2226 – 3816/3819M

Diploma Programme
Programme du diplôme
Programa del Diploma

Markscheme

May 2026

Psychology

Higher level and standard level

Paper 2

20 pages

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.

Marks	Level descriptor
0	Does not reach the standard described by the descriptors below.
1 – 2	Limited relevant psychological research is used in the response. Research selected serves to repeat points already made.
3 – 4	Relevant psychological research is used in support of the response and is partly explained. Research selected partially develops the argument.
5 – 6	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 normality versus abnormality. **[22]**

Refer to the paper 2 assessment criteria when awarding marks.

The command term "discuss" requires students to offer a considered review of normality versus abnormality.

Knowledge and understanding of normality versus abnormality may include but is not limited to:

- models: mental health; statistical; medical
- the cognitive explanation
- deviation from social and cultural norms
- validity and reliability in diagnosing normality/abnormality
- criteria for normality/abnormality, e.g. Jahoda (1958); Rosenhan and Seligman (1989).

Relevant studies may include but are not limited to:

- Bolton (1999) – cultural issues in overdiagnosis
- Lobbestael, Leurgans and Arntz (2011) – reliability of diagnosis
- Li-Repac's (1980) study on the role of stereotyping in diagnosis
- Luhrmann et al. (2015) – cultural differences hearing voices and having conversations with those voices in schizophrenia
- Szasz's (1974) discussions about problems of psychiatric labelling and the medicalization of problems of living
- Caetano's (1974) study into the effects of labelling on student and psychiatrist diagnoses of video-taped actors
- Rosenhan (1973) – reliability and validity issues.

Critical discussion may include but is not limited to:

- difficulties in defining normality/abnormality
- assumptions and biases
- areas of uncertainty in diagnostic manuals
- methodological and ethical considerations of research
- social and cultural considerations
- historical changes in our understanding of what constitutes normal and abnormal behaviour
- ethical implications (e.g. labelling).

Although studies illustrating difficulty in diagnosis (e.g. Rosenhan) may be relevant to the question, the response must be focused on the broader issue of normality versus abnormality to be awarded the full range of marks.

Responses are likely to focus on explaining concepts of normality versus abnormality. Marks awarded for criterion B should focus on how the responses reflect general knowledge of the topic including definitions of terms, explanations of theories and concepts. Marks awarded for criterion C assess the quality of the description of a study/studies and assess how well the student linked the findings of the study to the question.

2. Discuss the prevalence rates of **one or more** disorders. **[22]**

Refer to the paper 2 assessment criteria when awarding marks.

The command term “discuss” requires students to offer a considered review of the prevalence rates of one or more disorders.

Relevant studies could include but are not limited to:

- Nolen-Hoeksema’s (2001) review of gender differences in stress responses and depression
- Brown and Harris’s (1977) study of social factors affecting vulnerability to depression in women
- Ettmann et al.’s (2020) survey related to depression symptoms in US adults before and during the COVID-19 pandemic
- De Souza Vivan et al.’s (2014) research on prevalence rates of OCD in adolescents in Brazil
- Atwoli et al.’s (2015) review of studies related to the prevalence of PTSD, risk factors and consequences cross-culturally
- Makino et al.’s (2004) study regarding the prevalence of eating disorders in Western and non-Western countries.

Discussion points may include but are not limited to:

- variations in prevalence rates across age and gender
- risk factors, such as exposure to conflicts, traumatic events, physical or psychological abuse
- social and cultural considerations (for example, poverty, norms)
- availability of mental health services and treatment
- validity and reliability of diagnostic criteria and classification systems
- methodological considerations related to the research into prevalence rates of disorders
- implications of the findings.

Students may discuss the prevalence rates of one disorder in order to demonstrate depth of knowledge or may discuss the prevalence rates of a larger number of disorders in order to demonstrate breadth of knowledge. Both approaches are equally acceptable.

3. Discuss **one or more** ethical considerations in research related to the treatment of **one or more** disorders. **[22]**

Refer to the paper 2 assessment criteria when awarding marks.

The command term "discuss" requires students to offer a considered review of one or more ethical considerations in research related to the treatment of one or more disorders.

Ethical considerations may be positive (what guidelines were followed) or negative (what guidelines were not followed).

Relevant ethical considerations may include but are not limited to:

- informed consent
- protection from harm
- briefing and debriefing
- validity of diagnosis prior to enrolling in a study on treatment
- anonymity and confidentiality
- use of deception
- the right to withdraw.

Relevant research may include but is not limited to:

- Nugent et al.'s (2017) review of ethics of clinical trials research in severe mood disorders
- Neale et al.'s (2011) review on the outcome of antidepressants versus placebo
- Kuyken et al.'s (2008) randomized controlled trial of relative effectiveness of mindfulness-based cognitive therapy (MBCT) and anti-depressive medication
- Denys and Mantione's (2009) study using deep brain stimulation in obsessive-compulsive disorder
- Elkin et al.'s (1989) controlled outcome study of treatment for depression
- Agras et al.'s (1992) controlled comparison of drug treatment and CBT for patients with bulimia.

Discussion points may include but are not limited to:

- the importance of ensuring confidentiality in psychology research
- decisions as to why certain ethical guidelines were/were not followed
- changes over time in adherence to ethical standards/guidelines
- use of placebo in treatment research
- side effects of treatments
- risk of relapse and lack of follow-up once the research is over
- research ethics committee.

For criterion B (quality of knowledge of ethical issues) examiners need to be aware that some students 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 the level of detail and context.

Ethical considerations only identified or described in generic terms should be awarded marks in the lowest (1–2) band.

Ethical considerations described within relevant studies should be awarded marks in the mid (3–4) band.

Ethical considerations are described within relevant studies **and** clearly linked to the topic being focused on should be awarded marks in the top (5–6) band.

Students may discuss one ethical consideration related to the research into treatment in order to demonstrate depth of knowledge, or may discuss a larger number of ethical considerations related to research into treatment in order to demonstrate breadth of knowledge. Students may also demonstrate breadth of knowledge by considering ethical issues in relation to more than one disorder. All approaches are equally acceptable.

Developmental psychology

4. Evaluate **one or more** studies investigating influences on cognitive **and/or** social development. **[22]**

Refer to the paper 2 assessment criteria when awarding marks.

The command term "evaluate" requires students to make an appraisal of one or more studies investigating influences on cognitive and/or social development by weighing up the strengths and limitations of the selected study/studies. The focus of the evaluation should be upon the study/studies, not the influences of cognitive and/or social development. Although a discussion of both strengths and limitations is required, it does not have to be evenly balanced to gain high marks.

The term "influence" may include but is not limited to:

- genetic influence
- maturation of the nervous system
- trauma/deprivation
- resilience
- peers
- poverty
- nutrition
- educational programmes/support from parents/educators
- social learning.

Relevant research studies may include but are not limited to:

- Waber's (2007); Giedd's (2004); Chugani *et al.*'s (2001) studies on the effects of maturation of the nervous system on cognitive development
- Deary *et al.*'s (2006); Bouchard *et al.*'s (1990) studies on genetic inheritance in intelligence
- Cowell *et al.*'s (2006); Corky's (1997) studies on brain damage and memory deficits
- Fagot's (1978); Condry and Condry's (1976) studies on the role of society in gender development
- Carly and Eagly's (1999); Eagly and Johnson's (1990); Maccoby and Jacklin's (1980) meta-analysis considering the influence of gender on group relations
- studies relating to Vygotsky addressing peer mentoring or the relevance of zone of proximal development
- Bandura, Ross and Ross (1961) and related studies on social learning (e.g. Kimball 1986).

Evaluation may include but is not limited to:

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

Students may evaluate one or more studies investigating specific aspects of cognitive and/or social development (for example memory, intelligence, gender development, peer relationship) or evaluate one or more studies investigating cognitive and/or social development in general. Both approaches are equally acceptable.

In questions that ask for evaluation of studies, criterion A assesses 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].** 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 gain **[2].**

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

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. If the student 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.

5. Discuss the development of empathy **and/or** theory of mind. **[22]**

Refer to the paper 2 assessment criteria when awarding marks.

The command term “discuss” requires students to offer a considered review of the development of empathy and/or theory of mind. Students may discuss only the development of a theory of mind or only the development of empathy or may discuss the development of both. These approaches are equally acceptable.

The theory of mind is the ability to understand and attribute a particular mental state to a certain behaviour. Empathy is a similar concept but slightly different in that it refers to the ability to infer another's emotional state.

Research relevant to the theory of mind may include but is not limited to:
- Baron-Cohen, Leslie and Frith (1985), “Understanding false beliefs in human children”
- Wellman, Cross and Watson (2001), “Meta-analysis of theory-of-mind development: the truth about false belief”
- Byom and Mutlu (2013), “Theory of mind: mechanisms, methods, and new directions”
- Happé (1995), “The role of age and verbal ability in the theory of mind task performance of subjects with autism”
- Wellman and Gelman (1992), “Cognitive development: Foundational theories of core domains”
- Peterson et al. (2016), “Peer social skills and theory of mind in children with autism, deafness, or typical development”

Research relevant to the development of empathy may include but is not limited to:
- Bischof-Köhler (1991), “The development of empathy in infants”
- van der Mark et al. (2002), “Development of empathy in girls during the second year of life: Associations with parenting, attachment, and temperament”
- Damon and Hart (1992), “Self-understanding and its role in social and moral development”
- McDonald and Messinger (2011), “The development of empathy: How, when and why”
- Moore (1990), “The origins and development of empathy”
- Meltzoff (1995), “Representation of intentions in human children”.

Relevant areas of discussion may include but are not limited to:
- the biological, social and cultural influences
- the deficits in social insight, for example in autism spectrum disorders
- methodological and ethical considerations
- how the findings of research have been interpreted
- practical applications and implications of the findings
- assumptions and biases
- areas of uncertainty.

Responses referring to animal research are acceptable as long as they are linked to human behaviour.

Responses referring to cognitive development are not acceptable and should not earn marks unless specifically tied to the development of theory of mind/empathy.

Students may discuss one aspect of development of empathy and/or theory of mind in order to demonstrate depth of knowledge, or may discuss a larger number of aspects of development of empathy and/or theory of mind in order to demonstrate breadth of knowledge. Both approaches are equally acceptable.

6. Discuss **one or more** factors influencing brain development. **[22]**

Refer to the paper 2 assessment criteria when awarding marks.

The command term "discuss" requires students to offer a considered review of one or more factors influencing brain development.

Relevant factors may include but are not limited to:
- neuroplasticity
- gene expression
- environmental factors, e.g. stress, neglect, nutrition, trauma
- maturational theory of brain development.
- cognitive factors, e.g. language acquisition, problem solving and executive function, memory tasks.

Relevant studies may include but are not limited to:
- Waber's (2007); Gogtay et al.'s (2004) longitudinal studies of brain development using MRI scans
- Chugani et al.'s (1999) study on developmental changes in brain serotonin synthesis capacity
- Johnson and Newport's (1989) study on maturational predispositions for learning a language
- Baird et al.'s (2002); Diamond's (1991) studies on the effect of maturation on the frontal lobe and the development of object permanence
- Bell and Fox's (1996) study on crawling experience related to changes in the cortical organization during infancy using EEG
- Danelli et al.'s (2012) case study on functional neuroplasticity
- Gieldd et al.'s (2004) longitudinal study on brain development across developmental stages
- Bremner's (2003) study on how early sexual abuse correlated with the atrophy of the hippocampus
- Rosenzweig, Bennett and Diamond's (1972) study on environmental effects on brain development.

Critical discussion points may include but are not limited to:
- methodological and ethical considerations
- the accuracy and clarity of the concepts
- assumptions and biases
- areas of uncertainty
- supporting and/or contradictory evidence
- alternative theories/explanations
- practical applications and implications of the findings
- how the findings of research have been interpreted.

Responses referring to research on animals, such as the Rosenzweig study should be linked to human brain development. Responses that do not explicitly make any link to human brain development should be awarded up to a maximum of **[3]** for criterion C: use of research to support the answer. All remaining criteria should be awarded marks according to the best fit approach.

Responses to this question may also use Piaget's and Vygotsky's theories. For these responses, marks should be awarded depending on how effectively responses link these to brain development.

Students may discuss one factor influencing brain development in order to demonstrate depth of knowledge, or may discuss a larger number of factors in order to demonstrate breadth of knowledge. Both approaches are equally acceptable.

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 students to offer a considered review of the biopsychosocial model of health and well-being.

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

Relevant research may include but is not limited to:

- Olson and Strawderman’s (2003) study investigating how the biopsychosocial model predicts gestational weight gain
- Sorensen’s (1998) longitudinal study on genetic variability and the role of environment on obesity
- 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
- Steptoe and Marmot’s (2003) study looking at differences in stress responses
- Prentice and Jebb’s (1995) correlational study on increase in obesity and car ownership and television viewing.

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
- supporting and/or contradictory evidence
- comparison with alternative model (e.g. the biomedical model).

8. Evaluate **one or more** explanations of **one or more** health problems. **[22]**

Refer to the paper 2 assessment criteria when awarding marks.

The command term “evaluate” requires students to make an appraisal by weighing up strengths and limitations of one or more explanations of one or more health problems. Although both strengths and limitations should be addressed, the discussion does not have to be evenly balanced to gain high marks.

Explanations of health problems may include but are not limited to:

- the brain’s reward pathway explanation of addiction
- genetic vulnerability to addiction
- theory of planned behaviour addressing the role of decision making in sexual health
- sociocultural explanations of obesity
- General Adaptation Syndrome model as explanation of stress

Relevant research may include but is not limited to:

- Hammer, Dingle, Ostergren and Partridge’s (2013) study challenging the biomedical model of addiction
- Reed *et al*.’s (1999) study of pessimism within AIDS patients
- Kamen and Seligman’s (1987) study of attributional style and health level
- Stunkard *et al*.’s (1990) study of genetic factors in obesity
- Jobin et al.’s (2014) study on the role of optimism on stress and health
- Asare’s (2015) study on using the theory of planned behaviour to determine condom use behaviour among college students
- Evans and Kim’s (2007) study on how poverty exposes people to risk factors that lead to a higher vulnerability to stress.

Evaluation may include but is not limited to:

- methodological and ethical considerations in research related to investigating the explanations
- cultural factors and/or gender considerations
- supporting or contradictory evidence
- alternative explanations
- the application and/or implications of the findings.

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

Students may evaluate one explanation of health problem(s), in order to demonstrate depth of knowledge, or evaluate a larger number of explanations of health problem(s) in order to demonstrate breadth of knowledge. Both approaches are equally acceptable.

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 students to make a considered review of the effectiveness of one or more health promotion programmes. The effectiveness relates to the success rate of any health promotion programme.

Health promotion programmes are an attempt to encourage healthy 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 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:

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

Relevant studies may include but are not limited to:

- Sly et al.’s (2002) survey 22 months after the campaign to investigate if the anti-tobacco advertisements (TRUTH campaign) affected attitude changes
- 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
- Holm’s (2002) survey on the efficiency of health campaigns
- Schum and Gould’s (2007) study of why health campaigns are effective
- 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 behaviours”
- 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
- how the findings of research have been interpreted and applied
- implications of the findings
- the accuracy and clarity of the concept of effectiveness (e.g. defining “success” of the health promotion programmes)
- assumptions and biases
- areas of uncertainty
- supporting and/or contradictory evidence
- alternative theories/explanations
- comparing and contrasting the effectiveness of different health promotion programmes.

If a student discusses 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.

Students may discuss the effectiveness of one health promotion programme in order to demonstrate depth of knowledge, or may discuss the effectiveness of several programmes in order to demonstrate breadth of knowledge. Both approaches are equally acceptable.

Psychology of human relationships

10. Discuss the role of communication in personal relationships**.** **[22]**

Refer to the paper 2 assessment criteria when awarding marks.

The command term “discuss” requires students to offer a considered review of the role of communication in personal relationships.

Students may address communication in specific types of personal relationships (e.g. romantic, peer, parent–adolescent) or in personal relationships in general (including stages of formation, maintenance and dissolution). Both approaches are equally acceptable.

Relevant studies may include but are not limited to:

- Fincham’s (2004) study of the role of communication in marital satisfaction
- Bradbury and Finchman’s (1992) study of communication styles of couples
- Levenson and Gottman’s (1983) study on the relationship between marital dissatisfaction and negative affect
- Gottman and Levenson’s (1986) study on the role of communication of emotions in relationships
- Burgoon et al.’s (2000) study of the use of mindfulness and interpersonal communication
- Ying et al.’s (2015) study on parent–adolescent communication to build trust.

Critical discussion may include but is not limited to:

- methodological, cultural and ethical considerations
- age and/or gender considerations
- how the findings of research have been interpreted and applied
- implications and applications of the findings
- assumptions and biases
- areas of uncertainty
- alternative/contradicting theories/explanations.

Students may discuss a small number of factors that address the role of communication in relationships in order to demonstrate depth of knowledge or may consider a larger number of factors in order to demonstrate breadth of knowledge. Both approaches are equally acceptable.

11. Discuss co-operation **and/or** competition in groups. **[22]**

Refer to the paper 2 assessment criteria when awarding marks.

The command term “discuss” requires students to offer a considered review of the role of co-operation and/or competition in groups.

Relevant concepts/theories may include but are not limited to:
- realistic conflict theory
- game theory
- social identity theory
- jigsaw classroom strategies.

Relevant studies may include but are not limited to:
- Sherif’s (1961) Robbers Cave study
- Aronson et al.’s (1971; 1975; 1979) jigsaw classroom
- Beeman and D’Amico’s (1956) study of the effects of co-operation and competition on cohesiveness of small groups
- McCallum et al.’s (1985) study on competition and co-operation between groups and individuals using the Prisoner’s Dilemma
- Tajfel et al.’s (1971) study on social categorization and intergroup behaviour
- Dawes et al.’s (1986) study investigating game theory.

Discussion may include but is not limited to:
- the role of co-operation in strengthening or weakening group cohesion
- effects of co-operation or competition on individual and group performance
- comparison of the effectiveness of co-operation and competition in different groups
- methodological and ethical considerations in research related to co-operation and/or competition in groups
- how the findings of research have been interpreted and applied
- implications of the findings
- cross-cultural and/or gender considerations
- assumptions and biases in research related to co-operation and/or competition in groups.

12. To what extent is social responsibility (for example, by-standerism and prosocial behaviour) influenced by sociocultural factors? **[22]**

Refer to the paper 2 assessment criteria when awarding marks.

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

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

Relevant research/theory may include but is not limited to:

- Aknin et al.’s (2013) study on prosocial spending and well-being
- Levine et al.’s (2001) study on cross-cultural differences in helping strangers
- Mitahara et al.’s (2018) study on the impact of gender, culture and priming on empathetic concern
- Whiting and Whiting’s (1975) study on the role of a collectivist culture in prosocial behaviour
- Darley and Batson’s (1973) study on the role of situational and dispositional factors
- Miller et al.’s (1990) study on culture and social responsibility
- Latané and Darley’s (1968) study on by-stander behaviour.

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
- the accuracy and clarity of the concepts
- assumptions and biases
- areas of uncertainty
- generalizability of findings
- supporting and/or contradictory evidence.