



PREBOARD EXAMINATION 2023-2024

SET B

MARKING SCHEME

CLASS: XII

SUBJECT: PSYCHOLOGY (037)

TIME: 3 hrs

MM: 70

SECTION A

1.	b) Resistance	1
2.	a) Primary Appraisal	1
3.	c) A is true but R is false	1
4.	b) Experiential	1
5.	c) (i) and (iv)	1
6.	c) social identity	1
7.	c) Cohesiveness	1
8.	a) Group polarization	1
9.	b) (i) and (iii) are true	1
10.	d) Gestalt therapy	1
11.	b) Stereotype	1
12.	d) Social Cognition	1
13.	d) A is false but R is true	1
14.	b) Modelling	1
15.	c) Autism Spectrum Disorder	1

SECTION B

16.	Jaqueline is an Extrovert. Extraverts are sociable, outgoing, drawn to occupations that allow dealing directly with people, and react to stress by trying to lose themselves among people and social activity.	2
17.	Cognitive consistency means that two components, aspects or elements of the attitude, or attitude system, must be in the same direction. Each element should logically fall in line with other elements. If this does not happen, then the person experiences a kind of mental discomfort, i.e., the sense that 'something is not quite right' in the attitude system. In such a state, some aspect in the attitude system changes in the direction of consistency, because our cognitive system requires logical consistency	2
18.	Das and Naglieri have also developed a battery of tests, known as the Cognitive Assessment System (CAS). It consists of verbal as well as non-verbal tasks that measure basic cognitive functions presumed to be independent of schooling. The battery of tests is meant for individuals between 5 and 18 years of age. OR Aptitude refers to an individual's underlying potential for acquiring skills. Aptitude tests are used to predict what an individual will be able to do if given proper environment and training. A person with high mechanical aptitude can profit from	2

	appropriate training and can do well as an engineer. Similarly, a person having high language aptitude can be trained to be a good writer.	
19.	The therapist conveys by her/his words and behaviours that s/he is not judging the client and will continue to show the same positive feelings towards the client even if the client is rude or confides all the 'wrong' things that s/he may have done or thought about. This is the unconditional positive regard which the therapist has for the client. The therapist has empathy for the client. Empathy is present when one is able to understand the plight of another person, and feel like the other person. It means understanding things from the other person's perspective, i.e., putting oneself in the other person's shoes. Empathy enriches the therapeutic relationship and transforms it into a healing relationship	2
20.	Assessment is the first step in understanding a psychological attribute. Assessment refers to the measurement of psychological attributes of individuals and their evaluation, often using multiple methods in terms of certain standards of comparison.	2
21.	An attitude is a set of views or opinions which have an evaluative feature (positive, negative or neutral quality) and is accompanied by ABC components namely affective, behavioural and cognitive components. Features of attitude: Valence, Extremeness, Simplicity or Complexity and Centrality (Explanation of any one feature).	2
SECTION C		
22.	Tannu is suffering from Bulimia Nervosa. A distorted body image can lead to eating disorders. These disorders are of special interest to young people who may feel that they are fat and not according to a certain body type that they want. These disorders are of three types: <ul style="list-style-type: none"> • Anorexia Nervosa: The individual has a distorted body image of himself / herself and sees himself/herself as overweight. He/she starves himself and exercises compulsively to reduce weight. This can affect health negatively. He/she many refuses to eat or eliminate some food items from his/her diet. • Bulimia Nervosa: In this, the person may overeat and then purge his body by forced vomiting, or by taking laxatives or diuretics. He feels guilty after overeating and then feels relieved when he throws it out. Repetition of such behaviour can harm the digestive system. • Binge Eating: In this, there are frequent episodes of out-of-control eating. The individual tends to eat at a higher speed than normal and continues eating till he/she feels uncomfortably full. Large amount of food may be eaten even when the individual is not feeling hungry. 	3
23.	PASS Model of Intelligence: J.P. Das, Jack Naglieri and Kirby proposed the PASS model of Intelligence. PASS means Planning Attention/Arousal Simultaneous and Successive Processing. According to it, intelligence can be understood as a result of the interdependent functioning of three neurological systems which are responsible for the following: <ul style="list-style-type: none"> • Arousal and Attention: No intellectual activity can begin without attention. Arousal is necessary for initiating any activity. It forces us to focus attention in one direction. We attend to only selective stimuli which help us to reach our goal. • Simultaneous and Successive Processing: It helps in integrating different stimuli and grasping their meaning in our search for solutions. We process all the stimuli together i.e., the information is processed together which is known as simultaneous processing and when we process the information one after the other, it is called successive processing. 	3

	<ul style="list-style-type: none"> • Planning: On the basis of processing, we plan the course of action, implement it and then evaluate the result for future use. <p>Cognitive Assessment System (CAS) developed by Das and Naglieri consists of verbal and non-verbal task used for 5-18 years of age to remedy cognitive deficits of children.</p> <p style="text-align: center;">OR</p> <p>Intellectual Deficiency As it is already stated that children with IQ below 70 are suspected to have “intellectual disability. “They face enormous difficulty in learning even very simple skills. They show intellectual deficiency and are termed as "intellectually disabled." As a group, there is a wide variation among the intellectually disabled. The American Association on Mental Deficiency (AAD) views intellectual disability as "Significantly, sub-average general intellectual functioning existing concurrently with deficits in adoptive behaviours and manifested during developmental period". Intellectually disabled also known as mentally challenged. The percentage for these people in the population is 2.2. Even amongst this group, retardation is not of the same level. It can be mild (IQ 55 to approx. 70), moderate (IQ 35-40 approx. 50-55), severe (IQ 20-25 to approx. 35-40) and profound (IQ below 20-25). These group deviate considerably from the normal population with respect to their cognitive, emotional and motivational characteristics.</p> <p>Intellectual Giftedness Intellectually gifted individuals show higher performance because of their outstanding potentialities. While talking of intellectual giftedness we often used the terms 'talented' and 'giftedness' interchangeably but they mean different things. Giftedness is exceptional general ability shown in superior performance in a wide variety of areas. Talent is a narrower term and refers to remarkable ability in a specific field. (e.g., spiritual, social, aesthetic, etc). The highly talented are sometimes called 'prodigies'. Giftedness from the teacher's point of view depends on a combination of high ability, high creativity and high commitment. Gifted children show early signs of intellectual superiority. Larger attention span, good recognition memory, preference for novelty, sensitivity to environmental changes, and early appearance of language skills are the sign of intellectual superiority shown by infant and children at early childhood. Some important characteristics of gifted children are:</p> <ul style="list-style-type: none"> • Advanced logical thinking, questioning and problem-solving behaviour. • High speed in processing information. • Superior generalization and discrimination ability. (ii) Advanced level of original and creative thinking. • High level of intrinsic motivation and self-esteem. (vi) Independence and non-conformist thinking. <p>Preference for solitary academic for long periods.</p>	
24.	<p>Stress Resistant Personality: Recent studies by Kobasa have shown that people with high levels of stress but low levels of illness share three characteristics, which are referred to as the personality traits of hardiness. It consists of ‘the three Cs’, i.e., commitment, control, and challenge. Hardiness is a set of beliefs about oneself, the world, and how they interact. It takes shape as a sense of personal commitment to what you are doing, a sense of control over your life, and a feeling of challenge. Stress resistant personalities have control which is a sense of purpose and direction in life; commitment to work, family, hobbies and social life; and challenge, that is, they see changes in life as normal and positive rather than as a threat.</p>	3
SECTION D		

25.	<p>Therapeutic Relationship: The special professional relationship between the client and the therapist is known as therapeutic relationship or alliance.</p> <p>There are three major components of this relationship:</p> <ul style="list-style-type: none"> • The contractual nature of the relationship in which two willing individuals, the client and the therapist, enter into a partnership which aims at helping the client overcome his problems. • Limited Duration of the Therapy: This alliance is temporary and lasts until the client becomes able to deal with his problems and take control of his life. Through therapeutic relationship the therapist wins the trust of the client. The quality of this relationship/alliance determines early healing in psychotherapy. It involves high degrees of trust, positivity and confidentiality. • The therapist shows unconditional positive regard and empathy to develop such warm and accepting relations. It is only when a good therapeutic alliance is formed that the client starts trusting the therapist and shares everything with him. Thus, therapeutic alliance is a precondition for successful therapy 	4
26.	<p>Group formation needs some form of interaction between people. This interaction is facilitated by the following conditions namely:</p> <ul style="list-style-type: none"> • Proximity • Similarity • Common motives and goals <p>In Mary's case, the above-mentioned conditions are the reasons for him to become a part of the "hobby group" or became friendly with that group.</p> <ul style="list-style-type: none"> • Proximity: It refers to 'nearness'. If we are closer to each other like staying in the same colony or using the same transport, etc., we have more chances to know each other and be together for enough time duration to form a group. • Similarity: We like to be with people who are similar to us. People with same beliefs validate and reinforce our thinking. We think we are right and start liking them, thereby forming a group. • Common Motives or Goal: When people have a common goal, they get together and form a group, e.g., caring for street dogs. Like-minded people can form a helpful group. 	4
27.	<p>Angad is missing Emotional Intelligence.</p> <p>Emotional intelligence is a set of skills that underline accurate appraisal, expression, and regulation of emotions. It is the feeling side of intelligence. A good IQ and the scholastic record are not enough to be successful in life. People may be academically talented but are unsuccessful in their own lives. They experience problems in family, workplace and interpersonal relationships. According to some psychologists, the source of their difficulty may be a lack of emotional intelligence. This concept was first introduced by Salovey and Mayer who considered emotional intelligence as "the ability to monitor one's own and other's emotions, to discriminate among them and to use the information to guide one's thinking and actions."</p> <p>Emotional Quotient (EQ) is used to express emotional intelligence in the same way as IQ is used to express intelligence.</p> <p>Emotional intelligence is receiving increasing attention of educators for dealing with students who are affected by stresses and challenges of the outside world. Programmes aimed at improving students' emotional intelligence have beneficial effects on their academic achievement. They encourage cooperative behaviour</p>	4

	<p>and reduce their antisocial activities. These programmes are very helpful in preparing students to face the challenges of life outside the classroom. Emotionally intelligent persons have the following characteristics:</p> <ul style="list-style-type: none"> • They are sensitive to their feelings and emotions. • They are sensitive to various types of emotions in others by noting their body language, voice and tone, and facial expressions. • They relate their emotions to their thoughts which play an important role while solving problems and taking decisions. • They understand the powerful influence of the nature and intensity of their emotions. • They control and regulate their emotions and their expressions while dealing with self and others to achieve harmony and peace. 	
28.	<p>Shreya wants to become a singer even though she belongs to a family of doctors. Her family 'claims to love her, but disapproves of her choice of career. This fact warrants my attention towards an important terminology given by Carl Rogers, he, unconditional positive regard. She developed the humanistic approach on personality. As the desire of Shreya to become a singer is contradicted by his family, it results in a situation of negative social conditions which will reduce his level of self-concept and self-esteem. Her inability to fulfil his goal will prevent him from becoming a 'fully functioning person. Moreover, her conception of an ideal self' involves her being a singer, while her real self' is not one due to familial pressure. This discrepancy between the real and ideal self-results in dissatisfaction and unhappiness. The provision of unconditional positive regard which includes empathy, love and warmth irrespective of other factors is necessary for Shreya. According to Rogers, a person attains self-actualisation only when people have reached their own fullest potential. Her inability to pursue singing will not allow self-actualisation to occur which will prevent his psychological health and well-being..</p>	4
SECTION E		
29.	<ul style="list-style-type: none"> • Interview: Interview is a commonly used method for assessing personality. This involves talking to the person being assessed and asking specific questions. Diagnostic interviewing generally involves in-depth interviewing which seeks to go beyond the replies given by the person. Interviews may be structured or unstructured depending on the purpose or goals of assessment. In unstructured interviews, the interviewer seeks to develop an impression about a person by asking a number of questions. The way a person presents her/ himself and answers the questions carries enough potential to reveal her/his personality. The structured interviews address very specific questions and follow a set procedure. This is often done to make objective comparison of persons being interviewed. Use of rating scales may further enhance the objectivity of evaluations. • Observation: Behavioral observation is another method which is very commonly used for the assessment of personality. Although all of us watch people and form impressions about their personality, use of observation for personality assessment is a sophisticated procedure that cannot be carried out by untrained people. It requires careful training of the observer, and a fairly detailed guideline about analysis of behaviours in order to assess the personality of a given person. For example, a clinical psychologist may like to observe her/his client's interaction with family members and home 	6

visitors. With carefully designed observation, the clinical psychologist may gain considerable insight into a client's personality.

In spite of their frequent and widespread use, observation and interview methods are characterised by the following limitations:

- a) Professional training required for collection of useful data through these methods is quite demanding and time-consuming.
 - b) Maturity of the psychologist is a precondition for obtaining valid data through these techniques.
 - c) Mere presence of the observer may contaminate the results. As a stranger, the observer may influence the behaviour of the person being observed and thus not obtain good data.
- **Behavioral Ratings:** Behavioral ratings are frequently used for assessment of personality in educational and industrial settings. Behavioural ratings are generally taken from people who know the assesses intimately and have interacted with her/him over a period of time or have had a chance to observe her/him. They attempt to put individuals into certain categories in terms of their behavioural qualities. The categories may involve different numbers or descriptive terms. It has been found that use of numbers or general descriptive adjectives in rating scales always creates confusion for the rater. In order to use ratings effectively, the traits should be clearly defined in terms of carefully stated behavioural anchors.

The method of rating suffers from the following major limitations:

- a) Raters often display certain biases that Colour their judgments of different traits. **For example**, most of us are greatly influenced by a single favourable or unfavourable trait. This often forms the basis of a rater's overall judgment of a person. This tendency is known as the halo effect.
- b) Raters have a tendency to place individuals either in the middle of the scale (called middle category bias) by avoiding extreme positions, or in the extreme positions (called extreme response bias) by avoiding middle categories on the scale.

These tendencies can be overcome by providing raters with appropriate training Key Terms or by developing such scales in which the response bias is likely to be small.

- **Nomination:** This method is often used in obtaining peer assessment. It can be used with persons who have been in long-term interaction and who know each other very well. In using nomination, each person is asked to choose one or more persons of the group with whom s/he would like to work, study, play or participate in any other activity. The person may also be asked to specify the reason for her/his choices. Nominations thus received may be analysed to understand the personality and behavioural qualities of the person. This technique has been found to be highly dependable, although it may also be affected by personal biases.
- **Situational Tests:** A variety of situational tests have been devised for the assessment of personality. The most commonly used test of this kind is the situational stress test. It provides us with information about how a person behaves under stressful situations. The test requires a person to perform a given task with other persons who are instructed to be non-cooperative and interfering. The test involves a kind of role playing. The person is instructed to play a role for which s/he is observed. A verbal report is also obtained on what s/he was asked to do. The situation may be realistic one, or it may be created through a video play.

OR

Stages of Personality Development

Freud claims that the core aspects of personality are established early, remain stable throughout life, and can be changed only with great difficulty. He proposed a five-stage theory of personality (also called psychosexual) development. Problems encountered at any stage may arrest development, and have long-term effect on a person's life. A brief description of these stages is given here.

- **Oral Stage:** A newborn's instincts are focused on the mouth. This is the infant's primary pleasure-seeking centre. It is through the mouth that the baby obtains food that reduces hunger. The infant achieves oral gratification through feeding, thumb sucking, biting and babbling. It is during these early months that people's basic feelings about the world are established. Thus, for Freud, an adult who considers the world a bitter place probably had difficulty during the oral stage of development.
- **Anal Stage:** It is found that around ages two and three the child learns to respond to some of the demands of the society. One of the principal demands made by parents is that the child learns to control the bodily functions of urination and defecation. Most children at this age experience pleasure in moving their bowels. The anal area of the body becomes the focus of certain pleasurable feelings. This stage establishes the basis for conflict between the id and the ego, and between the desire for babyish pleasure and demand for adult, controlled behaviour.
- **Phallic Stage:** This stage focuses on the genitals. At around ages four and five children begin to realise the differences between males and females. They become aware of sexuality and the sexual relationship between their parents. During this stage, the male child experiences the Oedipus Complex, which involves love for the mother, hostility towards the father, and the consequent fear of punishment or castration by the father (Oedipus was a Greek king who unknowingly killed his father and then married his mother). A major developmental achievement of this stage is the resolution of the Oedipus complex. This takes place by accepting his father's relationship with his mother, and modelling his own behavior after his father. For girls, the Oedipus complex (called the Electra Complex after Electra, a Greek character, who induced her brother to kill their mother) follows a slightly different course. By attaching her love to the father, a girl tries to symbolically marry him and raise a family. When she realises that this is unlikely, she begins to identify with her mother and copy her behaviour as a means of getting (or, sharing in) her father's affection. The critical component in resolving the Oedipus complex is the development of identification with the same sex parents. In other words, boys give up sexual feelings for their mothers and begin to see their fathers as role models rather than as rivals; girls give up their sexual desires for their father and identify with their mother.
- **Latency Stage:** This stage lasts from about seven years until puberty. During this period, the child continues to grow physically, but sexual urges are relatively inactive. Much of a child's energy is channelled into social or achievement-related activities.
- **Genital Stage:** During this stage, the person attains maturity in psychosexual development. The sexuality, fears and repressed feelings of earlier stages are once again exhibited. People learn to deal with members of the opposite sex in a socially and sexually mature way. However, if the

	<p>journey towards this stage is marked by excessive stress or over-indulgence, it may cause fixation to an earlier stage of development.</p> <p>Freud's theory also postulates that as children proceed from one stage to another stage of development, they seem to adjust their view of the world. Failure of a child to pass successfully through a stage leads to fixation to that stage. In this situation, the child's development gets arrested at an earlier stage. For example, a child who does not pass successfully through the phallic stage fails to resolve the Oedipal complex and may still feel hostile toward the parent of the same sex. This failure may have serious consequences for the child's life. Such a boy may come to consider that men are generally hostile, and may wish to relate to females in a dependable relationship. Regression is also a likely outcome in such situations. It takes a person back to an earlier stage. Regression occurs when a person's resolution of problems at any stage of development is less than adequate. In this situation, people display behaviours typical of a less mature stage of development.</p>	
30.	<p>Neuro Developmental Disorders: These disorders are characterised by severe impairments in social interaction and communication skills, and stereotypes patterns of behaviours, interests and activities. Autistic disorder or autism is one of the most common of these disorders. About 70% of children with autism are also mentally retarded. Some other disorders come under this category are intellectual disability and specific learning disorder and ADHD. These disorders can lead to serious consequences if they are not treated in time. (any four)</p> <ul style="list-style-type: none"> • ADHD (Attention Deficit Hyperactive Disorder): (A part of Neurodevelopmental disorder) In this disorder, the activity level of the child becomes very high. He does not think before his actions. Such impulsive behaviour is accompanied by the difficulty to sustain attention. Due to this, his academic and social performance goes down. Boys are four times more likely to have it. Two main features of this disorder are inattention and hyperactivity-impulsivity children may fidget, squirm, climb and run around the room aimlessly, parents and teachers describe them as driven by a motor, always on the go and talk incessantly. • ODD (Oppositional Defiant Disorder): In this, the child displays age-inappropriate stubbornness, disobedience and hostility in behaviour. The child is especially hostile to authority figures like parents, teachers, etc. • Conduct Disorders: They refer to age-inappropriate actions and attitudes that defy social expectations. They also include aggressive behaviour of various kinds like verbal, physical, hostile and proactive aggression. • Antisocial Behaviour: Children show many different types of aggressive behaviour such as verbal aggression (i.e., name-calling, swearing), physical aggression (i.e., hitting, fighting), hostile aggression (i.e., directed at inflicting injury to others), and proactive aggression (i.e., dominating and bullying others without provocation). • Separation Anxiety Disorder (SAD): These children express excessive anxiety or even panic at being separated from their parents. These children have difficulty being in a room by themselves, going to school alone, are fearful of entering new situations, and cling to and shadow their parents 'every move. These children may fuss, scream, throw severe tantrums or make suicidal gestures. <p style="text-align: center;">OR</p> <p>There are several psychological models which provide a psychological explanation of mental disorders. These models maintain that psychological and interpersonal factors have a significant role to play in abnormal behaviour. These factors include maternal deprivation (separation from the mother, or lack of warmth and</p>	6

	<p>stimulation during early years of life), faulty parent-child relationships (rejection, over-protection, over-permissiveness, faulty discipline), maladaptive family structures (inadequate or disturbed family) and severe stress. The psychological models include psychodynamic, behavioural, cognitive and humanistic-existential models.</p> <ul style="list-style-type: none"> • Psychodynamic model: Psychodynamic theorists believe that behaviour is determined by psychological forces of which the individual is not consciously aware. This model was first formulated by Freud who believed that three forces shape personality - instinctual needs, drives and impulses (id), rational thinking (ego) and moral standards (superego). They believe that abnormal behaviour is due to unconscious mental conflicts that can be traced to early childhood period. • Behavioural model: According to this model, maladaptive ways of behaving is learned through classical conditioning (temporal association in which two events repeatedly occur close together in time), operant conditioning (behaviour is followed by a reward), social learning (learning by imitating others' behaviour). • Cognitive model: People may also repeatedly think in illogical ways and make over-generalisations and draw negative conclusions on the basis of a single insignificant event. • Humanistic-existential model: Humanists believe that human beings are born with natural tendency to be friendly, cooperative and constructive, and are driven to self-actualise. i.e. o fulfils his potential for goodness and growth. They further believe that from birth we have total freedom to give meaning to our existence or avoid that responsibility. Those who shirk from this responsibility live empty, inauthentic and dysfunctional lives. 	
	SECTION F	
31.	Beliefs refer to the cognitive component of attitudes such as belief in or belief in democracy.	1
32.	Prejudices are negative attitudes towards a particular group and are based on stereotypes (the cognitive component). The cognitive component of prejudice is accompanied by dislike or hatred (the affective component). Prejudice gets translated into discrimination (the behavioural component) whereby people behave in less positive way towards a particular target group compared to another group which they favour. In our society there has been cases of discrimination due to prejudice based on gender, religion, community, caste, physical handicap and illness such as AIDS.	2
33.	Stress can cause illness by impairing the working of the immune system. Psychoneuroimmunology focusses on the links between the mind, the brain and the immune system. There are different types of White Blood Cells (Leucocytes) within the immune system that destroy the antigens. These Leucocytes are T-cells, B-cells, T-helper cells and natural killer cells. Stress can affect the natural killer cell cytotoxicity.	1
34.	Stress Management Techniques Various stress management techniques are used such as Relaxation technique, Meditation, Biofeedback, Creative Visualization, Cognitive Behavioural Techniques and Exercise which help us to manage stress. (any two)	2

- **Relaxation Techniques:** This reduces symptoms of stress and decreases the incidence of illness such as high blood-pressure and heart diseases. It starts from the lower part of the body and progresses up to the facial muscles in such a way that the whole body is relaxed. Deep breathing is used along with muscle relaxation to calm the mind and relax the body.
- **Meditation Procedures:** A sequence of learned techniques for re-focusing of attention that brings about an altered state of consciousness. It involves such a thorough concentration that the meditator becomes unaware of any outside stimulation and reaches a different state of consciousness.
- **Biofeedback:** Monitors and reduces the physiological aspects of stress by providing feedback about current physiological activity and is often accompanied by relaxation training. It involves 3 stages:
 - Developing an awareness of the particular physiological response e.g., heart rate.
 - Learning ways of controlling that physiological response in quiet conditions. Transferring that control into the conditions of everyday life.
- **Creative Visualization:** Creative visualization is a subjective experience that uses imagery and imagination. Before visualising one must set oneself a realistic goal, as it helps build confidence. It is easier to visualise if one's mind is quiet, body is relaxed and eyes are closed.
- **Cognitive Behavioral Techniques:** These techniques aim to inoculate people against stress. Stress inoculation training is one effective method developed by Meichenbaum. They aim at replacing negative and irrational thoughts with positive and rational ones. There are 3 main phases in this; assessment, stress reduction techniques and application and follow-through. Assessment involves discussing the nature of the problem and seeing it from the view-point of the person/client. Stress reduction involves learning the techniques of reducing stress such as relaxation and self-instruction.
- **Exercise:** It can provide involves an active outlet for the physiological arousal experienced in response to stress. Improves the efficiency of the heart, enhances the function of the lungs, maintains good circulation, lowers blood pressure, reduces fat in the blood, improves the body's immune system.