

# **Markscheme**

**November 2023**

**Psychology**

**Higher and Standard level**

**Paper 2**

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## Paper 2 assessment criteria

### Criterion A — Focus on the question

[2]

To understand the requirements of the question students must identify the problem or issue being raised by the question. Students may simply identify the problem by restating the question or breaking down the question. Students who go beyond this by **explaining** the problem are showing that they understand the issues or problems.

Marks	Level descriptor
0	Does not reach the standard described by the descriptors below.
1	Identifies the problem/issue raised in the question.
2	Explains the problem/issue raised in the question.

### Criterion B — Knowledge and understanding

[6]

This criterion rewards students for demonstrating their knowledge and understanding of specific areas of psychology. It is important to credit **relevant** knowledge and understanding that is **targeted** at addressing the question and explained in sufficient detail.

Marks	Level descriptor
0	Does not reach the standard described by the descriptors below.
1 – 2	The response demonstrates limited relevant knowledge and understanding. Psychological terminology is used but with errors that hamper understanding.
3 – 4	The response demonstrates relevant knowledge and understanding but lacks detail. Psychological terminology is used but with errors that do not hamper understanding.
5 – 6	The response demonstrates relevant, detailed knowledge and understanding. Psychological terminology is used appropriately.

**Criterion C — Use of research to support answer**

**[6]**

Psychology is evidence based so it is expected that students will use their knowledge of research to support their argument. There is no prescription as to which or how many pieces of research are appropriate for their response. As such it becomes important that the research selected is **relevant** and useful in **supporting** the response. One piece of research that makes the points relevant to the answer is better than several pieces that repeat the same point over and over.

<b>Marks</b>	<b>Level descriptor</b>
<b>0</b>	Does not reach the standard described by the descriptors below.
<b>1 – 2</b>	Limited relevant psychological research is used in the response. Research selected serves to repeat points already made.
<b>3 – 4</b>	Relevant psychological research is used in support of the response and is partly explained. Research selected partially develops the argument.
<b>5 – 6</b>	Relevant psychological research is used in support of the response and is thoroughly explained. Research selected is effectively used to develop the argument.

## Criterion D — Critical thinking

[6]

This criterion credits students who demonstrate an inquiring and reflective attitude to their understanding of psychology. There are a number of areas where students may demonstrate critical thinking about the knowledge and understanding used in their responses and the research used to support that knowledge and understanding. The areas of critical thinking are:

- research design and methodologies
- triangulation
- assumptions and biases
- contradictory evidence or alternative theories or explanations
- areas of uncertainty.

These areas are not hierarchical and not all areas will be relevant in a response. In addition, students could demonstrate a very limited critique of methodologies, for example, and a well-developed evaluation of areas of uncertainty in the same response. As a result a holistic judgement of their achievement in this criterion should be made when awarding marks.

Marks	Level descriptor
0	Does not reach the standard described by the descriptors below.
1 – 2	There is limited critical thinking and the response is mainly descriptive. Evaluation or discussion, if present, is superficial.
3 – 4	The response contains critical thinking, but lacks development. Evaluation or discussion of most relevant areas is attempted but is not developed.
5 – 6	The response consistently demonstrates well-developed critical thinking. Evaluation or discussion of relevant areas is consistently well developed.

## Criterion E — Clarity and organization

[2]

This criterion credits students for presenting their response in a clear and organized manner. A good response would require no re-reading to understand the points made or the train of thought underpinning the argument.

Marks	Level descriptor
0	Does not reach the standard described by the descriptors below.
1	The answer demonstrates some organization and clarity, but this is not sustained throughout the response.
2	The answer demonstrates organization and clarity throughout the response.

## Abnormal psychology

1. Discuss **one or more** ethical considerations related to research on factors influencing diagnosis

[22]

*Refer to the paper 2 assessment criteria when awarding marks.*

The command term “discuss” requires candidates to offer a considered review that addresses various aspects of validity and/or reliability of diagnosis.

Candidates should address the ethical considerations related to research in abnormal psychology.

The ethical consideration(s) are likely to be from those presented in the ethical guideline section of the guide:

- informed consent
- confidentiality
- protection from psychological harm
- deception
- debriefing
- voluntary Participation
- role of the researcher.

Relevant research may include but are not limited to:

- Rosenhan's (1973) study on validity and reliability of diagnosis
- Beck et al.'s (1962) study on reliability of diagnosis between two psychiatrists
- Cooper et al.'s (1972) study on location and diagnosis
- Di Nardo et al.'s (1993) study on the reliability of the DSM III for the diagnosis of anxiety disorders
- Lipton and Simon's (1985) study on reliability of diagnosis for schizophrenia and mood disorders
- Kleinmann's (1984) study on cultural differences in diagnosis of depression in Chinese population
- Jenkins-Hall and Sacco's (1991) study on discrimination and its effect on validity of diagnosis.
- Rück et al.'s (2014) study on validity and reliability of chronic tic disorder and obsessive-compulsive disorder diagnoses in the Swedish National Patient Register.

Critical discussion may include, but is not limited to:

- the ethical considerations of conducting research in a different culture
- why deception is used
- the difficulties of ensuring confidentiality in research
- the role of informed consent when studying groups
- justifications as to why certain ethical guidelines were/were not followed
- changes over time in adherence to ethical standards/guidelines
- psychological harm caused by discrimination, labelling and stigma
- consequences of misdiagnosis in relation to ethical guidelines.

Candidates may address one ethical consideration to demonstrate depth of knowledge, or may address more than one ethical consideration to demonstrate breadth of knowledge. Both approaches are acceptable.

For Criterion B (quality of knowledge of ethical issues) examiners need to be aware that some candidates provide minimal information about ethical issues and focus on other aspects of studies or address ethical issues only in a general manner.

In awarding marks and establishing 'best fit' for knowledge and understanding examiners should take into account **level of detail** and **context**.

- If ethical considerations are only identified or described in generic terms, award marks in the lowest (1-2) band
- If ethical considerations are outlined within relevant studies, award marks in the mid (3-4) band
- If ethical considerations are described and clearly explained within relevant studies, award marks in the top (5-6) band.

If a candidate describes and discusses studies but does not focus on ethical considerations the response should be awarded up to a maximum of **[2]** for criterion D. All remaining criteria should be awarded marks according to the best fit approach.

2. Contrast the biological approach and the sociocultural approach to understanding the etiology of abnormal psychology.

[22]

*Refer to the paper 2 assessment criteria when awarding marks.*

The command term “contrast” requires candidates to give an account of the differences between the biological approach and the sociocultural approach to understanding the etiology of abnormal psychology, referring to both of them throughout.

Relevant studies may include but are not limited to:

- Kendler et al.’s (1991) study on genetic factors and bulimia nervosa
- Strober’s (2000) study on genetic factors and bulimia nervosa
- Sanders and Bazalgette’s (1993) study on media and body image
- Sharen and Sundar’s (2015) study on eating disorders in women
- Caspi’s (2003) study on genetic factors and stressful life events on depression
- Delgado and Moreno’s (2000) study on neurotransmitters and depression
- Marsala’s (1979) study on cultural conceptions of mental health
- Kleinman’s (1982) study on culture and depression
- Brown and Harris’s (1978) study on social origins of depression in women.

Critical discussion may include, but is not limited to:

- methodological and ethical considerations related to the research into the biological approach and sociocultural approach to understanding etiology
- the issue of reductionism versus holism
- how the findings of research have been interpreted and applied
- the accuracy and clarity of the concepts
- assumptions and biases
- areas of uncertainty (including research methods used and data uncertainties)
- supporting and/or contradictory evidence.

If the candidate provides only an implicit contrast, the response should be awarded up to a maximum of **[2]** for criterion D: critical thinking. All remaining criteria should be awarded marks according to the best fit approach.

If the candidate provides only a discussion of one approach to understanding the etiology of abnormal psychology, the response should be awarded up to a maximum of **[3]** for criterion B and. All remaining criteria should be awarded marks according to the best fit approach.



3. Discuss **one** biological treatment **and one** psychological treatment for **one or more** disorders. [22]

*Refer to the paper 2 assessment criteria when awarding marks.*

The command term “discuss” requires candidates to offer a considered review of the role of one biological treatment and one psychological treatment for one or more disorders.

The disorder(s) chosen is/are likely to come from the list in the guide:

- anxiety disorders
- depressive disorders
- obsessive compulsive disorders
- trauma and stress related disorders
- eating disorders.

Biological treatment could include, but is not limited to:

- drug therapy
- electroconvulsive therapy (ECT)
- brain stimulation.

Psychological treatment could include, but is not limited to:

- Interpersonal Therapy (IPT)
- Cognitive Behavioural Therapy (CBT)
- Exposure and Systematic desensitization
- Virtual Reality Therapy (VRT)
- Mindfulness-based Cognitive Therapy (MBCT)
- Group therapy.

Responses may refer to an interactionist approach or a biopsychosocial approach to treatment. These responses might refer to the interactionist approach as one treatment or argue that two treatments are used for helping patients with a disorder. Both approaches are equally acceptable and can be credited up to full marks.

Relevant studies may include, but are not limited to:

- Mason and Hargreaves’s (2011) qualitative investigation into the effectiveness of MBCT
- Butler *et al.*’s (2006) review of meta-analysis related to CBT efficacy
- Hodges and Oei’s (2007) discussion of the applicability of CBT to Chinese culture
- MacNamara *et al.*’s (2016) studying the effectiveness of SSRIs for PTSD
- Parsons and Rizzo’s (2008) meta-analysis of studies into the effectiveness of virtual reality therapy for PTSD.
- McLay *et al.*’s (2011) assessment of the effectiveness of VRT for post-traumatic stress disorder.

Discussion may include, but is not limited to:

- the effectiveness of the chosen treatment(s)
- the assumptions about etiology upon which the treatment is based with regard to the chosen disorder
- culture, gender, ethical, and/or practical considerations related to the use of treatment of the chosen disorder
- advantages and disadvantages of the treatment
- comparing and/or contrasting the two different treatments.

If a candidate discusses more than one biological treatment or more than one psychological treatment, credit should be given only to the first treatment.

If the candidate provides only a discussion of one treatment for one or more disorders, the response should be awarded up to **[3]** for criterion B. All remaining criteria should be awarded marks according to the best fit approach.

## Developmental psychology

4. Discuss the impact of childhood trauma **and** resilience on development. [22]

*Refer to the paper 2 assessment criteria when awarding marks.*

The command term “discuss” requires candidates to offer a considered review of the impact of childhood trauma and resilience on development. Candidates may address the impact of trauma and resilience in childhood and/or in any later stage of life.

Relevant studies include, but are not limited to:

- the effects of deprivation in critical periods (the cases of Genie/Anna/Isabelle)
- PTSD as a consequence of trauma (Feldman and Vengrober, 2011; Luo *et al.*, 2012)
- Rutter *et al.*'s (2001) and Rutter's (1981) studies on the consequences of deprivation
- Cockett and Tripp's (1994) study on long-term attachment deprivation effects
- Koluchova's case study showing the possibility of reversing the effects of deprivation
- Egeland *et al.*'s (1993) study on resilience as a process
- Wu *et al.*'s (2013) study on understanding resilience
- Farah *et al.*'s (2008) study on environmental stimulation, parental nurturance and cognitive development
- Kar *et al.*'s (2008) study on cognitive development in children with chronic protein energy malnutrition.

Critical discussion may include, but is not limited to:

- methodological and ethical considerations related to the research into childhood trauma and resilience on development
- how the findings of research have been interpreted and applied
- implications of the findings
- the accuracy and clarity of the concepts
- assumptions and biases
- areas of uncertainty
- supporting and/or contradictory evidence
- alternative theories/explanations.

Both childhood trauma and resilience should be addressed in the response. If only childhood trauma or only resilience is addressed, award up to a maximum of [3] in criterion B, knowledge and understanding. All remaining criteria should be awarded marks according to the best-fit approach.

If a candidate solely describes/outlines childhood trauma and/or resilience, but without linking them to development the response should be awarded up to a maximum [2] for criterion B.

If solely the impact of poverty on development is addressed with no reference to trauma or resilience, up to a maximum of [2] should be awarded for criterion B. All remaining criteria should be awarded marks according to the best-fit approach.

5. Evaluate **one or more** theories and/or studies relevant to the development of gender identity and/or social roles. [22]

*Refer to the paper 2 assessment criteria when awarding marks.*

The command term “evaluate” requires candidates to make an appraisal of one or more theories/studies related to the development of gender identity and/or social roles by weighing up the strengths and limitations of the theories/studies. Although a discussion of both strengths and limitations is required, it does not have to be evenly balanced to gain high marks.

Relevant theories related to gender identity and social roles may include, but are not limited to:

- gender schema theory that stresses the key role of cognitive processes in the development of gender roles
- social learning theory that highlights the importance of the social environment and emphasizes the potency of observational and modelling processes
- theory of psychosexual differentiation that is based on the assumption that gender roles are related to genetic sex determined by chromosomes
- evolutionary theory that attempts to locate gender role differences in a historical evolutionary context
- theory of social roles related to socialization and division of labour within society.

Relevant studies related to gender identity and social roles may include, but are not limited to:

- Martin and Halvorson’s (1983) study showing the role of gender schemas on gender roles
- Witt (1997); Fagot’s (1978) studies showing the influence of parents on gender roles
- Neculaesei (2015); Mead’s (1935) studies showing that gender roles depend upon the society
- Money and Ehrhardt’s (1972) study claiming that children are gender neutral at birth
- Eagly and Wood’s (2016) study on social role theory of sex differences.

Evaluation of theories may include but is not limited to:

- methodological and ethical considerations of empirical findings supporting the theory
- cultural and gender considerations
- the accuracy and clarity of the concepts
- contrary findings or explanations
- the productivity of the theory in generating psychological research
- assumptions and biases.

Evaluation of the selected studies may include, but is not limited to:

- methodological and ethical considerations
- cultural and gender considerations
- supporting and/or contradictory findings
- the applications of the empirical findings
- how the findings of research have been interpreted
- implications of the findings.

If the candidate addresses only strengths or only limitations, the response should be awarded up to a maximum of [3] for criterion D: critical thinking. All remaining criteria should be awarded marks according to the best fit approach.

For responses addressing only studies marks should be awarded in the following manner:

in criterion A we assess to what extent is the response focused on the question. Responses that are generic, lack a focus on the specific question and seem as pre-prepared essays of relevance to the general topic (but not to evaluation of one or more studies) should be awarded **[0]** for this criterion. If the response identifies which studies will be evaluated but there is also extra information that is not relevant or necessary for the specific question then **[1]** should be awarded. Responses that are clearly focused on evaluating one or more studies should be awarded **[2]**.

Marks awarded for criterion B should refer to definitions of terms and concepts. Overall this could include some knowledge of topic but more specifically knowledge and understanding related to research methods and ethics of chosen studies.

Marks for criterion B should be awarded as follows:

- 1–2 General knowledge of topic (development of gender identity and/or social roles)
- 3–4 Knowledge of general research terms and concepts is provided but lacks detail. Some minor errors might be present
- 5–6 Relevant knowledge of specific research methods material is utilized and concepts are defined within the context of the specific study.

Marks awarded for criterion C assess the quality of the description of as study/studies and assess how well the student linked the findings of the study to the question - this doesn't have to be very sophisticated or long for these questions but still the aim or the conclusion should be linked to the topic of the specific question.

Criterion D assesses how well the student is explaining strengths and limitations of the study/studies.

6. To what extent is development as a learner influenced by sociocultural factors? [22]

*Refer to the paper 2 assessment criteria when awarding marks.*

The command term “to what extent” requires candidates to consider the sociocultural factors contributing to development as a learner.

Relevant studies may include, but are not limited to:

- Immordino-Yang et al.’s (2019) study on social-emotional factors in brain development (Nurturing Nature)
- McEwen et al.’s (2012) study on how the social environment affects cognitive development
- Giedd’s (2004) study on structural magnetic resonance imaging of the adolescent brain
- Becht et al.’s (2021) study on individual differences in social brain development and friendship quality
- Otero’s (1996) study on poverty, cultural disadvantage and brain development of Mexican pre-school children
- Jernigan’s (2013) study on postnatal brain development
- Kraus et al.’s (2012) study on cognitive factors and auditory working memory
- Reinicke’s (2006) study on Danish fathers and children’s cognitive development
- Research testing Vygotsky’s theory.

Critical discussion may include, but is not limited to:

- alternative theories/explanations (Piaget, brain development theory)
- methodological and ethical considerations
- how the findings of research have been interpreted and applied
- implications of the findings
- the accuracy and clarity of the concepts
- assumptions and biases
- areas of uncertainty
- supporting and/or contradictory evidence
- practical applications, such as in education and parenting.

## Health psychology

7. Discuss the biopsychosocial model of health and well-being. [22]

*Refer to the paper 2 assessment criteria when awarding marks.*

The command term “discuss” requires candidates to make a considered review of the biopsychosocial model of health and well-being.

The biopsychosocial model uses a holistic approach to understanding health and illness that incorporates sociocultural factors, psychological factors, biological factors and individual behaviours.

The biopsychosocial model includes the following factors:

- biological factors such as genetics, age, sex, nutrition and previous illnesses
- psychological factors, such as health beliefs, habits, health knowledge, coping skills or strategies.
- sociocultural factors such as socio-economic status, peer pressure, family pressure, social norms, social support and availability of health care facilities.

Relevant research includes, but is not limited to:

- Olson and Strawderman’s (2003) study investigating how the biopsychosocial model predicts gestational weight gain
- Gatchel and Peng et al.’s (2007) review of the biopsychosocial approach to chronic pain
- Alonso’s (2004) study on the biopsychosocial model and the evolution of health concepts
- Hoffman and Driscoll’s (2000) study on health promotion and disease prevention using the biopsychosocial model.

Critical discussion points may include, but are not limited to:

- methodological and ethical considerations
- cultural/gender considerations
- usefulness of application
- assumptions and biases
- areas of uncertainty
- comparison and/or contrast with alternative model (e.g. the biomedical model).

8. Discuss **one or more** explanations of health problems.

[22]

*Refer to the paper 2 assessment criteria when awarding marks.*

The command term “discuss” requires candidates to make a considered review of ethical considerations in research related to health problems.

The health problem(s) likely to be presented include: stress, addiction, obesity, chronic pain, and/or sexual health

Explanations for health problems may include, but are not limited to:

- the biopsychosocial model combines biological, psychological, social, and behavioural causes and treatments for health problems
- social and cultural factors involved in determining health and illness
- risk and protective factors in health
- the biomedical model, which focuses primarily on biological factors.

Relevant studies include but are not limited to:

- Steptoe and Marmot’s (2003) survey on the interaction of psychological, social and physiological aspects of stress
- Link and Phelan’s (1995) study on social conditions as fundamental causes of disease
- Bauman et al.’s (1990) correlational study on likelihood of smoking in adolescence where parents also smoke

Critical discussion points may include, but are not limited to:

- methodological and ethical considerations in research related to health problems
- how the findings of research have been interpreted and applied
- implications of the findings
- assumptions and biases in explanations of health problems
- areas of uncertainty
- comparison and/or contrast of different explanations of specific health problems
- practical applications of findings.

If a candidate solely focuses on explanations of mental health issues with no explicit link to health problems the response should be awarded up to a maximum of **[2]** for criterion B. All remaining criteria should be awarded marks according to the best fit approach.



9. Discuss the effectiveness of **one or more** health promotion programmes. [22]

*Refer to the paper 2 assessment criteria when awarding marks.*

The command term “discuss” requires candidates to make a considered review of the effectiveness of health promotion programmes. The effectiveness relates to the success rate of any health promotion programme.

Health promotion programmes are an attempt to promote health behaviour. Health promotion programmes are those initiatives designed to assist people in gaining control over and improving their own health. These may be public or a government programmes, or may be privately sponsored. In addition, these programmes may be developed on an individual, local, national, or international level.

Examples of health promotion programmes may include, but are not limited to:

- food labelling programmes
- stress reduction programmes such as MBSR or yoga
- health education campaigns such as the TRUTH anti-tobacco campaign
- NHS’s ‘Healthy Child Programme’; keeping children healthy and safe (UK)
- public health campaigns designed to change beliefs and attitudes
- NHS Diabetes Prevention Programme (UK)
- taxes and/or subsidies upon products such as sugar, tobacco or alcohol
- National Tobacco Campaign (Australia).

Relevant studies may include, but are not limited to:

- Peckmann and Reibling’s (2006) study of the effectiveness of fear campaigns
- Yee et al.’s (2006) study of effectiveness of strategies to change behaviours related to obesity
- Sly et al.’s (2002) survey on community based anti-smoking promotion among teens
- Holm’s (2002) survey on the efficiency of health campaigns
- Schum and Gould’s (2007) study of why health campaigns are effective
- Morris and Wilson (2005) ‘Investigating smoking behaviours and attitudes of nurses and nursing assistants using the Health Belief Model’
- Prochaska and Di Clemente’s (1983) ‘Longitudinal research on the effectiveness of the Integrative Model of change for smoking behaviour’
- Marlatt and Gordon’s (1985) ‘Relapse prevention: maintenance strategies in the treatment of addictive Behaviors’
- Huhman et al.’s (2007) evaluation of a national physical activity intervention for children: VERB campaign.

Critical discussion may include, but is not limited to:

- methodological and ethical considerations related to the research into the effectiveness of health promotion programmes
- how the findings of research have been interpreted and applied
- implications of the findings
- the accuracy and clarity of the concepts (that is, health promotion programmes)
- the productivity of the theory in generating psychological research
- assumptions and biases
- areas of uncertainty
- supporting and/or contradictory evidence
- alternative theories/explanations
- comparing and contrasting different health promotion programmes

Candidates may discuss one health promotion programme in order to demonstrate depth of knowledge, or may discuss a larger number of health promotion programmes in order to demonstrate breadth of knowledge. Both approaches are equally acceptable.

If a candidate evaluates health promotion programmes in general with no reference to their effectiveness the response should be awarded up to a maximum of **[2]** for criterion D. All remaining criteria should be awarded marks according to the best fit approach.

## Psychology of human relationships

10. Discuss **one or more** explanations for why relationships change and/or end. [22]

*Refer to the paper 2 assessment criteria when awarding marks.*

The command term “discuss” requires candidates to offer a considered review of explanations for why relationships change and/or end.

Explanations of why relationships change or end may include, but are not limited to:

- social exchange theory
- equity theory
- attribution theory
- evolutionary explanations such as mate retention
- patterns of communication
- attachment styles
- fatal attraction theory
- other theories which show progression into a relationship or development/change within a relationship.

Relevant studies may include, but are not limited to:

- Flora and Seagrin’s (2003) study on the role of perception of the relationship
- Feinlee’s (1995, 1998) study investigating fatal attraction theory
- Levenson, Carstensen and Gottman’s (1994) and Gottman and Levenson’s (1992) study on communication patterns, physiological arousal, and marital satisfaction
- Buss and Shackelford’s (1997) study on mate retention behaviour in men and women.
- Fincham *et al.*’s (2000) and Graham and Conoley (2006) study on the relationship between attributions and marital satisfaction.

Discussion may include, but is not limited to:

- examining underlying assumptions and biases of relationships
- supporting and/or contradictory evidence
- methodological and/or ethical considerations related to research into the explanations for why relationships change or end
- cultural/gender considerations
- practical applications (relationship counselling).

Responses that focus specifically on formation of relationships and make no reference to change and/or end of relationships are not eligible for credit. However, it is appropriate to discuss how factors that affect the formation of relationships may affect the maintenance and change of a relationship (e.g. according to fatal attraction theory the factors that bring us together are likely to cause the break up of the relationship later on). For these responses the full range of marks can be awarded on all criteria.

**11. Evaluate **one or more** studies investigating origins of conflict and/or conflict resolution. [22]**

*Refer to the paper 2 assessment criteria when awarding marks.*

The command term “evaluate” requires candidates to make an appraisal of one or more studies investigating origins of conflict and/or conflict resolution by weighing up the strengths and limitations. The focus of the evaluation should be upon the study/studies and not on the origin of conflict and/or conflict resolution. Although a discussion of both strengths and limitations is required, it does not have to be evenly balanced to gain high marks.

Relevant studies may include, but are not limited to:

- Sherif *et al.*'s (1961) field experiment on competition and conflict resolution between groups
- Chambers and De Dreu's (2014) study on conflict and negotiation
- Sternberg and Dobson's (1987) study on resolution of interpersonal conflicts
- Sternberg and Soriano's (1984) study on styles of conflict resolution.

Other studies may be used provided the link is explicit (e.g if Tajfel and Turner's study on SIT is used responses need to explicitly state that the findings suggest that when individuals identify with a group, they are likely to develop biased attitudes favoring their in-group and discriminating against out-groups which will likely lead to conflict).

Evaluation of the selected studies may include, but is not limited to:

- methodological and ethical considerations
- cultural and gender considerations
- supporting and/or contradictory findings
- the applications of the empirical findings
- how the findings of research have been interpreted
- implications of the findings.

If the candidate addresses only strengths or only limitations, the response should be awarded up to a maximum of **[3]** for criterion D: critical thinking. All remaining criteria should be awarded marks according to the best fit approach.

In questions that ask for evaluation of studies, in criterion A we assess to what extent is the response focused on the question. Responses that are generic, lack a focus on the specific question and seem as pre-prepared essays of relevance to the general topic (but not to evaluation of one or more studies) should be awarded **[0]** for this criterion. If the response identifies which studies will be evaluated but there is also extra information that is not relevant or necessary for the specific question then **[1]** should be awarded. Responses that are clearly focused on evaluating one or more studies should be awarded **[2]**.

Marks awarded for criterion B should refer to definitions of terms and concepts. Overall this could include some knowledge of topic but more specifically knowledge and understanding related to research methods and ethics of chosen studies.

Marks for criterion B should be awarded as follows:

- 1–2 General knowledge of topic (origins of conflict and/or conflict resolution)
- 3–4 Knowledge of general research terms and concepts is provided but lacks detail. Some minor errors might be present
- 5–6 Relevant knowledge of specific research methods material is utilized and concepts are defined within the context of the specific study.

Marks awarded for criterion C assess the quality of the description of as study/studies and assess how well the student linked the findings of the study to the question - this doesn't have to

be very sophisticated or long for these questions but still the aim or the conclusion should be linked to the topic of the specific question.

Criterion D assesses how well the student is explaining strengths and limitations of the study/studies.

12. To what extent is the understanding of social responsibility (by-standerism, prosocial behaviour) influenced by biological factors? [22]

*Refer to the paper 2 assessment criteria when awarding marks.*

The command term “to what extent” requires candidates to consider the contribution of biological factors in the understanding of social responsibility.

It is appropriate and useful for candidates to address cognitive and/or sociocultural factors influencing the understanding of social responsibility in order to respond to the command term “to what extent”.

Responses may refer to biological factors and/or theories related to prosocial behaviour including, but not limited to:

- Dawkins’ selfish gene theory
- Kin selection theory

Relevant research may include, but is not limited to:

- Dawkins (1976) on evolutionary explanation for social responsibility
- Hamilton (1964) on Kin Selection theory and social responsibility
- Simmons et al. (1977) on Kin Selection theory and kidney donation
- Batson et al. (1981) on limitations of Kin Selection theory
- Axelrod and Hamilton (1981) on reciprocity and social responsibility
- Trivers (1971) on reciprocity altruism theory
- Latané and Darley (1968) on by-stander behaviour
- Schaller and Cialdini (1988) on negative-state relief model and social responsibility
- Miller et al. (1990) on culture and social responsibility.

Responses referring to research with animals are relevant but must be linked to social responsibility in humans (altruism, helping behaviour). Responses that do not explicitly make any link to human behaviour should be awarded up to a maximum of [3] for criterion D: critical thinking. All remaining criteria should be awarded marks according to the best-fit approach.

Discussion may include, but is not limited to:

- methodological and ethical considerations
  - how the findings of research have been interpreted and applied
  - implications of the findings
  - cultural and gender considerations
  - nature and nurture
  - free will vs. determinism
  - the accuracy and clarity of the concepts
  - assumptions and biases
  - areas of uncertainty
  - supporting and/or contradictory evidence
  - comparison and/or contrast of non-biological and biological factors
  - practical applications (ways of promoting prosocial behavior).
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