

CAMBRIDGE
INTERNATIONAL EXAMINATIONS

JUNE 2002

GCE ADVANCED LEVEL

MARK SCHEME

MAXIMUM MARK : 70

SYLLABUS/COMPONENT : 9698/3

PSYCHOLOGY



UNIVERSITY of CAMBRIDGE
Local Examinations Syndicate

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PSYCHOLOGY AND EDUCATION

Section A

Q1a	Explain, in your own words, what is meant by the term 'special educational need'.	2
	Typically: educational needs of those who are statistically not normal including those who are at either end of the normal distribution curve.	
Q1b	Describe one type of special educational need.	3
	One type may be children who are gifted ; a second may be children at the other end of the scale who have learning difficulties or disabilities .	
Q1c	Describe two ways in which those with special educational need could be educated.	6
	For gifted: 1] acceleration : bright children are promoted to a higher class than normal. Good intellectually but bad socially and emotionally. 2] segregation : bright children selected for particular schools. This may result in academic success in a particular ability but it is unfair, divisive and hard to implement. 3] enrichment : done within a normal classroom and can involve extra-curricular activity and individualised learning programmes with independent learning possible. For Problematic: segregation or integration .	

Q2a	Explain, in your own words, what is meant by the term 'learning style'.	2
	Typically: the way in which a child learns best: may be formal or may be via discovery; may be practically based or reflective. Learning styles are for learner and teaching styles (not credited here) are the way in which teachers present material to be learned.	
Q2b	Describe one way in which learning styles have been measured.	3
	Most likely: Kolb's 'kite' model	
Q2c	Describe two ways in which learning effectiveness can be improved.	6
	Any appropriate answer based on student study skills. Can be based on revision programmes or memory techniques eg 4PQR.	

Section B

Q3a	Describe how one psychological perspective of your choice has been applied to education.	8
	<p>Generally behaviourists focus on behaviour!, cognitivists on cognition and humanists on the person.</p> <p>Candidates will be tempted to provide details of early behaviourist approach (eg Pavlov & Skinner). Although this is legitimate in that it aids <i>understanding</i>, the question specifically requires applications, and so this should not be credited under <i>knowledge</i>.</p> <p>Any application of learning theory is legitimate. Possibilities include: Direct application of positive and negative reinforcement to shape behaviour; possible use of schedules. Programmed learning as an approach to teaching and learning Eg Bloom's mastery learning and Keller's personalised system of instruction. Rote learning versus discovery learning. Use of computers. Behaviour modification applied to (a) children who misbehave and (b) children who are disadvantaged. Social learning (eg Bandura) using teachers or other children as a role models.</p> <p>For the cognitive approach typically candidates will include the work of Piaget. His contribution is significant and covers a wide range of aspects such as readiness for teaching mathematics and the type of book a child should read at a particular age. More typically will be the readiness approach, a central component of discovery learning. If candidates focus on his theory of cognitive development without explicitly linking it to education, this strategy should receive no credit. Piaget is not the only relevant psychologist. Gagne (1977) outlines a number of cognitive strategies; Bruner (1966) has looked at discovery learning; Ausubel (1977) proposes a theory of meaningful verbal learning (subsumption).</p> <p>For the humanistic approach (eg 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</p>	

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	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.	
Q3b	Evaluate how your chosen psychological perspective has been applied to education.	10
	<p><i>NOTE: any evaluative point can receive credit; the hints are for guidance only.</i></p> <ul style="list-style-type: none"> • the strengths and weaknesses of psychological perspectives; • the implications the perspectives have for teachers; • whether theory applies in practice; • contrasting alternative perspectives. 	
Q3c	Using a different psychological perspective from the one chosen in part (a), suggest how it could be used to teach science.	
	<p><i>Mark scheme guidelines apply in that any reasonable suggestion is acceptable.</i></p> <p>Here candidates have to apply what they have written about in part (a) to a classroom situation in relation to teaching science for which they are unlikely to have prepared. This will therefore test their knowledge, understanding and application. They are required to consider one approach so if two or more approaches (not aspects of the same approach) are mentioned, the best one is to be credited.</p>	6
Q4a	Describe what psychologists have found out about disruptive behaviour in schools.	8
	<p>A definition of disruptive behaviour might be a good place to start but right away there are problems. Who does the defining? Major types are: conduct (eg distracting, attention-seeking, calling out, out-of-seat); anxiety & withdrawal; immaturity and verbal and physical aggression; bullying. School refusers disrupt themselves and is legitimate. Persistently disruptive children are often labelled as EBD. Candidates may then provide an explanation for these behaviours which may be behavioural, cognitive or social. Specific causes include ADHD</p>	
Q4b	Evaluate what psychologists have found out about disruptive behaviour in schools.	10
	<p><i>NOTE: any evaluative point can receive credit; the hints are for guidance only.</i></p> <ul style="list-style-type: none"> • definitions and types of problems; • the methods used by psychologists to assess problem behaviour; • ethical issues; • the challenges a problem child presents for teachers and educators. 	
Q4c	Suggest how a teacher may prevent disruptive behaviour from happening.	6
	<p><i>Mark scheme guidelines apply in that any reasonable suggestion is acceptable.</i></p> <p>There are a number of Preventative (NOT corrective) strategies:</p> <ol style="list-style-type: none"> (1) Care for children: know their names and other relevant information. (2) Give legitimate praise. (Marland, 1975) (3) Use humour. (4) Establish 'with-it-ness' (Kounin, 1970) (5) Shape the learning environment. (6) Maintain classroom activity. (Stodolsky, 1984 lists 17 activities!) (7) Maintain democratic procedures (eg Webster, 1968). (8) Set rules <p>Fontana (1981) lists 16 common-sense aspects of classroom management which lend themselves for consideration.</p>	

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PSYCHOLOGY AND ENVIRONMENT

Section A

Q5a	Explain, in your own words, what is meant by the term 'technological catastrophe'.	2
	Typically: event with dire consequences that concerns man-made structures (as opposed to natural disasters).	
Q5b	Describe two technological catastrophes.	6
	Any two events (recent or past) that are not natural events.	
Q5c	Describe one way in which psychologists can help after a technological catastrophe has happened.	3
	Most likely: counselling most likely for PTSD.	

Q6a	Explain, in your own words, what is meant by the term 'territory'.	2
	Typically: a portion of land belonging to an individual or group that can be defended. Land makes territory different from personal space.	
Q6b	Describe two types of territory and give an example of each.	6
	Three types: primary : eg house; secondary (semi public) : eg desk in classroom; public eg seat on bus	
Q6c	Describe one way in which people defend semi-public (secondary territory).	3
	Most likely: use of territorial markers such as bag on desk or item of clothing on seat.	

Section B

Q7a	Describe what psychologists have discovered about noise.	8
	<p>Candidates may well begin with definitions and types. As with other environment areas, the syllabus states performance, social behaviour and health.</p> <p>Health: McCarthy et al (1992) noise affects the immune system; Doring et al (1980) noise causes ulcers; Cohen et al (1986) found increased blood pressure in children at school on flight path. Many, many other studies. Is no direct link - noise may be stressful and stress causes health problems. Candidates may also look at mental health.</p> <p>Performance: 3 categories to consider: (a) effects during exposure; (b) after-effects; (c) effects on children. (a) Lab studies have shown mixed results with a wide range of variables. Effect depends on: volume, predictability & controllability; type of task performed; stress tolerance; individual personality.</p> <p>(b) Even if performance is not affected at time of study, effect of noise may continue for some time and hinder later performance. eg Glass et al (1969); Sherrod et al (1977). (c) Hambrick-Dixon (1986); Cohen et al (1986) compared children from noisy and quiet schools near Los Angeles airport. Found those from noisy environment suffered from learned helplessness lack of achievement and distractibility. Evans et al (1993) study of those near Munich airport. Also problems.</p> <p>Social behaviour: aggression: likely to be popular as many unethical lab studies involving electric shock. eg Geen & O'Neal (1969); Donnerstein & Wilson (1976).</p> <p>Helping: also popular with both lab and natural studies by Matthews & Canon (1975) and Page (1977). Some candidates may look at attraction but evidence here is questionable.</p>	
Q7b	Evaluate what psychologists have discovered about noise.	10
	<p><i>NOTE: any evaluative point can receive credit; the hints are for guidance only.</i></p> <ul style="list-style-type: none"> • points about defining and categorising noise/air pollution; • cultural and individual differences in perception of problem; • comparing and contrasting laboratory with natural studies; • the methods psychologists use to gain their evidence. 	
Q7c	Noise is generally considered to be negative sound. Giving reasons for your answer, suggest ways in which positive sound, such as music, can be beneficial.	6
	Candidates could focus on music played in doctor/dental waiting rooms to distract patients from worry about what may lie ahead. They could focus on Muzak , used in shops, supermarkets, etc to encourage people to buy certain products or attract a certain type of client. The work of North (1997) is relevant. Candidates could focus on the use of music in studying (Mozart effect) or any other aspect of behaviour.	

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Q8a	Describe what psychologists have discovered about climate and weather.	8
	<p>Candidates may begin with a distinction between weather, relatively rapidly changing conditions and climate, average weather conditions over a period of time. They may consider Climatological determinism, Probabilism and Possibilism. Inclusion of this would be impressive.</p> <p>Candidates could consider any aspect such as temperature, wind, storms (hurricanes, tornadoes) altitude and anything else that pertains. Note that the syllabus refers to performance, health and social behaviour so that should at least limit coverage a little.</p> <p>Effect of heat is likely to be most common. Performance: Lots of lab studies show conflicting results mainly due to variations in design. Also many field studies eg Pepler (1972) in classrooms and Adam (1967) with soldiers. Still individual differences. Bell suggests an arousal response (inverted U theory); Provins (1966) suggests differing core temperatures and that heat affects attention. Wyndham believes in adaptation levels. Social behaviour: aggression: the long hot summer effect: heat causes riots (Goranson & King (1970) and US riot commission (1968) but only in 1967 and only in US. Baron & Bell (1976) propose negative affect-escape model to explain it and lab studies in support. Many other studies on heat & aggression. Heat also may or may not affect helping (eg Page, 1978) and attraction (eg Griffit, 1970). Health: heat may cause heat exhaustion (sweating) or heat stroke (no sweating) or heart attacks. Cold temperature can also be covered. Causes hypothermia, frostbite, etc. Also affects performance and social behaviour (too cold to help or be aggressive). Not a lot on wind. Causes fear due to potential destruction. Increases helping in summer and decreases in winter (Cunningham, 1979). Cohn (1993) wind decreases domestic violence.</p> <p>Barometric pressure (eg pilots, divers) a possibility but not a lot of material available. Candidates may also, legitimately, consider the effects of the moon phases on behaviour; the effects of sunlight and seasonal affective disorder.</p>	
Q8b	Evaluate what psychologists have discovered about climate and weather.	10
	<p><i>NOTE: any evaluative point can receive credit; the hints are for guidance only.</i></p> <ul style="list-style-type: none"> • the methods used by psychologists to study climate and weather; • issues relating to individual and/or cultural differences; • the implications the evidence has for society; • comparing and contrasting theoretical explanations. 	
Q8c	You are designing the climate and weather for planet Mars. Giving reasons for your answer, say what climate and weather you would create for people to live comfortably.	6
	Any appropriate suggestion to receive credit - any aspect from Q8a above related to new planet.	

PSYCHOLOGY AND HEALTH

Section A

Q9a	Explain, in your own words, what is meant by the term 'adherence to medical advice'.	2
	Typically: the extent to which people carry out the instructions given to them by a medical practitioner.	
Q9b	Outline two ways in which adherence to medical advice can be measured.	6
	<p>Any two from:</p> <p>[1] Subjective [a] ask practitioner to estimate; [b] ask patient to estimate (self report); [c] estimate of family member/medical personnel.</p> <p>[2] Objective [a] Quantity accounting (pill count) where number of pills remaining is measured. [b] Medication dispensers which record and count times when used. [c] Biochemical tests such as blood or urine sample. [d] Tracer/marker method add tracer to medication eg riboflavin (vitamin B2) fluoresces under ultraviolet light. [e] recording number of appointments kept.</p>	
Q9c	Describe one study which shows how adherence to medical advice can be improved.	3
	<p>Most likely possibilities include:</p> <p>(a) changing physician behaviour (DiMatteo & DiNicola, 1982); sending doctors on</p>	

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	<p>training courses;</p> <p>(b) changing communication style (Inui et al, 1976);</p> <p>(c) change information presentation techniques (Ley et al, (1982);</p> <p>(d) have the person state they will comply (Kulik & Carlino, 1987);</p> <p>(e) provide social support (Jenkins, 1979) and increase supervision (McKenney et al, 1973).</p> <p>(f) Behavioural methods: tailor the treatment; give prompts & reminders; encourage self monitoring; provide targets & contracts.</p>	
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Q10a	Explain, in your own words, what is meant by the term 'stress'.	2
	Typically: so many possible definitions: could focus on the cause of the stress (stressor) or the stress response (eg emotional component) which would be preferable to a very long, all encompassing textbook quote.	
Q10b	Describe one cause of stress.	3
	Most likely: again so many possibilities but answers must be psychologically based: eg type A personality; daily hassles (all encompassing); life events (all encompassing).	
Q10c	Describe two ways in which stress can be managed.	6
	Most likely: reduction of stressor; drugs; any behavioural, cognitive or cognitive-behavioural strategy eg biofeedback, redefinition, imagery.	

Section B

Q11a	Describe what psychologists have learned about health and safety.	8
	<p>Answers must be based on psychological evidence. Candidates may focus on:</p> <p>Definitions of accidents, errors, etc</p> <p>Causes of accidents Theory A (people): eg accident proneness and/or accident prone personality; human error: illusion of invulnerability and/or risk homeostasis; transient states eg sleep, biorhythms, etc.</p> <p>Theory B (systems): eg substitution errors and systems failures.</p>	
Q11b	Evaluate what psychologists have learned about health and safety.	10
	<p><i>NOTE: any evaluative point can receive credit; the hints are for guidance only.</i></p> <ul style="list-style-type: none"> • the methods used by psychologists to study health and safety; • issues relating to individual and/or cultural differences; • the implications the evidence has for society design; • comparing and contrasting theoretical explanations; • the methods psychologists use to gather data. 	
Q11c	Using psychological evidence, outline ways in which safety behaviours can be promoted.	6
	Under global heading of health promotion campaigns come many individual approaches which could take place in schools, worksites or communities. Campaigns could also be specific such as that concerning chip pan fires. Answers must be psychological.	

Q12a	Describe what psychologists have discovered about the patient-practitioner relationship.	8
	<p>Question stresses practitioners and patients and so should answers. Answers could focus on:</p> <p>Lorber (1975) distinguishes between 'good' and 'bad' patients;</p> <p>Diagnosis & information processing (Elstein & Bordage (1979) type 1 & type 2 errors;</p> <p>Interpersonal skills: non-verbal communications</p> <p>Communication skills: accent, native language</p> <p>Provision of information a. about illness; b. about diagnosis & treatment;</p> <p>Organisation of setting eg seating positions</p> <p>Attitudes of doctor (practitioner style) and attitudes of patients (patient style)</p> <p>health beliefs</p>	
Q12b	Evaluate what psychologists have discovered about the patient-practitioner relationship.	10
	<p><i>NOTE: any evaluative point can receive credit; the hints are for guidance only.</i></p> <ul style="list-style-type: none"> • how psychologists gained their evidence; • reasons why proposal of theories/models is difficult in this area; • implications the evidence has for health care; • psychological perspectives related to counselling situations. 	
Q12c	Using your psychological knowledge, suggest ways in which the patient-practitioner	6

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	relationship can be improved.	
	Candidates could focus either on improving the patient 'end' or that of the practitioner. Practitioner more logical as they could attend training courses (eg Inui) or they could be more patient-centred rather than doctor-centred. Any appropriate suggestion based on psychological evidence is acceptable.	

PSYCHOLOGY AND ABNORMALITY

Section A

Q13a	Explain, in your own words, what is meant by the term 'abnormal affect due to trauma'.	2
	Typically: relates to the major psychological or emotional effect a serious traumatic event has on a person.	
Q13b	Describe two types of trauma response.	6
	Most likely: PTSD (post traumatic stress disorder), amnesia, fugue.	
Q13c	Describe one way to reduce the effects of trauma.	3
	Most likely: systematic desensitisation for PTSD; counselling.	

Q14a	Explain, in your own words, what is meant by the term 'degenerative abnormality'.	2
	Typically: general neurological degeneration that occurs as the human body deteriorates with age.	
Q14b	Describe two types of degenerative abnormality.	6
	Most likely: Alzheimer's disease, Pick's disease, Korsakoff's psychosis.	
Q14c	Give one way in degenerative abnormality may be reduced.	3
	Most likely: changes in diet with vitamin enrichment.	

Section B

Q15a	Describe what psychologists have found out about abnormal learning.	8
	Abnormal learning includes any type of learning abnormality and most typically this would include autism, dyslexia (and related difficulties eg dyscalculia) ADHD (attention deficit with/without hyperactivity) or any other learning abnormality. The focus could be on the suggested causes of such abnormalities or could be on the problems a typical child may have in a classroom. The focus could be one type or could be a consideration of a number.	
Q15b	Evaluate what psychologists have found out about abnormal learning.	10
	<i>NOTE: any evaluative point can receive credit; the hints are for guidance only.</i> <ul style="list-style-type: none"> • points about defining and categorising abnormal learning; • cultural and individual differences in abnormal learning; • comparing and contrasting explanations of cause; • implications of abnormal learning for the child, family and educational provision. 	
Q15c	Giving reasons for your answer, suggest ways of overcoming a learning abnormality of your choice.	6
	Most likely: candidates will focus on one of the above abnormalities, and this will determine the suggested way of overcoming the problem. For dyslexia there are many proposed solutions such as wearing coloured spectacles; for ADHD typically ritalin has been used extensively but also diet is considered to be important. Answers must be based on appropriate evidence.	

Q16a	Describe what psychologists have discovered about abnormal avoidance and/or need.	8
	Candidates can focus on either avoidance or need or both. Need: will include problems such as compulsive gambling and kleptomania but any other need is legitimate. Avoidance: any phobia appropriate here as would be elective withdrawal. Candidates may focus on suggested explanations or on typical behaviour/symptoms.	
Q16b	Evaluate what psychologists have discovered about abnormal avoidance and/or need.	10
	<i>NOTE: any evaluative point can receive credit; the hints are for guidance only.</i> <ul style="list-style-type: none"> • points about defining and categorising abnormal behaviours; • cultural and individual differences in need/avoidance; • comparing and contrasting explanations; • implications for person with abnormal need/avoidance. 	

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Q16c	Giving reasons for your answer, suggest a treatment for an abnormal avoidance or need of your choice.	6
	Focus on one need OR avoidance. Most likely treatment will be behaviourally or cognitive-behavioural such as systematic desensitisation (main treatment for phobias)	

PSYCHOLOGY AND ORGANISATIONS

Section A

Q17a	Explain, in your own words, what is meant by the term 'leadership style'.	2
	Typically: the way in which a leader directs a group toward the attainment of goals.	
Q17b	Briefly describe two theories of leadership.	6
	<p>Many theories to choose from:</p> <p>Universalist theories of leadership: [1] The <i>great man theory</i> (Wood, 1913) [2] McGregor (1960) <i>Theory X and Theory Y</i></p> <p>Behavioural theories of leadership [1] Researchers at Ohio State University Halpin and Winer (1957) suggested <i>initiating structure</i> and <i>consideration</i> [2] Researchers at the University of Michigan identified <i>task-oriented behaviours</i> and <i>relationship-oriented behaviours</i>. This extended into Blake and Moulton's (1985) <i>Managerial Grid</i>.</p> <p>Charismatic (or transformational) leaders have the determination, energy, confidence and ability to inspire followers.</p> <p>Contingency theories of leadership: [1] Fiedler's contingency model (Fiedler, 1967) [2] House's (1971) <i>path-goal theory</i>. [3] Vroom and Yetton (1973) propose a <i>decision-making theory</i> [4] Dansereau et al (1975) whose <i>leader-member exchange model</i></p>	
Q17c	Describe one study of leader-worker interaction.	3
	Most likely: Dansereau et al (1975) whose leader-member exchange model suggests 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. Eg 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.	

Q18a	Explain, in your own words, what is meant by the term 'temporal conditions of work environments'.	2
	Typically: temporal conditions are the time structure of the work period eg shiftwork	
Q18b	Describe two types of shiftwork.	6
	Most likely: short rotation or rapid rotation or 'continental' or 'metropolitan' approaches. Can have also have compressed work weeks or flexitime or 'on-call' system. Answers must be psychological for full marks.	
Q18c	Describe one way in which the negative effects of work environments could be reduced.	3
	Most likely: by changing working week from one of above to more desirable alternative.	

Section B

Q19a	Describe what psychologists have discovered about the selection of people for work.	8
	<p>Main requirement is a consideration of the procedures involved in (a) <i>personnel recruitment</i> (the means by which companies attract job applicants), (b) <i>personnel screening</i> (the process of reviewing information about job applicants to select workers) and (c) <i>personnel selection</i> (via interviewing).</p> <p>The process could include:</p> <p>(1) Production of job analysis and job description.</p> <p>(2) Advertising job via appropriate source(s)</p> <p>(3) Production of an application form. This could be:</p> <p>(a) standard, (b) weighted, or (c) a Biographical Information Bank.</p> <p>(4) Screening tests. These could test:</p> <p>(a) cognitive ability, (b) mechanical ability, (c) motor/sensory ability, (d) job skills/knowledge, (e) personality, (f) test specific to job/organisation.</p>	

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	<p>(5) Many methods exist for analysis of screening tests and/or applications. Any method should be (a) reliable: via test re-test or internal consistency (how items correlate) and (b) valid: via content validity or criterion-related validity.</p> <p>(6) Interviews: many studies and many aspects. A good summary of major points is provided in Riggio P116 and includes:</p> <ul style="list-style-type: none"> (a) Use structured interviews (b) Make sure that interview questions are job related (c) Provide for some rating or scoring of applicant responses (d) Use trained interviewers (e) Consider using panel interviews (f) Use the interview time efficiently <p>(7) Follow up methods: References & letters of recommendation.</p> <p>(8) Consideration throughout of equal opportunities.</p>	
Q19b	Evaluate what psychologists have discovered about the selection of people for work.	10
	<p><i>NOTE: any evaluative point can receive credit; the hints are for guidance only.</i></p> <ul style="list-style-type: none"> • issues concerning reliability and validity; • assumptions made by psychometric testing; • individual differences in test performance; • the usefulness of tests to select people; • how psychologists gain their evidence. 	
Q19c	Giving reasons for your answer, suggest how you, as personnel officer, would ensure the selection interview was fair for all candidates.	6
	Any appropriate answer acceptable that relates to the equality of interviews eg interviews should be formal (same questions in same order for all) rather than informal.	
Q20a	Describe what psychologists have found out about group behaviour in organisations.	8
	<p>Wide question in that candidates can legitimately focus on one or more of:</p> <p>Group processes such as cohesiveness, co-operation, competition;</p> <p>Group decision-making</p> <p>Group error such as groupthink and group polarisation.</p>	
Q20b	Evaluate what psychologists have found out about group behaviour in organisations.	10
	<p><i>NOTE: any evaluative point can receive credit; the hints are for guidance only.</i></p> <ul style="list-style-type: none"> • issues concerning generalisability; • the measures used to gain data; • individual differences in types of groups; • the usefulness of studying group processes. 	
Q20c	Using your psychological knowledge, suggest strategies for team building.	6
	Any suggestion based on psychological theory acceptable. Most likely: Tuckmans (1965) model [forming, storming, norming, performing]; The Belbin approach (1985, 93) or Margerison & McCann's (1991) team management wheel.	