# Psychology Subject Assessment Advice

## Overview

Subject assessment advice, based on the previous year’s assessment cycle, gives an overview of how students performed in their school and external assessments in relation to the learning requirements, assessment design criteria, and performance standards set out in the relevant subject outline. They provide information and advice regarding the assessment types, the application of the performance standards in school and external assessments, and the quality of student performance.

Teachers should refer to the subject outline for specifications on content and learning requirements, and to the subject operational information for operational matters and key dates.

# School Assessment

Assessment Type 1: Investigations Folio

When viewed as a set, the two investigations should provide evidence of collaborative and individual skills, individual ideas, a clear understanding of why ethical considerations are important in research, an ability to link the data collected to the research question and an understanding of the significance of the results in relation to the research question. Articulate students should consider using a qualitative investigation as this often has more potential for discussion.

Investigation reports should not include a detailed procedure or a literature review as these are not assessed and take up valuable word count. A very brief statement about the procedure and mention of some findings from previous research can be useful to set the context for the report. Students should be selective in the number of graphs they present as often extra graphs do not add any extra information. The presentation of raw data is most often unnecessary and can make the report more difficult to read.

The more successful responses commonly:

* used individually formulated research questions/hypotheses that could be discussed in depth using the data collected
* presented graphs using appropriate formats that could be easily interpreted
* discussed relevant aspects of the experimental design in depth rather than superficially trying to cover all aspects of measurement and design
* evaluated procedures rather than just provide definitions of validity and reliability.
* discussed ethical issues specific to the research program.

The less successful responses commonly:

* omitted the section in the proposal that relates to how the data will be used. This caused the proposal to lack detail and coherence
* lacked individual ideas because the task was overly scaffolded. When a set structure for writing the report is provided, the responses from the whole group of students start to look very similar
* omitted a clear description of the design of the investigation
* had a low word count
* discussed ethics only generally in both tasks.

Assessment Type 2: Skills and Application Tasks

The number of tasks submitted in this assessment type ranges from five to seven, with most groups submitting a mixture of tests and assignments. Test questions can be based on the style of questions used in the examination but should not be limited to past examination questions for which answers are easily obtained. When preparing samples for moderation the skills and applications tasks should be put together in one plastic sleeve per student and the investigations tasks should also be put together in one plastic sleeve per student. All samples should then be placed into one plastic bag for each assessment type and no extra folders should be used.

The more successful responses commonly:

* selected and acknowledged information from a wide range of sources in assignments
* provided evidence that could be assessed across all assessment design criteria
* applied concepts to unfamiliar scenarios and provide detailed examples that illustrated the concepts
* answered challenging extended response questions
* demonstrated a clear understanding of the lead-in verbs used in questions and how much to write for a given number of marks.

The less successful responses commonly:

* responded primarily to tests that lacked enough challenging questions and focused mainly on recall of knowledge
* discussed content not specified in the subject outline instead of specified content
* reported outcomes of interventions on other students that have not been approved for research in this course e.g. systematic desensitization.

# External Assessment

Assessment Type 3: Examination

Content from the Skills section and the six topics is examined using short-answer and extended-response questions. Some questions may require students to integrate their knowledge from more than one topic. Students provide evidence of their learning in relation to all four assessment design criteria. Students should use appropriate psychological terms in their responses.

Examination performance was again consistent with that of previous years, with an overall mean score of 62%.

General comments on Section A

Students are encouraged to plan their answers to short answer questions so that their responses generally fit into the space provided. Lengthy responses introduce the possibility of losing marks for adding additional information that is incorrect or that contradicts the first part of the answer. One point cannot receive marks more than once, regardless of how many times it is stated.

Marks were frequently lost for poor expression. It is important for students to write clearly and concisely in order to convey their understanding. Students should explain any abbreviations they use, unless they have been provided in the question. Students should refrain from everyday colloquialisms, e.g. ‘Harry is a worry-wart’. The use of everyday language rather than psychological terminology can lead to inaccurate answers and the consequent loss of marks. For full marks, psychological terms need to be used accurately.

Where a scenario is given in a question, students who perform well provide answers that use information from the scenario to discuss the concepts. Answers that simply provide generic answers about the theory cannot receive full marks where the link to the scenario is required. When questions are divided into parts, students need to recognise the relevance of each part of the question to the opening scenario.

Questions that require students to state, name, or list one piece of information that is either right or wrong are allocated only one mark. Questions with more marks generally require better expression and students need to understand the meaning of the key verb used in these questions. Students who perform well demonstrate that they understand the distinction between verbs such as identify’, ‘describe’, ‘discuss’, and ‘explain’ when answering questions. When questions require students to describe, it is expected they will write about what is happening, whereas when asked to explain, they will give reasons, that is, they will write about why something is happening.

**QUESTION 1**

Generally, students demonstrated a high level of understanding of the learning process in this question.

The successful responses in (a):

* identified the learning as classical conditioning.

The less successful responses commonly:

* used careless or incorrect terminology e.g., CC, operant conditioning, observational learning. Some students, who used the term “acquisition”, did not understand that acquisition is an inherent part of all learning, not just classical conditioning.

The successful responses in (b):

* correctly identified the unconditioned stimulus and response (puff of air and blinking, respectively), and the conditioned stimulus and response (tapping sound and blinking, respectively).

The less successful responses:

* confused the unconditioned stimulus and conditioned stimulus.

The successful responses in (c):

* correctly identified the process occurring at Stage 3 as extinction.

The less successful responses:

* demonstrated a lack of understanding of the new learning that had occurred; that is, the conditioned stimulus was no longer accompanied by the unconditioned stimulus, therefore the association between the two had been broken.

The successful responses in (d):

* described spontaneous recovery as the reappearance of a previously extinguished conditioned response (blinking when a tapping sound was heard), after a rest period and *without* new learning trials.

In the less successful responses:

* students discussed a re-learning, with the unconditioned stimulus paired with the conditioned stimulus again to elicit the conditioned response.

The successful responses in (e):

* demonstrated an understanding that the tapping sound must be followed very quickly by the puff of air so that an association is made between the tapping and the puff of air.

The less successful responses:

* included definitions of contiguity, with no linkage to the experiment described, even though the question explicitly required students to do so
* demonstrated confusion between the terms *contiguity* and *contingency.*

**QUESTION 2**

The successful responses in (a):

* demonstrated an understanding that Luke had learned to fear not only bees, but also similar stimuli; that is, other flying insects

The less successful responses:

* showed limited understanding of terminology and included descriptions of stimulus discrimination
* did not link definitions to Luke’s phobia.

The successful responses in (b):

* described a fear hierarchy – a list of the feared stimuli ranked from least fearful to most fearful. The steps could be looking at pictures of bees, watching videos of bees, etc
* discussed the need to learn a relaxation strategy to reduce physiological arousal. The intent of the desensitisation program was to replace the conditioned response, fear, with a new conditioned response, relaxation
* described the pairing of items in the hierarchy with relaxation, working through the hierarchy one step at a time. When Luke could handle a lower-ranked fear without experiencing anxiety, the therapist would proceed to the next fear.

The less successful responses:

* had detailed descriptions of hierarchies, but lacked detail about the process.

The successful responses in (c):

* showed an understanding that observational learning is a cognitive process involving a number of factors, including attention, retention, reproduction and motivation
* linked one factor with the learning demonstrated by Luke’s sister.  
  Examples:
  + Luke’s sister may have admired her brother. She would have been more likely to pay attention to her role model, and observational learning would have been facilitated.
  + There must be some motivation (or incentive) for the sister to reproduce Luke’s behaviour.  
    e.g., Luke’s sister saw her brother rewarded. He received attention from their parents.

The less successful responses:

* dealt with the question superficially, with repetition of the information provided in the question.  
  Example:
  + Luke’s sister paid attention to Luke, and therefore developed a fear of flying insects.

**QUESTION 3**

The successful responses:

* demonstrated that the students had focused on the lead-in verb, explain, which required students to address *how* stress has an effect on health
* linked each effect of stress to health.  
  Examples:
  + With chronic stress, the immune system becomes compromised (high levels of cortisol). Infectious diseases become more probable.
  + Stress is linked to cardiovascular disorders because sympathetic nervous system activation constricts blood vessels and raises blood pressure and heart rate.
* included effective explanations of the General Adaptation Syndrome

In the less successful responses:

* students were able to correctly identify the effects of stress but were unable to link the effects to health
* students commonly identified weight gain/loss, insomnia, or excessive worrying, without explaining how these had an impact on health.

**QUESTION 4**

The successful responses in (a):

* focused on the lead-in verb (describe)
* cited numbers in their descriptions of sleep change from birth to 15 years of age.

The less successful responses:

* did not use data from the graph, as instructed
* did not make a comparison of the values at birth and at age 15 years
* provided reasons why the sleep changes occurred, which was not required.  
  This would have been required if the question had asked students to *explain* the changes.

The successful responses in (b):

* included either repair, restoration or memory consolidation explanations linked to differences between 5 and 50 year olds.  
  Example:
  + Sleep promotes growth of new tissue. 5 year olds are still growing and developing, compared to 50 year olds who only need repair of damaged tissue or replacement of worn out tissue.

The less successful responses:

* stated that 50 year olds led busier lives and had greater commitments, and therefore had less time for sleep.

In part (c), most students correctly identified stage B as REM sleep.

**QUESTION 5**

The successful responses in (a):

* correctly listed the order as: beta, alpha, theta, delta.

The less successful responses:

* listed the brainwaves in reverse order
* stated the frequencies or described the states of consciousness

In (b), most students could state that the brainwave frequency decreased as a person entered deeper stages of sleep.

**QUESTION 6**

This question was the best-answered question in the whole examination, with 42% of responses gaining full marks.

The successful responses in (a):

* focused on the lead-in verb (state)
* focused on effects of sleep deprivation on school performance; for example, reduced ability to concentrate in class, or reduced ability to solve problems.

The less successful responses:

* did not address the impact of sleep deprivation on school performance, as required in the question, citing for example, increased irritability and relationship problems.

The successful responses in (b):

* included explanations of the link between darkness and melatonin release, which is needed for sleep or reduced arousal levels
* demonstrated an understanding of the benefit of a strict routine in getting up at the same time every day.  
  For example: The body’s alternating sleep-wake cycle is controlled by an internal, 24-hour physiological ‘clock’. With a strict bed-time routine, circadian rhythms are not interrupted.

The less successful responses:

* confused the role of melatonin in the body.

**QUESTION 7**

The successful responses in (a):

* identified two features of the experimental design described in the scenario: random allocation of participants to the two groups and manipulation of the independent variable (type of role in comforting a crying child)

The less successful responses:

* identified an advantage of the experimental design rather than a characteristic or feature
* demonstrated a belief that the presence of an independent variable and a dependent variable was enough to make a design experimental, or that only experimental designs provided opportunities for repetition
* indicated a lack of understanding of research methodology, citing the ability to form hypotheses and conclusions was a unique feature of experimental designs.

The successful responses in (b):

* correctly identified the dependent variable as the changes in depressive symptoms.

The less successful responses:

* provided definitions of the independent variable
* identified the independent variable, instead of the dependent variable.

The successful responses in (c):

* focused on the limitations of the sample, rather than the design, and explained that the small sample size (30 participants) reduced data reliability, and the fact that all participants were all from the same medical centre reduced representativeness.

The less successful responses:

* overlooked the fact that people with depressive symptoms made up the sample, and included possible variations in children’s behaviours and characteristics
* included different strategies that could have been used to console the crying child, limitations of the experiment, rather than the sample, or statements about the effect that witnessing a child crying could have on increasing the participants’ depressive symptoms.

The successful responses in (d):

* described either focus groups or surveys with open-ended questions, focusing on descriptive, rather than numerical, data.

The less successful responses:

* were ambiguous, citing questionnaires and surveys as necessary components of generating qualitative data, and not specifying that open ended questions were required
* described the Delphi technique (not appropriate given the context), or rating scales and Likert scales, generating quantitative data.

The successful responses in (e):

* included descriptions of situational factors, such as home or work environments, financial situations, etc
* included personal factors, such as severity of the depression, duration of the depression, success (or lack) of past treatments, previous experience with children, like/dislike of children, other acts of kindness beyond the confines of the investigation, etc.

The less successful responses:

* provided generic answers, e.g., weather, time
* only identified two factors, instead of *describing* them.

The successful responses in (f):

* were specific to the investigation described: participants with depressive symptoms should have been briefed on what was involved because they were vulnerable; mental health may have been further jeopardised by exposure to a stressful situation.

**QUESTION 8**

The successful responses:

* described current interventions as more scientific, or evidence-based; as more holistic, incorporating multi‑pronged strategies; or as less invasive, with bloodletting, induced vomiting, lobotomies no longer being used.

The less successful responses:

* identified a difference using the timeline, but gave no additional information.

**QUESTION 9**

The successful responses in (a):

* described personal characteristics, such as high levels of confidence or assertiveness, good problem‑solving skills, or having an optimistic personality.

The less successful responses:

* showed confusion between the different levels and offered answers based on the socio-cultural and basic processes levels of explanation
* described one feature in two ways.  
  For example: Someone with an assertive personality is likely to be resilient. An unassertive person is less likely to be resilient.

The successful responses in (b):

* provided two different factors (e.g., family, co-workers, employers), focusing on the influence that other people exert on behaviour, and citing specific differences in how they could have affected emergency personnel resilience.

The less successful responses:

* offered answers suited to other levels of explanation.

The many successful responses in (c):

* commonly cited increased heart rate and breathing rate.

The less successful responses:

* provided biological symptoms that were not linked to anxiety
* provided symptoms at other levels of explanation.

Part (d) highlighted the fact that many students were not aware of the difference between treatments and coping strategies.

The successful responses:

* commonly stated relaxation techniques, exercise or healthy diet.

The less successful responses:

* identified treatments such as medication or electroconvulsive therapy, which are biological treatments
* identified cognitive-behavioural therapy (CBT), which is a treatment, but is not a biological treatment.

The successful responses in (e):

* identified learning as a basic process, and explained their answer through either classical or operant conditioning
* discussed the cognitive and behavioural components of CBT, and were able to link these components back to the scenario.

The less successful responses:

* identified emotions or thinking as basic processes, but were unable to make any links to the scenario.

The successful responses in (f):

* demonstrated understanding that causal relationships cannot be inferred when quantitative observational designs are used, only correlational relationships can be established; and that there is a greater chance of other variables affecting the results
* demonstrated understanding that, in qualitative designs, researcher bias may contaminate the results; that the data should not be interpreted to be representative of the entire population; and that the data provided by participants may not be accurate
* explained that to induce stress in participants, in order to monitor the effectiveness of various strategies in preventing mental health disorders, is unethical
* identified one of the following measuring tools for collecting quantitative data: rating scale, Likert scale, survey with closed questions, biological measures (e.g. heart rate, blood pressure, cortisol level).

The less successful responses:

* gave advantages, rather than disadvantages of the two designs
* demonstrated unfamiliarity with psychological terms, providing disadvantages of types of data, rather than designs
* stated that an experimental investigation about stress was unethical.

General comments on Section B

Both questions consisted of four independent sub-questions related to an opening scenario. It is unnecessary to write extensive introductions or conclusions, as has been pointed out in previous assessment reports.

The best extended responses are about one and a half to two pages of hand-writing. Answers shorter than this tend to address too few points, or do not address them in enough detail. Excessively long responses frequently contain repetition, are fragmented and disorganised.

In extended response questions, four marks are allocated for clear, well-expressed answers that are well organised and relevant to the questions.

The average mark for both questions was approximately 12/20.

**QUESTION 10**

In the successful responses:

* students described the key features of the central and peripheral routes of persuasion.  
  For the central route, the message focuses on the quality of the product; provides details, statistics; it makes the audience think carefully about the message to evaluate the information; and this route is used when the issue is personally relevant to audience (e.g., importance of vaccinations).  
  For the peripheral route of persuasion, the message is based on other cues besides the strength of the arguments in the message (e.g., attractive people, Hollywood stars, cartoons and jingles); requires little thinking by the audience; occurs when a listener is persuaded because he/she notices that a message about vaccinations has many arguments, but lacks the ability or motivation to think about them individually
* students explained advantages of the central route as:
  + likely to have a longer lasting effect upon a person’s attitudes as the person has to process the cues more carefully
  + likely to lead to the formation of stronger attitudes, which may predict subsequent behaviour better than attitudes formed via the peripheral route
  + likely to produce greater resistance to counter persuasion
  + more likely to induce cognitive dissonance. The discomfort created is likely to bring about a behavioural change, that is, ensure that vaccinations take place.
* students explained advantages of the peripheral route as:
  + effective even if the audience has low ability to process information
  + engaging viewers more easily, thus reaching a larger audience
  + effective if the audience has low motivation (or attention span) to process information
* students demonstrated a good understanding of other factors that could influence the effectiveness of the message
* in describing the source, students often described the need to have experts delivering the vaccination message, because those with experience in the field would have greater credibility.  
  In describing the message, students cited the importance of it being specific, detailed and clear, or providing both sides of an argument (message is then seen as fair, and the listeners don’t think they are being manipulated); evoking strong emotions or strong processing in the audience to make the message more effective (fear is often used in health and safety campaigns).  
  For the medium, direct contact with people was described as being more persuasive than a message delivered via television or radio. However, others believed that, in today’s world, social media would be more effective because it would be more accessible.  
  For audience factors, students described older generations as having formed stronger attitudes through direct experience; these would be harder to change
* when discussing ethics, students frequently addressed the fear evoked in the audience by the message or the graphics affecting emotional well-being, particularly if children were viewing the advertisement. Others were sensitive to the distressing aspect of exposure if viewers had been personally touched by illness, or if pressure was applied to conform against cultural/religious beliefs, or misrepresentations of information in the advertisements.

In the less successful responses:

* students found it difficult to distinguish between a description of each route and an advantage. A large number of students discussed the peripheral route of persuasion as the “emotional” route, ignoring the fact that the central route of persuasion uses emotion as well
* answers were superficial, citing facts and statistics (for a campaign targeting the central route of persuasion) compared to images and attractive people (for a campaign targeting the peripheral route of persuasion); advantages were identified but with no explanation accompanying the statement
* students misidentified the target audience, describing message features that would appeal to 3 year olds, because they would be the ones making informed decisions about vaccinations
* students chose research ethical principles such as informed consent, voluntary participation, right to withdraw and confidentiality for this dot point. It was evident that many students were unaware of the differences between ethics in research and ethics in persuasion. Another common mistake was to discuss ethical considerations of being vaccinated, rather than considerations of designing a campaign to encourage vaccinations.

**QUESTION 11**

The successful responses:

* usually included a description of Bree’s personality using Maslow’s hierarchy of needs.  
  Most students included thorough descriptions of the hierarchy, correctly identified Bree as missing her self‑esteem needs, and therefore not reaching self-actualisation
* described Bree’s personality in terms of McCrae and Costa’s Big 5 model or Eysenck’s model.  
  Most students were able to provide detailed descriptions of the chosen model and apply it to Bree
* addressed personality assessment by describing one of the self-report inventories (e.g., MBTI, NEO PI-R). Most successful responses described the actual personality assessment:  
  For example:
* One form of personality assessment is a standardised self-report inventory. A standardised test is any form of test requiring all test takers to answer the same questions in the same conditions. A rating scale is often used, allowing individuals to express how much they agree or disagree with a particular statement. The scoring of the test is then done in a “standard” or consistent manner. This makes comparisons between the relative performances of individuals possible, and allows them the identification of individual strengths and weaknesses.
* described some strategies in assertiveness training.  
  For example:
* Bree could rehearse some assertive communication techniques by learning to state her feelings, needs, and wants appropriately, stating the facts, speaking clearly and using appropriate gestures, maintaining eye contact, avoiding exaggerations, and using “I” statements rather than “you” statements. She would then need to overlearn her responses to ensure that, even if she becomes nervous or angry during the conversation, she has learned this ‘script’ so well that she is able to follow through with it in a calm manner. Bree would then need to be prepared to repeat herself, using some different techniques and different words if she felt she was still not being heard.

The less successful responses:

* demonstrated superficial or incorrect understanding of self-actualisation  
  For example:
* Bree cannot become self-actualised until she becomes a school leader or Bree needs to become self-actualised in order to be happy and have a healthy personality.
* demonstrated knowledge of Rogers’ self-concept theory, but lacked application of that theory to Bree’s personality, failing to clearly explain how incongruence between the actual self and ideal self affects personality
* revealed confusion in understanding of the traits and equating them with experience  
  For example:
* Bree is a low scorer in openness because she has no experience in public speaking.
* included analyses of Bree’s personality using a psychodynamic model (with most opting for Freud). The multiple aspects of Freud’s model may have been the reason for this; students attempted to discuss the psychosexual stages, the id, ego, superego, and the conscious, preconscious and unconscious minds. Responses focusing on one aspect were more successful
* students were typically able to successfully identify one personality assessment by name but beyond this identification, responses to this question tended to be vague. Many responses, instead, described how understanding her personality strengths would help Bree in leadership application, rather than actually describing a personality assessment
* revealed a lack of knowledge of assertiveness training. Responses tended to define the term *assertiveness*, and explain its importance. Most students didn’t respond to the ‘discuss how’ part of the question, which requires students to explain the process of the training. Most could discuss the likely outcomes of the training (confidence, clear communication, effective body language), but they could not explain how the process actually produces those outcomes.