than just one;
- use the interview time efficiently.

Added to this, adherence to equal opportunities should be evident throughout.

(b) Describe two personnel selection decision-making models. [6]

Syllabus:
- personnel selection decisions and job analysis: The selection of personnel: decision-making (e.g. multiple regression, multiple hurdle and multiple cut-off models). Biases in selection decisions and equal opportunities. Job descriptions and specifications. Job analysis techniques (e.g. FJA and PAQ).

Expansion:
- multiple regression model: combines each factor statistically
- multiple cut-off model: applicants must obtain a minimum score on each factor to be successful
- multiple hurdle model: decisions made at various stages (e.g. end of day 1 if interview is two day or even short-listing for interview.

Marks: 3 marks for description of each model.

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