

Markscheme

November 2024

Psychology

Higher level 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 to 2	The response demonstrates limited relevant knowledge and understanding. Psychological terminology is used but with errors that hamper understanding.
3 to 4	The response demonstrates relevant knowledge and understanding but lacks detail. Psychological terminology is used but with errors that do not hamper understanding.
5 to 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 to 2	Limited relevant psychological research is used in the response. Research selected serves to repeat points already made.
3 to 4	Relevant psychological research is used in support of the response and is partly explained. Research selected partially develops the argument.
5 to 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 to 2	There is limited critical thinking and the response is mainly descriptive. Evaluation or discussion, if present, is superficial.
3 to 4	The response contains critical thinking, but lacks development. Evaluation or discussion of most relevant areas is attempted but is not developed.
5 to 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. Evaluate **one or more** studies related to clinical biases in diagnosis.

[22]

Refer to the paper 2 assessment criteria when awarding marks.

The command term “evaluate” requires candidates to make an appraisal by weighing up the strengths and limitations of one or more studies related to clinical biases in diagnosis. Although a discussion of both strengths and limitations is required, it does not have to be evenly balanced to gain high marks.

Relevant research may include but is not limited to:

- Rosenhan’s (1973) study on the validity and reliability of diagnosis
- Kleinmann’s (1984) study on cultural differences in the diagnosis of depression in the Chinese population
- Beck et al.’s (1962) study on the reliability of diagnosis between two psychiatrists
- Cooper et al.’s (1972) study on location and diagnosis
- Rück et al.’s (2014) study on the validity and reliability of chronic tic disorder and obsessive-compulsive disorder diagnoses in the Swedish National Patient Register
- 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 the reliability of diagnosis for schizophrenia and mood disorders
- Friedlander and Stockman’s (1983) study to determine the role of anchoring bias in diagnosis
- Li-Repac’s (1980) study on biases in diagnosis.

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

- methodological and ethical considerations
- cultural and gender considerations
- generalizability of findings
- supporting and/or contradictory findings
- practical applications and 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]. 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.

2. Discuss **one or more** explanations 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 chosen explanation(s) of one or more disorders.

Explanations for disorders may include, but are not limited to:

- biological explanations, such as neurological/neurochemical explanations, the role of genes, evolutionary explanations or the role of brain abnormalities
- psychodynamic explanations
- cognitive explanations
- sociocultural explanations.

Relevant studies may include, but are not limited to:

- Caspi et al.’s (2003) study on gene and environment interaction in depression
- Weissman et al.’s (2005) kinship study on depression
- Brown and Harris’s (1978) study on sociocultural factors in vulnerability to depression
- Gilbertson et al.’s (2002) study on the hippocampus and post-traumatic stress disorder in veterans
- Hitchcock et al.’s (2015) study on cognitive appraisal in post-traumatic stress disorder
- Strober et al.’s (2000) study on genes and eating disorders
- Kendler et al.’s (1991) twin study on genetic vulnerability in bulimia nervosa
- Tchanturia et al.’s (2011) study on cognitive flexibility as a specific type of cognitive style and anorexia nervosa
- Jaeger et al.’s (2002) cross-cultural study on the relationship between body dissatisfaction and the development of bulimia

Discussion points may include, but are not limited to:

- Alternative explanations
- practical applications and implications of the findings
- cultural and gender considerations
- methodological and ethical considerations
- supporting and/or contradictory findings
- comparing and/or contrasting different explanations
- nature versus nurture
- holism versus reductionism.

Candidates may address one explanation to demonstrate depth of knowledge or may address a larger number of explanations to demonstrate breadth of knowledge. Both approaches are acceptable.

3. Discuss the effectiveness of **one or more** treatments for **one or more** disorders. [22]

Refer to the paper 2 assessment criteria when awarding marks.

The command term “discuss” requires candidates to give a considered review of the effectiveness of one or more treatments for one or more disorders.

Relevant treatments may include, but are not limited to:

- biological: drug, ECT, brain stimulation
- cognitive-behavioural therapy
- behavioural
- psychoanalytic
- eclectic.

Relevant studies may include, but are not limited to:

- Cooper et al.’s (2003) study on short- and long-term effects of psychological treatment on post-partum depression
- Neale et al.’s (2011) meta-analysis of studies of the outcome of using antidepressants versus placebos
- Elkin et al.’s (1989) outcome study of CBT treatment for depression
- MacDermut et al.’s (2001) meta-analysis on the effectiveness of group therapy for depression
- Poulsen et al.’s (2014) study on psychoanalytic psychotherapy or cognitive-behavioural therapy for bulimia nervosa
- Vocks et al.’s (2010) meta-analysis on the effectiveness of psychological and pharmacological treatments for binge-eating disorder
- Boggio et al.’s (2010) study on repetitive transcranial magnetic stimulation (rTMS) treatment for post-traumatic stress disorder.

Discussion may include, but is not limited to:

- methodological and ethical considerations
- gender and cultural considerations
- practical applications and implications of the findings
- the accuracy and clarity of the concepts
- assumptions and biases
- comparison/contrast of therapies
- supporting and/or contradictory evidence.

Candidates may address one treatment to demonstrate the depth of knowledge or may address a larger number of treatments to demonstrate the breadth of knowledge. Both approaches are acceptable.

Developmental psychology

4. Discuss the role of peers **and/or** play in cognitive **and/or** social 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 role of peers and/or play in cognitive and/or social development.

Relevant discussion may include, but is not limited to:

- the influence of different types of play on cognitive and/or social development
- the therapeutic value of play
- Piaget's and Vygotsky's theories related to play and cognitive development
- the link between cognitive development and peer relationships
- the link between peer relationships and social comparison.

Studies may include, but are not limited to:

- Hughes's (1999) study on learning social skills through role play
- Russ's (2004) study of a child's capacity for cognitive flexibility and creativity developed by role play
- Todd et al.'s (2016); Fagot's (1985) studies on gender-specific toys
- Bradbard et al.'s (1986) study on the influence of gender stereotypes
- Albert et al.'s (2013) study on peer influences in adolescent decision-making
- Newcomb and Bentler's (1988) study showing positive relationships are important in reducing adolescent's drug use
- Kupersmidt and Coie's (1990) studies on peer rejection as predictor of externalizing problems in adolescence
- Granic et al.'s (2014) study on the benefits of playing video games
- Nichols's (1996) study on social interaction.

Discussion may include, but is not limited to:

- methodological and ethical considerations
- gender and cultural considerations
- how the findings of the research have been interpreted and applied
- practical applications and implications of the findings
- assumptions and biases
- supporting and/or contradictory evidence
- alternative explanations addressing cognitive and/or social development.

Candidates may discuss one aspect of the role of peers and/or play in cognitive and/or social development in order to demonstrate the depth of knowledge or may discuss a larger number of aspects of the role of peers and/or play in cognitive and/or social development in order to demonstrate the breadth of knowledge. Both approaches are equally acceptable.

Candidates may discuss animal research or explanations relating to animal studies if these are linked to human behaviour.

5. Discuss **one or more** factors influencing the development of gender identity.

[22]

Refer to the paper 2 assessment criteria when awarding marks.

The command term “discuss” requires candidates to offer a considered review of one or more factors influencing development of gender identity.

Factors discussed may include, but are not limited to:

- biological factors eg evolutionary factors, hormones and genes
- cognitive factors
- sociocultural factors
- gender socialization by peers
- the role of culture
- the role of media.

Relevant studies may include, but are not limited to:

- Money and Ehrhardt’s (1972) study claiming that children are gender neutral at birth
- Slaby and Frey’s (1975) study on gender constancy
- Martin and Halvorson’s (1983) study on the role of gender schemas on gender roles
- Neulaesei (2015); Mead’s (1935) studies on gender roles and society
- Martin’s (1989) study on the influence of gender labelling on information processing
- Witt (1997); Fagot’s (1978) studies on the influence of parents on gender roles
- Bussey and Bandura’s (1999) study on how the media can create gender stereotypes.

Discussion points may include, but are not limited to:

- methodological and ethical considerations
- cultural considerations
- theoretical considerations
- practical applications and implications of the findings
- assumptions and biases
- supporting and/or contradictory evidence.

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 candidates 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 eg stress, neglect, nutrition, trauma
- cognitive factors eg language acquisition, problem solving and executive function, memory tasks
- maturational theory of brain development.

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.

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 (2001) 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
- Gelder et al.'s (2004) longitudinal study on brain development across developmental stages
- Rosenzweig, Bennett and Diamond's (1972) study on environmental effects on brain development
- Bremner's (2003) study on how early sexual abuse correlated with the atrophy of the hippocampus.

Discussion points may include, but are not limited to:

- methodological and ethical considerations
- practical applications and implications of the findings
- the accuracy and clarity of the concepts
- assumptions and biases
- supporting and/or contradictory evidence.

Responses referring to research on animals, such as 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 mark bands independently and could achieve up to full marks.

Health psychology

7. Discuss **one or more** dispositional factors and their effects on health.

[22]

Refer to the paper 2 assessment criteria when awarding marks.

The command term “discuss” requires candidates to make a considered review of one or more dispositional factors and their effects on health.

Dispositional factors are internal factors, such as genetics and personality eg optimism, resilience, cognitive styles, that can affect our health.

Relevant studies may include, but are not limited to:

- Nielsen et al.’s (2009) study on the genetic vulnerability of heroin addicts to non-addicts
- Foroud et al.’s (2000) twin study on the link of genes and alcohol addiction
- Li et al.’s (2004) twin study on the association of genes and nicotine addiction
- Howard et al.’s (1997) meta-analysis confirming Cloninger’s tri-dimensional theory, that novelty seeking predict alcohol abuse in teenagers
- Yan et al.’s (2014) study on personality, stress and family functioning playing a role in internet addiction
- Roseman et al.’s (1976) quasi-experiment on type A personality and coronary heart disease
- Sorensen et al.’s (1992) correlational study on genetics and obesity.

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

- methodological and/or ethical considerations
- gender and/or cultural considerations
- how the findings of research have been interpreted and applied
- implications of the findings
- assumptions and biases
- determinism versus free will
- nature versus nurture
- comparison of different explanations.

Candidates may discuss one dispositional factor and its effect on health in order to demonstrate depth of knowledge or may discuss a larger number of dispositional factor and its effect on health in order to demonstrate the breadth of knowledge. Both approaches are equally acceptable.

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

[22]

Refer to the paper 2 assessment criteria when awarding marks.

The command term “discuss” requires candidates to offer a considered review of one or more explanations of one or more health problems.

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

Relevant explanations may include, but are not limited to:

- Stress and Coping Theory: chronic stress is linked to various health problems, including cardiovascular disease, obesity, and immune dysfunction.
- Social Cognitive Theory (SCT)
- Health Belief Model
- Biopsychosocial Model
- Cognitive behavioral model
- Personality and dispositional 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
- Bauman et al.’s (1990) correlational study on likelihood of smoking in adolescence where parents also smoke
- Sorensen’s (1998) longitudinal study on genetic variability and the role of environment on obesity
- Binswanger et al.’s (2012) qualitative study of risk and protective factors in drug users after prison release
- Luthar et al.’s (1998) study on the risk and protective factors among addicted (opioid and cocaine) mothers’ children
- Unger and Chen’s (1999) study on the role of social networks and media in predicting age of smoking: risk and protective factors.

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
- cultural and/or gender considerations
- practical applications of the research
- assumptions and biases in explanations of health problems
- nature versus nurture
- implications of findings- e.g. policy changes, health interventions.

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 health promotion.

[22]

Refer to the paper 2 assessment criteria when awarding marks.

The command term “discuss” requires candidates to offer a considered review of health promotion (this may include health promotion programmes and their effectiveness).

Discussion of health promotion may include, but is not limited to:

- Health Belief Model
- Theory of Planned Behaviour
- Transtheoretical Model
- Social-cognitive theory
- Other relevant concepts eg mindfulness.

Relevant studies relating to health promotion may include, but are not limited to:

- Quist-Paulsen et al.’s (2003) study investigating the influence of health beliefs on cessation of smoking
- McEachan et al.’s (2011) meta-analysis on the theory of planned behaviour’s predictive ability, e.g. effectiveness depending on age, health behaviour and type of reporting
- Prochaska and Diclemente’s (1983) study on stages and processes of self-change in smoking
- Lowe et al.’s (2011) case study on the “Food Dudes” programme in the UK
- Sanderson and Yopuk’s (2007) study on social cognitive theory and safe-sex behaviour.

Discussion points may include, but are not limited to:

- methodological and ethical considerations
- cultural and/or gender considerations
- practical applications of the findings
- issues of validity and reliability
- assumptions and biases
- practical applications and implications (e.g. school-based health programmes)
- comparison/contrast of health promotion strategies
- effectiveness of health promotion programme(s).

Candidates may discuss one health promotion programme/strategy in order to demonstrate depth of knowledge or may discuss a larger number of health promotion programmes/strategies 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 candidates to offer a considered review of the role of communication in personal relationships.

Communication plays a relevant role at all stages of the development of personal relationships. Examples of theories and models explaining the role of communication in relationships may include, but are not limited to: social penetration theory, approaches based on the concept of attributional styles and approaches based on the concept of patterns of accommodation.

Candidates may address specific types of personal relationships (eg romantic, peer, parent–adolescent) or personal relationships in general. Both approaches are equally acceptable. Also, candidates may address the role of communication in the formation, maintenance or breakup of a relationship.

Relevant theories may include, but are not limited to:

- Social exchange theory
- Equity theory
- Rusbault’s investment theory
- Duck’s resolution theory

Relevant studies may include, but are not limited to:

- Fincham’s (2004) study of the role of communication in marital satisfaction
- 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
- Levenson and Gottman’s (1983) study on the relationship between marital dissatisfaction and negative affect
- Collins and Miller’s (1994) study investigating the role of disclosure in relationship building
- Tannen’s (1990) research examining the communication differences between men and women.

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
- assumptions and biases
- gender and/or cultural differences in communication
- alternative theories/explanations.

11. To what extent is social responsibility (for example, by-standerism and/or prosocial behaviour) 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 contribution of sociocultural factors in the understanding of social responsibility.

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

Relevant theories may include but are not limited to:

- Social identity theory
- Social cognitive theory
- Reciprocity norms
- Cultural dimensions theory
- Diffusion of responsibility

Relevant research may include, but is not limited to:

- Aknin et al.’s (2013) study on prosocial spending and wellbeing
- Levine et al.’s (2001) cross-cultural differences in helping strangers
- Mitahara et al.’s (2018) study on 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 (1968) 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
- comparison/contrast of different factors
- practical applications/implications
- supporting and/or contradictory evidence.

12. Discuss cooperation **and/or** competition in groups.

[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 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.
-