

PRACTICALS

Diploma in Psychological Guidance and Counselling

PAPER – VI

LESSON WRITER

Dr. T. D. Vimala,

Adjunct Professor,
Department of Psychology
Acharya Nagarjuna University,
Nagarjuna Nagar,
Guntur.

Director

Dr. NAGARAJU BATTU

MBA., MHRM., LLM., M.Sc. (Psy)., MA (Soc)., M.Ed., M.Phil., Ph.D

CENTRE FOR DISTANCE EDUCATION

ACHARAYA NAGARJUNA UNIVERSITY

NAGARJUNA NAGAR – 522 510

**Ph: 0863-2293299, 2293214,
0863-2346259 (Study Material)**

Website: www.anucde.info

e-mail: anucdedirector@gmail.com

Diploma in Psychological Guidance and Counselling

First Edition : 2021

No. of Copies :

©Acharya Nagarjuna University

This book is exclusively prepared for the use of students of Diploma in Psychological Guidance and Counselling Centre for Distance Education, Acharya Nagarjuna University and this book is meant for limited circulation only.

Published by:

Dr. NAGARAJU BATTU,

Director

**Centre for Distance Education,
Acharya Nagarjuna University**

Printed at:

FOREWORD

Since its establishment in 1976, Acharya Nagarjuna University has been forging ahead in the path of progress and dynamism, offering a variety of courses and research contributions. I am extremely happy that by gaining 'A' grade from the NAAC in the year 2016, Acharya Nagarjuna University is offering educational opportunities at the UG, PG levels apart from research degrees to students from over 443 affiliated colleges spread over the two districts of Guntur and Prakasam.

The University has also started the Centre for Distance Education in 2003-04 with the aim of taking higher education to the door step of all the sectors of the society. The centre will be a great help to those who cannot join in colleges, those who cannot afford the exorbitant fees as regular students, and even to housewives desirous of pursuing higher studies. Acharya Nagarjuna University has started offering B.A., and B.Com courses at the Degree level and M.A., M.Com., M.Sc., M.B.A., and L.L.M., courses at the PG level from the academic year 2003-2004 onwards.

To facilitate easier understanding by students studying through the distance mode, these self-instruction materials have been prepared by eminent and experienced teachers. The lessons have been drafted with great care and expertise in the stipulated time by these teachers. Constructive ideas and scholarly suggestions are welcome from students and teachers involved respectively. Such ideas will be incorporated for the greater efficacy of this distance mode of education. For clarification of doubts and feedback, weekly classes and contact classes will be arranged at the UG and PG levels respectively.

It is my aim that students getting higher education through the Centre for Distance Education should improve their qualification, have better employment opportunities and in turn be part of country's progress. It is my fond desire that in the years to come, the Centre for Distance Education will go from strength to strength in the form of new courses and by catering to larger number of people. My congratulations to all the Directors, Academic Coordinators, Editors and Lesson- writers of the Centre who have helped in these endeavors.

Prof. P. Raja Sekhar
Vice-Chancellor
Acharya Nagarjuna University

DDGC06: - PRACTICAL

PAPER – VI

1. Case Study
2. Psycho physiological Inventory
3. Neurotic Measurement Scale.
4. Eysenck Personality Inventory
5. Measurement of Stress.

INDEX

SL. NO.	PRACTICAL	PAGE NO.
1	CASE - HISTORY	1.1 – 1.5
2	PSYCHO – PHYSIOLOGICAL STATE INVENTORY	2.1 – 2.5
3	EYSENCK PERSONALITY INVENTORY	3.1 – 3.7
4	MEASURING STRESS	4.1 – 4.5
5	INTEREST INVENTORY	5.1 – 5.4

CASE - HISTORY

Name:-

Age:-

Gender:-

Educational qualification:-

Occupation:-

Income:- Marital status:-

Whether client stays with parents:-

Whether client stays with spouse:-

Whether have any siblings, if so how many:-

What is the position of the client in the family: eldest, middle or youngest or only child:

Anyone in the family having conflicts:-

Anyone in the family is suffering / has suffered from any physical disorders:

Presenting problem: (This should be recorded as the client narrates)

Date of onset of the problem:

Precipitating factor if any:

Duration of problem:

Any counseling taken:

How intense is the problem and how does it affect the client?

- Has to take leave from work place/ school/ college
- Cannot carry on even the routine work
- Does not want to do anything

Interview with family members/spouse/the concerned person

- Their view point in regard to all of the above
- The interview with family members should cover all aspects that are covered in the interview with the client. In addition the following need to be covered.

Relationship: patient's relationship with family members

- If unmarried:
 - with mother
 - Father
 - Brother
 - Sisters

Any other relatives staying with patients

- ◆ With friends: how many friends does the patient have? How does the patients relate to them?
- ◆ With neighbors
- ◆ With school and class mates
- ◆ With the teacher in school
- ◆ With other authority figures
- ◆ With playmates
- ◆ In the games field

Educational history:

- ◆ In school /college
- ◆ How is the client in studies and academic performance?
- ◆ Does the client come up to the expectations of parents and teachers?
- ◆ How has the performance been over the years?
- ◆ Do they find that there is sudden deterioration in studies and academics performances?
- ◆ Have they received any complaints from the school authorities regarding the client's performances?
- ◆ Since when have they noted that the client is not the same in regard to academics as he or she used to be?
- ◆ Had they done anything about it so far? If so what?
- ◆ After their efforts had there been any improvement?
- ◆ When did they decide to consult a counselor?

Work history:

- ◆ What occupation is the client involved?
- ◆ How regular is the client for work?
- ◆ Has the client been complaining about work place? If so what?
- ◆ Generally how has the client been fairing in work?
- ◆ What is their perception about client's relationship in the workplace? With boss:
- ◆ With colleagues:
- ◆ With subordinates:

If married: Relationship with spouse in terms of

- ◆ Day to day dealings
- ◆ Sex life
- ◆ Work relationship (if spouse is working)
- ◆ Relationship with children
- ◆ Relationship with opposite sex persons
- ◆ Decision making (who takes the decision – spouse or self)

- ◆ Sharing of work at home with the spouse
- ◆ Relationship with spouses relatives
- ◆ Relationship with spouses friends

Record every issue in details verbatim, that is as is being narrated by the patients family members.

Steps to be followed during the session are given here:

Step 1: The learner must pay close attention to the following regarding the client:

- ◆ Clients presentation
- ◆ Clients personal appearance
- ◆ Clients social interaction with office staff and other in the waiting area
- ◆ Whether the client is accompanied by someone (this helps to determine if the client has social support)

The above few observations can provide important information about the client that may not otherwise be revealed through interviewing or one-to-one conversation.

Step 2: When client enters the office, pay close attention to the following:

- ◆ Note the personal grooming
- ◆ Note things as obvious as hygiene
- ◆ Note things such as whether the client is dressed appropriately according to the season
- ◆ Note if client is talking to himself in the waiting area
- ◆ Note if client is pacing up and down outside the office door
- ◆ Record all observations

These types of observations are important and may offer insight into clients illness.

Step 3: Establish rapport

The next step for the psychologist is to establish adequate rapport with the client by introducing himself or herself. Speak directly to the client during this introduction, pay attention to whether the client is maintaining eye contact. Mental notes such as these may aid in guiding the interview later. Note if clients appear uneasy as they enter the office, then immediately attempt to ease the situation by offering small talk or even a cup of water. Many people feel more at ease if they can have something in their hands. This reflects an image of genuine concern to clients and may make the interview process much more relaxing for them. A complete MSE is more comprehensive and evaluates the following ten areas of functioning:

1. **Appearance:** The psychologist notes the person's age, sex, and overall appearance. These features are significant because poor personal hygiene or grooming may reflect a loss of interest in self care or physical inability to bathe or dress oneself.
2. **Movements and behavior:** The psychologist observes the person's gait (manner of walking) posture, coordination, eye contact, facial expressions, and similar behaviors. Problem with walking or coordination may reflect a disorder of the

central nervous system.

3. **Affect:** Affect refers to a person's outwardly observable emotional reactions. It may include either a lack of emotional response to an event or an overreaction.
4. **Mood:** Mood refers to the underlying emotional "ATMOSPHERE" or tone of the persons answer. Whether the person is in sad mood, happy mood, angry mood etc.
5. **Speech:** The psychologist evaluates the following:
 - a) The volume of the persons voice
 - b) The rate or speed of speech
 - c) The length of answers of questions
 - d) The appropriateness of the answers
 - e) Clarity of the answers and similar characteristics
6. **Thought content:** The examiner assesses what the client is saying for indications of the following which are indicative of certain typical disorders. Each of the following will have to be learner/ trainee.

All the cases should be written verbatim in a narrative style. What questions were asked by the psychologist and what answer was given by the client. At the time of answering the questions how was the client answering? (For instance was the client hesitating? Was the client free in communicating? Was the client evading any question? Was the client focusing on the interview? What was the general demeanor of the client while answering in the interview session? Was the client in a hurry to finish the interview and go off? Was the client showing unwillingness to continue with the interview?)

An example of how to write the interview session is given below:

Client's name:

Interview no:

Date:

Sessions No:

Time:

Purpose of the interview:

The client was referred to me for taking a detailed case history.

Start of the session:

The client Ms .Y came in. I greeted her asked her to please come in and take her seat. She was accompanied by her husband. I offered him also a seat. However as the interview started I asked Ms. Y if it would be all right we both talked alone and her husband waited for a while outside. (It is always important that we meet the client alone first and hear her version before interviewing those who accompany. The reason is that such a behavior on the part of the psychologist makes the client feel good and contributes to establishing rapport quickly.)

The client appearance: The client was well dressed, neat and clean. She looked bright but somewhat anxious.

I decided to make sure that the client is comfortable and told her that she can make herself at home here and whatever she would tell me will kept completely confidential. Only that information, which she says can be passed on to other family members, would be done so. I am a psychologist working here and she can feel free to convey whatever she wants.

Then Ms .Y started to tell me about the problems she is facing with her husband. He does not seem to understand her and suspects her if she goes out. She said that she is also working and in her work she has to interact with a lot of men and her husband does not like it and most of the time fights with her. In the last few months the husband has started doubting her integrity.

The problem as told by Ms. Y should be written down verbatim and clearly.

.....
.....

Next questions:

The clients reply (along with the learner's observations):

How did the interview session end?

As the time allotted to the client is generally one hour, I ended the interview in the following manner.

Ms. Y, I think today we have discussed your problem particularly from the relationship and your experiences angles. It has been possible to understand when your problems started, what precipitated it and how you have been handling the same. Your efforts are really appreciated.

However there are many things we need to discuss with each other. For instance, the difficulty you are facing in your relationship with your husband and the effect of all this on your family life, work life etc. Do you think I have understood your problems correctly? Would you like to come for other sessions sometimes next week as is convenient to you? Can we fix up next Saturday 10am for the next session? May be we will like to give some psychological tests which like to come next week at the time specified. I called the husband for a while and told him that I would like to see him next when Ms Y comes for the session. We both stood up, and shook hands and client and her husband took leave.

My observations: when the client left I found that she was looking slightly more relaxed and was happy that she was listened to and her problem could be put across by her clearly to the counselor.

Plan of action: Continue the interview and gather more information about the dynamics underlying the various conflicts that she has expressed. A session with the husband is required to understand the problem from his angle too.

Today session was able to achieve the purpose with which it started

PSYCHO – PHYSIOLOGICAL STATE INVENTORY

PART - A

Guidelines for submitting practical record

Introduction:

Non-psychotic psychiatric illness also referred to as Common Mental disorders was a term coined by Goldberg and Huxley to describe “disorders which are commonly encountered in community settings, and whose occurrence signals a breakdown in normal functioning”. Common Mental Disorders, the new incarnation of neurosis, have been classified in ICD 10 in two main categories: Neurotic, Stress-related and Somatoform Disorders with a number of subcategories and Mood Disorders (with specific reference to unipolar depression). Thereby, Common Mental Disorders comprise psychological and physiological symptomatology.

The General Health Questionnaire – 28 (GHQ-28) is a widely used instrument to assist in the detection and estimation of non-psychotic psychiatric illness. The questionnaire aims to provide normative data about the symptoms and signs that define non-psychotic psychiatric illness. The questionnaire is easy to administer, acceptable to respondents, fairly short, and objective.

The main value of the General Health Questionnaire is its utility as a screening device in epidemiological research. Screening is the presumptive identification of unrecognized disease or defect by the application of tests, examinations or other procedures, which can be applied rapidly. Screening tests sort out apparently well persons who probably have a disease from those who probably do not. The important point is that screening is not a diagnostic procedure but a pre-diagnostic filtering process, which selects individuals with highest probability of having the disorder for subsequent specific diagnostic evaluation.

The GHQ may therefore be thought of as comprising a set of questions which form a lowest common multiple of symptoms which will be encountered in the various differentiated syndromes of mental disorder, consisting as it does of symptoms which best differentiate psychiatric patients as a general class from those who consider themselves to be well.

Since we are concerned with severity of disturbance in the present and not with the lifelong possession or otherwise of neurotic traits, the items consist of symptoms like abnormal feelings and thoughts, and aspects of observable behavior. The emphasis is not on what the individual is ‘usually like’, but always on how the present state differs from the usual state.

In GHQ-28 four seven-item scales had been established: A-Scale consisting of somatic symptoms; B-Scale dealing with anxiety and insomnia; C-Scale consisting of Social dysfunction; and D-Scale comprising items on severe depression. The multi-dimensional properties of the GHQ may prove useful in situations where additional information about the components of disorder is required, rather than a single severity score.

AIM:

The GHQ-28 detects psychological components of ill health in terms of Somatization, Anxiety and Insomnia, Depression and Social Dysfunction.

Material: GHQ-28 Questionnaire.

Scoring:

A binary scoring method was applied to identify whether the subject is reporting a

number of symptoms that exceeds the predetermined threshold; here 1 and 2 options i.e., not at all and no more than usual indicates the non possession of the symptom in the question; 3 and 4 i.e., rather more than the usual and much more than the usual indicate the possession of the symptom.

The discrimination between cases and normal's is determined by the number of possessions of the symptoms identified.

Respondents with 3 or fewer symptoms are considered as normals respondents with 4 or more are considered as clinical psychological cases.

Procedure:

The subject is seated comfortably and GHQ (General Health Questionnaire - 28) is handed over. The following instructions are given and the subject is asked to complete the questionnaire.

We should like to know if you have had any medical complaints, and how your health has been in general, *over the past few weeks*. Please answer ALL the questions on the following pages simply by underlining the answer which you think most nearly applies to you. Remember that we want to know about present and recent complaints, not those that you had in the past. It is important that you try to answer ALL the questions. Thank you very much for your co- operation.

Results:

The following scoring procedure is followed:

1. Count the number items the subject has given 3 and 4 is "Worse than usual and much worse than usual in each area of GHQ-28, i.e., Somatization (a) Anxiety, insomnia (b) Depression (c) Social dysfunction (d).
2. Put the scores in the table given below:

Somatization	Anxiety, Insomnia	Social Dysfunction	Depression	Total GHQ-28

Interpretation:

- If the total GHQ-28 score is 3 or less the subject is normal.
- If the total is more than 4, he is symptomatic of a common mental disorder.
- The area where you find more is identified as problem area.

Discussion:

The subject obtained a total score of _____ on GHQ-28 (Describe it in 2 or 3 lines). Also he obtained a score of _____ in somatization; _____ in anxiety and insomnia; _____ in depression; in social dysfunction (Describe each score with its appropriateness).

Conclusion:

The total score _____ hence, _____

(A) Somatization score _____ hence _____

(B) Anxiety & Insomnia score _____ hence _____

(C) Depression score _____ hence _____

(D) Social Dysfunction score _____ hence _____.

PSYCHO – PHYSIOLOGICAL STATE INVENTORY

PART -B

Procedure for the conduct of the practical

Subject

Name:

Age:

Gender:

Occupation:

Instructions:

We should like to know if you have had any medical complaints, and how your health has been in general, *over the past few weeks*. Please answer ALL the questions on the following pages simply by underlining the answer which you think most nearly applies to you. Remember that we want to know about present and recent complaints, not those that you had in the past. It is important that you try to answer ALL the questions. Thank you very much for your co- operation.

Have you recently:

A1	been feeling perfectly well and good in health?	Better thanusual	Same as usual	Worse thanusual	Much worsethan usual
A2	been feeling in a need ofgood tonic?	Not at all	No more thanusual	Rather morethan usual	Much morethan usual
A3	been feeling run downand out of sorts?	Not at all	No more thanusual	Rather morethan usual	Much morethan usual
A4	felt that you are ill?	Not at all	No more thanusual	Rather morethan usual	Much morethan usual
A5	been getting any painsin your head?	Not at all	No more thanusual	Rather morethan usual	Much morethan usual
A6	been getting a feeling oftightness or pressure in your head?	Not at all	No more thanusual	Rather morethan usual	Much morethan usual
A7	been having hot or coldspells?	Not at all	No more thanusual	Rather morethan usual	Much morethan usual

B1	lost much sleep overhurry?	Not at all	No more than usual	Rather more than usual	Much more than usual
B2	had difficulty in staying asleep once you are off?	Not at all	No more than usual	Rather more than usual	Much more than usual
B3	felt constantly under strain?	Not at all	No more than usual	Rather more than usual	Much more than usual
B4	been getting edgy and bad-tempered?	Not at all	No more than usual	Rather more than usual	Much more than usual
B5	been getting scared or panicky for no good reason?	Not at all	No more than usual	Rather more than usual	Much more than usual
B6	found everything getting on top of you?	Not at all	No more than usual	Rather more than usual	Much more than usual
B7	been feeling nervous and strung-up all the time?	Not at all	No more than usual	Rather more than usual	Much more than usual

C1	Been managing to keep yourself busy and occupied?	More so than usual	Same as usual	Rather less than usual	Much less than usual
C2	been taking longer over the things you do?	Quicker than usual	Same as usual	Longer than usual	Much longer than usual
C3	felt on the whole you were doing things well?	Better than usual	About the same as usual	Less well than usual	Much less well
C4	been satisfied with the way you've carried out your task?	More satisfied	About the same as usual	Less satisfied than usual	Much less Satisfied
C5	felt that you are playing a useful part in things?	More so than usual	Same as usual	Less useful than usual	Much less than usual
C6	felt capable of making decisions about things?	More so than usual	Same as usual	Less so than usual	Much less capable
C7	been able to enjoy your normal day-to-day activities?	More so than usual	Same as usual	Less so than usual	Much less than usual

D1	been thinking of yourself as a worthless person?	Not at all	No more than usual	Rather more than usual	Much more than usual
D2	felt that life is entirely hopeless?	Not at all	No more than usual	Rather more than usual	Much more than usual
D3	felt that life isn't worth living?	Not at all	No more than usual	Rather more than usual	Much more than usual
D4	thought of the possibility that you might make away with yourself?	Definitely not	I don't think so	Has crossed my mind	Definitely have
D5	found at times you couldn't do anything because your nerves were too bad?	Not at all	No more than usual	Rather more than usual	Much more than usual
D6	found yourself wishing you were dead and away from it all?	Not at all	No more than usual	Rather more than usual	Much more than usual
D7	found that the idea of taking your own life kept coming into your mind?	Definitely not	I don't think so	Has crossed my mind	Definitely has

A**B****C****D****TOTAL**

EYSENCK PERSONALITY INVENTORY

PART - A

Subject

Name:

Age:

Gender:

Occupation:

Display time 45 minutes

Instructions:

Here are some questions regarding the way you feel and behave. You apply these questions to yourself (your usual way of feeling and behavior). Underline Yes/No given against the question. There is no right or wrong answers. Do not think too long write your first reaction to the question. There is no time limit but do it quickly.

1. Do you often long for excitement? Yes/No
2. Do you often need understanding friends to cheer you up? Yes/No
3. Are you usually carefree? Yes/No
4. Do you find it very hard to take no for an answer? Yes/No
5. Do you stop and think over before doing anything? Yes/No
6. If you say you will do something do you always keep your promise, no matter how inconvenient it might be to do so? Yes/No
7. Does your mood often go up and down? Yes/No
8. Do you generally do and say things quickly without stopping to think? Yes/No
9. Do you ever feel "Just miserable" for no good reason? Yes/No
10. Would you do almost anything for a dare? Yes/No
11. Do you suddenly feel shy when you want to talk to an attractive stranger? Yes/No
12. Once in a while do you lose your temper and get angry? Yes/No
13. Do you often do things on the spur of the moment? Yes/No
14. Do you often worry about things you should not have done or said? Yes/No
15. Generally, do you prefer reading or meeting people? Yes/No
16. Are your feelings rather easily hurt? Yes/No
17. Do you like going out a lot? Yes/No
18. Do you occasionally have thoughts and ideas that you would not like other people to know about? Yes/No

19. Are you sometimes bubbling over with energy and sometime very sluggish? Yes/No
20. Do you prefer to have few but special friends? Yes/No
21. Do you day dream a lot? Yes/No
22. When people shout at you, do you shout back? Yes/No
23. Are you often troubled about feelings of guilt? Yes/No
24. Are all your habits good and desirable ones? Yes/No
25. Can you usually get yourself go and enjoy yourself a lot at a party? Yes/No
26. Would you call yourself tense or “highly – struggle”? Yes/No
27. Do other people think of you as being very lively? Yes/No
28. After you have done something important, do you often come away feeling you could have done better? Yes/No
29. Are you mostly quiet when you are with other people? Yes/No
30. Do you sometimes gossip ----- Yes/No
31. Do ideas run through your head so that you cannot sleep? Yes/No
32. If there is something you want to know about, would you rather look it up in a book than talk to someone about it? Yes/No
33. Do you get palpitations or thumping in your heart? Yes/No
34. Do you like the kind of work that you need to pay close attention to? Yes/No
35. Do you get attacks of shaking or trembling? Yes/No
36. Would you always declare everything at the customs, even if you knew that you could never be found out? Yes/No
37. Do you hate being with a crowd who play jokes on one another? Yes/No
38. Are you a irritable person? Yes/No
39. Do you like doing things in which you have to act quickly? Yes/No
40. Do you worry about awkward things might happen? Yes/No
41. Are you slow and unhurried in the way you move? Yes/No
42. Have you ever been late for an appointment or work? Yes/No
43. Do you have many close neighbors? Yes/No
44. Do you like talking to people so much that you never miss a chance of talking to a stranger? Yes/No
45. Are you troubled by aches and pains? Yes/No
46. Would you be very unhappy if you could not see lots of people most of the time? Yes/No
47. Would you call yourself a nervous person? Yes/No

48. Of all the people you know, are there some whom you definitely do not like? Yes/No
49. Would you say that you were fairly self-confident? Yes/No
50. Are you easily hurt when people find fault with you or your work? Yes/No
51. Do you find it hard to really enjoy yourself at a lively party? Yes/No
52. Are you troubled with feelings of inferiority? Yes/No
53. Can you easily get some life into a rather dull party? Yes/No
54. Do you sometime talk about things you know nothing about? Yes/No
55. Do you worry about your health? Yes/No
56. Do you like playing pranks on others? Yes/No
57. Do you suffer from sleeplessness? Yes/No

EYSENCK PERSONALITY INVENTORY

PART –II-B

Guidelines for submitting practical record

Experiment –1:

E -

S -

Title: Eysenck Personality Inventory

Introduction:

Personality, Definition and Introduction. Description of extroversion and introversion traits. Jung Theory, Neuroticism importance and characters. Difference between stable, unstable and normal personalities.

Aim: To assess the type of extroversion- introversion and neurotic personality traits of the subject.

Materials: Eysenck Personality Inventory questionnaire, scoring key and manual.

Procedure: The subject is seated in a comfortable position and the following instructions are given.

Instructions: Here are some questions regarding the way you feel and behave. You apply these questions to yourself (your usual way of feeling and behavior). Underline Yes/No given against the question. There is no right or wrong answers. Do not think too long write your first reaction to the question. There is no time limit but do it quickly.

After clarifying the doubts about the questionnaire the subject is asked to complete the questionnaire without leaving any question.

Results: The answers of the questionnaire is corrected as for the scoring key. The key for 57questions is as follows.

E - Score		N – Score		L - Score	
Yes	No	Yes	No	Yes	No
1	5	2	35	6	12
3	15	4	38	24	18
8	20	7	40	36	30
10	29	9	43		42
13	32	11	45		48
17	34	14	47		54
22	37	16	50		
25	41	19	52		
27	51	21	55		
39		23	57		
44		26			
46		28			
49		31			
53		33			
56					

The score of limitations are as follows.

E-Score: Extrovert – 17 or more than 17.

Introvert -- 7 or less than 7.

Ambivert – between 8 and 16.

N-Score: Unstable – more than 14

Stable – less than 4

Normal – between 5 and 12

L-Score: Tendency to lie – 5 or more than 5

The subject answers which are as per the scoring key are given one mark. Then the subjects E-Score, N-Score, L-Score are calculated separately.

Table – I: Individual Data:

E-Score	Description	N-Score	Description

L-Score indicates the tendency of the subject to lie. If it is more than 5 it indicates the tendency to lie is more.

Discussion:

1. Discussion on extraversion, introversion scores and its characters of the subject.
2. Discussion on neuroticism score and its characters.
3. Discussion on the tendency of the subject to lie.

Conclusion:

1. E-Score and type
2. N-Score and type
3. L-Score and its level

Application:

1. Clinical purpose
2. Job selection process

Reference:

PART –II-B**Guidelines for submitting practical record****2. Eysenck Personality Inventory****Experiment –1:**

E

S

Title: Eysenck Personality Inventory

Introduction: Personality Definition and Introduction. Description of extroversion and introversion traits. Jung Theory, Neuroticism importance and characters. Difference between stable, unstable and normal personalities.

Aim: To assess the type of extroversion- introversion and neurotic personality traits of the subject.

Materials: Eysenck Personality Inventory questionnaire, scoring key and manual.

Procedure: The subject is seated in a comfortable position and the following instructions are given.

Instructions: Here are some questions regarding the way you feel and behave. You apply these questions to yourself (your usual way of feeling and behavior). Underline Yes/No given against the question. There is no right or wrong answers. Do not think too long write your first reaction to the question. There is no time limit but do it quickly. After clarifying the doubts about the questionnaire the subject is asked to complete the questionnaire without leaving any question.

Results: The answers of the questionnaire is corrected as for the scoring key. The key for 57 questions is as follows.

<i>E - Score</i>		<i>N – Score</i>		<i>L - Score</i>	
<i>Yes</i>	<i>No</i>	<i>Yes</i>	<i>No</i>	<i>Yes</i>	<i>No</i>
1	5	2	35	6	12
3	15	4	38	24	18
8	20	7	40	36	30
10	29	9	43		42
13	32	11	45		48
17	34	14	47		54
22	37	16	50		
25	41	19	52		
27	51	21	55		
39		23	57		
44		26			
46		28			
49		31			
53		33			
56					

The score of limitations are as follows.

E – score: Extrovert 17 or more than 17

Introvert – 7 or less than 7

Ambivert – between 8 and 16

N-Score: Unstable – more than 14

Stable – less than 4

Normal – between 5 and 12

L-Score: Tendency to lie – 5 or more than 5

The subject answers which are as per the scoring key are given one mark. Then the subjects E-Score, N-Score, L-Score are calculated separately.

Table – I: Individual Data:

E-Score	Description	N-Score	Description

L-Score indicates the tendency of the subject to lie. If it is more than 5 it indicates the tendency to lie is more.

Discussion:

1. Discussion on extraversion, introversion scores and its characters of the subject.
2. Discussion on neuroticism score and its characters.
3. Discussion on the tendency of the subject to lie.

Conclusion:

1. E-Score and type
2. N-Score and type
3. L-Score and its level

Application:

1. Clinical purpose
2. Job selection process

MEASURING STRESS

Introduction:

Stress is an internal state which can be caused by physical demands on the body (disease conditions, exercise, extremes of temperature and the like) or by environmental and social situations which are evaluated as potentially harmful, uncontrollable or exceeding our resources for coping.

Life events and pressures of everyday life have a forceful impact on health. Recent advances in mind-body medicine is an outcome of the empirical research on stress and its effects on body and mind. The need to identify these life events or the environmental triggers have gained importance, as early detection can help in preventing major degenerative diseases. The physical, environmental and social causes of the stress state are termed as stressors. Once induced by stressors, the internal stress state can then lead to various responses. On the one hand, it can result in a number of physical bodily responses. On the other hand, psychological responses such as anxiety, helplessness, depression, irritability and a general feeling of most being able to cope with the world can result from the stress state.

Stress researchers developed techniques to assess the stress levels of subjects. Schedule of Recent Experience (SRE) was the first of this kind. This has undergone many modifications and variations. Homes and Rahe (1967) quantified the effects of stressful events in terms of life change events.

Aim:

To assess the level of stress and the controllability over such situations as perceived by the subjects.

Materials required:

Stress Questionnaire Constructed by Dr. Latha Satish.

Description of the material:

The questionnaire developed by Latha (1988) consists of 52 items arranged from mild stress (least affecting the everyday affairs), moderate to severe stress (which affects the adjustment and efficiency of an individual). This lists the life experiences based on the amount of 'change' or 'adjustments' one has to make to life rather than the undesirability of events themselves. It also has a Control Index, where the subject has to record whether he/she had complete, partial or no control over the experienced stressful situation.

The scale was tried out on a sample of 80 subjects. The item reliability value was 0.86. A test reliability on a sample of 30 subjects was found to be 0.96 ($P < 0.01$). The content validity based on judges rating was 0.86.

Procedure:

The subject was scaled comfortably and given the following instructions. "This questionnaire studies the day to day problems encountered/experienced by people and the way they react to it. Here are a list of events /situations/problems and you will have to mark 'Yes', if you have experienced them and mark 'No', if you have not experienced them. If you find any of the situations is not applicable to you, then delete them. You also have to indicate

the account of control such as you had whether partial, complete, no control over the situation in which you have given 'Yes' response by put a mark in the appropriate column.

Scoring:

- (i) The questionnaire with 52 items are divided into 3 categories of stressors according to its severity in affecting an individual normal life.
- (ii) The items from No.1 to No.17 are classified as Mild stressors. The score is obtained by adding the 'Yes' responses.
- (iii) Items from No.18 to 35 represent moderate stress and items No.36 to 52 represent stress of severe type. The scores for both the categories are arrived by adding, the 'Yes' response. Thus, the possible number of Yes responses are 52. This score under this category ranges from 0 to 52.
- (iv) The Control Index was decided by giving a weightage of 1,2 or 3 makes against 'Yes' items scored as complete control, partial and no control respectively. The Index ranges from 0 to 156.

Results:

Table – 1 shows the individual data for stress and control index. Table – 2 shows the group data for stress and control index.

Table – 1: Individual data on Stress and Control Index:

Stress Control	Level of Stress	Control Index	Interpretation

Discussion:

The above questionnaire was designed to measure the level of stress in an individual (subject) and the amount of control he/she has over it. The external and internal factors contributing to stress and the impact of stress (i.e., how it affects) on the individual are to be discussed. Both the individual data and group data. The sex differences in the group should also be studied.

Conclusion:

The conclusion may be drawn on the basis of the analysis of ----- discussion recorded above. It can be on the following:

- (i) The subject's level of stress and the amount of control he/she has over it.
- (ii) The group data on the level of stress and control index.
- (iii) Sex differences on the level of stress and control index.

Application:

The scale constructed by Dr. Latha Satish is a useful measure to determine the various levels of stress people undergo. Stress is an inseparable part of our everyday life. Each one of us experiences stress as we are constantly pressurised by the physical/environmental/social demands.

The test can be administered on the housewives/working women/adolescents/people working in industries and corporate sectors/patients undergoing a dreadful disease etc., as the life events and pressures of everyday life leading to stress have a fearful impact on health leading to deterioration of body and mind.

Reference:

- (1) LATHA. S (1997)– Development of stressful life events questionnaire – Journal of Psychometry, 1997. Vol. 16, No.2.
- (2) MALINI DEVI KIRUBAI (1993) - Family structure in relation to stress coping of general health of women – Unpublished M.Phil Dissertation, University of Madras.

Control Index:

0 - 51 Complete control over stress

52 – 105 Partial control over stress

106-156 No control over stress.

- The total stress level score of the subjectand as per the test norms, the subject is having level of stress. The control index of the subject is and is indicative of as per the manual.
- Indicate the items in which the subject expressed stress (i.e., yes items) and describe.
- Discuss about his control index score (5 to 6 lines) Application:- used for clinical purpose.

Stress Questionnaire:

List of situations/Events/Problems	Yes/No	Amount of Control Over it		
		Comple econtrol	Partial Control	No Control
(1). Lack of holiday rest				
(2). Too much to do at short period				
(3). Uncertainty of coming days				
(4). Prices sky rocketing				
(5). Addition of new family members				
(6). Lack of domestic help				
(7). Change in sleeping habits				
(8). Lack of emotional support at home				
(9). Career pressure				
(10). Academic Pressure				
(11). Very high family pressure is earn more				

(12). Increased work load at home				
(13). Pollutions and slum conditions in the locality.				
(14). Lack of job satisfaction				
(15). Getting married				
(16). Appearing for examination				
(17). Lack of understanding between staff in work place				
(18). Failure in exams or other achievements				
(19). Discrimination in work place because of your sex/physical characteristics/religion/social status				
(20). Lack of monetary security				
(21). Daughter's marriage				
(22). Family conflict				
(23). Huge loan to be repaid				
(24). Lack of child (male child)				
(25). Unemployment				
(26). Sexual difficulties				
(27). Unwanted pregnancy				
(28). Conflict over dowry (self/spouse)				
(29). Feel a sense of powerlessness or hopelessness.				
(30). Lack of promotion or incentives.				
(31). Heavy responsibility in work situation				
(32). Financial loss or problems				
(33). Decline in social life				
(34). Too much time pressure				
(35). Anxiety about unfulfilled commitments				

(36). Illness of family members				
(37). Major personal illness				
(38) Lack of confidence in oneself				
(39) Broken love affairs				
(40) Lack of support or excessive expectation from yourself and those around you				
(41) Intense arguments with spouse				
(42) Sense of loneliness				
(43) Marital conflict				
(44) Alcoholism /drug addition by family member				
(45) trouble with parent –in-law				
(46) Suspension or dismissal from job				
(47) Extreme boredom				
(48) Lack of sense of self-worth				
(49) having a handicapped child				
(50) Marital separation/divorce				
(51) Extra marital relation of spouse				
(52) Death of close family member/anyother.				

INTEREST INVENTORY

Subject

Name:

Age:

Gender:

Occupation:

Instructions:

The schedule given below consists of ten rows and ten columns. In each of the 100 boxes a pair of occupation is printed. You are asked to express your preference for different occupations. The occupations are given in pairs and you are asked to check them to indicate your preferences. In each comparison assume that there is no difference in income, social status, and other perks.

Encircle 1 if you prefer the first of a pair of occupations. Encircle 2 if you prefer the second of a pair of occupations. Encircle 1 and 2, if you like both the occupations. Do not encircle both the occupations if you dislike both of them.

Display time 45 minutes

	PS1	BS1	C1	B1	E1	P1	L1	H1	A1	M1	
PS2	1 physicist Engineer 2	1 Physician physicist 2	1 Auditor Chemist 2	1 Banker Machiner Designer 2	1 Campaign banker machine Designer	1 Criminal Lawyer Bridge Designer	1 Journalist Mathematician 2	1 Child welfare Aeroplarie Designer	1 Commercial artist Mechanical engineer 2	1 orchestra 1 conductor inventor	PS
BS2	1 Mechanical Engineer Anatomist 2	1 Psychologist Zoologist 2	1 statistician Botanist 2	1 Business Manager Psychologist 2	1 City Mayor Biologist 2	1 Labour arbitrator public Health 2	1 Foreign Correspondent horticulturalist 2	1 Clergyman Physician 2	1 Art critic Bacteriologist 2	1 Music Composer surgeon 2	BS
C2	1 Inventor Purchasing agent 2	1 Psychologist Statistician 2	1 Cost Analyst Tax Specialist 2	1 Manufacture Bank Examiner 2	1 Judge Tax Specialist 2	1 Politician Cost analyst 2	1 Radio Commentator Insurance statistician 2	1 Vocational Counsellor Accountant 2	1 Artist Auditor 2	1 Pianist Cashier 2	C
B2	1 Chemist Automobile Dealer 2	1 Anatomist Manufacturer 2	1 Accountant Retail Merchant 2	1 Retail Merchant Manufacturer 2	1 State Governor Wholesale Merchant 2	1 Political Speaker Banker 2	1 News Paper Editor Importer 2	1 Juvenile Court Hotel Manager 2	1 Portrait Painter Building Contractor 2	1 Violonist Real estate 2	B
E2	1 Electrical Engineer Museum Director 2	1 Zoologist Factory Superintendent 2	1 Insurance statistician Campaign Manager 2	1 Investment Broker City Mayor 2	1 Hotel Manager City Mayor 2	1 Publicity Writer Army Officer 2	1 Magazine writer ship Captain 2	1 Missionary School Superintendent 2	1 Sculptor Judge 2	1 Singer Hospital Supertindent 2	E
P2	1 Mathematician Criminal lawyer 2	1 Bacteriologist Advertising Manager 2	1 Bank Examiner Labour arbitrator 2	1 Real Estate Political Speaker 2	Coast Guard 1 Real Estate Editorial Writer 2	1 Criminal Lawyer Political Speaker 2	1 Historian Salesman 2	1 Social service Insurance Salesman 2	1 Cartoonist Politician 2	1 Choir Director Sales Manager 2	P
L2	1 Physicist Author 2	1 Botanist Diplomatic Service 2	1 Cost analyst Lecturer 2	1 Store Manager Lawyer 2	1 Hospital Superintendant Journalist 2	1 Sales Manager College Professor 2	1 News Paper Editor Magazine writer 2	1 Y.M.C.A. Secretary Columnist 2	1 landscape director Missionary 2	1 Song writer Foreign Correspondent 2	L
H2	1 Astronomer Clergyman 2	1 Horticulturist Recreation Director 2	1 Purchasing Agent Juvenile Court 2	1 Retail Merchant Vocational Counselor 2	1 School Superintendent Social Service 2	1 Advertising Manager Y.M.C.A Secretary 2	1 lawyer Red cross 2	1 Child Welfare Red cross 2	1 stage Director Missionary 2	1 Organist Child welfare 2	H
A2	1 Machine Designer Landscape architet 2	1 Surgeon Sculptor 2	1 Tax Specialist Textile Designer 2	1 Wholesale Merchant Art critic 2	1 Ship captain Commercial artist 2	1 Radio Commentator Stage Director 2	1 writer artist 2	1 Red cross Portrait 2	1 Commercial artist Art critic 2	1 Music Teacher Costume designer 2	A
M2	1 Electronics expert Music Teacher 2	1 Biologist Pianist 2	1 Castier Band Leader 2	1 Insurance Broker Song Writer 2	1 Factory superintendent Organist 2	1 Insurance salesman Violonist 2	1 Diplomatic Service Music Composer 2	1 Recreation Director Singer 2	1 Textile designer Orchestra conductor 2	1 Pianist Violonist 2	M

	PS1	BS1	C1	B1	E1	P1	L1	H1	A1	M1	
PS2	1 physicist Engineer 2	1 Physician physicist 2	1 Auditor Chemist 2	1 Banker Machiner Designer 2	1 Campaign banker machine Designer	1 Criminal Lawyer Bridge Designer	1 Journalist Mathematician 2	1 Child welfare Aeroplane Designer 2	1 Commercial artist Mechanical engineer 2	orchestra 1 conductor inventor	PS
BS2	1 Mechanical Engineer Anatomist 2	1 Psychologist Zoologist 2	1 statistician Botanist 2	1 Business Manager Psychologist 2	1 City Mayor Biologist 2	1 Labour arbitrator public Health 2	1 Foreign Correspondent horticulturist 2	1 Clergyman Physician 2	1 Art critic Bacteriologist 2	1 Music Composer surgeon 2	BS
C2	1 Inventor Purchasing agent 2	1 Psychologist Statistician 2	1 Cost Analyst Tax Specialist 2	1 Manufacture Bank Examiner 2	1 Judge Tax Specialist 2	1 Politicin Cost analyst 2	1 Radio Commentator Insurance statistician 2	1 Vocational Counsellor Accountant 2	1 Artist Auditor 2	1 Pianist Cashier 2	C
B2	1 Chemist Automobile Dealer 2	1 Anatomist Manufacturer 2	1 Accountant Retail Merchant 2	1 Retail Merchant Manufacturer 2	1 State Governor Wholesale Merchant 2	1 Political Speaker Banker 2	1 News Paper Editor Importer 2	1 Juvenile Court Hotel Manager 2	1 Portrait Painter Building Contractor 2	1 Violonist Real estate 2	B
E2	1 Electrical Engineer Museum Director 2	1 Zoologist Factory Superintendent 2	1 Insurance statistician Campaign Manager 2	1 Investment Broker City Mayor 2	1 Hotel Manager City Mayor 2	1 Publicity Writer Army Officer 2	1 Magazine writer ship Captain 2	1 Missionary School Superintendant 2	1 Sculptor Judge 2	1 Singer Hospital Supertindent 2	E
P2	1 Mathematician Criminal lawyer 2	1 Bacteriologist Advertising Manager 2	1 Bank Examiner Labour arbitrator 2	1 Real Estate Political Speaker 2	Coast Guard 1 Real Estate Editorial Writer 2	1 Criminal Lawyer Political Speaker	1 Historian Salesman 2	1 Social service Insurance Salesman 2	1 Cartoonist Politician 2	1 Choir Director Sales Manager 2	P
L2	1 Physicist Author 2	1 Botanist Diplomatic Service 2	1 Cost analyst Lecturer 2	1 Store Manager Lawyer 2	1 Hospital Superintendent Journalist 2	1 Sales Manager College Professor	1 News Paper Editor Magazine writer 2	1 Y.M.C.A. Secretary Columnist 2	1 landscape director Missionary 2	1 Song writer Foreign Correspondent 2	L
H2	1 Astronomer Clergyman 2	1 Horticulturist Recreation Director 2	1 Purchasing Agent Juvenile Court 2	1 Retail Merchant Vocational Counselor 2	1 School Superintendent Social Service 2	1 Advertising Manager Y.M.C.A Secretary	1 lawyer Red cross 2	1 Child Welfare Red cross 2	1 stage Director Missionary 2	1 Organist Child welfare 2	H
A2	1 Machine Designer Landscape architet 2	1 Surgeon Sculptor 2	1 Tax Specialist Textile Designer 2	1 Wholesale Merchant Art critic 2	1 Ship captain Commercial artist 2	1 Radio Commentator Stage Director 2	1 writer artist 2	1 Red cross Portrait 2	1 Commercial artist Art critic 2	1 Music Teacher Costume designer 2	A
M2	1 Electronics expert Music Teacher 2	1 Biologist Pianist 2	1 Castier Band Leader 2	1 Insurance Broker Song Writer 2	1 Factory superintendent Organist 2	1 Insurance salesman Violonist 2	1 Diplomatic Service Music Composer 2	1 Recreation Director Singer 2	1 Textile designer Orchestra conductor 2	1 Pianist Violonist 2	M

Procedure: The subject should be made to sit comfortably and relaxed. The subject is asked to fill up the personal details on the Thurstone interest schedule. The schedule consists of a single sheet of paper and is divided into 10 rows and 10 columns. In each of the one hundred spaces is printed with pair of occupations and the subject is asked to mark his preference in each mark. It represents his relative interest.

Instruction: The schedule given below consists of ten rows and ten columns. In each of the 100 boxes a pair of occupation is printed. You are asked to express your preference for different occupations. The occupations are given in pairs and you are asked to check them to indicate your preferences. In each comparison assume that there is no difference in income, social status, and other perks.

Encircle 1 if you prefer the first of a pair of occupations. Encircle 2 if you prefer the second of a pair of occupations. Encircle 1 and 2, if you like both the occupations. Do not encircle both the occupations if you dislike both of them.

Results: The results for the experiment are given as follows. There are 10 vocations in the questionnaire and the relative preference of the subject for different vocations is given in the table given below.

Table –I: Subject Scores in various occupations:

S.No.	Occupation field	Score obtained
1	PS – Physical Science	
2	BS – Biological Science	
3	C – Computational	
4	B – Business	
5	E – Executive	
6	P – Persuasive	
7	L - Linguistics	
8	H – Humanitarian	
9	A – Artistic	
10	M - Musical	

Scoring procedure:

- For calculating the PS score all the PS vertically encircled 1's and Horizontally encircled 2's to be added that is $PS_1 + PS_2 = PS$
Similarly by adding BS_1 and BS_2 you will get the BS score. In the same way all the scores for the different professions to be calculated.

The schedule can be scored either by the examiner or by the subject. The scoring is done by counting the number of marks in each column and its corresponding row. The comparison items are arranged so as to facilitate scanning without interference of printing across the column or row. The score is then recorded for each of the ten fields. The maximum range for each score is 0 to 20.

There are ten interest scores. The interest score for physical science – PS is obtained by counting in column PS1 all the rings around the 1's and in row PS2 all the rings around the 2's. Write the sum at the end of that row in the box PS. This is the interest score for physical science proceeds in the same way for the other interest scores.

Discussion: The subject's preferred vocational field and non-preferred vocational field to be enlightened and discussed.

Subjects preferences for various occupations to be indicated on a graph paper and discussed.

Conclusion: Subject has scored high on –

Subject has scored least on -

Applications: Educational guidance

Vocational guidance