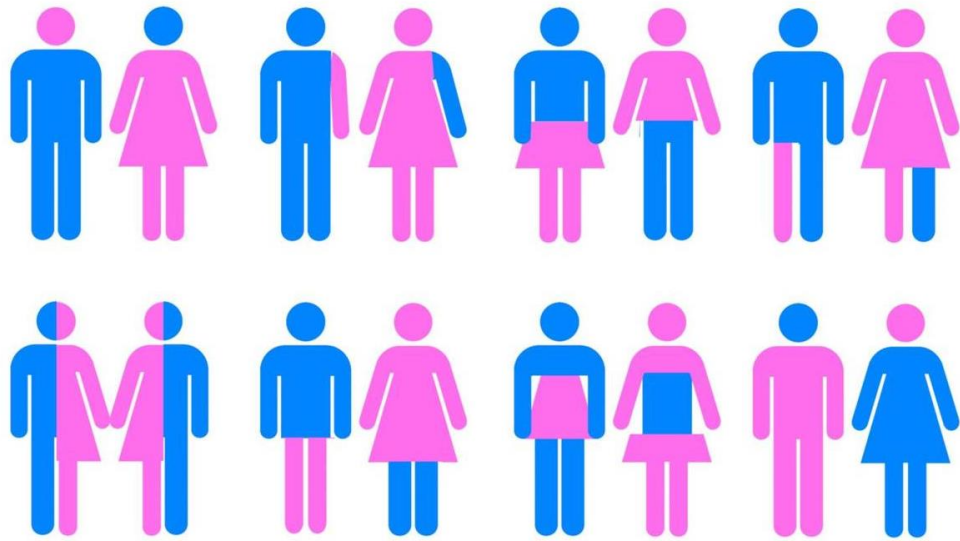


Gender

AQA Psychology

Paper 3



NAME _____

Gender Specification Details

Paper 3 Candidates should be able to: -	GREEN	AMBER	RED
4.3.3 Gender			
1. Sex and gender. Sex-role stereotypes. Androgyny and measuring androgyny, including the Bem Sex Role Inventory			
2. The role of chromosomes and hormones (testosterone, oestrogen and oxytocin) in sex and gender. Atypical sex chromosome patterns: Klinefelter's syndrome and Turner's syndrome.			
3. Cognitive explanations of gender development: Kohlberg's theory; gender identity, gender stability and gender constancy; gender schema theory.			
4. Psychodynamic explanations of gender development: Freud's psychoanalytic theory; Oedipus complex; Electra complex; identification and internalisation			
<u>5.</u> Social learning theory as applied to gender development. The influence of culture and media on gender roles.			
<u>6.</u> Atypical gender development: gender identity disorder; biological and social explanations for gender identity disorder.			

Possible Essay questions

Essay Title	My Grade	My amended grade
Discuss the concept of androgyny. Refer to the Bem Sex Role Inventory in your answer (16 marks)		
Discuss the role of chromosomes and hormones in sex and gender (refer to atypical sex chromosomes in your answer) (16 marks)		
Describe and evaluate Kohlberg's theory of gender development (16 marks)		
Discuss two cognitive explanations of gender development (16 marks)		
Outline and evaluate Freud's psychoanalytic theory of gender development (16 marks)		
Discuss social learning theory as applied to gender development. (Refer to an alternative explanation of gender development in your answer). (16 marks)		
Describe and evaluate the influence of culture and / or media on gender roles. (16 marks)		
Discuss research related to gender identity disorder. (16 marks)		

Key word glossary

Androgyny

Gender

Sex

Sex-role stereotypes

Chromosomes

Hormones

Intersex

Conservation

Gender constancy

Pre-operational

Schema

Electra complex

Identification

Internalisation

Oedipus complex

Social Learning Theory

Culture

Media

Gender Identity
Disorder (GID)

Sex-Role Stereo Types and Androgyny

If we ask 'who are you?' one of your first answers might be to say I am 'a boy' or 'a girl'. Your sex is a key aspect of your sense of who you are. In fact psychologists distinguish between sex and gender. Sex is a biological fact – whether a person is genetically male or female. Gender refers to a person's sense of maleness or femaleness. In this topic we are concerned with the development of gender, which is due in part to biology (nature) and in part to life experience (nurture).

	TRUE	FALSE	DON'T KNOW
1) The builder was driving a van			
2) The van was travelling quicker than the nurse			
3) There was at least one man in the van			
4) Not every man mentioned would shout 'nice-legs' to a passer by			
5) The doctor is no longer living with his wife			
6) The doctor has a new girlfriend			
7) The doctor's son is in the army			
8) The youngest child is training to be a hairdresser			
9) At some point a man spoke to a woman			
10) At least two of the people mentioned are men			
11) A woman was shouted at			

Sex-roles stereotypes

Describe sex-role stereotypes and provide examples...

Androgyny

Formed from the two words 'andro' meaning males and 'gyny' meaning female. The word means a combination of male and female characteristics.

Background Info...

Bem is a feminist who points out that gender schemas become the **lenses** through which we view the world. These '**lenses**' lead to three main beliefs held in Western society: men and women differ psychologically and sexually, men are the dominant and superior sex and these differences are natural. The repercussion of viewing things through these lenses is that society is structured in a way that **empowers men but not women**.

In contrast to this, Bem takes an interactionist viewpoint whereby the similarities between the sexes outweigh the differences. Society should be gender depolarized through the redefinition of our gender traits and the perception of what it is to be human rather than what it is to be male or female.

Bem's Explanation for Psychological Androgyny (A01)

Bem (1974) challenged the traditional idea that there are only 2 gender identities by adding ANDROGYNOUS to the masculine and feminine identities. By PSYCHOLOGICAL ANDROGYNY she was referring to individuals having behavioural and emotional traits rather than a physical androgyny (i.e. not just appearing androgynous; thinking a feeling that way).

According to **Bem**, there are costs involved in the maintenance of gender role stereotypes. These costs include limiting opportunities for boys and girls, ignoring talent and perpetuating unfairness in our society. Bem therefore felt it was best to be androgynous as one could be more **adaptable** to the demands of modern life and take the opportunities that are open to both boys and girls...

For **Bem**, psychological androgyny means taking on whichever quality best fitted the situation- whether it was masculine or feminine. It is far more adaptive than the traditional stereotyped gender identities of 'boy' or 'girl'.

Bem designed the **SRI** (Sex Role Inventory) questionnaire to test her ideas and found that 34% of male participants and 27% of female's participants were androgynous. These individuals were found by a number of researchers to be more adaptable to situations and a greater sense of well-being.

Bem (1983) reformed her approach in terms of what she called '**gender schema theory**' – (to be discussed later). She suggested that the differences between androgynous and a traditionally sex-typed person is one of cognitive style. An androgynous person, when faced with a decision as to how to behave in a particular situation, responds independently of any gender concepts. In contrast, a traditionally sex-typed person determines what would be appropriate for their gender, therefore using gender schemas. Bem's argument was that a person who has a 'freer' cognitive style will be psychotically healthier.

Evaluation of Sex-role stereotypes and androgyny



Support for parental influence Smith and Lloyd (1978) showed that mothers do treat boy and girl babies differently, in line with sex-role stereotypes. The mothers sample size of 32, were videotaped playing for 10 minutes with a baby (not their own child). The babies were six months old and dressed and named as either a boy or a girl. Two were actually boys and two were actually girls but the clothes / names didn't match their sex type. Seven toys were present: a squeaky hammer and a stuffed rabbit in trousers (masculine), a doll and a squeaky bambi (feminine), and a squeaky pig, a ball and a rattle (neutral).

If the mother thought she was playing with a boy, she verbally encouraged more motor activity and offered gender appropriate toys. In other, words, the mothers to the perceived sex of the infant, in-line with typical gender expectations.

Support for the relationship between androgyny and psychological health.

Research has found a positive correlation (ooohh correlations!!) between androgyny and psychological health, as Bem predicted. Prakash et al. (2010) tested 100 married females in India on masculinity / femininity and a range of outcomes were measured including; physical health, depression, anxiety and perceived stress. Females high in masculinity had a lower depression scores etc., whereas those with higher femininity scores had higher depression scores etc. This supports the view that androgyny has a psycho-protective effect, because those with masculinity AND femininity were better off in terms of health.

Real world applications

Reliability of the BSRI

Validity of the BRSI

Exam Questions

1. Distinguish between the terms sex and gender (2 marks)

2. Describe one study related to sex-role stereotypes (4 marks)

3. Describe the Bem Sex Role Inventory (4 marks)

Essay title: Discuss the concept of androgyny	
Outline (Write for 7 minutes)	Evaluate (13 minutes)
	Research support (+)
	Research Challenge (-)
	Issues or debates (+/-)
	Methodology/approaches (+/-)
	If you need an extra evaluation point due to not writing the above in enough detail then add another issue/debate/methodology or approach evaluation.

The role of chromosomes and hormones

Everyone has 23 pairs of chromosomes (in each cell of the body). Each chromosome carries hundreds of genes which contain instructions about physical and behavioural characteristics such as eye colour.

Of the 23 pairs of chromosomes, there is one set of sex chromosomes and these establish an individual's **sex**.

- Females have XX chromosomes.
- Males have XY chromosomes.

The Y chromosome does not carry much genetic information but it does determine an individual's sex. The Y chromosome causes changes to the embryo from a very early stage.

There is usually a direct link between an individual's chromosomes and their external/internal reproductive organs. It is the chromosome that starts a chain of events that establish an individual's sex.

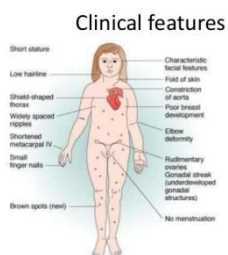
Atypical sex chromosomes patterns

Task: Your task is to research a range of genetic disorder that can affect an individual's gender.

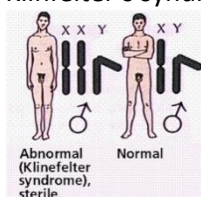
You need to find out:

- The main characteristics of each disorder
- The consequences
- The treatments (if any)
- Summarise in the spaces below.

Turner syndrome



Klinefelter's syndrome



Below is an article about a family in the Caribbean, you need to read it and answer the questions following the article.

On a lush tropical island in a remote area of the Caribbean something, very peculiar is happening. The young girls in one village are turning into boys. This startling sex change is occurring naturally, and a team of scientists sent to the island believes it could throw a new light on fundamental aspects of human nature and sexual identification. The Caribbean phenomenon has been happening for the past 50 years. In that time 37 village girls have changed into boys around the age of 13.

The story of the Batista family is typical of the village. Four out of the ten children in the Batista family have changed from girls into boys. The eldest, Mario, now 29 and married with children, began life as a girl named Antonia. Their next daughter Milady remains a girl. Then came Chichi, now 19, a normal male who started out as a girl called Isobel. Then there is Venecia, a normal girl. And now Virgilio, who is 12, is in the process of changing from a female to a male.

The Batista's do not regard themselves or their affected children as freaks. After all, 22 other families have experienced the same sex transformation over the years. The primitive lifestyle of the village contributes greatly to the relaxed and passive acceptance of "God's will." The people of the island are a mixture of Negroid and Creole stock - well-built handsome men and tall, strapping girls able to share the work load of cutting sugar cane, the island's staple crop.

Virgilio's brothers immediately found girlfriends when they turned into boys. Mario, the eldest, is the father of two children now, living in one of the bigger towns. "We always brought up our girls as girls" Mr Batista says. "Because that's what we always thought they were."

"And some of our girls stayed girls," adds Mrs Batista, pointing to two of her grown-up daughters who remained girls and are now married with babies of their own. None of the Batista men who were girls appears to show any sign of embarrassment about the change. Even Virgilio, still in the process, did not mind removing his trousers to reveal his sexual parts.

At birth Virgilio and his other sisters who became boys looked just like any other female baby. But the male anatomy was waiting inside his body and the external genitalia began to change at puberty. The testes dropped, as with all pubescent boys. But in the Caribbean children, the testes have to force their way from deep inside the child's body. The clitoris grew into a normal, full-size male penis.

When they reached puberty this produced an increase in testosterone and led to the production of dihydrotestosterone which Virgilio and the other affected children were unable to produce when they were tiny babies. This led to them developing the external anatomy of a male.

In the womb all babies have the beginnings of both male and female sex organs. How the child develops, is determined by the "program" laid down by the chromosomes within its cells. If the child has the female chromosome structure, she will develop ovaries, and the male organs will disintegrate, leaving the female organs to grow.

But the Caribbean children had inherited a faulty gene which meant that the testes developed, but failed to produce the chemical which would remove the female parts. The body did not start producing the vital chemical until puberty, and then the children underwent the changes that should have occurred in the womb.

What is particularly significant is that all of the Caribbean children were brought up as normal girls. They were taught the ordinary female village tasks: Washing the clothes, cooking, fetching the wood, and they played with dolls.

But when they reached the age of 10 they suddenly felt the urge to be male. Young Virgilio explains: "I began to feel like a man in my muscles." Virgilio's father explains: "When they turn into men they change into different clothes. Soon everybody forgets. They find girlfriends very quickly." Indeed, the affected children become more muscular and virile than their normal brothers.

The easy adjustment of the Caribbean children led the scientists to challenge the usual view that our "male" or "female" behaviour is determined more by the way we are brought up than by our physiology. They suggest that there may be a part of the brain which is different in males and females and which governs much of what we think of as sex-role behaviour.

In the space below summarise the case study above: make sure you include the findings, conclusion:

What does this suggest about the biological influences on gender development?

Hormones

Chromosomes determine a person's sex but most gender development is actually governed by hormones. Hormones are released prenatally and in adolescence when we are exposed to a surge of hormones during puberty. To study the effects of hormones we have to look at individuals with a disorder, as it would be unethical to change someone's hormones on purpose.

Congenital adrenal hyperplasia (CAH) - An inherited disorder, present at birth, which affects a baby's adrenal glands and therefore the ability to produce certain hormones. Girls with CAH usually have normal internal reproductive organs but they also have male external genitalia.

Androgen Insensitivity Syndrome (AIS) - A condition that causes individuals to have insensitivity to androgens (hormones such as testosterone). In effect the body would produce the testosterone but the individual would not respond to it. This can lead to no external male genitalia being developed.

Females can also be exposed to large doses of male hormones (this could be due to medication while the mother was pregnant). This causes the female to develop swollen genitalia (resembling a penis).

(More about the above later)

Hormone	Description	Research
Testosterone		
Oestrogen		
Oxytocin		

Task:

Caster Semenya, a South African athlete who won the 800m World Champion in Berlin 2009. Rumours abounded that she was a hermaphrodite. Tests show that controversial runner Caster Semenya is a woman ...and a man!



The 18-year-old South African champ has no womb or ovaries and her testosterone levels are more than three times higher than those of a normal female, according to reports.

Semenya could be stripped of the gold medal she won in Berlin last month and her competitive future is in limbo, according to Australia's Daily Telegraph.

Using your knowledge of gender, create arguments for and against the decision to strip her of her medals

Evaluation of chromosomes and hormones

Develop each of the following into PEEL paragraphs.

Point: Challenging biological determinism

Evidence:

Explain:

Link:

Point: The importance of other factors

Evidence:

Explain:

LINK:

Point: The role of culture and social influences

Evidence:

Explain:

LINK:

Point: Real-world applications

Evidence:

Explain:

LINK:

Point: The effects of hormones on brain development
Evidence:
Explain:
LINK:

Additional Notes section

Exam Questions

1. Outline the role of chromosomes in sex and gender (6 marks)

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2. Describe Klinefelter's syndrome (4 marks)

3. Outline the role of hormones in sex and gender (6 marks)

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[illegible]

Essay title:

Discuss the role of chromosomes and hormones in sex and gender – your answer MUST refer to atypical sex chromosome patterns.

Outline (Write for 7 minutes)

Evaluate (13 minutes)

Research support (+)

Research Challenge (-)

Issues or debates (+/-)

Methodology/approaches (+/-)

If you need an extra evaluation point due to not writing the above in enough detail then add another issue/debate/methodology or approach evaluation.

Psychological explanations of gender - Cognitive development theory



Cognitive-developmental theories focus on how children's thinking develops as they grow. They focus on **maturational**, which suggests that all children must develop in the same way, through the same stages. Age is not so important here, as children may progress through the stages at different speeds, but all children will move through the same stages in the same order. Children will only move onto the next stage when they are ready to. **Lawrence Kohlberg (1966)** produced such a theory to explain the development of gender.

Kohlberg's theory of Gender Constancy (1966)		
THEORY	<p>Kohlberg believed that children can only learn gender-behaviours when they realise that gender is constant, i.e., they cannot change from one to the other. This only happens at age 7. Children develop gender identity at age 3, but this is only a basic understanding. The stages of development are as follows:</p> <ul style="list-style-type: none"> • Age 2-3: Gender Identity: the child learns which gender they are. They also recognise others as male or female. This is simply based on their physical appearance, so if a boy wears a skirt, he therefore becomes a 'girl'. • Age 3-7: Gender Stability: the child learns that gender is fixed: males stay male and females stay female. But they still don't realise that gender stays the same over situations: if a boy acts like a girl he might turn into one! • Age 7-12: Gender Constancy: children now fully understand gender and realise that it stays the same, even if the person looks or behaves differently. If a girl cuts her hair short, she is still a girl. At this stage, children are ready to learn about gender-appropriate behaviours. 	<p>This third stage is related to the theory of cognitive development by Jean Piaget. He studied how children's general thinking develops. His studies demonstrated that children aged under 7 don't understand that objects remain the same even if they change shape. If you show a child some water in a short, fat glass, then pour it into a tall, thin glass, children under 7 will believe that there is now more water, as the level is higher. Children over 7 realise that there is the same amount of water. This is called conservation and is related to a child's understanding that gender stays the same, even when appearances change.</p>
EVIDENCE	<p>Slaby & Frey (1975) conducted research involving asking children questions about gender. Children aged 2 were shown a picture of a boy and girl and asked which they were: they could answer correctly. Children were then asked 'Were you a little boy or little girl when you were a baby? Will you grow up to be a mummy or daddy?' Children could not answer correctly until age 3 or 4. Finally, children were shown films of men and women. Those with gender consistency watched the same-sex model as themselves, suggesting that they realise that this is what they will grow into.</p> <p>Conclusion...</p>	

How can we apply the science debate to the cognitive development theory?

Fill in the boxes that you think apply to the theory.

Identify the stage

Scenario	Kohlberg's stage
"I'm a girl because I have long hair"	
"Daddy is a girl as he has long hair"	
"This is a woman even though she is a builder"	
"Daddy is a man"	
"This is a girl even though she has short hair"	
"That must be a girl playing with dolls"	

Task:In the table below your task is to explain how the child would view the toy, in terms of gender, at each stage, taking into account the age and the gender constancy theory.

Age	Male Ken doll	Ken doll with skirt on
2		
4		
6		

The cognitive development theory is scientific because.....	The cognitive development theory is NOT scientific because.....
Replicable?	Lack of reliability?
Objective?	Subjective?
Control?	Experimenter bias?
Falsifiable?	Unfalsifiable?
<p>Thompson (1975) when children were given pictures of other children of mixed sex, by two years old they were able to select the pictures of same-sex children. This demonstrated that the children were able to self-label and also identify the gender of others. At two years old, 76% were able to show correct gender identity compared to 90% of 3 year olds. This shows support for Kohlberg's theory as it demonstrates that children's ability to label and understand gender increases with age.</p>	

Cognitive explanation of gender development

(Point) – Age differences

Evidence: Slaby and Frey (1975) did find that gender constancy appeared at a younger age than Kohlberg had suggested, as young as five.

Explanation: This is not a direct challenge of the theory, as it still supports the same idea and thinking however, adjustments to the ages are necessary.

Link:

(Point) – Gender differences - It has been found that boys tend to demonstrate gender consistency before girls.

Evidence: Huston (1985) found that it was relatively easy to get girls to engage in masculine activities, but not vice versa as boys generally resist.

Explanation: This can be explained using the Social Learning Theory. Male role models tend to be more powerful (and therefore more likely to be imitated), than female counterparts so boys are more likely than girls to identify with their same-sex model and act appropriately. Males are also more likely to be punished for gender-inappropriate behaviour than girls and therefore learn appropriate gender more quickly.

Link: This suggests that Kohlberg's theory is not a complete explanation of gender development; it is clearly more complex and cannot be explained by one theory.

(Point) – Gender constancy may not be required.

Evidence: Martin and Little (1990) found that children under the age of four so no signs of gender stability let alone gender constancy.

Explanation: But they do show many signs of gender stereotyping about what boys and girls are permitted to do.

Link:

Exam Questions

1. One stage of Kohlberg's theory of gender development is called gender labelling. Briefly describe **another** stage (3 marks)

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2. Kohlberg's theory of gender development is a cognitive explanation. Explain in what way it is cognitive. (2 marks)

[illegible]

Essay title: Describe and evaluate Kohlberg's theory of gender development.	
Outline (Write for 7 minutes)	Evaluate (13 minutes)
	Research support (+)
	Research Challenge (-)
	Issues or debates (+/-)
	Methodology/approaches (+/-)
	If you need an extra evaluation point due to not writing the above in enough detail then add another issue/debate/methodology or approach evaluation.

Gender Schema Theory

- **What is meant by a schema?**
- A schema is a mental representation of an aspect of the world: it is a cluster of related items that together create a concept. It can also be known as a stereotype; however a schema is more complex.
- In the space below draw a picture or write down key features of a robber and a princess

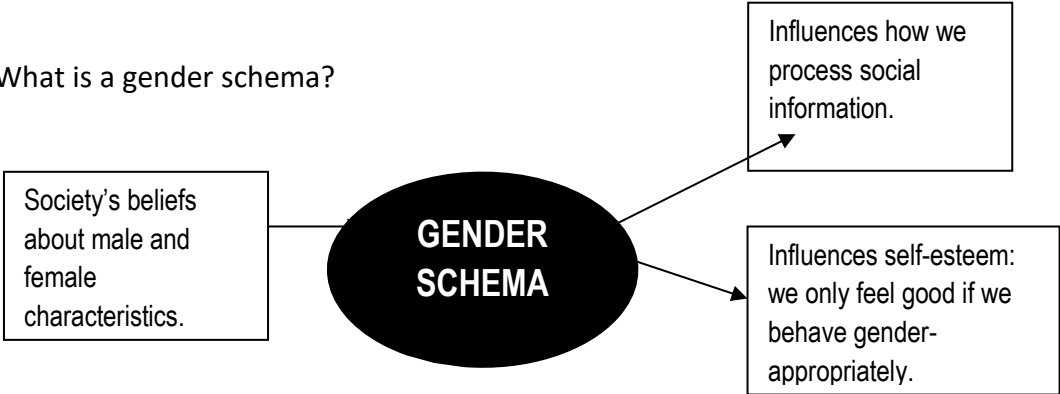
Robber	Princess
---------------	-----------------

Compare your images/list to the person next to you: are they similar? This is a schema – an idea of how something should be.

Now think about what your schemas are for males and females, what pops into your head when you think about a male or female? Use the space below to either draw an image or fill the box with words.

Male	Female

Compare with the person next to you: are they similar / different?

Gender Schema Theory	
THEORY	<p>What is a schema?</p> <p>What is a gender schema?</p>  <p>Martin and Halverson (1981) suggested that, once children understand their <i>gender identity</i> (around age 3); they start to look to others for information about their <i>gender schema</i>. Unlike Kohlberg, Martin and Halverson don't believe that children have to understand constancy for this to happen. When children understand which sex they are, they develop a sense of <i>in-groups and out-groups</i>. They concentrate on observing their in-group and learning their behaviours. They show favouritism towards their in-group. They avoid the opposite sex because they are 'not like me'. Peers are teased if they play with the opposite sex and so learn to avoid doing so.</p>
EVIDENCE	<p>Martin (1995) showed toys to 4-5 year olds and told them that they were either girls' or boys' toys. Children would much prefer playing with the toys that were said to be for their own gender. Liben & Signorella (1993) showed films of adults doing stereotypical opposite-sex activities (eg a male nurse) and found that children were more likely to completely forget seeing this than more stereotypical activity. This suggests that children only really notice information which supports the gender stereotypes they are learning. This is called <i>confirmatory bias</i>.</p>
A FURTHER EXPLANATION	<p>Sandra Bem (1981) suggested that children can be categorised as <i>gender-schematic</i> (they perceive information about themselves that reflects stereotypes and are more ready to categorise behaviours as definitely male or female) or <i>gender non-schematic</i> (they have a more androgynous schema with both male and female behaviours). Androgyny is healthier as it allows for more flexible behaviour and less anxiety.</p>

Research

Martin and Halverson (1983)

Task: The researcher showed the children pictures which included males and females in gender roles and non-gender roles. They asked children to recall pictures of people. **Findings:** Children under 6 recalled more of the gender-consistent ones (male fire fighters) than gender-inconsistent ones (males nurses).

Conclusion:

A03:

LINK:

Task:

When David Reimer had his penis and testes removed at 6 months old, Dr Money directed David's parents to bring him up as a girl.

Using your knowledge of the gender schema theory, what advice would you give Mrs Reimer when bringing her 'daughter' up.



Beck Laxton, 46, and partner Kieran Cooper, 44, decided not to reveal baby Sasha's gender to the world so he would not be influenced by society's prejudices and preconceptions.

They referred to their child as "The Infant" and only allowed him to play with "gender-neutral toys" in their television-free home.

For the first five years of his life Sasha alternated between girls' and boys' outfits, leaving friends, playmates and relatives guessing.

What impact do you think this would have on Sasha (who is actually a boy?) In the box below, weigh up the pros and cons of gender neutrality: try to bring in elements of the gender schema theory.

Strengths	Weaknesses

Task 3: Summarise, in no more than 1 sentence, how each of the following explains gender development

Schemas:

In-group and Outgroup Processes

Resilience of Gender Beliefs

Gender Schema Theory, Martin and Halverson (1981) A03 Studies

For each study, decide whether it supports or refutes Gender Schema Theory and why...

Fagot (1985) found that two-year-olds who can correctly label the genders spent 80% of their time in same-gender groups, whereas those who cannot spend only 50% of their in same-gender groups. Also, early labelers are subsequently more sex-typed in their choice of toys and have greater knowledge of gender stereotypes (Fagot & Leinback, 1989).

Martin and Little (1990) tested three- to five-year-olds on gender identity, stability and constancy, as well as on clothing and toy stereotypes, toy preferences and peer preferences. They found that children require only gender identity for their preferences and knowledge to be influenced.

Martin and Halverson (1983) found that when children view pictures or watch films of individuals in cross-gender activities, such as a male acting as a nurse or a female as a doctor, they either miss the point, distort the information or quickly forget it (insisting that the man was the doctor and the woman was the nurse). This demonstrates the resilience of children's gender-role beliefs and attitudes. When they processed gender-related information in terms of their schemas, they admit data that are consistent with their schemas, and disregard or reject data that are inconsistent with them.

Bradbard et al 1986:

'When 4-9 year olds were told that certain 'neutral' items were in fact boy or girl items, they took greater interest in the ingroup labelled toys. A week later, more details about the ingroup toys were accurately recalled than those toys in the outgroup.'

Martin and Halverson (1983) found that when children were asked to recall pictures of people children under 6 recalled more gender consistent (Male fire-fighter) ones than inconsistent (Male nurse). This shows that children pay greater attention to information consistent with gender schemas.

Hoffman (1998) found that children whose mothers work have less stereotyped views of what men do. This suggests that children are not entirely fixed on gender schemes and can take on some gender inconsistent ideas.

In the space below compare and contrast the two cognitive theories of gender development. You could get an essay that asks for TWO cognitive explanations

	Gender Constancy Theory	Gender Schema Theory
What does the theory claim are the influences on gender development?		
How does gender develop according to this theory?		
What is the date of the theory?		
Briefly describe a key study for each theory.		
What type of research is it?		
Assess the ecological validity of the research.		
Give one main strength of the theory.		
Give one main limitation of the theory.		
	<i>Gender consistency is the cause of gender identity: "My gender isn't going to change so I should start behaving like a boy."</i>	<i>Gender identity is the cause of gender consistency: "I'm a boy so I should find out how boys are supposed to behave."</i>

Can the theories reach a compromise? In the space below can you create a basic theory that takes into account sections from the gender schema theory and the cognitive development theory?

Evaluation - Gender Schema Theory

(Point) – Gender schemas without constancy

Evidence:

Explanation:

Link:

(Point) – Gender identity even earlier

Evidence:

Explanation:

Link:

(Point) – Gender schemas organise memory

Evidence:

Explanation:

Link:

You need to find 2 more evaluation point:

Exam Questions

1. Outline gender schema theory explanation of gender development (6 marks)

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2. Give one criticism of the gender schema theory (4 marks)

-
-
-
-
-
-
3. Explain in what way gender schema theory is an example of the cognitive approach in psychology. (3 marks)

-
-
-
-
-
-
-
-
-
-
-
4. Explain one difference between Kohlberg's theory of gender development and the gender schema theory. (4 marks)

Essay title:
Discuss TWO cognitive explanations of gender development

Outline (Write for 7 minutes)

Evaluate (13 minutes)

Research support (+)

Research Challenge (-)

Issues or debates (+/-)

Methodology/approaches (+/-)

If you need an extra evaluation point due to not writing the above in enough detail then add another issue/debate/methodology or approach evaluation.

Psychodynamic explanation of Gender Development

Freud saw conscious behaviour as motivated by unconscious drives, with the structure of the mind consisting of the _____, _____ and _____, the three components of personality. Freud saw children as experiencing an unconscious conflict as they went through each of the five psychosexual stages. In the first two stages, the oral and the anal; stages, children are perceived as 'bisexual' as there are no visible differences between behaviour in boys and girls. However, when children reach the third stage, the phallic stage, between ages 3 and 5, its libido (life force) is seen as increasing focused on their genitals and it is this stage when child's gender identity develops through the resolution of either the Oedipus complex (for boys) or the Electra complex (for girls)

Freud saw children developing through psychosexual stages. He believed that the unresolved conflicts occurring during these stages affected later behaviour.

1. **Oral stage** (0-1 years) pleasure gained from the mouth and sucking
2. **Anal stage** (1-3 years) pleasure gained from evacuating the bowels.
3. **Phallic stage** (3-6 years) pleasure gained from the genitals
4. **Latency stage** (6-12 years) the development of other activities means less concentration on sexual areas.
5. **Genital stage** (puberty onwards) pleasure gained through heterosexual relationships.

Freud believed that people could become 'fixated' at any stage, thus affecting later behaviour. For example, a smoker has an 'oral' personality, since they gain pleasure through the mouth. An excessive tidy and obsessive person has an 'anal' personality

The third stage is known as the **phallic stage**, which occurs between the ages of 3 and 5. In this stage, the child unconsciously sexually desires the opposite-sex parent and is jealous of the same-sex parent. In order to deal with these feelings and the anxiety that they produce, the child begins to behave like the same-sex parent. This is known as **identification**. Freud believed this process occurred differently in boys and girls.

Gender development in boys – The Oedipus Complex

The Oedipus complex has three key components;

1.

2.

3.

The gender identity and identification leads to masculine behaviour as young boys take on the attitudes and expectations of their fathers.

Gender development in girls – The Electra Complex

Just like the Oedipus complex the Electra complex also has three key components:

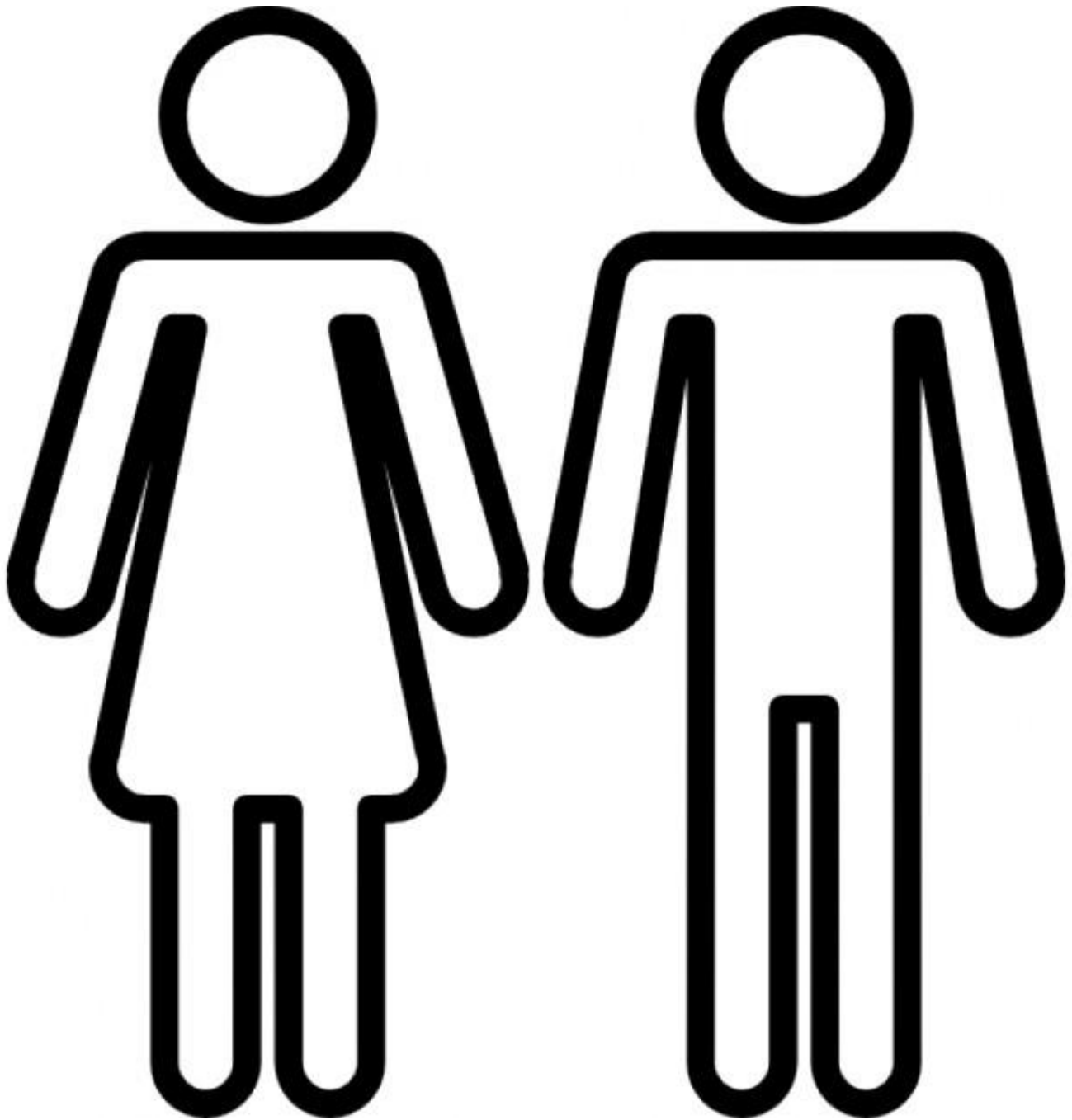
1.

2.

3.

The end resolution is less satisfactory for girls because their identification with the same-sex parent is less strong – Freud believed that there was little reason for anyone to want to identify with a woman because women have a lower status than men, so why would you want to identify with a woman?!?!

Task –Around the figures below, in short bullet points summarise up the Oedipus and Electra complex.



Read the Little Hans Case study

Freud (1909)

Freud carried out a case study to investigate the gender development of a baby known as 'Little Hans'

Aim	To investigate Little Hans's phobia
Method	Hans's father wrote to Freud to tell him about Hans's development. At the age of four Hans developed a phobia of horses. He was frightened that a horse might bite him or fall down. He was particularly afraid of large white horse with black around the mouth. Freud analysed this information.
Result	Freud claimed that Hans was experiencing the Oedipus complex. He unconsciously sexually desired his mother and saw his father as a rival and feared castration. He displaced the fear of his father on to horses. The white horse with black around his mouth represented his father who had a dark beard. His fear of being bitten by a horse represented his fear of castration and his fear of horses falling down was his unconscious desire to see his father dead.
Conclusion	This supports Freud's ideas about the Oedipus complex.

1. Explain how the Little Hans case study supports Freud's Psychodynamic explanation of gender development?

I am currently experiencing problems with my five year old son. He used to be a very loving little boy who enjoyed cuddles and kisses from me. Our relationship was so close that he would upset his father by refusing to go to him when he was distressed.

Is this normal? What should I do?

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Evaluation – Psychodynamic approach to gender development

Little Hans

- Supporting research

Sexual Awareness

- Both complexes depend on the child having an awareness of genitals, however Bem found that children aged 3 - 5 were not aware of what the opposite genital looked like, which would make it impossible for the Oedipus / Electra complex to develop
- However..

Lack of validity

- Predictive validity??

Alternative Explanations

- Chodorow (1994) proposed that mothers and young daughters are closer precisely because they are the same sex, whereas sons are more able to be independent because they are different from their mothers.
- The advantage of this account is that it does not involve sexual desire for the opposite sex parent and also does not predict problems where parents are the same sex.
- Therefore,

Any other evaluation point?

Exam Questions

1. Outline the Oedipus and Electra complex (4 marks each)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

2. Explain how both identification and internalisation are part of Freud's account of gender development (4 marks)

Essay title:
Discuss Freud's psychodynamic theory of gender development

Outline (Write for 7 minutes)

Evaluate (13 minutes)

Research support (+)

Research Challenge (-)

Issues or debates (+/-)

Methodology/approaches (+/-)

If you need an extra evaluation point due to not writing the above in enough detail then add another issue/debate/methodology or approach evaluation.

Social learning theory as applied to gender development

Social learning theory regards gender identity and role as a set of behaviours that are **learned** from the environment. The main way that gender behaviours are learned is through the process of **observational learning**. Children observe the people around them behaving in various ways, some of which relate to gender. They pay **attention** to some of these people (models) and **encode** their behaviour. At a later time they may **imitate** the behaviour they have observed. They may do this regardless of whether the behaviour is 'gender appropriate' or not but there are a number of processes that make it more likely that a child will reproduce the behaviour that its society deems appropriate for its sex.

First, the child is more likely to attend to and imitate those people it perceives as **similar** to itself. Consequently, it is more likely to imitate behaviour modelled by people the same sex as it is. Second, the people around the child will respond to the behaviour it imitates with either **reinforcement** or punishment. It is likely that the child will be reinforced for acting in gender appropriate ways and punished or ignored for gender inappropriate behaviour. Third, the child will also have observed the consequences of other people's behaviour and will be motivated to imitate the behaviour it has seen reinforced and avoid imitating the behaviour it has seen punished (**vicarious reinforcement** and punishment).

Socialising agents model examples of appropriate and inappropriate behaviour, and also the consequences of conforming or not conforming to gender norms (vicarious reinforcement).

Use your knowledge of the social learning theory to explain why a little boy would imitate their dad.

Stage	Explanation
Attention	
Retention	
Motivation	
Reinforcement	

Once this process has taken place and the child begins to imitate their model, they will then begin to act in a gender specific way and receive direct reinforcement from the socialising agents which causes them to continue with that behaviour.

In addition:

Children also learn through **direct tuition** and instructions about appropriate gender behaviour, for example, boys being told not to play with Barbie.

Your experiences

How do you think your parents influenced your gender behaviour development? What would they do if you behaved according to the opposite gender (playing football if you are a girl, playing with dolls if you are a boy)? Which parent do you think would be most bothered by this?

Think about your childhood....

What colour was your bedroom?

Did you have a favourite outfit?

What toys did you play with?

Does this 'fit' with the stereotypical role of being a male/ female?

Who else influenced your childhood behaviour?



Influence of parents

Social learning theory believes that gender roles are developed because boys and girls are treated differently by their parents. Adults are known to treat babies differently depending on if they perceive them be boys or girls, suggesting they will be expected to respond in a gender specific way and in turn be rewarded, leading to the child repeating this behaviour. Parents use rewards and punishments to encourage gender-appropriate behaviour in their children. They encourage feminine behaviour in their daughters by, for example, telling them how pretty they look in a dress, while telling their sons that they look soft playing with dolls.

Evidence of parental influence – Smith & Lloyd 1978: this study demonstrated that most parental influence is unconscious – parents don't always realise how they are influencing their children. In this lab experiment, women (who were mothers themselves) were filmed playing with a 4-month-old baby (not their own). Regardless of the baby's actual gender, sometimes it was dressed as a girl and sometimes as a boy. Smith & Lloyd wanted to know how the women would respond to the baby based on what they *thought* the gender was. There was a variety of toys for the women to choose from to give to the baby. The results showed that the choice of toy varied depending on what gender the baby was perceived to be. The 'boy' would be given a toy hammer to play with and encouraged to make noise, while the 'girl' would be given a doll to play with and encouraged to be quiet. It was also found that the women were more prepared to let the 'girl' play with boys' toys, but not to let the 'boy' play with girls' toys. Therefore, the women were reinforcing stereotypical behaviour, without even realising. **This suggests that**

Evaluation of Smith & Lloyd:
Point –

Link to theory:

Influence of peers

Peers act as role models for gender-role stereotypes, with children more likely to imitate the same sex mode. Gender differences develop in social situations like peer settings, more than in individual settings, with children soon displaying preferences for same-gender playmates and dividing themselves into mainly same-gender groups, where they resist attempts to interact with the opposite gender. Peers reinforce gender stereotypes, for instance by praising gender appropriate behaviour and ridiculing non-appropriate behaviour, and are intolerant of cross-gender behaviour for example boys playing with girls.

Bussey and Banduar (1992) found that children aged three disapproved of gender role inconsistent behaviour, such as girls playing football, but rated their own feeling about masculine and feminine toys equally. However, four year old children disapproved of gender role inconsistent behaviour while also being self-critical in their feelings to play with gender role inconsistent toys. **This suggests that**

Archer and Lloyd (1982) reported that three year olds playing the opposite sexes games were ridiculed by their peers and later shunned, **supporting the idea that**

Evaluation of Bussy and Bandura:
Point –

Link to theory:

Evaluation of Archer and Lloyd:
Point –

Link to theory:

Social learning theory as applied to gender development

(Point) – Evidence to support modelling

Evidence:

Explanation:

Link:

(Point) – Direct tuition may be more effective than modelling

Evidence: Research has shown that children do not always model the behaviour of a same-sex model. Martin et al (1995) found that preschool boys played with toys 'labelled boys' (a kind of direct tuition).

Explanation: This suggests that direct tuition is more important in preschool children than modelling

Link:

(Point) –Self-direction

Evidence:

Explanation:

Link:

(Point) – Too much emphasis on social process

Evidence: Mead (1953) research on individuals in Papua New Guinea found that men were more aggressive in all the groups she studied despite some large variations in gender roles.

Explanation:

Link: Universal similarities suggest that biology actually plays an important role in shaping gender behaviour; therefore it does not support the SLT approach.

Exam Questions

1. Outline social learning theory as applied to gender develop (4 marks)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

2. Give one criticism of the social learning theory as applied to gender development (4 marks)

[illegible]

Describe research into social influences on gender. (8 marks)

Although 'research' includes theories and studies, candidates are likely to focus on some of the many studies investigating the importance of social influences on gender. These include the role of **parents, peers, schools, and the media.**

Their significance for the development of gender identity is likely to be the focus, but **cross-cultural studies of social influence on gender would also be relevant.** For marks beyond Basic descriptions of studies should include some detail of eg **methods/findings/conclusions.**

Overall approaches that attempt to explain social influences on gender, such as the behavioural or social learning theories, would be an alternative route to AO1 credit.

Simple identification of social influence such as parents and peers may earn a maximum mark of 2 (Rudimentary). Note that this question requires description of more than one social influence and so partial performance criteria apply.

Evaluation of research is not required in this question part and may not earn marks.

Assess the importance of social influences on gender. (16 marks)

Social influences include parents; family, peers, teachers and media, and a range of research studies have investigated their impact on gender roles. **Findings from such studies are likely to provide the main source of AO2/AO3 credit.** Additional commentary could include **the interaction between biological and social factors, and gender and/or cultural differences.** Candidates may introduce **alternative approaches** and evidence, for instance on the role of biological factors. These can only earn marks if used as part of sustained and effective commentary on the importance of social influences.

Answers in the top band must address the question directly, with coherent commentary on the importance of social influences on gender. Answers that do not explicitly address the question of the importance of social influence on gender will not move out of Rudimentary.

Indicative issues, debates and approaches in the context of the role of social influences in gender roles: Social psychological approaches; social learning theory; **nature-nurture; gender bias and differences; cultural bias and differences; free will/determinism; ethical issues.**

Such material must be used *effectively* to move into the top band.

Answers assessing the importance of only one social influence are demonstrating partial performance and can earn a maximum of **10 marks** for AO2/AO3.

Essay title:

Discuss social learning theories explanation of gender development

Outline (Write for 7 minutes)

Evaluate (13 minutes)

Research support (+)

Research Challenge (-)

Issues or debates (+/-)

Methodology/approaches (+/-)

If you need an extra evaluation point due to not writing the above in enough detail then add another issue/debate/methodology or approach evaluation.

Influence of the Media

Vicarious reinforcement means that we learn gender-appropriate behaviour through watching others being rewarded for behaving in a certain way. One of the main sources of this is the media, as television often shows people behaving in gender-stereotyped ways and being rewarded for doing so, usually by being successful or popular in some way.

The media (TV, films, books, advertisements, toys etc) portray males and females differently. Males are more represented in most types of TV programmes even more so in children's programmes. Males and females are portrayed in gender stereotypical ways, males are perceived as more dominant, aggressive and independent while women are seen as submissive, nurturing and dependent.

The media does more than simply model gender typical behaviours, as it also gives information about the likely outcomes of those behaviours for males and females. Seeing people similar to yourself succeed raises a person's belief in their own capabilities (self efficacy), whereas the failure of similar others produces self-doubt.

Hodges et al (1981) found that men are more likely to be portrayed as being in control, while women are at the mercy of others. **McGhee & Frueh (1980)** found that children who are exposed to such models on tv display far more stereotyped behaviours. When the media shows people behaving in a gender-typed way and succeeding somehow, this increases the feeling of **self-efficacy** in the viewer: ie they feel that they too will be successful if they behave in the same way.

TASK:

Manstead and McCulloch (1981) were interested in the way men and women are portrayed in TV ads. They observed 170 ads over a one-week period, ignoring those that only involved children and animals. They focused on the central adult figure and recorded frequencies that males and females occur in a variety of different roles.

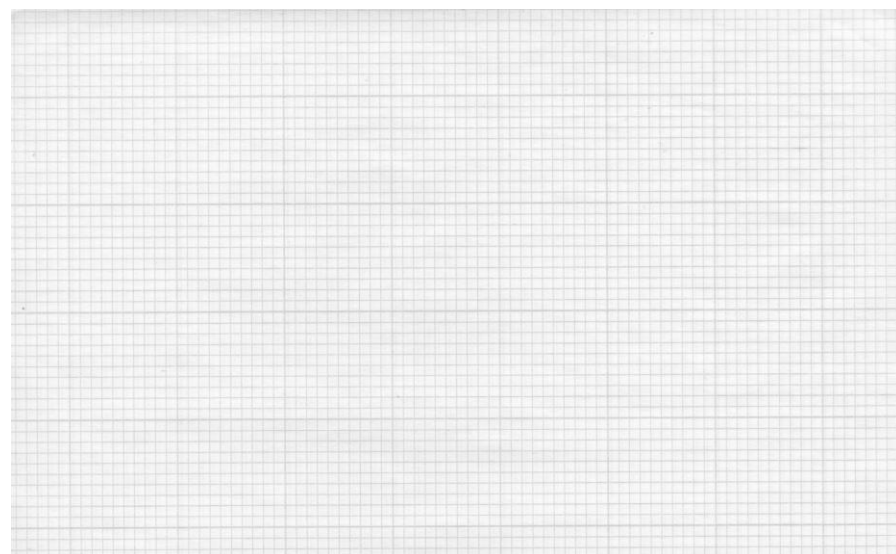
Create your behavioural checklists

Chosen graph:

Justification:



Ensure that you label each of the axis correctly and that your axis is to an appropriate scale – easy marks in an exam!



What does the graph show/ tell us? – **don't just repeat the data!!!**

Cultural influences on gender

This section focuses on gender role and gender identity and how our culture can shape our gender.



Studying cultural influences on gender role gives us a greater understanding of the relative contributions of biology and socialisation in the development of gender. It allows us to address the nature/nurture debate and consider how much each contributes to gender development.

Cross cultural studies help us to decide whether it is **biology** or **socialisation** which determines gender roles.

If **biology** was the main factor, we should expect to find similarities in the division of labour across cultures. However, if **socialisation** was the main factor, we should expect to see differences across cultures in the roles taken on by men and women **this is known as cultural relativism**.

If gender roles were the same in every culture – what would this suggest?

FACT: women tend to perform better at science in cultures which do not hold such gender-stereotyped beliefs about ability (Nosek et al, 2009).



What does this suggest about gender differences?

Gender: Cultural Influences

Complete the table with gender differences which are common across cultures, and gender differences which vary between cultures.

Cultural Similarities	Cultural Variations

Key studies in Cultural Differences – For or against and why is it a key study?

Mead (1935) studied gender roles and behaviour in three different tribal societies living close to each other in Papua New Guinea. She spent time with each tribe documenting how they lived their lives day to day. She reported that the tribes differed substantially. The Arapesh put a high value on co-operation. Boys and girls were raised to be gentle and loving. Child-bearing was highly valued and both parents were said to bear the child, not only the mother. The Mundugumor, by contrast, were quarrelsome, fierce and arrogant. Both men and women professed to hate the whole idea of pregnancy, birth and child-rearing. Infants and children were treated in a harsh and disdainful manner. In the Tchambuli tribe, the men were regarded as emotional and unfit for making serious decisions. They spent lots of time looking after their appearance whilst the women took care of food gathering, trade and other serious matters. As well as these obvious differences, there were also similarities between the tribes. For example, in all cases (including the Tchambuli) it was the men who went to war when there was conflict with other tribal groups.

Buss et al (1990) examined the features that women and men look for in potential sexual/romantic/relationship partners. In all of the 37 cultures they compared, women's concerns in finding a mate were dominated by the need for protection and to be provided for economically (e.g. income, status, employment) whilst men's concerns were dominated by physical attractiveness and age. When respondents were asked to rank the qualities they looked for in a mate in order of importance, there was a high level of agreement between members of different cultures.

Malinowski (1929) studied the Trobriand Islanders. In documenting their sexual behaviour he reported that the Trobriand women were sometimes highly sexually aggressive. Gangs of the women would capture and rape men from other tribes, often quite brutally. They would boast about their conquests and considered these to enhance the reputation of their tribe.

Williams & Best (1990a) found evidence of cultural similarities in gender stereotypes. They tested 2,800 students' in 30 different countries using a 300 item adjective checklist. Participants were asked to decide whether each adjective was most associated with men or women. There was a broad consensus across countries. Men were seen as more dominant, aggressive and autonomous, whereas women more nurturing and interested in affiliation. This suggests there are universal stereotypes about gender.

Exam Questions

1. Outline the role of media on gender roles (4 marks)

[illegible]

2. Outline the role of culture on gender roles (4 marks)

[illegible]

Essay title:
Describe and Evaluate the influence of culture and / or media on gender roles (16 marks)

Outline (Write for 7 minutes)

Evaluate (13 minutes)

Research support (+)

Research Challenge (-)

Issues or debates (+/-)

Methodology/approaches (+/-)

If you need an extra evaluation point due to not writing the above in enough detail then add another issue/debate/methodology or approach evaluation.

Atypical Gender Development

Gender dysphoria is a condition where a person experiences discomfort or distress because there's a mismatch between their biological sex and gender identity. It's sometimes known as gender identity disorder (GID), gender incongruence or transgenderism.

Biological sex is assigned at birth, depending on the appearance of the genitals. Gender identity is the gender that a person "identifies" with or feels themselves to be.

While biological sex and gender identity are the same for most people, this isn't the case for everyone. For example, some people may have the anatomy of a man, but identify themselves as a woman, while others may not feel they're definitively either male or female.

This mismatch between sex and gender identity can lead to distressing and uncomfortable feelings that are called gender dysphoria. Gender dysphoria is a recognised medical condition, for which treatment is sometimes appropriate. It's not a mental illness.

Some people with gender dysphoria have a strong and persistent desire to live according to their gender identity, rather than their biological sex. These people are sometimes called transsexual or trans people. Some trans people have treatment to make their physical appearance more consistent with their gender identity.

Signs of gender dysphoria

The first signs of gender dysphoria can appear at a very young age. For example, a child may refuse to wear typical boys' or girls' clothes, or dislike taking part in typical boys' or girls' games and activities.

In most cases, this type of behaviour is just a normal part of growing up and will pass in time, but for those with gender dysphoria it continues through childhood and into adulthood.

Adults with gender dysphoria can feel trapped inside a body that doesn't match their gender identity.

They may feel so unhappy about conforming to societal expectations that they live according to their anatomical sex, rather than the gender they feel themselves to be.

They may also have a strong desire to change or get rid of physical signs of their biological sex, such as facial hair or breasts.

Assessment of GID

A diagnosis of gender dysphoria can usually be made after an in-depth assessment carried out by two or more specialists.

This may require several sessions, carried out a few months apart, and may involve discussions with people you are close to, such as members of your family or your partner.

The assessment will determine whether you have gender dysphoria and what your needs are, which could include:

- whether there's a clear mismatch between your biological sex and gender identity
- whether you have a strong desire to change your physical characteristics as a result of any mismatch
- how you're coping with any difficulties of a possible mismatch
- how your feelings and behaviour's have developed over time
- what support you have, such as friends and family

The assessment may also involve a more general assessment of your physical and psychological health.

Treatment for gender dysphoria

If the results of an assessment suggest that you or your child have gender dysphoria, staff at the GIC will work with you to come up with an individual treatment plan. This will include any psychological support you may need.

Treatment for gender dysphoria aims to help reduce or remove the distressing feelings of a mismatch between biological sex and gender identity.

This can mean different things for different people. For some people, it can mean dressing and living as their preferred gender.

For others, it can mean taking hormones or also having surgery to change their physical appearance.

Many trans people have treatment to change their body permanently, so they're more consistent with their gender identity, and the vast majority are satisfied with the eventual results.

How common is gender dysphoria?

It's not known exactly how many people experience gender dysphoria, because many people with the condition never seek help.

A survey of 10,000 people undertaken in 2012 by the Equality and Human Rights Commission found that 1% of the population surveyed was gender variant, to some extent.

While gender dysphoria appears to be rare, the number of people being diagnosed with the condition is increasing, due to growing public awareness.

However, many people with gender dysphoria still face prejudice and misunderstanding.

Gender terminology

Gender dysphoria is a complex condition that can be difficult to understand. Therefore, it helps to distinguish between the meanings of different gender-related terms:

- **gender dysphoria** – discomfort or distress caused by a mismatch between a person's gender identity and their biological sex assigned at birth
- **transsexualism** – the desire to live and be accepted as a member of the opposite sex, usually accompanied by the wish to have treatment to make their physical appearance more consistent with their gender identity

- **transvestism** – where a person occasionally wears clothes typically associated with the opposite gender (cross-dressing) for a variety of reasons
- **genderqueer** – an umbrella term used to describe gender identities other than man and woman – for example, those who are both man and woman, or neither man nor woman, or moving between genders

Gender dysphoria isn't the same as transvestism or cross-dressing and isn't related to sexual orientation. People with the condition may identify as straight, gay, lesbian, bisexual or asexual, and this may change with treatment.

Task – Design a leaflet with all the information above to give to people who are experiencing from GID. Make sure to include the following:

- ✓ Gender Identity Disorder overview of characteristics
- ✓ Diagnosis
- ✓ Prevalence

What causes gender dysphoria?

Gender development is complex and there are many possible variations that cause a mismatch between a person's biological sex and their gender identity, making the exact cause of gender dysphoria unclear.

Occasionally, the hormones that trigger the development of biological sex may not work properly on the brain, reproductive organs and genitals, causing differences between them. This may be caused by:

- additional hormones in the mother's system – possibly as a result of taking medication
- the foetus' insensitivity to the hormones, known as androgen insensitivity syndrome (AIS) – when this happens, gender dysphoria may be caused by hormones not working properly in the womb

Gender dysphoria may also be the result of other rare conditions, such as:

- Congenital adrenal hyperplasia (CAH) – where a high level of male hormones are produced in a female foetus. This can cause the genitals to become more male in appearance and, in some cases; the baby may be thought to be biologically male when she is born.
- Intersex conditions – which cause babies to be born with the genitalia of both sexes (or ambiguous genitalia). Parents are recommended to wait until the child can choose their own gender identity before any surgery is carried out.

Biological influences on Gender Identity Disorder:

Genetic influences: Hare et al – the androgen receptor gene, congenital adrenal hyperplasia (CAH)

The influence of prenatal hormones – androgen insensitivity syndrome (AIS)

Brain sex theory.

Social influences on Gender Identity Disorder:

Distorted parental attitudes-Stoller (1995)

Childhood trauma

Social sensitivity of research into GID

Atypical Gender Development

(Point) – Criticisms of the brain sex theory

Evidence:

Explanation:

Link:

(Point) – Support for cross-wiring (phantom limb)

Evidence:

Explanation:

Link:

(Point) –Support for social explanations

Evidence:

Explanation:

Link:

(Point) – More than one explanation needed

Evidence:

Explanation:

Link: Such research suggests that there are likely to be different explanations for different types of GID

Exam Questions

3. Explain what is meant by gender identity disorder (3 marks)

[illegible]

4. Outline one or more social explanations of GID (4 marks)

[illegible]

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Essay title: Describe and Evaluate research related to gender identity disorder.	
Outline (Write for 7 minutes)	Evaluate (13 minutes)
	Research support (+)
	Research Challenge (-)
	Issues or debates (+/-)
	Methodology/approaches (+/-)
	If you need an extra evaluation point due to not writing the above in enough detail then add another issue/debate/methodology or approach evaluation.