ENTRANCE EXAMINATION 2011
QUESTION PAPER BOOKLET
Ph.D. in Psychology

Marks: 75
Time: 2 hours

Hall Ticket No.: X-92

INSTRUCTIONS

Read the following instructions carefully.

1. Write your Hall Ticket Number in the space provided above and on the answer sheet given to you.

2. Hand over the answer sheet at the end of the examination.

3. This question paper has three sections – Section A, Section B, and Section C.

4. Each section carries equal marks (25 marks each).

5. Choose one question each from Section A and Section B. There is no choice in Section C.

This book contains 3 pages excluding this page
SECTION A

Answer any ONE of the following.

1. Design a survey to study the health risk behaviour of young adults in India on a sample of 5000. Prepare an instrument of 10 items for this purpose.

2. Design a study to find out the relative impact of relaxation therapy and relaxation in combination with cognitive behavioural therapy in treating PTSD.

3. Being a Health Psychologist, your hunch is to pursue research on positive mental health. Prepare a research proposal to identify the predictors of positive mental health.

SECTION B

Answer any ONE of the following.

1. ‘In management of life style diseases, social support plays an important role’ – Discuss.

2. What are the socio-cultural factors influencing health? Discuss their role in health behaviour.

3. Critically evaluate the illness – wellness continuum citing relevant research findings.
SECTION C

25 Marks

Two views on euthanasia are discussed below. Which of the two views do you support? Put your own arguments on the issue in not more than 250 words. Give a suitable title to your view.

View 1

Legalizing euthanasia would help alleviate suffering of terminally ill patients. It would be inhuman and unfair to make them endure the intolerable pain. In case of individuals suffering from incurable diseases or in conditions where effective treatment wouldn’t affect their quality of life, they should be given the liberty to choose induced death. The motive of euthanasia is to aid in dying painlessly and thus should be considered and accepted by law. Although killing in an attempt to defend oneself is far different from mercy killing, law does find it worth approving. In an attempt to provide medical and emotional care to the patient, a doctor does and should prescribe medicines that will relieve his suffering even if the medications cause gross side effects. This means that dealing with agony and distress should be the priority even if it affects the life expectancy. Euthanasia follows the same theory of dealing with torment in a way to help one die peacefully out of the compromising situation.

Euthanasia should be a natural extension of patient’s rights allowing him to decide the value of life and death for him. Maintaining life support systems against the patient’s wish is considered unethical by law as well as medical philosophy. If the patient has the right to discontinue treatment why would he not have the right to shorten his lifetime to escape the intolerable anguish? Isn’t the pain of waiting for death frightening and traumatic? The argument that family heirs would misuse the euthanasia rights for wealth inheritance does not hold much water. Even in the absence of legalized mercy killing, the relatives can withdraw the life support systems that could lead to the early death of the said individual. This can be considered as passive involuntary euthanasia. Here, they aren’t actively causing the death, but passively waiting for it without the patient’s consent. Present legal restrictions leave both the incurable patients as well as pro euthanasia activists helpless who approve euthanasia as good will gesture for patient’s dignity. The right of a competent, terminally ill person to avoid excruciating pain and embrace a timely and dignified death bears the sanction of history and is implicit in the concept of ordered liberty.

View 2

Mercy killing is morally incorrect and should be forbidden by law. It is a homicide. Murdering another human cannot be rationalized under any circumstance. Human life deserves exceptional security and protection. When you can’t induce a life into a cadaver, you have no right to take away the life of an individual. Advanced medical technology has made it possible to enhance human life span and quality of life.
The same technology may sometime come up with the cure for the patient, who is classified as terminally ill. Palliative care and Rehabilitation Centers are better alternatives to help disabled or patients approaching death live a pain-free life. Euthanasia has a potential danger of misuse. There is no way you can be really sure if the decision towards assisted suicide is voluntary or forced by others. So, implementing euthanasia would mean many unlawful deaths. Legalizing euthanasia would be like empowering law abusers and increasing distrust of patients towards doctors. Mercy killing would cause decline in medical care and cause victimization of the most vulnerable section in society. Mercy killing may transform itself from the "right to die" to "right to kill".

Apart from the aforementioned reasons, there are some aspects where there is a greater possibility of euthanasia being mishandled. What if the pain threshold is below optimum and the patient perceives the circumstances to be not worthy of living? How would one know whether the wish to die is the result of unbalanced thought process in mentally ill patients or a conscious logical decision of a terminally ill patient? Laws against euthanasia and assisted suicide are in place to protect patients from unwarranted decisions. In a society where health care takes a backseat, incurring expenditure in prolonging life with disproportionate or no outcome, the apprehensions of euthanasia are far from fantasy. The Hippocratic Oath taken by medical professionals underlines self-restraint against terminating life. Nobody, including the patient or the family has the moral right to demand violation of such valued ethics of a highly esteemed profession.