

Psychology (037)
Class- XII
Sample Question Paper with Marking Scheme
Term II
2021-2022

Time – 2 Hours

Max Marks – 35

General instructions:

- There are 12 Questions in this paper.
- The paper is divided into 4 sections, Section A, B, C and D.
- Section A has 3 questions, from Question No. 1 to 3 carrying 2 marks each. Answer to these questions should not exceed *40 words*.
- Section B has 3 questions, from Question No. 4 to 6, carrying 3 marks each. Answer to these questions should not exceed *80 words*.
- Section C has 4 questions, from Question No. 7 to 10, carrying 4 marks each. Answer to these questions should not exceed *120 words*.
- Section D has one case study. There are 2 questions based on this case study, Question No. 11 and 12. Each question carries 2 marks. Answer to these questions should not exceed *40 words*. Answer both questions.

SECTION A

Marks Chapter

1. State any two differences between somatic symptom and illness anxiety disorder.

2 4

Answer:

Somatic symptom disorder	Illness anxiety disorder
persistent body-related symptoms which may or may not be related to any serious medical condition.	persistent preoccupation about developing a serious illness
overly preoccupied with their symptoms	overly concerned about undiagnosed disease,
expression is in terms of physical complaints.	it is the anxiety which is the main concern.

Any 2 Points (1+1=2)

Page: 78

2 **Explain any two factors that influence attitude formation.** 2 6
Answer:
Explanation of any two of the following
1. Reference Groups
2. Personal Experiences
3. Media-related Influences
(1+1=2)
Page: 111-112

OR

Explain any two components of attitudes. 2 6
Answer:
Explanation of any two of the A-B-C components (Affective-Behavioral-Cognitive components).
(1+1=2)
Page: 108

3. **What is cognitive dissonance? Give an example.** 2 6
Answer:

- It emphasizes that the cognitive components of an attitude must be 'consonant' (opposite of 'dissonant'), i.e., they should be logically in line with each other.
- If an individual finds that two cognitions in an attitude are dissonant, then one of them will be changed in the direction of consonance.
- (Or explained with the help of an example)

(1+1=2)
Page:112

SECTION B

4. Radhika has been diagnosed with generalised anxiety disorder. Explain the development of this disorder with the help of the diathesis-stress model. 3 4
Answer:
Explain diathesis stress model.
Diathesis Stress Model

- presence of some biological aberration
- Presence of pathological stressor
- their predisposition may actually evolve into a disorder.

This model can be applied to explain Radhika's GAD. According to the model, Radhika has genetic predisposition to develop anxiety disorders which she may have inherited. Due to external stressors, generalized anxiety disorder may get triggered.

(1.5 marks for explaining the model and 1.5 mark for explaining Radhika's GAD through the model

(1.5+1.5=3)

Page: 75-76

5. A client approaches a therapist to overcome her/his phobia for heights. Describe a behavioral technique that the therapist might choose to help her/him to overcome this phobia for heights. 3 5

Answer:

- Systematic Desensitization: the therapist prepares a hierarchy of anxiety-provoking stimuli with the least anxiety-provoking stimuli at the bottom of the hierarchy. E.g., the fear of lifts.
- Each session is accompanied by relaxation exercises. Reciprocal inhibition principle -Wolpe.
- Over sessions, the client is able to imagine more severe fear-provoking situations while maintaining the relaxation. The client gets systematically desensitized to the fear.

(1+1+1=3),

Page: 98

- 6 We are members of a number of groups at any given time. Explain the reasons that make people join groups. 3 7

Answer –Reasons:

- Security
- Status
- Self -esteem
- Satisfaction of one's psychological and social needs
- Goal achievement
- Provide knowledge and information

Explanation of any 3 Reasons

(1+1+1=3)

Pg.132

OR

- Groups differ in many respects. Identify the characteristics that distinguish primary groups from secondary groups. 3 7

Answer:

Primary group:

- pre-existing formations
- face-to-face interaction and members have close physical proximity
- central to individual's functioning
- boundaries are less permeable.

Secondary groups:

- individuals join by choice,
- impersonal, indirect,
- and less frequent relationships among members;
- easy to leave and join.

(1.5+1.5=3)

Page.135

SECTION C

7 Describe the defining symptoms of oppositional defiant disorder and conduct disorder. 4 4

Answer:

Defining symptoms of Oppositional Defiant Disorder (ODD)

- age-inappropriate amounts of stubbornness, irritable, defiant, disobedient, hostile
- oppositional, or defiant and often justify their behavior, problems interacting with others.

Defining symptoms of Conduct Disorder

- age-inappropriate actions and attitudes that violate family expectations, societal norms, and the personal or property rights of others.
- aggressive actions that cause or threaten harm to people or animals, non-aggressive conduct that causes property damage, major deceitfulness or theft, and serious rule violations. State types of aggression- verbal aggression physical aggression, hostile aggression and proactive aggression

(2+2=4)

Page: 84

OR

What are dissociative disorders? Describe some of the identifying symptoms of different types of dissociative disorders. 4 4

Answer:

Dissociative Disorders:

- severance (divisions, separation) of the connections between ideas and emotions, feelings of unreality, estrangement, depersonalization, temporary alterations of consciousness and sometimes a loss or shift of identity.

Types of Dissociative Disorders

Dissociative Amnesia

- unable to tell important, personal information often related to a stressful and traumatic report; extent of forgetting beyond normal, associated with overwhelming stress
- Dissociative fugue- traveling away from a stressful environment, assumption of a new identity, and the inability to recall the previous identity, when fugue ends no recall of fugue state

Dissociative Identity Disorder

- person assumes alternate personalities that are contrasting from each other, may or may not be aware of each other.
- associated with traumatic experiences (physical abuse) in childhood.

Depersonalization

- a dreamlike state in which the person has a sense of being separated both from self and from reality
- a change of self-perception,

(1+1+1+1=4)

Page: 78-79

8 Explain the alternative treatment possibilities to psychotherapy. How does rehabilitation of the mentally ill improve the quality of their life? 4 5

Answer:

There are many alternative therapies such as yoga, meditation, acupuncture, herbal remedies and so on.

1. Yoga - today refers to only the asanas or body posture component or to breathing practices or pranayama, or to a combination of the two.

2. Meditation refers to the practice of focusing attention on breath or on an object or thought or a mantra.
3. In Vipassana meditation, also known as mindfulness-based meditation, passively observes the various bodily sensations and thoughts that are passing through in her or his awareness.
4. Sudarshan Kriya Yoga (SKY) is found to be beneficial for stress, anxiety, post-traumatic stress disorder (PTSD), depression, stress-related medical illnesses, substance abuse etc.
5. Kundalini Yoga is effective in treatment of mental disorders like obsessive-compulsive disorder. Kundalini Yoga combines pranayama or breathing techniques with chanting of mantras help the patients to process emotional stimuli better.

Explanation of any three alternate treatment- 3marks

- The aim of rehabilitation is to empower the patient to become a productive member of society to the extent possible and be self-sufficient
- Occupational therapy, vocational therapy and social skills training

(3+1 = 4)

Page 103, 104

OR

Explain the different cognitive therapies that are used to reduce distress.

4

5

Answer:

Cognitive therapies locate the cause of psychological distress in irrational thoughts and beliefs.

- Rational Emotive therapy- Albert Ellis- ABC analysis
- Irrational beliefs assessed through questionnaires and interviews, nondirective questioning.
- The rational belief system replaces the irrational belief system and there is a reduction in psychological distress

Cognitive therapy- Aaron Beck- core schema; dysfunctional cognitive structures.

- The therapist uses questioning, which is gentle, nonthreatening disputation of the client's beliefs and thoughts.
- whereby she gains insight into the nature of her dysfunctional schemas. Cognitive restructuring.

(2 + 2 = 4)

Page:99-100

- 9 Anshu feels that assertive and successful women might become too powerful and neglect their family responsibilities. Explain the factors that will help in changing Anshu's attitude towards assertive and successful women. 4 6

Answer:

Explanation of the following with respect to Anshu's attitude.

- Characteristics of the existing attitude,
- Source characteristics,
- Message characteristics
- Target characteristics

(1+1+1+1=4)

Page 114-118

- 10 A person 'X' was caught taking a bribe and her/his colleagues were asked to decide on what punishment she/he should be given. They could either let her/him go with just a warning or decide to terminate her/his services. After a discussion with other employees of the organisation, an extreme decision was taken to terminate this person's services. Identify this phenomenon and explain why it occurs. 4 7

Answer:

- Group polarization
- Groups are more likely to take extreme decisions than individuals alone.
- This strengthening of the group's initial position is referred to as group polarization and may sometimes have dangerous repercussions as groups may take extreme positions.
- Explanation of reasons with reference to X
 - Company of like-minded people
 - Band-wagon effect
 - Ingroup perception with like-minded people and consequent identification

(1/2 +1/2+ 1+1+1=4)

Page 137, 138

SECTION D

Mental health professionals have attempted to understand psychological disorders using different approaches through the ages. Today, we have sophisticated facilities and hospitals dedicated to the

treatment of the mentally ill. While studying the history of psychological disorders it is interesting to note that some practices from ancient times are still in use. Take the case of Lakshmi and her daughter, Maya. Maya exhibits abnormal behaviours and Lakshmi believes that this is because of evil spirits that have possessed her. She has been taking her daughter to a self-proclaimed healer, who uses counter-magic and prayer to cure her. Stigma and lack of awareness prevents Lakshmi from using the modern facilities and hospitals that provide quality mental health care.

On the other hand, when young Rita reported seeing people and hearing voices, mental health professionals at a modern facility were able to understand her hallucinations using a convergence of three approaches. Psychologists use official manuals like the Diagnostic and Statistical Manual of Mental Disorders – 5th Edition (DSM-5) and International Classification of Diseases (ICD-10) to indicate presence or absence of disorders. Today there is increased compassion for people who suffer from disorders and a lot of emphasis is placed on providing community care.

11. Identify the method used by the healer to cure Maya’s illness. How does this theory from ancient times explain Maya’s treatment? 2 4

Answer:

Method used: Exorcism - removing the evil that resides in the individual through counter magic and prayer

Abnormal behavior can be explained by the operation of supernatural and magical forces such as bhoot-pret or shaitan.

(1+1=2), Page: 72

12. Which approach do you think would best explain Rita’s treatment? How do you think DSM - 5 and ICD -10 help mental health professionals in indicating the presence or absence of disorders? 2 4

Answer:

Interactional Approach, which is a bio-psycho-social approach

DSM -5 /ICD-10 have criteria that indicate presence or absence of disorders - for each disorder there is a description of the main clinical features or symptoms and of other associate features including diagnostic guidelines

(1+1), Page 73

