

DEPARTMENT OF SOCIAL WORK
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ODD SEMESTER EXAMINATION- 2014
SEMESTER Ist 2014
SET- THREE
MODEL ANSWER

TIME: 3 HOUR

M.M= 75 MARKS

PAPER: - MS- 301: SOCIAL PROBLEMS & SOCIAL LEGISLATION

I. ATTEMPT ALL QUESTIONS EACH CARRY EQUAL MARKS 10X2= 20.

1. _____ is an inability to accomplish something one might want to do, that most others around one are able to accomplish.

Handicap

2. Poverty Line in India is defined on the basis of :

- (a) Minimum level of income**
- (b) A person's employment status**
- (c) Nature of the job**
- (d) All the above**

(a) Minimum level of income

3. Diabetes is an

- (a) Visible disability**
- (b) Nonvisible Disability**
- (c) None of the above**

(b) Nonvisible Disability

4. According to Durkheim "a state of normlessness in both the society & the individual is known as _____.

Anomie

5. Prejudice refers to

- (a) Any kind of bias or inclination toward anything or anyone that may be considered inherently irrational.**
- (b) Positive attitudes of a special kind.**
- (c) A usually negative attitude toward the members of some social group.**
- (d) Attitudes of a majority toward a minority.**

(a) Any kind of bias or inclination toward anything or anyone that may be considered inherently irrational.

6. Faulty socialization is one of the factor facilitating Deviance (T/F)

True

7. In cultural lag Ogburn has divided culture into two parts namely

(a) Material and non-material

(b) Visible and invisible

(c) Both

(d) None of the above

(a) Material and non-material

8. A condition in which an individual loses control over his alcohol intake is known as

(a) Alcoholism

(b) Drug addiction

(c) Both

(d) None of the above

(a) Alcoholism

9. One of the characters of Terrorism is

(a) It is against the state or community

(b) It is legal and lawful

(c) It shows rational thinking

(d) All the above

(a) It is against the state or community

10. Social control is needed for maintaining the social unity (T/F)

True

**II. ATTEMPT ANY FIVE QUESTIONS (Write your Answers 150- 200Words)
7X5=35.**

1. Critically Analyse the Concept of Cultural Lag. Discuss .

The word lag connotes crippled movement. Hence cultural lag means the faltering of one aspect of culture behind another. For example if either the material or the non-material

aspect of culture were to stay behind the other, it would be a case of cultural lag. It is generally observed that material culture progresses faster in comparison with non-material culture.

Ogburn's Theory

The term cultural lag originated in a famous sociologist W.F. Ogburn's treatise entitled Social Change. The term was coined by Ogburn. According to him, culture has two aspects, one material and the other non-material. The material aspect, as compared with the non-material, tends to progress rapidly.

Thus the non-material part lags behind. It is this faltering action which is termed cultural lag. Defining cultural lag in their work Handbook of Sociology Ogburn and Nimkoff have written that "the strain that exists, between two correlated parts of culture that change at unequal rates of speed may be interpreted as a lag in the part that is changing at the slower rate for the one lags behind the other." Citing an example of cultural lag in his Social Characteristics of Cities Ogburn has stated that the number of policemen per 10,000 residents is less in towns in which the population is increasing than the towns in which it is decreasing. This situation Ogburn has represented diagrammatically, thus:

Some Examples from Indian Conditions

In Indian conditions one comes across many forms of cultural lag. During the last two hundred years much has been borrowed from the West

In India's material culture and such town as Delhi, Calcutta and Bombay are in no way inferior to the Western towns in respect of superficial gaudiness. But inspite of having borrowed so much from the West in its material culture, Indian culture, has undergone very limited changes in the sphere of non- material culture. In this way, as far as the question of borrowing from the West in education is concerned, a tremendous lagging behind from material culture is evident in India's non-material culture.

Culture is changing very rapidly in the sphere of fashion, dress, artificial beautification, art, recreation, etc., but the change in the sphere of religious notions is comparatively very slow. The present age is called the age of science and rationalism and the West is considered le m most advanced in this respect but how scientific and rational is the Christian outlook both medieval and modern, concerning beliefs, rituals, etc.? Actually, we are seeing newer and newer superstitions in the age of science.

In this way, in modern age, cultural lag in the! Various elements of culture is evident in all cultures, be it Indian, Japanese, English or any other. Lumley has written correctly that it seems as if many pedestrian soldiers or a complete army are marching out of step or as if some of the performers of an orchestra are playing this year's music on their

instruments while others are playing last year's music and still others last century's music or even more ancient music at the same time. Such music would not be particularly musical or melodious. But this is the picture of every culture.

Criticism

Many sociologists have indulged in bitter criticism of Ogburn's theory of cultural lag. According to Mueller, cultural lag is artificial and imaginary. Some other scholars regard lag as artificial and imaginary. Some other scholars view it as a very simple background to the understanding of social change. James W. Woodard and R.M. Maclver have put forward the following objections to Ogburn's theory of cultural lag:

1. Ogburn's distinction between material and non-material culture is not clear

Again, it is not necessary that non-material culture should invariably lag behind material culture.

2. A major defect of Ogburn's theory lies in the fact that the same term cultural lag has been employed for all disequilibriums occurring in the process of social change. Maclver has in this connection, suggested the use of many terms for the various types of disequilibriums and conflicts, such as technological lag, ethnological restraint, cultural clash; cultural ambivalence; etc.

4. According to cultural lag, one thing progresses forward while another lags or restricts. Hence this word should not be used in the context of those objects in whose case the encouraging as well as the restraining objects are similar and possess a common standard of evaluation.

The main critics Maclver and Page (1956) put forth following arguments in against of cultural lag theory:

Firstly, the distinction between material and non-material culture, as made by Ogburn, is not clear and workable one. What lags behind what? Where no such standard is available, we cannot rightly speak of a lag.

Secondly, material culture is nothing but civilisation and non-material is rightly called the culture proper.

Thirdly, the term 'lag' is not properly applicable to relations between technological factors and the cultural pattern or between the various components of cultural pattern itself.

Fourthly, the rate of change in the sphere of technology is always not uniform.

Some technological articles advance too fast while the others remain behind. This situation is termed by Maclver and Page (1956) as 'technological lag'. Fifthly, for various types of disequilibrium or maladjustment different terms should have been used instead of lumping together indiscriminately in a single category.

Maclver and Page (1956) have suggested four such terms:

- (1) Technological lag;
- (2) Technological restraint;
- (3) Culture clash, and
- (4) Cultural ambivalence.

2. Discuss Mental Illness in context of Individual Pathology.

A mental illness is a medical condition that disrupts a person's thinking, feeling, mood, ability to relate to others and daily functioning. Just as diabetes is a disorder of the pancreas, mental illnesses are medical conditions that often result in a diminished capacity for coping with the ordinary demands of life.

Serious mental illnesses include major depression, schizophrenia, bipolar disorder, obsessive compulsive disorder (OCD), panic disorder, posttraumatic stress disorder (PTSD) and borderline personality disorder. The good news about mental illness is that recovery is possible. A mental illness is a health problem that significantly affects how a

person thinks, behaves and interacts with other people. It is diagnosed according to standardised criteria. A mental health problem also affects how a person thinks, feels, and behaves, but to a lesser extent than a mental illness.

Mental illnesses can affect persons of any age, race, religion or income. Mental illnesses are not the result of personal weakness, lack of character or poor upbringing. Mental illnesses are treatable. Most people diagnosed with a serious mental illness can experience relief from their symptoms by actively participating in an individual treatment plan.

These illnesses may also be referred to as a mental disorder, mental impairment or psychiatric disability.

Causes of mental illness

Mental illness results from complex interactions between the mind, body and environment. Factors which can contribute to mental illness are:

- long-term and acute stress
- biological factors such as genetics, chemistry and hormones
- use of alcohol, drugs and other substances
- cognitive patterns such as constant negative thoughts and low self esteem
- social factors such as isolation, financial problems, family breakdown or violence

These factors can be minimised by a strong and supportive community environment.

Frequently Diagnosed Mental Illnesses

1. Schizophrenia

Although it affects men and women with equal frequency, schizophrenia most often appears in men in their late teens or early twenties, while it often appears in women a few years later. The symptoms, strengths and course of the illness is unique for each person. Interfering with a person's ability to think clearly, manage emotions, make decisions and relate to others, schizophrenia impairs a person's ability to function to their potential

when it is not treated. Unfortunately, no single, simple course of treatment exists. Research has linked schizophrenia to many of possible causes, including aspects of brain chemistry and structure, as well as environmental causes. Environmental stressors and genetic risks are now thought to both contribute to this illness.

2. Bipolar Disorder

Bipolar disorder is a chronic illness with recurring episodes of mania and depression that can last from one day to several months. This illness causes unusual and dramatic shifts in mood, energy and the ability to think clearly. Cycles of high (manic) and low (depressive) moods may follow an irregular pattern that differs from the typical ups and downs experienced by most people. The symptoms of bipolar disorder can have a negative impact on a person's life. Damaged relationships or a decline in job or school performance are potential effects, but positive outcomes are possible. Attending to the risk of co-occurring substance abuse is important for people living with bipolar disorder.

3. Depression

Major depression is a mood state that goes well beyond temporarily feeling sad or blue. It is a serious medical illness that affects one's thoughts, feelings, behavior, mood and physical health for more than two weeks. Depression is often a life-long condition in which periods of wellness alternate with recurrences of illness

4. Obsessive-compulsive Disorder (OCD)

Obsessions are intrusive, irrational thoughts—unwanted ideas or impulses that repeatedly well up in a person's mind. Again and again, the person experiences disturbing thoughts, such as “my hands must be contaminated; I must wash them” or “I am going to injure my child.” On one level, the individual knows these obsessive thoughts are irrational. But on another level, he or she fears these thoughts might be true. Trying to avoid such thoughts creates great anxiety.

5. Posttraumatic Stress Disorder (PTSD)

PTSD can affect many different people, from survivors of rape and survivors of natural disasters to military service men and women. Roughly 10 percent of women and 5 percent of men are diagnosed with PTSD in their lifetimes, and many others will experience some adverse effects from trauma at some point in their lives.

6. Attention-deficit Disorder (ADD) and Attention deficit Hyperactivity Disorder (ADHD)

Attention-deficit hyperactivity disorder (ADHD) is a condition characterized by inattention, hyperactivity and impulsivity. The most commonly diagnosed behavior disorder in young people, the Center for Disease Control and Prevention (CDC) reports that ADHD affects an estimated 9 percent of children aged 3-17 and 2-4 percent of adults. Although ADHD has its onset and is usually diagnosed in childhood, it is not a disorder limited to children—ADHD often persists into adolescence and adulthood and is frequently not diagnosed until later years.

7. Borderline Personality Disorder (BPD)

BPD is characterized by pervasive instability in moods, interpersonal relationships, self-image and behavior. It is a disorder of emotional dysregulation. This instability often disrupts family and work, long-term planning and the individual's sense of self-identity. While less well known than schizophrenia or bipolar disorder, BPD is common (estimates range from 2-5 percent) and important to understand.

8. Other Illnesses

There are many resources online at nami.org for other mental illnesses such as schizoaffective disorder, eating disorders, Dissociative Identity Disorder and anxiety.

Treatment

Because mental illnesses are typically persistent illnesses, continuous maintenance to help prevent the reemergence of symptoms is recommended. The management of the illness should include attention to lifestyle, stress management, supports and also medication options. There is no one approach. It is essential to put together a care plan with elements specific to individual needs. If mental illnesses are left untreated, the symptoms can become more pronounced. Recognition and diagnosis of any condition in its earliest stages is important so that one can receive effective treatment. Effective treatment plans usually include medication, psychotherapy, education, self-management strategies and external supports such as family, friends and formal support groups. Combining these elements and revising the treatment plan based on assessment of an individual's response is the best means of preventing relapse and reducing the severity of symptoms.

Medications

Not everyone responds to medications in the same way. Several classes of medications are now available, those that help psychosis (antipsychotics), depression (antidepressants), anxiety symptoms (anti-anxiety medications) and mood instability (mood stabilizers and others). While they are usually effective, they also have side effects that will need to be monitored and minimized. Often, multiple types of medication must be assessed in order to find the one, or ones, that are the most effective for an individual. Information on medications can change

Psychotherapy

While medication is often one key element in successful treatment of mental illness, psychotherapy, support groups and knowledge about the illness are also essential components of the treatment process. The most useful psychotherapies generally focus on understanding the illness (psychoeducation), and on learning how to cope and change ineffective patterns of thinking. One popular type of psychotherapy used for changing these ineffective patterns is cognitive behavioral therapy (CBT). Cognition, the ability to think and to use higher brain functions, is often compromised when symptoms of mental illness are present. A new mode of treatment called cognitive remediation, (one approach is cognitive enhancement therapy, or CET) has been shown to be effective for people living with psychosis. CET uses computer and group work to build learning pathways as well as social interaction. CET can be found through some mental health centers or providers

3. Explain the Nature and Scope of Social Services in India.

Every civilized society, in order to enable its members to lead a emancipated, respectful, decent and dignified life and for that to promote proper personality development through optimum realization of their potentials – talents and abilities, creates provision for varied types of services like health, housing, education, recreation, etc. Broadly speaking, the term service means —an act of helpful action; help. The term help never means spoon-feeding. It has been etymologically derived from Teutonic *‘helpan’* which means aid or assistance given to another through some type of reinforcement or supplementation of the other’s actions or possessions to create him/her more effective in conditions of

performance of socially expected roles as a responsible member of society. Therefore social service in its broadest sense means any aid or assistance provided through society to enable its members to optimally actualize their potentials to effectively perform the roles expected/prescribed through society and to remove obstacles that come in the method of personality development or social functioning. Just as to H.M. Cassidy the term —social services‡ means‡ those organized behaviors that are primarily and directly concerned with the conservation, the protection and the improvement of human possessions‡, and —comprises as social services: social assistance, social insurance, child welfare, corrections, mental hygiene, public health, education, recreation, labour protection, and housing‡. Social services therefore are those services which are envisaged and provided through society to its members to enable them to develop optimally and help them to function effectively and to lead life of decency, dignity, and liberty. These services directly benefit all the members of society, irrespective of their religion, caste, race, language, region, culture etc. The two other conditions used in literature are: public services and social welfare services. A finer distinction flanked by ‘public services’ and ‘social services’ is that the former are envisaged and organized through the state as an institution created through society to manage its affairs, to the citizens whereas the latter are envisioned and provided through people in society as enlightened persons for promoting human and social development. Despite this fine distinction both the conditions are quite often used inter- changeably and taken as synonyms of each other. At present when the state is slowly withdrawing from social sector leaving every thing to market forces/ corporations or corporate bodies or organizations and civil society organizations, it is more appropriate to use the term ‘social services’ as compared to public services. Social welfare services are those ‘social/public services’ which are specifically visualized and intended for weaker and vulnerable sections of society to enable them to effectively compete with other sections of society to join the mainstream.

The Nature of social services are as under:

- Social/public services are visualized and organized through society/state.
- These services directly benefit all sections of society.
- These services have a very wide scope including every thing that has a direct bearing on the excellence of life of people.

- These services aim at promoting human and social development, protecting human rights of people and creating a sense of duty in the middle of them towards society.

4. Describe the role of NGOs in redressal of violation of rights regarding

Dowry.

The practice of a woman giving a "dowry" or gift to a man at *marriage is said to have had its origins in the system of streedhan (woman's share of parental wealth given to her at the time of her marriage). As a woman had no right to inherit a share of the ancestral property, streedhan was seen as a way by which the family ensured that she had access to some of its wealth. There is no clear proof as to when this practice was first started in India.

What began as gifts of land to a woman as her inheritance in an essentially agricultural economy today has degenerated into gifts of gold, clothes, consumer durables, and large sums of cash, which has sometimes entailed the impoverishment and heavy indebtedness of poor families. The dowry is often used by the receiving family for business purposes, family members' education, or the dowry to be given for the husband's sisters. The transaction of dowry often does not end with the actual wedding ceremony, as the family is expected to continue to give gifts.

It was only in the middle of the 1970s that the women's movement and other human rights groups exposed the perniciousness of the system in India, when it was realized that there were an increased number of "accidental kitchen deaths" of young married women. The first reports to the police were often registered as suicides or accidents. The available statistics of dowry death are chilling and disturbing.

Initially, women's groups protested individual cases of dowry deaths. A national campaign focused on humiliating and socially boycotting the families in these cases. The campaign also demanded that mysterious deaths be presumed to be murders until investigated and proved otherwise by the police. The demand for special cells of women police officers to head investigations of dowry murders led to an amendment of the outdated Dowry Prohibition Act of 1961, which was later further amended so that all streedhan gifts (both movable and immovable) had to be registered in the wife's name at the time of the marriage. Unfortunately, in India basic attitudes to

female life have remained unchanged, and the dowry is seen as a bribe to the son-in-law to keep the daughter, who after a certain age is totally unwanted in her parental home. Families often know that they are virtually signing a death warrant when they give their daughter in marriage, and yet, they do so.

Role of NGOs in redressal of violation of rights regarding Dowry.

- Contributing a support both psychological, physical and legally for women struggling for their rights after suffering from dowry harassments and domestic violence
- Educate women in the community about their legal rights and setting up women support groups
- Generate a socio cultural environment against crime and influencing new policy
- Providing a safe sanctuary for victims of dowry harassment and domestic violence by maintaining a shelter home for women in distress
- Supervise and support as the women after coming to an agreement with their husbands and in-laws return home to their families
- Working directly with husbands, in-laws and other involved parties, trying to change their perspective on dowry to prevent future harassment
- Finding suitable husbands for women living in the shelter in need and want for a new family
- Organizing classes in life skills such as home management, stress management, child care training, legal awareness, misconceptions about female sexually and health issues. By this hoping to give the women a better starting point.
- To identify perceptions, attitudes, practices in connection with dowry in society.
- To inform all stakeholders, primarily youth and students, about the social, economic, psychological, and health hazards of dowry and dowry violence.
- To engage mass media in promotion and dissemination of awareness against repercussions of dowry.
- To lobby for various reforms with the various levels of government.
- To organise and mobilise students and parents against dowry.

The key strategies to achieve these objectives included research, media advocacy, youth involvement, and collaboration with legislators, religious leaders, and opinion makers. Specific examples of programme activities include:

- Engaging the mass media in increasing awareness about these hazards
- Television advocacy
- Lobbying the various levels of government, including the Parliament, courts, and government ministries
- Organising and mobilising young people against dowry

5. What is meant by Mortality and Morbidity? How these two are a National Problem?

The study of mortality deals with the effects of death on population. Though the meanings of terms life and death are obvious, a scientific study of demographic processes calls for formal definitions.

The United Nations and the World Health Organisation have defined death as follows: "Death is the permanent disappearance of all evidence of life at any time after birth has taken place (postnatal cessation of vital functions without capacity of resuscitation)." A death can thus occur only after a live birth, and the span between birth and death is life.

The above definition of death does not include any death prior to a live birth, which has been defined by the United Nations as follows: "Live birth is the complete expulsion or extraction from its mother of a product of conception, irrespective of the duration of pregnancy.

Which, after such separation, breathes or shows any other evidence of life, such as beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles, whether or not the umbilical cord has been cut or the placenta is attached; each product of such a birth is considered live-born."

It is, therefore, evident that any death prior to a live birth is not considered as a death. Thus abortions and still births are referred to, not as deaths, but as foetus deaths.

Any expulsion of the foetus, either spontaneous or induced, which occurs before the foetus becomes viable, that, is capable of independent existence outside its mother, is known as an abortion.

When a birth does not have any of the characteristics included in either of these two definitions of live birth or abortion, it is known as a still birth.

Morbidity refers to the disease state of an individual, or the incidence of illness in a population. **Mortality** refers to the state of being mortal, or the incidence of death (number of deaths) in a population.

	Morbidity	Mortality
Definition	Morbidity refers to the state of being diseased or unhealthy	Mortality is the term used for the number of people who died within a

	Morbidity	Mortality
	within a population.	population
Demographic reference	Morbidity refers an incidence of ill health in a population.	Mortality refers to the incidence of death or the number of deaths in a population.
Units of measurement	Morbidity scores or predicted morbidity are assigned to ill patients with the help of systems such as the APACHE II, SAPS II and III, Glasgow Coma scale, PIM2, and SOFA.	Mortality rates are generally expressed as the number of deaths per 1000 individuals per year.
	Data is collected according to the disease type, gender age, area.	The mortality rate can be distinguished into crude death rate; perinatal mortality rate; the maternal mortality rate; infant mortality rate; child mortality rate; standardized mortality rate; and age-specific mortality rate.

6. What are the problem of Enviroment?

There are many environmental issues in India. Air pollution, water pollution, garbage, and pollution of the natural environment are all challenges for India. The situation was worse between 1947 through 1995. According to data collection and environment assessment studies of World Bank experts, between 1995 through 2010, India has made one of the fastest progress in the world, in addressing its environmental issues and improving its environmental quality. Still, India has a long way to go to reach environmental quality similar to those enjoyed in developed economies. Pollution remains a major challenge and opportunity for India.

Environmental issues are one of the primary causes of disease, health issues and long term livelihood impact for India.

Upon independence from Britain, India adopted a constitution and numerous British-enacted laws, without any specific constitutional provision on protecting the environment. India amended its constitution in 1976. Article 48(A) of Part IV of the amended constitution, read: The State shall endeavour to protect and improve the environment and to safeguard the forests and wildlife of the country. Article 51 A(g) imposed additional environmental mandates on the Indian state.

Other Indian laws from recent history include the Water (Prevention and Control of Pollution) Act of 1974, the Forest (Conservation) Act of 1980, and the Air (Prevention and Control of Pollution) Act of 1981. The Air Act was inspired by the decisions made at Stockholm Conference. The Bhopal gas tragedy triggered the Government of India to enact the Environment (Protection) Act of 1986. India has also enacted a set of Noise Pollution (Regulation & Control) Rules in 2000.

In 1985, Indian government created the Ministry of Environment and Forests. This ministry is the central administrative organisation in India for regulating and ensuring environmental protection.

Despite active passage of laws by the central government of India, the reality of environmental quality mostly worsened between 1947 to 1990. Most of Indian economy was nationalised and owned by India, and regulations were mostly ignored by state run enterprises. Rural poor had no choice, but to sustain life in whatever way possible. The state governments of India often regarded environmental laws enacted by the central government as a mere paperwork formality. Air emissions increased, water pollution worsened, forest cover decreased.

Major environmental issues are forest and agricultural degradation of land, resource depletion (water, mineral, forest, sand, rocks etc.), environmental degradation, public health, loss of biodiversity, loss of resilience in ecosystems, livelihood security for the poor.

The major sources of pollution in India include the rampant burning of fuel-wood and biomass such as dried waste from livestock as the primary source of energy ,lack of organised garbage and waste removal services, lack of sewage treatment operations, lack of flood control and monsoon water drainage system, diversion of consumer waste into rivers, cremation practices near major rivers, government mandated protection of highly polluting old public transport, and continued operation by Indian government of government owned, high emission plants built between 1950 to 1980.

Air pollution, poor management of waste, growing water scarcity, falling groundwater tables, water pollution, preservation and quality of forests, biodiversity loss, and land/soil degradation are some of the major environmental issues India faces today.

India's population growth adds pressure to environmental issues and its resources.

India has major water pollution issues. Discharge of untreated sewage is the single most important cause for pollution of surface and ground water in the India. There is a large gap between generation and treatment of domestic waste water in the India. The problem is not only that India lacks sufficient treatment capacity but also that the sewage treatment plants that exist do not operate and are not maintained. The majority of the government-owned sewage treatment plants remain closed most of the time due to improper design or poor maintenance or lack of reliable electricity supply to operate the plants, together with absentee employees and poor management. The waste water generated in these areas normally percolates in the soil or evaporates. The uncollected wastes accumulate in the urban areas cause unhygienic conditions and release pollutants that leaches to surface and groundwater.

Other sources of water pollution include agriculture run off and small scale factories along the rivers and lakes of India. Fertilizers and pesticides used in agriculture in northwest have been found in rivers, lakes and ground water.Flooding during monsoons worsens India's water pollution problem, as it washes and moves all sorts of solid garbage and contaminated soils into its rivers and wetlands

Air pollution in India is a serious issue with the major sources being fuelwood and biomass burning, fuel adulteration, vehicle emission and traffic congestion. Air pollution is also the main cause of the Asian brown cloud, which is causing the monsoon to be

delayed. India is the world's largest consumer of fuel-wood, agricultural waste and biomass for energy purposes. Traditional fuel (fuel-wood, crop residue and dung cake) dominates domestic energy use in rural India and accounts for about 90% of the total. In urban areas, this traditional fuel constitutes about 24% of the total. Fuel wood, agri waste and biomass cake burning releases over 165 million tonnes of combustion products into India's indoor and outdoor air every year. These biomass-based household stoves in India are also a leading source of greenhouse emissions contributing to climate change.

Vehicle emissions are another source of air pollution. Vehicle emissions are worsened by fuel adulteration and poor fuel combustion efficiencies from traffic congestion and low density of quality, high speed road network per 1000 people

7. Explain the Concept of Anomie.

The word comes from Greek namely the prefix *a-* "without", and *nomos* "law". The Greeks distinguished between *nomos* ("law"), and *arché*, "starting rule, axiom, principle"). For example, a monarch is a single ruler but he or she might still be subject to, and not exempt from, the prevailing laws, i.e. *nomos*. In the original city state democracy, the majority rule was an aspect of *arché* because it was a rule-based, customary system, which might or might not make laws, i.e. *nomos*. Thus, the original meaning of *anomie* defined anything or anyone against or outside the law, or a condition where the current laws were not applied resulting in a state of illegitimacy or lawlessness.

The contemporary English understanding of the word *anomie* can accept greater flexibility in the word "norm", and some have used the idea of normlessness to reflect a similar situation to the idea of anarchy. But, as used by Émile Durkheim and later theorists, *anomie* is a reaction against or a retreat from the regulatory social controls of society, and is a completely separate concept from anarchy, which consists of the absence of the roles of rulers and submitted.

In 1893, Durkheim introduced the concept of *anomie* to describe the mismatch of collective guild labour to evolving societal needs when the guild was homogeneous in its constituency. He equated homogeneous (redundant) skills to *mechanical solidarity* whose inertia retarded adaptation. He contrasted this with the self-regulating behaviour of a division of labour based on differences in constituency, equated to *organic solidarity*, whose lack of inertia made it sensitive to need changes.

Durkheim observed that the conflict between the evolved organic division of labour and the homogeneous mechanical type was such that one could not exist in the presence of the other.

When solidarity is organic, anomie is impossible. Sensitivity to mutual needs promotes evolution in the division of labour. "Producers, being near consumers, can easily reckon the extent of the needs to be satisfied. Equilibrium is established without any trouble and production regulates itself." Durkheim contrasted the condition of anomie as being the result of mechanical solidarity:

But on the contrary, if some opaque environment is interposed... relations [are] rare, are not repeated enough... are too intermittent. Contact is no longer sufficient. The producer can no longer embrace the market at a glance, nor even in thought. He can no longer see its limits, since it is, so to speak limitless. Accordingly, production becomes unbridled and unregulated.

Durkheim's use of the term anomie was about a phenomenon of industrialization—mass-regimentation that could not adapt due to its own inertia—its resistance to change, which causes disruptive cycles of collective behavior e.g. economics, due to the necessity of a prolonged buildup of sufficient force or momentum to overcome the inertia.

Later in 1897, in his studies of suicide, Durkheim associated anomie to the influence of a lack of norms or norms that were too rigid. But such normlessness or norm-rigidity was a *symptom of anomie*, caused by the lack of differential adaptation that would enable norms to evolve naturally due to self-regulation, either to develop norms where none existed or to change norms that had become rigid and obsolete.

Anomie is a "condition in which society provides little moral guidance to individuals". It is the breakdown of social bonds between an individual and the community e.g. if under unruly scenarios resulting in fragmentation of social identity and rejection of self-regulatory values. It was popularized by French sociologist Émile Durkheim in his influential book *Suicide* (1897). Durkheim never uses the term normlessness; rather, he describes anomie as "derangement", and "an insatiable will".

For Durkheim, anomie arises more generally from a mismatch between personal or group standards and wider social standards, or from the lack of a social ethic, which produces moral deregulation and an absence of legitimate aspirations. This is a nurtured condition:

The concept of **anomie** refers to a condition or state in which there is a breakdown of social norms and guidance for the citizens of a society. Anomie occurs when society has little influence on individuals' propensity to follow rules and norms, and individuals are,

therefore, left without moral guidance. Individuals do not feel attached to the collective society.

III. ATTEMPT ANY TWO QUESTIONS. 10X2=20

1. What are the Legislations Pertaining to Adoption? Explain.

Indian citizens can adopt in India under three major legislations: the Hindu Adoption and Maintenance Act of 1956, the Guardians and Wards Act of 1890 and the Juvenile Justice (Care and Protection) Act of 2000, amended in 2006.

The Hindu Adoption and Maintenance Act, 1956 (HAMA)

This Act covers Hindus, Buddhists, Jains or Sikhs. Some relevant parts of the Act are:

- Married couples or single adults can adopt;
- Legally the man adopts with the consent of his wife;
- A single man or woman can adopt;

If a biological child already exists in the family, a child of the opposite sex has to be adopted;

- Children adopted under this Act get the same legal rights as a biological child might;
- Children under the age of 15 years can be adopted;
- A single man adopting a girl should be at least 21 years older than the child;
- A single woman adopting a boy should be at least 21 years older than the child; and
- Adoption under this act is irrevocable.

The Guardians and Wards Act, 1890 (GWA)

Before the Juvenile Justice (Care and Protection) Act of 2000, this was the only legislation that allowed non-Hindus to adopt. However, this act ended up being the first secular law that allowed for a child to be adopted in India. The salient points of this Act are:

The parent adopting is a 'guardian' and the child is a 'ward', meaning that the same rights of a biological child aren't inherent;

- Anyone under the age of 18 years can be a ward;
- The guardianship can be revoked by the courts or by the guardian;

- A will is required for any property/goods to be bequeathed to the child;
- This will can be legally contested by 'blood' relatives;
- Both spouses can legally be guardians (versus HAMA where the man adopts with the consent of his wife); and
- Single people can adopt without any age difference restrictions.

The Juvenile Justice (Care and Protection) Act of 2000, amended in 2006 (JJ Act)

The JJ Act is meant mainly for the care and rehabilitation of children in conflict with the law. There was the need for a law that would allow children the same rights, whether they were adopted or biological. There was also the need for a law that delinked adoption from the religion of the adoptive parent(s). The JJ Act filled this space and a tiny section was added on for adoption.

The Amendment Act of 2006 has since expanded the provisions. The main strengths of this Act are:

- Any Indian citizen can adopt a child who is legally free for adoption;
- The adoptee gets the same rights that a biological child might;
- The religion of the adoptive parent(s) is not relevant;
- Single people can adopt;
- The adoption is irrevocable;
- Some time limits have been set to ensure that children are considered legally free for adoption earlier; and
- The thrust is on the best interest of the child.

Section 2 (aa) of the Act defines adoption as “the process through which the adopted child is permanently separated from his biological parents and becomes the legitimate child of his adoptive parents with all rights, privileges and responsibilities that are attached to the relationship.”

While the Act covers all of India, it is only possible to adopt under this Act in areas where the JJ Boards (provided under the Act) have been constituted. This is an ongoing process, with a majority of states issuing notifications constituting these boards.

International Adoption

Indian citizens, non-resident Indians and non-Indians residing outside India can adopt a child from India. While these adoptions are also legalized under one of the three Acts mentioned above, the rules related to these adoptions can be different. These differences are a function of the priority given to Indians residing in India while placing a child, the regulations of the countries in which the adoptive families reside and the relevant immigration laws.

The adoption under Hindu Law is governed by The Hindu Adoption and Maintenance Act, 1956.

The Hindu Adoption and Maintenance Act, 1956 extends to only the Hindus, which are defined under Section-2 of the Act and include any person, who is a Hindu by religion, including a Virashaiva, a Lingayat or a follower of the Brahmo, Prarthana or Arya Samaj, or a Buddhist, Jaina or Sikh by religion, to any other person who is not a Muslim, Christian, Parsi or Jew by religion. It also includes any legitimate or illegitimate child who has been abandoned both by his father and mother or whose parentage is not known and who in either case is brought up as a Hindu, Buddhist, Jaina or Sikh.

Adoption is recognized by the Hindus and is not recognized by Muslims, Christian and Parsis. Adoption in the Hindus is covered by The Hindu Adoptions Act and after the coming of this Act all adoptions can be made in accordance with this Act. It came into effect from 21st December, 1956. Prior to this Act only a male could be adopted, but the Act makes a provision that a female may also be adopted. This Act extends to the whole of India except the state of Jammu and Kashmir. It applies to Hindus, Buddhists, Jainas and Sikhs and to any other person who is not a Muslim, Christian, Parsi by religion.

Requirements for a valid adoption

In the Hindu law the requirements for a valid adoption. The Act reads,

No adoption is valid unless
The person adopting is lawfully capable of taking in adoption
The person giving in adoption is lawfully capable of giving in adoption
The person adopted is lawfully capable of being taken in adoption
The adoption is completed by an actual giving and taking and The ceremony called data homan (oblation to the fire) has been performed. However this may not be essential in all cases as to the validity of adoption?

2. Explain the Meaning and Concept of Social Legislation?

Legislation is an instrument to control, guide and restrain the behaviour of individuals and groups living in society. Individuals and groups left in absolute freedom may clash with each other in the pursuit of their self interest at the cost of others. They cause grave harm to society leading to chaos. Legislation is one of the many institutions which controls and directs individual action into desirable channels. Others being social customs, traditions, religious prescription etc. Law is a vast subject having many branches. In a broad sense, all laws are social in character, in a narrow sense only those laws that are enacted for the purpose of social welfare are categorized as social legislation. There are several types of legislations such as taxation, corporate, civil, criminal, commercial etc. Social legislation is that branch of law which is an aggregate of the laws relating to the various socio- economic condition of the people. It is a social institution that embodies the social norms created on the initiative of a competent legislative agency. These laws are enacted keeping in view the needs of the time, the circumstances of the nation and its socio- political ideals.

Dr. R.N. Saxena defines social legislation as ‘any act passed by the legislature or a decree issued by the government for the removal of certain social evils or for the improvement of social conditions or with the aim of bringing about social reform.

A comprehensive definition of the term social legislation is found in the Dictionary of Sociology by Fairchild. According to this definition social legislation means laws designed to improve and protect the economic and social position of those groups in

society which because of age, sex, race, physical or mental defect or lack of economic power cannot achieve health and decent living standards for themselves.

Social legislations, according to Prof. Gangrade, involves an active process of remedy by preventing or changing the wrong course of society or by selecting among the courses that are proved to be right.

To sum up these definitions social legislation can be defined as special laws which are passed with the special purposes of improving the socio-economic position of the specific groups such as women, children, elderly, scheduled castes, scheduled tribes, physically and mentally challenged, unorganised workers, agricultural and landless labourers and other such vulnerable groups.

Thus, Social legislation is needed

- i) To ensure social justice,
- ii) To bring about social reform,
- iii) To promote social welfare,
- iv) To bring about desired social change.
- v) To protect and promote of rights of socioeconomically disadvantaged groups of the society.

Social legislation derives its inspiration from our constitution and has the following specific objectives:

- i) Removal of discrimination on the grounds of sex, religion, caste, class etc. and promotion of equality to all.
- ii) Safeguard the rights of the weaker section such as women, children, elderly, widows, destitute and the backward classes.
- iii) Eradication of traditional malpractices and social evils such as untouchability, dowry, child marriage, female infanticide etc.
- iv) Provision of social security.

The British rule in India for the first time established the supreme authority of law in social matters, ensuring uniformity in law and social order which India did not have till then. In the last century, we have had a series of legislations intended for bringing about significant changes in the status of women, children, scheduled castes and other such vulnerable groups on the one hand, whereas there were legislations for bringing reform in social institutions like family, marriage etc. on the other. Since Independence a number of social legislations have been passed. We know many of the evil practices such as *sati pratha*, child marriage etc. may have still persisted, had they not been curtailed by timely suitable legislations. Social legislation, beset as it may be with drawbacks, has nevertheless helped us to shelve many of our outmoded traditional customs and practices. For instance law has been instrumental in bringing about a change in the status of women. Equality of sexes has been ensured by our constitution and law has endowed many rights on women at par with men. Today we have legislation which prohibits any discrimination on the ground of sex. A woman can acquire, hold and transfer absolute property in addition to Stridhana under the Hindu Succession Act 1956. The Act further gives the women the right of succession equal to that of male heirs. Where a Hindu male dies without making a will of his property, his widow, mother, daughters and sons are all classified together as class I heirs and they take one share each.

Social legislation is required for (i) protection and promotion of rights, (ii) prevention of individual and social disorganisation, (iii) proactive action, (iv) pioneering social reforms in social institutions and, (v) progressive social values for desired social order. In brief, the main aim of social legislation is to change and reorganise society by improving its social and economic condition. Each individual of the society has to be given equal rights and equal opportunities. Social legislation aims to address social problems through legislative means, and initiates process of social reform and social change based on sound social rules. Since the process of social change in fast social legislation also provides desired direction to changes.

3. Elaborate the Concept of Impairment , Handicap and Disability in India.

The most commonly cited definition is that of the World Health Organization in 1976, which draws a three-fold distinction between impairment, disability and handicap. 'An impairment is any loss or abnormality of psychological, physiological or anatomical structure or function, a disability is any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered normal for a human being, a handicap is a disadvantage for a given individual, resulting from an impairment or a disability, that prevents the fulfillment of a role that is considered normal (depending on age, sex and social and cultural factors) for that individual'.

According to the United Nations Standard Rules on the Equalization of Opportunities for Persons with Disabilities:

The term “**Disability**” summarizes a great number of different functional limitations occurring in any population, in any country of the world. People may be disabled by physical, intellectual or sensory impairment, medical conditions or mental illness. Such impairments, conditions or illnesses may be permanent or transitory in nature.

The term “**Handicap**” means the loss or limitation of opportunities to take part in the life of the community on an equal level with others. It describes the encounter between the person with a disability and the environment. The purpose of this term is to emphasize the focus on shortcomings in the environment and in many organized activities in society, for example, information, communication and education, which prevent persons with disabilities from participating on equal terms.

The use of the two terms “**Disability**” and “**Handicap**”, as defined in the two paragraphs above, should be seen in the light of modern disability history. During the 1970s, there was a strong reaction among representatives of organizations of persons with disabilities and professionals in the field of disability against the terminology of the time. The terms “**Disability**” and “**Handicap**” were often used in an unclear and confusing way, which provided poor guidance for policy-making and political action. The terminology

reflected a medical and diagnostic approach, which ignored the imperfections and deficiencies of the surrounding society.

In India different definitions of disability conditions have been introduced for various purposes, essentially following the medical model and, as such, they have been based on various criteria of ascertaining abnormality or pathologic conditions of persons. In absence of a conceptual framework based on the social model in the Indian context, no standardisation for evaluating disability across methods has been achieved. In common parlance, different terms such as disabled, handicapped, crippled, physically challenged, are used inter-changeably, indicating noticeably the emphasis on pathologic conditions.

Persons with Disability Act, 1995: Through the Act is built upon the premise of equal opportunity, protection of rights and full participation, it provides definitions of disabled person following the medical model. According to the Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995, "Person with disability" means a person suffering from not less than forty percent of any disability as certified by a medical authority (any hospital or institution, specified for the purposes of this Act by notification by the appropriate Government). As per the act "Disability" means -

(i) Blindness; (ii) Low vision; (iii) Leprosy-cured; (iv) Hearing impairment; (v) Locomotor disability; (vi) Mental retardation; (vii) Mental illness, which were defined as below.

- "Blindness" refers to a condition where a person suffers from any of the following conditions, (i) Total absence of sight.(ii) Visual acuity not exceeding 6/60 or 20/200 (snellen) in the better eye with correcting lenses;(iii) Limitation of the field of vision subtending an angle of 20 degree or worse;
- "Person with low vision" means a person with impairment of visual functioning even after treatment or standard refractive correction but who uses or is potentially capable of using vision for the planning or execution of a task with appropriate assistive device;
- "Leprosy cured person" means any person who has been cured of leprosy but is suffering from-

(i) Loss of sensation in hands or feet as well as loss of sensation and paresis in the eye and eye-lid but with no manifest deformity;

(ii) Manifest deformity and paresis; but having sufficient mobility in their hands and feet to enable them to engage in normal economic activity;

(iii) Extreme physical deformity as well as advanced age which prevents him from undertaking any gainful occupation, and the expression "leprosy cured" shall be construed accordingly;

- "Hearing impairment" means loss of sixty decibels or more in the better ear in the conversational range of frequencies;

- "Loco motor disability" means disability of the bones, joints muscles leading to substantial restriction of the movement of the limbs or any form of cerebral palsy;

- "Mental retardation" means a condition of arrested or incomplete development of mind of a person which is specially characterized by sub normality of intelligence;

- "Mental illness" means any mental disorder other than mental retardation;

**DEPARTMENT OF SOCIAL WORK
GURU GHASIDAS VISHWAVIDYALAYA BILASPUR
ODD SEMESTER EXAMINATION- 2014**

**SEMESTER Ist 2014
SET- TWO**

MODEL ANSWER

TIME: 3 HOUR

M.M= 75 MARKS

PAPER: - MS-SW 305: INTERDISCIPLINARY DISASTER MANAGEMENT

I. ATTEMPT ALL QUESTIONS EACH CARRY EQUAL MARKS 10X2= 20.

1. A natural event such as an earthquake will always result in a _____.

Endogenous Disaster

2. During a drought, it is important that:

- a) People get relief supplies as near to their homes as possible
- b) People leave their homes and migrate to a water source
- c) Livestock is reduced to allow ample supplies for humans
- d) That a program be implemented to impress the public with the seriousness of the problem
- e) None of the above

b) People leave their homes and migrate to a water source

3. A volcanic disaster will pose both:

- a) An immediate and a long-term disease problem
- b) Loss of crops and disruption of migration
- c) Deaths and high surgical needs
- d) Loss of crops and disruption of markets
- e) Loss of housing and long-term lung disease

d) Loss of crops and disruption of migration

4. _____ floods are rare in deserts and mountains.

Slow on-set

5. Famines occur:

- a) because of lack of modern technology such as refrigeration
- b) unexpectedly

- c) only because of drought
- d) because of crop destruction by insects
- e) predictably

a) because of lack of modern technology such as refrigeration

6. Communicable diseases are a major threat after an earthquake. (T/F)
False

7. Which of the following is an Endogenous Disaster?

- a) Cyclone
- b) Volacanic Eruption
- c) Lightning
- d) Hailstorms
- e) None of the above

b) Volacanic Eruption

8. A volcanic disaster will pose both:

- a) an immediate and a long-term disease problem
- b) loss of crops and disruption of migration
- c) deaths and high surgical needs
- d) loss of crops and disruption of markets
- e) loss of housing and long-term lung disease

d) loss of crops and disruption of migration

9. Houses damaged in a cyclone usually:

- a) explode
- b) get blown over
- c) collapse
- d) remain standing
- e) require new roofs

a) collapse

10. Epidemics generally result from disasters. (T/F)
True

**II. ATTEMPT ANY FIVE QUESTIONS (Write your Answers 150- 200 Words)
7X5=35.**

1. Discuss the role of Urban Local Bodies in Disaster Risk Management.

Urban local bodies need to play a major role in the disaster preparedness planning. Major roles of the urban local bodies before and after a disaster are

- Preparation and updation of preparedness plans
- Participation and coordination in response activities and
- Taking up activities such as damage assessment and relief distribution for recovery from the incident.

The district level is the key level for disaster management and relief activities. The Collector/Dy. Commissioner is the chief administrator in the district. He is the focal point in the preparation of district plans and in directing, supervising and monitoring calamities for relief. A District Level Coordination and Relief Committee is constituted and is headed by the Collector as Chairman with participation of all other related government and non governmental agencies and departments in addition to the elected representatives. The Collector is required to maintain close liaison with the district and the State Governments as well as the nearest units of Armed Forces/Central police organizations and other relevant Central Government organizations like Ministries of Communications, Water Resources, Drinking Water, and Surface Transport, who could supplement the efforts of the district administration in the rescue and relief operations. Similarly, sub-divisional and Block/Taluka level Disaster Management Committees are also being constituted. At the village level Disaster Management Committees and Disaster Management Teams are being constituted. Each village in a multi-hazard prone district will have a Disaster Management Plan.

- Ensure Training of its officers and employees for Disaster Management.
- Ensure maintenance of Resources to meet any Disaster situation.
- Ensure all Construction Projects conform to the prescribed standards and specifications.
- Carry out relief, rehabilitation and reconstruction activities.

2. What do you mean by Terrorist Incidents?

A common definition of terrorism is the systematic use or threatened use of violence to intimidate a population or government for political, religious, or ideological goals. Terrorism in India, according to the Home Ministry, poses a significant threat to the people of India. Terrorism found in India includes ethno-nationalist terrorism, religious terrorism, left wing terrorism and narco terrorism.

The regions with long term terrorist activities have been Jammu and Kashmir, east-central and south-central India (Naxalism) and the Seven Sister States. In August 2008, National Security Advisor M K Narayanan has said that there are as many as 800 terrorist cells operating in the country. As of 2013, 205 of the country's 608 districts were affected by terrorist activity.¹ Terror attacks caused 231 civilian deaths in 2012 in India, compared to 11,098 terror-caused deaths worldwide, according to the State Department of the United States; or about 2% of global terror fatalities while it accounts for 17.5% of global population.

The Indian government uses the following working definition of terrorism, same as one widely used by Western nations as well as the United Nations, proposed by Schmid and Jongman in 1988.

Terrorism is an anxiety-inspiring method of repeated violent action, employed by (semi-) clandestine individual, group or state actors, for idiosyncratic, criminal or political reasons, whereby the direct targets of violence are not the main targets. The immediate human victims of violence are generally chosen randomly (targets of opportunity) or selectively (representative or symbolic targets) from a target population, and serve as message generators. Threat and violence-based communication processes between terrorist organization, victims, and main targets are used to manipulate the main target (audience(s)), turning it into a target of terror, a target of demands, or a target of attention, depending on whether intimidation, coercion, or propaganda is primarily sought.

—Alex Schmid and Albert Jongman

India subdivides terrorism in four major groups:

1. Ethno-nationalist terrorism - This form of terror focuses either (a) on creating a separate State within India or independent of India or in a neighboring country, or (b) on emphasizing the views/response of one ethnic group against another. Violent Tamil Nationalist groups from India to address the condition of Tamils in Sri Lanka, as well as insurgent tribal groups in North East India are examples of ethno-nationalist terrorist activities.
2. Religious terrorism - This form of terror focuses on religious imperatives, a presumed duty or in solidarity for a specific religious group, against one or more religious groups. Mumbai 26/11 terror attack in 2008 from an Islamic group in Pakistan is an example of religious terrorism in India.
3. Left wing terrorism - This form of terror focuses on economic ideology, where all the existing socio-political structures are seen to be economically exploitative in

character and a revolutionary change through violent means is essential. The ideology of Marx, Engel, Mao, Lenin and others are considered as the only valid economic path. Maoist violence in Jharkhand and Chhattisgarh are examples of left wing terrorism in India.

4. Narco terrorism - This form of terror focuses on creating illegal narcotics traffic zones. Drug violence in northwest India is an example of narco-terrorism in India.

Chronology of major incidents

Mumbai has been the most preferred target for most terrorist organisations, many operating with a base from Pakistan. Over the past few years there have been a series of attacks, including explosions in local trains in July 2006, and the most recent and unprecedented attacks of 26 November 2008, when two of the prime hotels, a landmark train station, and a Jewish Chabad house, in South Mumbai, were attacked and sieged.

Bihar

On 27 October 2013, seven crude bombs exploded in Bihar during an election rally. One was in the Patna Junction railway station, and another near a cinema hall. One person died and six were injured in these two blasts.

In July 2013, nine bombs exploded in a terror attack at the Bodh Gaya temple complex, a Buddhist shrine, where the Buddha himself is said to have gained enlightenment.^[28] In 2014, members of banned Indian Mujahideen and Students Islamic Movement of India were accused and arrested for the blasts.

New Delhi

2001 Attack on Indian parliament

Terrorists on 13 December 2001 attacked the Parliament of India, resulting in a 45-minute gun battle in which 9 policemen and parliament staff were killed. All five terrorists were also killed by the security forces and were identified as Pakistani nationals. The attack took place around 11:40 am (IST), minutes after both Houses of Parliament had adjourned for the day. The suspected terrorists dressed in commando fatigues entered Parliament in a car through the VIP gate of the building. Displaying Parliament and Home Ministry security stickers, the vehicle entered the Parliament premises. The terrorists set off massive blasts and used AK-47 rifles, explosives, and grenades for the attack. Senior Ministers and over 200 members of parliament were inside the Central Hall of Parliament when the attack took place. Security personnel sealed the entire premises, which saved many lives.

Uttar Pradesh

2005 Ayodhya attacks

The long simmering Ayodhya crisis finally culminated in a terrorist attack on the site of the 16th century Babri Masjid. The ancient Masjid in Ayodhya was demolished on 5 July 2005. Following the two-hour gunfight between Lashkar-e-Toiba terrorists based in Pakistan and Indian police, in which six terrorists were killed, opposition parties called for a nationwide strike with the country's leaders condemning the attack, believed to have been masterminded by Dawood Ibrahim.

3. Discuss cumulative atmospheric hazards/Disasters.

Flood destructions have always brought miseries to numerous people, especially in rural areas. Flood results in the outbreak of serious epidemics, specially malaria and cholera. Simultaneously, scarcity of water also arises. It has a drastic effect on agricultural produce.

Sometimes, water remains standing over large areas for long span of time hampering the Rabi crops. India is one of the most flood prone countries in the world. The principal reasons for flood lie in the very nature of natural ecological systems in this country, namely, the monsoon, the highly silted river systems and the steep and highly erodible mountains, particularly those of the Himalayan ranges. The average rainfall in India is 1150 mm with significant variation across the country. The annual rainfall along the western coast and Western Ghats, Khasi hills and over most of the Brahmaputra valley amounts to more than 2500 mm. Most of the floods occur during the monsoon period and are usually associated with tropical storms or depressions, active monsoon conditions and break monsoon situations.

Twenty-three of the 35 states and union territories in the country are subject to floods and 40 million hectares of land, roughly one-eighth of the country's geographical area, is prone to floods.

The National Flood Control Program was launched in the country in 1954. Since then sizeable progress has been made in the flood protection measures. By 1976, nearly one third of the flood prone area had been afforded reasonable protection; considerable experience has been gained in planning, implementation and performance of flood warning, protection and control measures (CWC, 2007). Table 1.8 presents the flood affected area and damages for the period 1953 to 2004 in India as per Water Data Complete Book 2005 and Central Water Commission, 2007).

Floods occur in almost all rivers basins in India. The main causes of floods are heavy rainfall, inadequate capacity of rivers to carry the high flood discharge, inadequate drainage to carry away the rainwater quickly to streams/ rivers. Ice jams or landslides blocking streams; typhoons and cyclones also cause floods. Flash floods occur due to high rate of water flow as also due to poor permeability of the soil. Areas with hardpan

just below the surface of the soil are more prone to, floods as water fails to seep down to the deeper layers.

Droughts

The primary cause of any drought is deficiency of rainfall and in particular, the timing, distribution and intensity of this deficiency in relation to existing reserves. A prolonged period of relatively dry weather leading to drought is a widely recognized climate anomaly. Drought can be devastating as water supplies dry up, crops fail to grow, animals die, and malnutrition and ill health become widespread. The environmental effects of drought, including salinization of soil and groundwater decline, increased pollution of freshwater ecosystems and regional extinction of animal species. In India around 68 percent of the country is prone to drought in varying degrees. Of the entire area 35 percent receives rain falls between 750 mm and 1125 mm which is considered drought prone while 33 percent which receives rainfalls between less than 750 mm is considered to be chronically drought prone.

4. Explain any two Exogenous Hazard/Disasters.

Cyclones are among the most awesome events that nature can produce. They pose a major threat to lives and property in many parts of the world. Every year these sudden, unpredictable, violent storms bring widespread devastation to coastlines and islands lying in their erratic paths. A windstorm's destructive work is done by the high wind, flood-producing rains and associated storm surges.

The major natural disaster that affects the coastal regions of India is cyclone and as India has a coastline of about 7516 kms, it is exposed to nearly 10 percent of the world's tropical cyclones. About 71 percent of this area is in ten states (Gujarat, Maharashtra, Goa, Karnataka, Kerala, Tamil Nadu, Puducherry, Andhra Pradesh, Orissa and West Bengal). The islands of Andaman, Nicobar and Lakshadweep are also prone to cyclones. On an average, about five or six tropical cyclones form in the Bay of Bengal and Arabian sea and hit the coast every year. Out of these, two or three are severe. When a cyclone approaches to coast, a risk of serious loss or damage arises from severe winds, heavy rainfall, storm surges and river floods. The effect of a storm surge is most pronounced in wide and shallow bays exposed to cyclones such as in the northern part of Bay of Bengal.

On an average, five or six tropical cyclones occur every year, of which two or three could be severe. Most cyclones occur in the Bay of Bengal followed by those in the Arabian Sea and the ratio is approximately 4:1. The incidence of cyclonic storms, with wind speeds between 65 Km/h and 117 Km/h and severe cyclonic storm with wind speeds between 119 Km/h and 164 Km/h, reaching Tamil Nadu and Andhra Pradesh is high during the north east monsoon season ie. October – December, where as the highest annual number of storms, severe storms occur in the Orissa - West Bengal coast. The yearly distribution of tropical cyclones in the north Indian Ocean indicates large year to-year variations in the frequency of cyclonic disturbances and tropical cyclones, but no distinct periodicity.

Tropical Cyclones

The major natural disaster that affects the coastal regions of India is cyclone and as India has a coastline of about 7516 kms, it is exposed to nearly 10 percent of the world's tropical cyclones.

About 71 percent of this area is in ten states (Gujarat, Maharashtra, Goa, Karnataka, Kerala, Tamil Nadu, Puducherry, Andhra Pradesh, Orissa and West Bengal). The islands of Andaman, Nicobar and Lakshadweep are also prone to cyclones. On an average, about five or six tropical cyclones form in the Bay of Bengal and Arabian sea and hit the coast every year. Out of these, two or three are severe. When a cyclone approaches to coast, a risk of serious loss or damage arises from severe winds, heavy rainfall, storm surges and river floods. The effect of a storm surge is most pronounced in wide and shallow bays exposed to cyclones such as in the northern part of Bay of Bengal. On an average, five or six tropical cyclones occur every year, of which two or three could be severe. Most cyclones occur in the Bay of Bengal followed by those in the Arabian Sea and the ratio is approximately 4:1. The incidence of cyclonic storms, with wind speeds between 65 Km/h and 117 Km/h and severe cyclonic storm with wind speeds between 119 Km/h and 164 Km/h, reaching Tamil Nadu and Andhra Pradesh is high during the north east monsoon season ie. October – December, where as the highest annual number of storms, severe storms occur in the Orissa - West Bengal coast.

5. What is meant by Population Explosion?

Population Explosion refers to the sudden and rapid rise in the size of Population. Population explosion is not only a problem in India; it has reached a menacing proportion all over the world, especially in the poorer countries.

But in developing countries like India, with a backward economy and little scope for fruitful employment, millions of people find no work to do. The unemployed, having nothing to do and without an ensured living, are left frustrated and demoralized, losing their faith in life itself. As it happens in India and several underdeveloped countries in Asia and Africa, the unemployed threaten the very process of development and plunge the country in gloom. It is only natural. Those who are born with two hands consider it a curse when they are denied the simple right to work and earn a living. While their numbers go on multiplying and the growth rate becomes menacing, the fruits of development are found to be too inadequate to bridge the yawning gulf.

It may sound queer, but the law is that the poorer a country the greater is the growth rate of its population. India, caught in the morass of her age-old poverty, finds herself in the midst of a population explosion. The population that was less than 400 million in the forties was found to be about 120 billion in 2013. As a result of this even the six plans completed by now have so far failed to cope with the enormous problem of unemployment.

Whatever our plans might have achieved in some sixty-five years is found to be too little to eradicate poverty. More than seventy percent of Indians live in villages and most of them languish in their dark, dreary nooks; the fruits of our plans have not quite reached them. And having no other occupation their only pleasure lies in producing children. In the towns too the poorer sections always have bigger families, while the rich and well-off sections live comfortably with small families. The poor in India are ignorant and superstitious, and so they do not see the advantages of planned family. Many of them never think of going against the law of nature and the will of their God; so they never refrain from breeding children, though they know that they cannot even feed them and keep them away from the curse of poverty and ignorance. Perhaps the sickening monotony of living in their world of despair leads them to torment their women with a vengeance and seek as much pleasure as they can. These poor people do not have the education necessary for planning their present with a view to ensuring a better future. This is why while their hope wears off they leap in the dark and break their neck, making things grimmer for their world. The millions of famished, under-nourished and naked children everywhere in India show the chaos this country is in.

But whatever the poor may be driven to do, the government cannot ignore or shelve the problem of population explosion, for it is a rot and entire development of the country depends on how effectively it is stemmed. This awareness made our governments, both at the centre and in the states, to think about the adopt official programme to educate public opinion and reduce the birth rate so that the population can fit in well with the evolving pattern of developing economy.

The Family Planning as an official programme was launched with much fanfare in 1952. The government is still trying to educate the people. All government agencies and institutions mobilized all their resources to attain the goal of planned families. The propaganda machinery was geared up with the help of public media. The people were reminded of the advantages of small families, of healthy and happy children and of the need for eradicating the age-old poverty. The parents were persuaded to go in for sterilization after the births of two children, for the contraceptive were not always found to be safe and fool-proof. Many parents, especially the educated, came forward to see things in the new light and were amenable to persuasion. But many others resisted, at places quite violently, and refused to see reason. The government was very serious about making the programme a success. The state governments also came forward to help the center in its bid to achieve success. Cheap contraceptives were distributed in even the remotest villages, sex education was popularized, vasectomy operations were conducted and abortion was legalized.

But even then family planning has a lot more to achieve, for the population in India has already become about 120 billion and at this rate of growth it may very soon become 150 billion and then 200 billion and so on. As one of the poorest countries in the world India cannot survive this challenge and in face of such explosion all her plans would be an exercise in futility.

6. What are the Preventive measures of Industrial and Chemical Hazard?

Industrial disaster: Industrial disasters are disasters caused by chemical, mechanical, civil, electrical or other process failures due to accident, negligence or incompetence, in an industrial plant which may spill over to the areas outside the plant or with in causing damage to life, property and environment.

Chemical disaster: Chemical disasters are occurrence of emission, fire or explosion involving one or more hazardous chemicals in the course of industrial activity (handling), storage or transportation or due to natural events leading to serious effects inside or outside the installation likely to cause loss of life and property including adverse effects on the environment.

“Chemical accident or emergency can result in extensive damage to the environment with considerable human and economic costs. Chemical and industrial emergencies may arise in a number of ways, such as -

- Explosion in a plant
- Accidents in storage facilities of chemicals
- Accidents during the transportation of chemicals, misuse of chemicals
- Improper waste management
- Accidents in treatment plants
- Technological system failures
- Failures of plant safety design
- Arson and sabotage
- Human error

Before Chemical and industrial Hazard

- Avoid housing near the industries producing or processing poisonous chemicals, if possible.
- The people living near industrial units should gather information about the nature of industrial units located near their houses.
- Read literature, leaflets, newsletters and televisions / radio publishing about the properties and characteristics of hazardous chemicals.
- Participate in all the capacity building programmes organized by the government/ voluntary organizations / industrial units.
- Take part in preparing disaster management plan and identify safe shelter along with safe and easy access routes.
- Prepare a family disaster management plan and explain it to all the family members.
- Make the family aware of the basic characteristics of various poisonous chemicals and the first aid required to treat them.

After Chemical and industrial Hazard

- When you notice any chemical leak/accident evacuate calmly and quickly against the wind direction.
- Keep a wet handkerchief or piece of cloth on face during evacuation.
- As far as possible try to attract other's attention on your way to the scene of chemical disaster.
- Avoid visiting and become audience to the risky areas.
- Don't be obstacle to the people who are managing the disaster.

- Keep the sick, elderly, weak, handicapped and other people who are unable to evacuate inside house and close all the doors and windows tightly.
- Inform Fire & Emergency Services, Police and medical services from safe location by calling 101, 100 and 108 respectively.
- Obey any instruction of the District authorities who will be doing their best to ensure the safety of you, your family and society as a whole and also try to save the property and the environment.
- Provide correct and accurate information to government official.
- Turn on local radio/ TV channels for advice from District Emergency Operation Centre/health authorities
- Inform others on occurrence of event at public gathering places (like school, shopping centre, theatre etc.).
- Wait for other instructions by authorised people after reaching at safe place.
- Don't pay attention to the rumours and don't spread rumours.

7. Establish an inter-relationship between Disasters and Development through climate change adaptation.

There is growing evidence that climate change is increasing the frequency and intensity of climate-related hazards, and hence the level and patterns of often inter-related risks, exacerbating levels of vulnerability for poor and excluded people. Poverty and social impacts, though generally not well-understood, are likely to be profound and will impact humans through a variety of direct (changes in climate variables) and indirect pathways (pests and diseases; degradation of natural resources; food price and employment risks; displacement; conflicts, negative spirals)

For many poor rural people, reliance on subsistence agriculture means that the impact of climate shocks and stresses are likely to have negative implications for their food and livelihood security, human capital and welfare. Risks and uncertainties, often associated with seasonality, are typically embedded in agricultural practices and poor people often have considerable experience of coping and risk management strategies, which need to be built upon in developing more resilient livelihoods.

Climate change also has implications for the urban poor and for rural-urban change. Most informal urban settlements are built illegally and without formal planning. . Limited availability of water, high child and infant mortality rates and a very high disease burden (malaria, tuberculosis, diarrhea etc.) are common characteristics of such informal settlements. Planning for climate change in such situations will be extremely difficult when governments have limited authority and capacity to address the risks posed by existing hazards .

With climate change negatively impacting rural livelihoods, migration from rural to urban areas is increasingly likely to become the favoured adaptation strategy of the mobile, rural poor. This will further exacerbate the problem of people living in urban fringe hazardous environments with potential risks of social unrest. At the same time, the greater concentration of people creates opportunities for more effectively managing climate change risks *vis-à-vis* people living in remote rural locations. Furthermore, migration should not be viewed as a universally negative impact of climate change; it can serve a positive function. For both the poor and non-poor, migration can be an

accumulative strategy . For example, rural agricultural labourers may choose voluntary internal migration from rural to urban areas in the aftermath of a shock in order to move from the agricultural to non-agricultural sector. However, migration is not an option for all, especially the chronically poor or specific vulnerable or excluded people, who may face discrimination and severely limited mobility.

III. ATTEMPT ANY TWO QUESTIONS. 10X2=20

1. Explain the Disaster cycle with its analysis.

Pre-disaster Activities

These activities are normally subdivided into disaster prevention, disaster mitigation and disaster preparedness. In general, disaster prevention is event-focused. In other words, the objective of prevention is to prevent the disaster from occurring at all. Disaster mitigation accepts the fact that some natural event may occur but tries to lessen the impact by improving the community's ability to absorb the impact with little damage or disruptive effects. Disaster preparedness assumes that the disaster will occur and focuses on structuring response and laying a framework for recovery.

Emergency Response Activities

Emergency response activities are those carried out during the actual emergency or immediately prior to it. This may involve evacuation of threatened communities, emergency assistance during the disaster, and actions taken in the immediate aftermath during the time when the community is rather disorganized and basic services and infrastructure are not fully functioning. Because the emergency period is both dramatic and traumatic, most attention by the press and international community is focused here. Yet in most disasters (with the exception of droughts and civil strife), the emergency passes rather quickly and, in reality, only accounts for a very small percentage of the total picture.

Post-disaster Activities

Post-disaster recovery can be subdivided into two phases. The first begins at the end of the emergency phase. It is a transitional phase (often called the rehabilitation phase) when

people and community systems try to reestablish a semblance of normalcy. This period is usually characterized by such activities as business reopening in damaged structures, farmers returning to reclaim and clear their land, and resumption of basic infrastructure services such as water and sanitation systems in urban areas.

The reconstruction phase is marked by large-scale efforts to replace damaged buildings, revitalize economies or restore agricultural systems to their full pre-disaster production capacity.

Disaster – related Activities

Pre-disaster Activities Disaster Prevention

Disaster Mitigation

Disaster Preparedness

Emergency Response Warning (beginning before the actual event)

Evacuation / Rescue

Emergency Assistance (food, shelter, medical)

Post-disaster activities

Transitional Period Repair Structure and lifelines

Reclaim and clear land

Resume services\

Reconstruction Period Replace buildings

Restore services

Revitalize economy

Restore agriculture

Elements of Disaster Risk Management framework

- Pre Disaster phase
 - Risk assessment – Diagnostic process to identify the risks that a community faces
 - Prevention - Activities to avoid the adverse impact of hazards
 - Mitigation – Structural/non-structural measures undertaken to limit the adverse impact

- Preparedness - Activities and measures taken in advance to ensure effective response
- Early warning - Provision of timely and effective information to avoid or reduce risk
- During disaster
 - Evacuation - temporary mass departure of people and property from threatened locations
 - Saving people and livelihoods – Protection of people and livelihoods during emergency
 - Immediate assistance – Provision of assistance during or immediately after disaster
 - Assessing damage and loss – Information about impact on assets and loss to production
- Post disaster
 - Ongoing assistance – Continued assistance until a certain level of recovery
 - Recovery - Actions taken after a disaster with a view to restoring infrastructure and services
 - Reconstruction - Actions taken after a disaster to ensure resettlement/relocation
 - Ongoing development activities – Continued actions of development programmes

2. What do you mean by mitigation and explain the working of Seismological

Laboratory?

Disaster Mitigation is essentially measures taken in advance of a disaster aimed at minimizing or eliminating the impact of disaster on community and environment.

Components of Disaster Mitigation: reducing hazard and reducing vulnerability

Disaster mitigation measures

- Passive mitigation measure
- Active mitigation measures

Phases of disaster mitigation

- Risk analysis
- Prevention
- Preparedness

Disaster Mitigation Actions

- Engineering and construction
 - Engineered buildings
 - Non-engineered
 - Existing buildings
- Physical planning
 - Location of public sector units
 - Provision of several small facilities
 - Changing use of vulnerable buildings
 - Availability of safer land for poorer community
- Economic
 - Diversification of economy: single type of industry is vulnerable
 - Economic incentives like loans, tax concessions etc.
- Management and institutional
 - Special department for disaster management
- Societal
 - Public awareness through education
 - Involvement of community through drills

Working of Seismological Laboratory are as follows

1. Earthquake Monitoring & Services (EMS)

Center for Seismology (CS) is the nodal agency of Government of India responsible for monitoring seismic activity in and around the country. CS/IMD has rendered more than a century of seismological service to the nation with the first seismological observatory of the country having been set up by the department at Kolkata in 1898. The operational task of the Center is to quickly estimate the earthquake source parameters immediately on occurrence of an earthquake and disseminate the information to all the user agencies including the concerned State and Central Government agencies responsible for carrying out relief and rehabilitation measures. The information relating to under-sea earthquakes capable of generating tsunamis on the Indian coastal regions is also disseminated to all concerned user agencies including the Indian National Centre for Ocean Information Services (INCOIS), Hyderabad for issue of tsunami related messages

and warnings. The earthquake information is transmitted to various user agencies including public information channels, press, media etc. using different modes of communication, such as SMS, fax, email and also posted on IMD's Website.

2. Geophysical Observational System (GOS)

Center for Seismology is maintaining a country wide National Seismological Network (NSN), consisting of a total of 82 seismological stations, spread over the entire length and breadth of the country. This includes: a) 16-station V-SAT based digital seismic telemetry system around National Capital Territory (NCT) of Delhi, b) 20-station VSAT based real time seismic monitoring network in North East region of the country and (c) 17-station Real Time Seismic Monitoring Network (RTSMN) to monitor and report large magnitude under-sea earthquakes capable of generating tsunamis on the Indian coastal regions. The remaining stations are of standalone/ analog type. A Control Room is in operation, on a 24X7 basis, at premises of IMD Headquarters in New Delhi, with state-of-the art facilities for data collection, processing and dissemination of information to the concerned user agencies

3. Earthquake Hazard & Risk Assessment (EHRA)

Seismic hazard assessment and seismic microzonation studies have emerged as major tools towards our efforts for preparedness and mitigation of losses due to earthquakes. 'Seismic microzonation' is a process of classifying a region into zones of relatively similar exposure to various earthquake-related effects and has emerged as a major tool towards providing user-friendly, GIS-based and site-specific hazard and risk related information products to enable appropriate planning of pre- and post-disaster management strategies. The EHRA unit of Center for Seismology has the mandate to generate and disseminate user-friendly GIS-based and site-specific hazard and risk - related information products to enable appropriate planning of pre- and post disaster management strategies. The Centre has completed microzonation of Delhi region on 1:50,000 scale and played a key role in various studies relating to the seismic microzonation of other cities, such as, Jabalpur and Guwahati. EHRA unit is currently engaged in refining the seismic microzonation of NCT, Delhi on 1:10,000 scale. Action has also been initiated for taking up microzonation of other important cities.

Field studies for aftershock / swarm monitoring, site response studies are also being taken as per requirement.

4. Seismic Zoning of India: Bureau of Indian Standards [IS-1893 – part – 1: 2002], based on various scientific inputs from a number of agencies including earthquake data supplied by IMD, has grouped the country into four seismic zones viz., Zone-II, -III, -IV and -V. Of these, zone V is rated as the most seismically prone region, while zone II is the least. The Modified Mercalli (MM) intensity, which measures the impact of the earthquakes on the surface of the earth, broadly associated with various zones, is as follows:

Seismic Zone	Intensity on MMI scale	% of total area
II (Low intensity zone)	VI (or less)	43%
III (Moderate intensity zone)	VII	27%
IV (Severe intensity zone)	VIII	18%
V (Very severe intensity zone)	IX (and above)	12%

5. Program Planning & Coordination (PPC)

In order to generate trained manpower in the field of seismology and allied subjects, Center for Seismology organizes training courses/ awareness programs in Seismology and allied subjects at various levels to station operators and scientists of departmental and various non-departmental agencies. Officers of Seismology Division also deliver lectures on various Seismology related topics, on request, for the benefit of various state / central government organizations dealing with earthquake related matters. Familiarization training on various operational activities related to earthquake monitoring is also imparted to trainees from various organizations including those deputed by WMO.

In addition to generate trained manpower in the field of seismology, CS is coordinating various program in the field of seismology, coordination with various national and international agencies in the field of seismology and other related subjects.

6. Earthquake Processes & Modeling (EPM)

The upgraded seismological network has generated very useful and unique digital broadband and strong motion data sets for several significant earthquakes including the recent great Sumatra earthquake of 26th December, 2004, Pakistan earthquake of 8th October 2005 and Sikkim Earthquake of 18th September, 2011. Analyses of these data sets have greatly helped in improving our understanding about the earthquake processes in the inter- and intra-plate seismic regimes and the crust and upper mantle structure of the Peninsular shield region.

Center for Seismology is actively involved in Research and Development related activities in the field of Seismology and allied subjects.

Bilateral collaboration in various fields of Seismology has also been established with various countries doing research work in the field of seismology and allied subjects.

3. What do you mean by Natural Disaster and Hazard? Explain with suitable examples

Generally, disasters are of two types – Natural and Manmade. A natural disaster is a consequence when a natural calamity affects humans and/or the built environment. Some of the disasters are listed below:

Natural disasters:

- Earthquakes

- Fire
- Flooding
- Hurricanes & typhoons
- Snow storms & avalanches
- Tidal waves
- Tornadoes & wind storms
- Volcanic eruptions

The definition of natural disasters is any catastrophic event that is caused by nature or the natural processes of the earth. The severity of a disaster is measured in lives lost, economic loss, and the ability of the population to rebuild. Events that occur in unpopulated areas are not considered disasters. So a flood on an uninhabited island would not count as a disaster, but a flood in a populated area is called a natural disaster.

All natural disasters cause loss in some way. Depending on the severity, lives can be lost in any number of disasters. Falling buildings or trees, freezing to death, being washed away, or heat stroke are just some of the deadly effects. Some disasters cause more loss of life than others, and population density affects the death count as well.

Then there is loss of property, which affects people's living quarters, transportation, livelihood, and means to live. Fields saturated in salt water after tsunamis take years to grow crops again. Homes destroyed by floods, hurricanes, cyclones, landslides and avalanches, a volcanic eruption, or an earthquake are often beyond repair or take a lot of time to become livable again. Personal effects, memorabilia, vehicles, and documents also take a hit after many natural disasters.

A **hazard** is a situation that poses a level of threat to life, health, property, or environment. Most hazards are dormant or potential, with only a theoretical risk of harm; however, once a hazard becomes "active", it can create an emergency situation. A hazardous situation that has come to pass is called an incident. Hazard and possibility interact together to create risk.

Identification of hazard risks is the first step in performing a risk assessment.

Hazards are sometimes classified into three modes:

- **Dormant**—The situation presents a potential hazard, but no people, property, or environment is currently affected. For instance, a hillside may be unstable, with the potential for a landslide, but there is nothing below or on the hillside that could be affected.
- **Armed**—People, property, or environment are in potential harm's way.
- **Active**—A harmful incident involving the hazard has actually occurred. Often this is referred to not as an "active hazard" but as an accident, emergency, incident, or disaster.

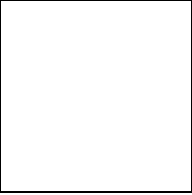
Types of Hazard

Hazards are generally labeled as one of five types:

- **Physical hazards** are conditions or situations that can cause the body physical harm or intense stress. Physical hazards can be both natural and human made elements.
- **Chemical hazards** are substances that can cause harm or damage to the body, property or the environment. Chemical hazards can be both natural or human made origin.
- **Biological hazards** are biological agents that can cause harm to the human body. These some biological agents can be viruses, parasites, bacteria, food, fungi, and foreign toxins.
- **Psychological hazards** are created during work related stress or a stressful environment.
- **Radiation** hazards are those that harm or damage the human body by directly affecting cells.

1993 Latur earthquake: The Latur earthquake in 1993 was one of the most devastating ones in modern India. Measuring 6.4 on Richter scale, the disaster killed more than 20,000 people. The Latur district was brutally hit by three aftershocks on the same day which damaged more than 2 lakh houses in 13 neighbouring districts. Nearly 1, 27,000 families were affected by the tragedy in Maharashtra.

2004 Indian Ocean Tsunami: A destructive Tsunami in the Indian Ocean in 2004, triggered by a powerful earthquake - measuring 9.0 on the Richter scale - caught the



attention of the world as it killed more than 10,000 people in India alone. Perhaps the most powerful Tsunami in history, the disaster severely affected 150,000 people in 11 countries. Experts say the Tsunami was so powerful that its impact can be equated to the energy of 23,000 Hiroshima-type atomic bombs.

2001 Gujarat earthquake: A powerful earthquake, measuring 7.9 on the Richter scale hit the Gujarat state on January 26, 2001 killing at least 30,000 people. According to statistics, 6,356 houses in Bhuj alone - the epicentre of the quake - were destroyed by the disaster.

**DEPARTMENT OF SOCIAL WORK
GURU GHASIDAS VISHWAVIDYALAYA BILASPUR
ODD SEMESTER EXAMINATION- 2014**

**SEMESTER Ist - 2014
SET- ONE**

MODEL ANSWER

Time: 3 HOUR

M.M= 75 MARKS

PAPER: - MS- 102: HUMAN GROWTH AND PERSONALITY DEVELOPMENT

I. ATTEMPT ALL QUESTIONS EACH CARRY EQUAL MARKS 10X2= 20.

1. Improvement in memory & language indicates development in the _____ Domain

Cognitive

2. In Learning theory, the naturally occurring response is called the

- (a) Unconditioned response**
- (b) Conditioned Stimulus**
- (c) Conditioned Response**

(a) Unconditioned response

(b) The model of Personality as learned habits was developed by

- a. Skinner**
- b. Watson**
- c. Bandura**
- d. Dollard & Miller**

(a) Skinner

4. Changes in size & structure of the body fall in the _____ domain of development

Physical

5. Prejudice refers to

- (a) Any kind of bias or inclination toward anything or anyone that may be considered inherently irrational.**
- (b) Positive attitudes of a special kind.**
- (c) A usually negative attitude toward the members of some social group.**
- (d) Attitudes of a majority toward a minority.**

(a) Any kind of bias or inclination toward anything or anyone that may be considered inherently irrational.

6. Development follows a constant rate (T/F)

False

7. Development is defined as the pattern of movement or across the life-span.

- (a) **Growth**
- (b) **Change**
- (c) **Decline**
- (d) **Stability**

(a) Growth

8. Which of the following would involve a cognitive process?

- (a) **Hormonal changes at puberty**
- (b) **An infant responding to her mother's touch with a smile**
- (c) **An elderly couple's affection for each other**
- (d) **Putting together a two-word sentence.**

(d) Putting together a two-word sentence.

9. Which of the following statement is false?

- (a) **Attitudes can be directed at almost any object, person, or concept.**
- (b) **Attitudes are evaluative**
- (c) **Attitudes have affective, Cognitive & Behavioural components**
- (d) **Attitudes show more day to day change than moods.**

(a) Attitudes show more day to day change than moods.

10. The study of development does not cover old age (T/F)

False

II. ATTEMPT ANY FIVE QUESTIONS (Write your Answers 150- 200Words)

7X5=35.

1. Describe the nature and principle of Growth and Human Development.

Generally, Growth and development go hand in hand. Growth without development is meaningless. For example, when body grows in structure, it also develops in function. That means growth helps in development. But, this is not always so; child may grow fat, but this may not be accompanied by any functional improvement or development, growth in size, height or weight may not indicate any improvement in physical or sensory motor activity. The intellectual, emotional and social development continues after the growth in general has ceased. Development constitutes a progressive series of changes : progressive

because they are directional, leading forward rather than backward, leading to greater differentiation and complexity of the system, resulting in more efficient functioning of the human organism.

Growth

Growth means an increase in size, height, weight, length, etc. which can be measured.

Development

Development implies changes in shape, form or structure resulting in improved working. It implies qualitative changes.

The principles of growth and development are described below.

(i) Development follows a pattern:

Development occurs in orderly manner and follows a certain sequence. For example, the human baby can stand before he walks and can draw a circle before he can draw a square. He babbles before he talks, he is dependent on others before he becomes self-dependent.

(ii) Development proceeds from general to specific responses:

It moves from a generalized to localized behavior. The newborn infant moves its whole body at one time instead of moving only one part of it. It makes random kicking with its legs before it can coordinate the leg muscles well enough to crawl or to walk.

(iii) Development is a continuous process:

Development does not occur in spurts. Growth continues from the moments of conception until the individual reaches maturity. It takes place at slow regular pace rather than by 'leaps and bounds'.

Although development is a continuous process, yet the tempo of growth is not even during infancy and early years, growth moves swiftly. Later on, it slackens.

(iv) Different aspects of growth develop at different rates

Neither all parts of the body grow at the same rate nor do all aspects of mental growth proceed equally. They reach maturity at different times.

(v) Most traits are correlated in development:

Generally, it is seen that the child whose intellectual development is above average is so in health size, sociability and special aptitudes.

(vi) Growth is complex:

All of its aspects are closely interrelated. The child's mental development is intimately related to his physical growth and its needs.

(vii) Growth is a product of the interaction of the organism and environment:

Among the environmental factors one can mention nutrition, climate the conditions in the home, the type of social organization in which individual moves and lives.

(viii) There are wide individual differences in growth:

Individual differences in growth are caused by differences in heredity and environment.

(ix) Growth is both quantitative and qualitative:

These two aspects are inseparable. The child not only grows in 'size'; he grows up or matures in structure and function too.

(x) Development is predictable:

It is possible for us to predict at an early age the range within which the mature development of the child is likely to fall. But mental development cannot be predicted with the same degree of accuracy.

2. Discuss the Psychosocial Theory of Human Development .

Erik Erikson's theory of psychosocial development is one of the best-known theories of personality in psychology. Much like Sigmund Freud, Erikson believed that personality develops in a series of stages. Unlike Freud's theory of psychosexual stages, Erikson's theory describes the impact of social experience across the whole lifespan.

One of the main elements of Erikson's psychosocial stage theory is the development of ego identity.

1 Ego identity is the conscious sense of self that we develop through social interaction. According to Erikson, our ego identity is constantly changing due to new experience and information we acquire in our daily interactions with others. In addition to ego identity, Erikson also believed that a sense of competence also motivates behaviors and actions. Each stage in Erikson's theory is concerned with becoming competent in an area of life. If the stage is handled well, the person will feel a sense of mastery, which he sometimes referred to as ego strength or ego quality.

2 If the stage is managed poorly, the person will emerge with a sense of inadequacy. In each stage, Erikson believed people experience a conflict that serves as a turning point in development. In Erikson's view, these conflicts are centered on either developing a psychological quality or failing to develop that quality. During these times, the potential for personal growth is high, but so is the potential for failure.

Psychosocial Stage 1 - Trust vs. Mistrust

- The first stage of Erikson's theory of psychosocial development occurs between birth and one year of age and is the most fundamental stage in life.
- Because an infant is utterly dependent, the development of trust is based on the dependability and quality of the child's caregivers.
- If a child successfully develops trust, he or she will feel safe and secure in the world. Caregivers who are inconsistent, emotionally unavailable, or rejecting contribute to feelings of mistrust in the children they care for. Failure to develop trust will result in fear and a belief that the world is inconsistent and unpredictable.

Psychosocial Stage 2 - Autonomy vs. Shame and Doubt

- The second stage of Erikson's theory of psychosocial development takes place during early childhood and is focused on children developing a greater sense of personal control.
- Like Freud, Erikson believed that toilet training was a vital part of this process. However, Erikson's reasoning was quite different than that of Freud's. Erikson believed that learning to control one's body functions leads to a feeling of control and a sense of independence.
- Other important events include gaining more control over food choices, toy preferences, and clothing selection.
- Children who successfully complete this stage feel secure and confident, while those who do not are left with a sense of inadequacy and self-doubt.

Psychosocial Stage 3 - Initiative vs. Guilt

- During the preschool years, children begin to assert their power and control over the world through directing play and other social interaction.
- Children who are successful at this stage feel capable and able to lead others. Those who fail to acquire these skills are left with a sense of guilt, self-doubt and lack of initiative.

Psychosocial Stage 4 - Industry vs. Inferiority

- This stage covers the early school years from approximately age 5 to 11.
- Through social interactions, children begin to develop a sense of pride in their accomplishments and abilities.
- Children who are encouraged and commended by parents and teachers develop a feeling of competence and belief in their skills. Those who receive little or no encouragement from parents, teachers, or peers will doubt their ability to be successful.

Psychosocial Stage 5 - Identity vs. Confusion

- During adolescence, children are exploring their independence and developing a sense of self.
- Those who receive proper encouragement and reinforcement through personal exploration will emerge from this stage with a strong sense of self and a feeling of independence and control. Those who remain unsure of their beliefs and desires will be insecure and confused about themselves and the future.

Psychosocial Stage 6 - Intimacy vs. Isolation

- This stage covers the period of early adulthood when people are exploring personal relationships.
- Erikson believed it was vital that people develop close, committed relationships with other people. Those who are successful at this step will develop relationships that are committed and secure.

□ Remember that each step builds on skills learned in previous steps. Erikson believed that a strong sense of personal identity was important to developing intimate relationships. Studies have demonstrated that those with a poor sense of self tend to have less committed relationships and are more likely to suffer emotional isolation, loneliness, and depression.

Psychosocial Stage 7 - Generativity vs. Stagnation

□ During adulthood, we continue to build our lives, focusing on our career and family.
□ Those who are successful during this phase will feel that they are contributing to the world by being active in their home and community. Those who fail to attain this skill will feel unproductive and uninvolved in the world.

Psychosocial Stage 8 - Integrity vs. Despair

□ This phase occurs during old age and is focused on reflecting back on life.
□ Those who are unsuccessful during this phase will feel that their life has been wasted and will experience many regrets. The individual will be left with feelings of bitterness and despair.
□ Those who feel proud of their accomplishments will feel a sense of integrity. Successfully completing this phase means looking back with few regrets and a general feeling of satisfaction. These individuals will attain wisdom, even when confronting death .

3. Explain the concept of stereotypes and discrimination with suitable examples?

A stereotype is a fixed set of greatly simplified beliefs or thought which are held usually through the members of a group or through people. One caste or race may have a set of thoughts in relation to the caste or race. We have stereotyped thoughts in relation to the several religious, ethnic or sex groups. Stereotype refers to sure physical characteristics of some people; for instance tall and high-necked women may be looked upon as a beautiful women or a broad shouldered tall black person may be regarded as a cruel person. Stereotypes are highly generalized beliefs shared through the members of a group. They may be either based on some objective or on few observed instances. It has been measured as a concept that leads to false classification and feelings of like and dislike, approval or disapproval. Stereotype is a form of deification with three features People identify a category of persons just as to sure attributes, People agree in attributing sets of traits or features to the category of persons and People attribute the features to any person belonging to the category.

The main features of a stereotype are:

- A stereotype is a mental picture or image. A stereotype is a mental picture of a class or a group on the basis of which we assign some features to the members of that group,
- A stereotype comprises a widely agreed belief in relation to the group of people also. For instances mainly people consider that teachers are idealist, politicians are opportunist and so on,
- A stereotype involves gross and exaggerated generalization. It develops on the basis of the experience of a few people of any group, Usually no change takes

place in a stereotype. It does not change in spite of exposure to new information or contradictory information and

- A stereotype can either be positive or negative. It is related to prejudice.

Stereotypes are not innate but are acquired. The factors responsible for the formation of stereotypes are:

- Partial experience and knowledge,
- Socialization,
- Social and cultural factors,
- Imitation and Tradition and folklore.

Stereotypes have a significant role to play in social life as they power our social interaction. The main functions of stereotypes are:

- To create social behaviour meaningful,
- To control social behaviour,
- To predict social behaviour and
- To help us in commercial advertisements.

Stereotypes power our social interaction as well as interfere with our functioning.

4. What do you mean by Social Perception in context of Psycho-social bases of behaviour?

Social perception is the study of how people form impressions of and make inferences about other people. We learn about other's feelings and emotions by picking up on information we gather from their physical appearance, and verbal and nonverbal communication. Facial expressions, tone of voice, hand gestures, and body position are just a few examples of ways people communicate without words. A real world example of social perception would be understanding that someone disagrees with what you said when you see them roll their eyes.

An important term to understand when talking about Social Perception is attribution. Attribution is being able to successfully identify a person's behavior based on the current context of the situation. For example, if you are at a wedding, you attribute everyone's happiness because getting married is a cause to celebrate.

Most importantly, social perception is shaped by individual's motivation at the time, their emotions, and their cognitive load capacity. All of this combined determines how people attribute certain traits and how those traits are interpreted.

Social perception is the process of forming impressions of individuals. The resulting impressions that we form are based off of information available in the environment, our

previous attitudes about relevant stimuli, and our current mood. Humans tend to operate under certain biases when forming impression of other individuals. For example, we are more like to perceive a beautiful person as being good (i.e. possessing desirable personality traits such as kindness, sociability, intelligence) than less attractive people.

5. Explain the different Determinants of Human Development.

1. Heredity

The passing on of physical or mental characteristics genetically from one generation to another.

2. Genetic Influences

At the time of conception, the ovum of the mother and the sperm cell of the father unite to form a new cell. The small particles in the nucleus of the cell are called chromosomes. The chromosomes exist in pairs. The human cell has 46 chromosomes arranged in 23 pairs. One member from each pair comes from the mother and the other one from the father. Chromosomes store and transmit genetic information. The genes, which are the actual trait carriers, are found in very large numbers in each chromosome. The fertilized zygote brings together various combinations of chromosomes. In this way, different genes are transferred from each child of the same set of parents. Due to this reason each child bears greater similarity to his or her blood relatives than to anyone else. At the same time there are also many differences amongst blood relatives.

3. Genotypes and Phenotypes

Genetic transmission is a complex process. Most characteristics that we observe in human beings are combinations of a large number of genes. Innumerable permutations and combinations of genes are responsible for the large differences in physical and psychological characteristics. Only identical or monozygotic twins have exactly the same set of chromosomes and genes as they are formed by duplication of a single zygote. Most twins are fraternal or di-zygotic, who develop from two separate zygotes. These fraternal twins may resemble each other like brother and sister, but they will also be different from one another in many ways.

Genes can be dominant or recessive. It is a known fact that there is more color blindness or lack of sensitivity to certain colors among males than females. A grandmother and mother can transmit this condition to the male child without being color blind themselves. This is because in the male this disorder is dominant, whereas in female it is recessive. The genes form pairs. If both genes in a pair are dominant, the individual will display the specific trait (e.g. color blindness). If one gene is dominant and the other recessive, the dominant will prevail. The recessive gene will be passed on and may show up in a later generation.

The dominant gene, therefore, is the one responsible for a particular trait to show up in a person. The characteristics which show up and are displayed e.g. eye color, are called phenotypes. The recessive gene does not show up as a trait, unless paired with another gene just like it. The characteristics that are carried genetically as recessive genes but are not displayed are called genotypes. Genotype, therefore, refers to the actual genetic

material or a person's genetic heritage while phenotype refers to the individual's physical and behavioral characteristics which are determined by both genetic and environmental factors.

4. Environmental Influences

Nature refers to what a child has inherited genetically from her parents, while the influence of environment on the development of the child is referred to as nurture.

To understand the development of a person, we have to study the complex interaction between nature and nurture or heredity and environment. Environmental influences are important both at the prenatal and postnatal stages of human development. At the prenatal stage, when a fetus is in the mother's womb, internal or external harmful agents, such as certain legal or illegal drugs, alcohol, lead and pollutants can harm the unborn baby's development. The mother's nutrition, diseases and emotional stress can also affect the development of the fetus.

6. What do you mean by Social Prejudices? Explain with suitable.

Prejudice is an attitude which predisposes an individual to think perceive, feel, and act in favorable or unfavorable methods towards a group or its members. Whether or not a prejudiced person will really behave in accordance with his attitude depends upon circumstances and other factors. The term prejudice stresses the perceptual, cognitive, and emotional content of person's internal feelings, predispositions, and experiences. It does not necessarily imply that behaviour is congruent with such experience. The word prejudice is derived from the Latin word 'Prejudicial': 'Pre' means before and 'Judicial' means judgment. Prejudice refers to positive or negative evaluations or judgments of members of a group that are based primarily on the fact of their membership in the group and not necessarily because of scrupulous features of individual members. It is quite often defined as a negative attitude towards the members of some social, ethnic, or religious group.

Features of Prejudice

Since prejudice is a type of attitude, it has to be acquired. A newborn child does not have a negative or positive prejudice towards people from other cast. As he comes to know in relation to the people's caste, class, or religion, prejudice develops. Prejudice has an emotional tone. If the prejudice is favorable then one shows love and affection towards people of that class or caste. A person's unfavorable prejudice towards people of other ethnic group or religion comes out in the form of hostility, hate, and anger. Prejudice is

directed towards the group as a whole. The target of a prejudice is not an individual but the whole group. In spite of having some good qualities, any person or member of a scrupulous group would be shown a scrupulous type of prejudice through members of other groups.

Prejudice is based on rigid generalization. Rigidity is established in prejudice and it is based on inflexible generalization. Even after getting authentic information one does not change his/her prejudice. Prejudice is not related to reality. Whether prejudice is favorable or unfavorable, it is not related to reality. It is based on our traditions and customs.

The factors that help to maintain prejudice operate on three stages i.e.:

- Social structure,
- Individual personality dynamics and
- Culture.

Effect of Prejudice in Social Behaviour

The effect of prejudice is both positive and negative. The positive effects of prejudice are as follows:

- It helps a person satisfy his suppressed desire;
- It helps a person to get rid of his frustration through being aggressive towards other groups,
- With the help of prejudice the group may develop a feeling of superiority which helps in satisfying the need for prestige.

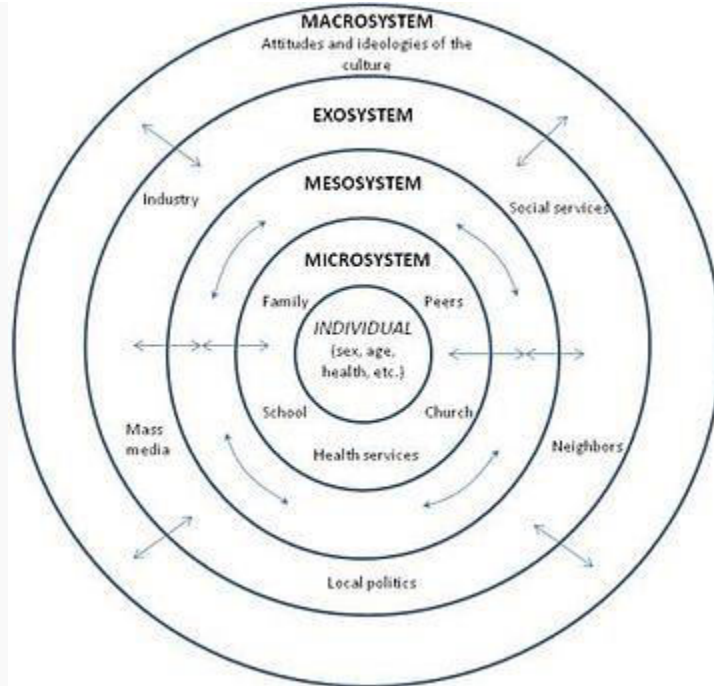
Negative effect of prejudice is:

- Prejudice result in social disagreement;
- It is the cause of social disorganization and
- It makes troubles for national integration.

7. Discuss Interactional or System Approach to study Human Development.

Ecological systems theory, also called development in context or human ecology theory, identifies five environmental systems with which an individual interacts..Ecological systems theory was developed by Urie Bronfenbrenner.

The five systems



Bronfenbrenner's ecological systems theory

- **Microsystem:** Refers to the institutions and groups that most immediately and directly impact the child's development including: family, school, religious institutions, neighborhood, and peers.

- Mesosystem: Interconnections between the microsystems, Interactions between the family and teachers, Relationship between the child's peers and the family
- Exosystem: Involves links between a social setting in which the individual does not have an active role and the individual's immediate context. For example, a parent's or child's experience at home may be influenced by the other parent's experiences at work. The parent might receive a promotion that requires more travel, which might increase conflict with the other parent and change patterns of interaction with the child.
- Macrosystem: Describes the culture in which individuals live. Cultural contexts include developing and industrialized countries, socioeconomic status, poverty, and ethnicity. A child, his or her parent, his or her school, and his or her parent's workplace are all part of a large cultural context. Members of a cultural group share a common identity, heritage, and values. The macrosystem evolves over time, because each successive generation may change the macrosystem, leading to their development in a unique macrosystem
- Chronosystem: The patterning of environmental events and transitions over the life course, as well as socio-historical circumstances. For example, divorces are one transition. Researchers have found that the negative effects of divorce on children often peak in the first year after the divorce. By two years after the divorce, family interaction is less chaotic and more stable. An example of socio-historical circumstances is the increase in opportunities for women to pursue a career during the last thirty years.

The person's own biology may be considered part of the micro-system; thus the theory has recently sometimes been called "Bio-Ecological Systems Theory."

III. ATTEMPT ANY TWO QUESTIONS. 10X2=20

1. Discuss the Theory of Cognitive Development in context of human development.

According to psychologist Jean Piaget, children progress through a series of four key stages of cognitive development. Each stage is marked by shifts in how kids understand the world. Piaget believed that children are like "little scientists" and that they actively try to explore and make sense of the world around them.

Through his observations of his own children, Piaget developed a stage theory of intellectual development that included four distinct stages: the sensorimotor stage, from birth to age 2; the preoperational stage, from age 2 to about age 7; the concrete operational stage, from age 7 to 11; and the formal operational stage, which begins in adolescence and spans into adulthood.

Main Elements of Piaget's Cognitive Development Theory

There are three elements to Piaget's theory:

1. Schema
2. The four processes that enable the transition from one stage to another
3. The four stages of cognitive development

Schema

A schema is the basic building block of intelligent behaviour, a form of organizing information that a person uses to interpret the things he or she sees, hears, smell, and touches (Singer & Revenson, 1997). A schema can be thought of as a unit of knowledge, relating to one aspect of the world including objects, actions, and abstract (theoretical) concepts. We use schemas to understand and to respond to situations. We store them and apply them when needed.

A child is considered to be in a state of equilibrium or in a state of cognitive balance when she or he is capable of explaining what he or she is perceiving (schema) at the time.

The dual processes of assimilation and accommodation (described below) are the building blocks to forming a schema.

The Four Processes:

The four processes that enable the transition from one cognitive stage to another are assimilation, accommodation, disequilibrium, and equilibration. Educators generally view these processes as an explanation of cognitive learning processes, not just those that lead to major shifts in cognitive ability

Together, assimilation and accommodation are processes of adjustment to changes in the environment and are defined as adaptation, the continuous process of using the

environment to learn. And, according to Piaget, adaptation is the most important principle of human functioning.

The Four Stages of Cognitive Development:

Piaget identified the following four stages in development of cognition:

- Sensory-Motor (Ages Birth Through Two)
- Preoperational (Ages Two Through Seven)
- Concrete Operations (Ages Seven Through Eleven)
- Formal Operations (Ages Eleven Through Sixteen)

Piaget's Stages of Cognitive Development

- The Sensorimotor Stage: During this stage, infants and toddlers acquire knowledge through sensory experiences and manipulating objects. It was his observations of his daughter and nephew that heavily influenced his conception of this stage. At this point in development, a child's intelligence consists of their basic motor and sensory explorations of the world. Piaget believed that developing is known as object permanence or object constancy, the understanding that objects continue to exist even when they cannot be seen, was an important element at this point of development. By learning that objects are separate and distinct entities and that they have an existence of their own outside of individual perception, children are then able to begin to attach names and words to objects.
- The Preoperational Stage: At this stage, kids learn through pretend play but still struggle with logic and taking the point of view of other people. They also often struggle with understanding the ideal of constancy. For example, a researcher might take a lump of clay, divide it into two equal pieces, and then give a child the option of choosing two pieces of clay to play with. One piece of clay is rolled into a compact ball while the other is smashed into a flat pancake-shape. Since the flat shape *looks* larger, the preoperational child will likely choose that piece even though the two pieces are exactly the same size.
- The Concrete Operational Stage: Kids at this point of development begin to think more logically, but their thinking can also be very rigid. They tend to struggle with abstract and hypothetical concepts. At this point, children also become less egocentric and begin to think about how other people might think and feel. Kids

in the concrete operational stage also begin to understand that their thoughts are unique to them and that not everyone else necessarily shares their thoughts, feelings, and opinions.

- The Formal Operational Stage: The final stage of Piaget's theory involves an increase in logic, the ability to use deductive reasoning, and an understanding of abstract ideas. At this point, people become capable of seeing multiple potential solutions to problems and think more scientifically about the world around them.

2. What do you understand by Normal and Abnormal behaviour? Explain causes and manifestations of Abnormal Behaviour.

Behaviour can be defined as the way in which an individual behaves or acts. It is the way an individual conducts herself/himself.

Behaviour should be viewed in reference to a phenomenon, an object or person. It can be seen in reference to society norms, or the way in which one treats others or handles objects. Behaviour, therefore, is the way an individual acts towards people, society or objects. It can be either bad or good. It can be normal or abnormal according to society norms. Society will always try to correct bad behaviour and try to bring abnormal behaviour back to normal.

Abnormal behavior is behavior that deviates from what is expected and normal. Abnormal behavior is any behavior that deviates from what is considered normal. There are four general criteria that psychologists use to identify abnormal behavior: violation of social norms, statistical rarity, personal distress, and maladaptive behavior.

Causes of Abnormal behaviour

In general, psychologists look at four different criteria for defining abnormal behavior. Each has its strengths, and each has its problems.

The first criterion is violation of social norms. Behavior that goes against what is considered normal by society is abnormal. As we just saw, culture plays a role in social

norms, as does age. A man who takes off all his clothes and jumps in a fountain is likely to be seen as weird, whereas a three-year-old who does it might just be seen as cute.

Another criterion for identifying abnormal behavior is statistical rarity. A person who has an extremely low IQ, for example, might be classified with some type of mental retardation. Because there is only a small percentage of the population with mental retardation, it is rare and therefore abnormal. Of course, the problem with statistical rarity is that people who are exceptionally intelligent are just as rare as those with mental retardation. So according to this criterion, Albert Einstein would be abnormal.

A third criterion of abnormal behavior is personal distress. When we engage in abnormal behavior, the cause (and sometimes, result) of our behavior can be distress. A good example of this is obsessive-compulsive disorder, where anxiety about something can lead to compulsive behaviors meant to relieve that distress. The problem with personal distress, though, is that some people with mental illness do not feel distress, such as people with antisocial personality disorder who have an underdeveloped conscience.

The final criterion for defining abnormal behavior is maladaptive behavior. Whether it is physical harm or social harm, such as losing a job or the respect of your peers, maladaptive behavior leads to some type of harm.

Manifestation of Abnormal Behaviour

1. *Statistical abnormality.* A behavior may be judged abnormal if it is statistically unusual in a particular population.

2. *Violation of socially-accepted standards.* An abnormal behavior might be defined as one that goes against common or majority or presumed standards of behavior. For example, one might be judged abnormal in one's failure to behave as recommended by one's family, church, employer, community, culture, or subculture.

3. *Theoretical approaches.* Theories approach abnormality by starting with a theory of personality development, If normal development can be defined, then abnormality is defined by the failure to develop in this

way. For example, if adults normally arrive at a moral stage that prohibits killing other people, and someone does not arrive at this stage, that person might be called abnormal.

4. *Subjective abnormality.* Abnormal behavior can be defined by a person's *feeling* of abnormality, including feelings of anxiety, strangeness, depression, losing touch with reality, or any other sensation recognized and labeled by an individual as out of the ordinary.

5. *Biological injury.* Abnormal behavior can be defined or equated with abnormal biological processes such as disease or injury. Examples of such abnormalities are brain tumors, strokes, heart disease, diabetes, epilepsy, and genetic disorders.

3. What do you mean by Life Span Perspective? Explain it in relation with Human Development?

Lifespan can be defined as the period that extends from conception to death. Thus, lifespan development is a process that begins at conception and continuous to death. Lifespan development can therefore be defined as a methodical, intra-individual transformation that is attributed to progressions corresponding to age. The development advances in a way that implicates the level of functioning. As a child grows he exhibits transformations that progresses with time. These may include physical growth, cognitive advancement, and psychological advancement that may entail emotional and social development.

Physical development may directly refer to the increase in body and organ sizes, signs of ageing and motor abilities. Cognitive development is mainly concerned with the manner in which a child thinks or perceives the world. This is brought about by the changes in perception, language knowledge, memory, and problem solving skills. Psychological development entails transformations in personal and interpersonal advancements that are concerned with emotional and social aspects. Emotional development subjects children to certain emotional feelings such as guilt and pride. Social development is mainly concerned with the manner in which children interact, share and relate as friends .

Characteristics of lifespan perspective

Development is a distinctive feature that largely varies from individual to individual. Life expectancy has been greatly boosted by progress made in nutrition, health and medical knowledge. Development is life-long and thus is not dominated by any age period, it is multi-dimensional. This is because it is concerned with the biological, cognitive, socio-emotional and spiritual aspects. Development can also be said to be multidirectional as some features of development increase while others are decreasing. Another characteristic of development is that it is plastic. It is able to assume different paths depending on the living conditions of an individual. It has the capacity to change. For example, the condition of a child experiencing intellectual retardation may be reversed by the administration of proper diet and positive experience.

The other characteristic is that development is historically-embedded. This is to mean that historical conditions can influence development. Development is multidisciplinary. Professionals in the field of psychology, sociology, anthropology, neuroscience and medical research are all concerned with human development with a common goal of expanding their understanding of development in the course of the lifespan. It is contextual in the sense that a person incessantly responds to and acts on context. Such contexts may include the biological constitution of an individual, physical environment, and social, historical, and cultural contexts .

Human Development Domains and Periods

Development domains are categories that are adopted by scientists. Three main domains have been defined and they appear to be related or they appear to affect each other. These domains are biological, cognitive and psychological. Biological domain is characterized by human growth and physical changes in human. This is normally centered on the course of childhood and adolescence. It is normally concerned with maturation and growth. Cognitive domain tends to address the manner by which learning takes place and the reasons for deterioration of memory in the course of old age. Cognitive domain is constituted by the mental processes of imaging, perceiving, way of thinking and problem solving. Psychological domain is concerned with emotions, individuality and social relations and expectations. All these domains appear to be operating jointly and affect each other .

Human development periods cover the lifetime from conception to death. In total there are eight major periods. These periods include infancy and toddler, early childhood, middle childhood, adolescence, early adulthood, middle adulthood, and late adulthood. As long as a person is alive, he/she will pass through each of these stages. In the course of growth of a newborn to a toddler, they portray a characteristic

thinking ability, language and personality. In their middle years, great emphasis is laid on family, school, friends in addition to individuality and cognitive skills. When one moves from childhood to adulthood, sexual development is exhibited and the individual is subject to thinking about marriage and career. In adulthood, one cannot avoid thinking about retirement. Theories have been put forward to explain in details how the actual transitions from one period to another occur. Some of these theories include the psychoanalytic, learning and cognitive theories.

Contemporary Concerns in Lifespan Development

There are two main concerns that are related to lifespan development. These are nature and nurture, and continuity and discontinuity. For the better part of history, researchers thought that transformations in human were due to forces that could have been external or internal. Advancements in the knowledge and experimental factors of biological processes are referred to as nature versus nurture. Proponents of nature harbor the belief that children are born with certain traits that are innate and are inborn biases. These may have arisen as a result of genetics or as a consequence of prenatal environment. In any case children are not born as blank slates. Proponents of nurture argue that the outcomes of certain occurrences depend on how an individual perceive them

In the case of continuity and discontinuity, the subject of contention is whether the transformation that comes with age is basically a matter of amount, degree, type, or kind. The number of friends that a child has may vary as his age advances. These changes that come with age can be grouped as universal, group specific and individual changes. Children normally advance slowly through the various stages of cognitive development. There is a possibility of intelligence and individuality in the course of childhood merging at the onset of adulthood. This continuity is not rigid but flexible hence it is subject to change. A child who portrays a high level of intellectual capacity in the course of his childhood may lose this good trait if they are continuously subjected to an environment where they are vulnerable to abuse and are neglected

Every human being goes through universal changes. Such changes are a characteristic of certain ages. Group specific changes are a preserve of individuals who share comparable cultural and historical experiences. Individual changes are limited to the person concerned and are attributed to genetic factors and timing of experiences. Everybody is unique, and this is attributed to their genes which dictate their physical appearance, individuality, and intelligence

Conclusion

Development of the lifespan is a matter that begun a long time ago but is still an area that enjoys social and scientific research. Children are normally born, and they grow

to develop their understanding and perception of their environment. We realize that lifespan is multidimensional, life-long, multidirectional, plastic, historically-embedded, multidisciplinary and contextual. The major human domains are biological, cognitive and psychological. Lifespan development can be divided into eight major periods that range from infancy to late adulthood. With the expansion of the field, controversies surrounding nature versus nurture and continuity versus discontinuity become more complicated