

Name:
Enrolment No:



UNIVERSITY OF PETROLEUM & ENERGY STUDIES
End- Semester Examination (Online) – JUNE 2021

Program: B.A-PPA
Subject/Course: INTRODUCTION TO PSYCHOLOGY
Max. Marks: 100
Course Code: CLNL1028

Semester: II

Duration: 3 Hours

IMPORTANT INSTRUCTIONS

Q.No		Marks	COs
	Section-A-Attempt all Questions Each Question carries 5 marks	Total 30	
1.	Stages of cognitive development given by Piaget are 1 2..... 3..... 4.....	5	CO3
2	Classical conditioning was propounded by	5	CO3
3	Degree to which a person is pragmatic and emotionally distant is known as	5	CO3
4	Psychology of Happiness is written by	5	CO3
.5	Name four eating disorders 1..... 2..... 3..... 4.....	5	CO3

6	Name the Specific Learning Disorders- 1..... 2..... 3..... 4	5	CO3
Section -B- Attempt all Questions Each Questions carry 10 marks Write and explain in brief		Total 50	CO4
7.	Discuss Operant conditioning and describe the schedules of reinforcement?	10	CO4
8.	Elaborate in detail the stages of cognitive development as given by Piaget?	10	CO4
9.	Elucidate the term JOHARI window and explain with suitable examples?	10	CO4
10.	Analyze the term “Happiness” and explain by examples how to be happy in the present scenario (COVID-19)?	10	CO4
11.	Discuss the different Eating Disorders in detail?	10	CO4
12.	Section-C-Attempt all Questions Case study carry 20 marks Respond in detail to questions given below	Total 20	CO4
<p>Emma’s* parents, Mr and Mrs Bond*, were worried about their 16-year-old; for over a year she had been on a diet that didn’t seem to stop. They didn’t understand why she was on a diet because she had never been overweight, and it didn't seem as though she had secured any happiness from her diet.</p> <p>Emma's dieting behaviors made her more withdrawn, depressed and anxious. Every time her parents expressed their concerns, she burst into tears or shouted at them. She had stopped eating with the family and spent most of her time in her bedroom. She was still going to school and doing extremely well in her exams, but her friends were worried about her. Emma’s parents had repeatedly suggested that she went to see the doctor but she insisted that there was nothing wrong with her, asking them why they couldn't just leave her alone. Mr and Mrs Bond had</p>			

started to disagree about how to handle Emma's behavior and argued frequently. As a result of this, Emma's younger brother and sister were very angry with her and wouldn't talk to her.

Finally, Mr. and Mrs. Bond received a phone call from school to say that Emma had fainted and was in hospital.

She was discharged a short while later but with the recommendation that they saw an eating disorders specialist. Emma's parents took her to the GP who referred her to Priory's eating disorder service. She was immediately admitted to a Priory hospital as an inpatient because her weight was dangerously low. Emma also had a very low heart rate (bradycardia) and a low temperature (hypothermia).

After a thorough assessment of not only her physical condition, but also her mental health, Emma had repeated blood tests and an electrocardiogram (ECG). Because of her bradycardia and hypothermia, she was nursed on bed rest with 24-hour care. She was prescribed a gradually increasing diet by the dietitian, and was supported to increase her dietary intake to improve her physical health and weight.

As her weight went up, Emma's condition improved. She began participating in Priory's intensive therapy programme and was allocated an individual therapist.

Once Emma's physical health had improved, she began to participate in group therapy which involved anxiety management, body image, cognitive behavioral therapy (CBT) and psychoeducational nutrition groups. Emma and her family also received regular family therapy sessions. In her individual therapy, Emma was able to address a number of life events and issues which had caused her considerable distress prior to the onset of her eating disorder. Emma and her family were also supported to have meals together on the unit and the dietitian advised her family on how to manage her meal plan when she went home. Emma's parents also attended the parents' support group.

When Emma was ready for weekend leave, she related much better to her family. They all believed that the family therapy had helped, as well as the carer support group and education sessions.

Emma was pleased that she was supported by the unit and her school to continue studying for her AS levels during her stay at Priory, and held on to her dream of going to university.

16 weeks later, on discharge, Emma had gained control over her eating disorder, dealt with a number of significant life issues and was looking

	<p>forward to relating more appropriately with her friends again. Her family were more relaxed as they knew how to help Emma, and no longer felt helpless or fearful for the future.</p> <p>Q1. Summarize the case study in brief?</p> <p>Q2. Name and explain the eating disorder Emma is facing?</p> <p>Q3. Explain the treatment strategies involved in Emma's case?</p> <p>Q4. Give some suggestions on how Emma can cope over her life issues?</p>		

ANSWERS