



Chhatrapati Shahu Ji Maharaj  
University, Kanpur

**Answer Script Details**  
**Barcode** 10787166

**Roll No.** 24039000085  
**Total Mark** 70/75.00

**Exam** MA-III\_ODD\_EXAM\_NOV\_2025  
**Subject** A090908T - Developmental Psychology (Elective)

**Question wise Mark Summary**

**Q.No Mark Q.No Mark Q.No Mark Q.No Mark**

1A 4/5 9B 0/7

1B 4/5 9C 0/7

1C 4/5

1D 5/5

1E 5/5

1F 5/5

1G 5/5

1H 5/5

1I 5/5

2 14/15

3 0/15

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7 14/15

8 0/15

9A 0/7

**Chhatrapati Shahu Ji Maharaj University  
Kanpur, Uttar Pradesh**

PART-I

Date of Exam: 19/11/25 Shift: 3 Room No.: 24  
 Paper Code: A090908T DEVELOPMENTAL  
 Subject: PSYCHOLOGY Year/Sem: 3  
 Name of Candidate: AREEBA AFTAB  
 Roll No. 2403900085

Signature of Candidate: *Areeba Aftab*  
 Signature of Investigator: *Vaishnavi Gupta*  
 COE Facsimile

PART-II

MARKS OBTAINED										
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Total Marks in Figures						Max. Marks				
Total Marks in Words										



A090908T  
Paper Code

Signature of Evaluator

PART-III

Course: M.A. PSYCHOLOGY  
 Session: 2025-26 Year/Semester: 3  
 Subject: DEVELOPMENTAL PSYCHOLOGY  
 Paper Code: A090908T  
 Exam Date: 19/11/2025  
 Name of Candidate: AREEBA AFTAB  
 Father's Name: AFTAB AHMAD

कॉलेज का कोड College Code	परीक्षा केंद्र का कोड Exam Centre Code	प्रकार का परीक्षा Type of Exam
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ANSWER BOOKLET NO.  
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A090908T  
Paper Code



PART-IV

Enrollment Number: CSJMA24000129861  
 Candidate's Roll Number: 2403900085  
 Paper Code: A090908T

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*Areeba Aftab*  
Signature of Candidate

*Vaishnavi Gupta*  
Signature of Investigator

CS Facsimile

COE Facsimile

शेड : 1. परीक्षाओं को निर्दिष्टित दिनांक जमाना है कि आरम्भ करने से पूर्व आप पर अधिकतम सभी निर्देशों को सावधानीपूर्वक पढ़ें।  
 2. शीटों में गरी जाने वाली प्रतिलिपियाँ सादी तस्वीर से मुक्त की जाएँ। 3. शीटों को कानून का पालन और सुरक्षा से पराजने।





## Section-A

Q.1)  
Ans a.)

Interview Method: The Interview method is a qualitative research method of data collection in which the researcher asks various questions to the participants, observes their body language and facial expressions (non-verbal cues) and tries to obtain an in-depth understanding of the participant's thoughts, experiences, emotions and behavioural patterns.

There are two-types of interview methods mainly:

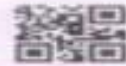
i) Structured: Researcher asks the same questions to all the participants.

→ Same questions help in cross participant response comparisons.

ii) Unstructured: Unstructured / clinical interviews have open-ended questions which are uniquely tailored to each participant's experiences.

→ "How did that make you feel?"; "What are your thoughts about that?" etc.

→ This method helps gain a rich, elaborate understanding of the ~~stion~~ participant's



experiences.

### Limitations of Interview —

- i) Unstructured interview response findings are unique to the individual so they cannot be generalized.
- ii) Interviews are time-consuming as each participant takes up minutes to hours depending upon the study.

### Strengths —

- i) Interviews provide rich, detailed, in-depth information.
- ii) Unexplored themes can be ~~use~~ unravelled via interview methods.

Example: Interviewing adolescents about the emotional impact of peer pressure experiences at school.

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Ans. b) Lifespan Development is a perspective in Developmental Psychology which states that human development is a continuous and lifelong process that encapsulates a person's entire life — from conception to death.



It is made up of four assumptions —

- i) Development is lifelong — No single stage is more important to development; infancy, adolescence, adulthood all contribute uniquely to development.

E.g.: Infants learn to walk, adolescence form personal identity, adults build careers.

- ii) Development is multidimensional and multi-directional : —

→ Multidimensional: Physical, cognitive, socioemotional factors collectively interact towards development

→ Multi-directional: Both gains & losses occur simultaneously.

E.g.: A person's vocabulary improves with age (gain) but processing speed reduces (loss).

- iii) Development is Plastic : Abilities can be fixed; they are not rigid.

E.g.: Stroke patients regaining speech via therapy (neural plasticity)

- iv) Multiple forces influence development: Biological, historical (contextual effects), non-normative and cultural factors interact together to influence lifespan development.



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Ans. c) Two determinants of Human Development are —

i) Physical development : Refers to biological growth which influences body and organ maturity.

i) Infancy : Learning to sit, crawl, stand and walk.

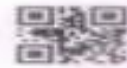
ii) Toddlerhood : Developing gross motor and fine motor skills (grasping, pinching, plucking, etc.)

iii) Childhood : Improved athletic ability; running, jumping, climbing, etc.

iv) Adolescence : Puberty, sexual maturity, development of reproductive organs and secondary sexual characteristics (facial hair in boys, breast development in girls)

Physical development continues in adulthood and declines in old-age.

2) Cognitive development : Refers to development of memory, planning, attention, concentration, logic, perspective-taking, etc.



- i) Infants develop object permanence — belief that object exist even when invisible.
- ii) Children develop concrete logic (~~2-7 yrs~~ <sup>7-11 yrs</sup>; Piaget's theory) and then abstract thinking, hypothetical reasoning in adolescence.
- iii) <sup>Young</sup> Adults develop perspective-taking while middle adults develop crystallized intelligence (knowledge from experience).

Ans. D) Difference between Growth and Development

<u>GROWTH</u>	<u>DEVELOPMENT</u>
1) Growth is linear in nature; meaning it continues to move forward.	Development is non-linear; there can be both losses and gains simultaneously.
2) Example: Physical growth — height increases as age increases; height does not <u>shorten</u> .	Example: As age increases, vocabulary improves (gain) but working memory processing slows down (loss/decline).

GROWTHDEVELOPMENT

- |    |   |  |
|----|---|--|
| 3) | Growth is unidimensional; mainly focuses on biological maturity | Development is multidimensional; social, emotional, cognitive, physical—all domains are important. |
| 4) | Growth is specific  | Development is holistic  |
| 5) | Growth stops after a certain time period                        | Development is lifelong (conception to death)  |

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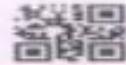
- Ans) Freud's Psychosexual Theory : i) It is a pioneering theory which states that individuals go through five stages of psychosexual development.
- ii) Each stage has a psychosexual conflict which causes conflict between the Id (pleasure instinct; pleasure principle) and the Superego (morality instinct).
- iii) The Ego (works on reality principle) has to mediate the conflict. Successful resolution will lead to healthy movement towards the next stage.
- iv) Unsuccessful resolution can cause maladaptive behaviours which can influence adult personality negatively.



The five stages are described below:

- i) Oral (Birth - 1 year) : Adequate gratification of oral needs (breastfeeding, sucking, rooting) leads to security. Neglect can result in thumb-sucking, smoking, nail-biting tendencies in the future.
- ii) Anal (1 - 3 yrs) : Toddlers feel pleasure holding/releasing bowels/urine. Too little/too much control can cause extreme orderliness/disorder as an adult.
- iii) Phallic (3 - 6 yrs) : Oedipus or Electra Complex develop. Successful resolution leads to development of Superego. Sexual impulses towards ~~same~~<sup>opposite</sup> sex parent die down eventually.
- iv) Latency (6 - 11 yrs) : Focus shifts on academics, ~~ath~~ athletics, peer-group membership. Success can build confidence ~~or~~ otherwise incompetence may develop.
- v) Genital (11 yrs - Adole. - e) : Sexual maturity develops via puberty. Successful resolution leads to mature sexuality, marriage and child rearing.

This theory focuses excessively on sexual impulses and ~~the~~ Sigmund Freud never actually researched on children; hence, it was criticized.



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Ans.)  
6)

### Main developmental issues

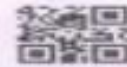
The developmental issues in each life stage are varied. They are as follows:

- 1) <sup>(Birth - 1yr)</sup> ~~(Birth - 1yr)~~ <sup>Infancy</sup>: Complications in prenatal (oxygen deprivation, infection, premature birth) can hinder physical and cognitive growth (brain development and organ maturation).
- 2) <sup>early</sup> ~~(2 - 6 yrs)~~ <sup>(2 - 6 yrs)</sup> <sup>Childhood</sup>: Potty-training, speech & language development, ~~and~~ are crucial milestones. Children with Speech disorders (echolalia, pronunciation issues, mutism) or Autism Spectrum Disorder face difficulty in social interactions.
- 3) <sup>Late Childhood</sup>: Development of basic (6 - 11 yrs) reading, writing, math, ability. Formation of logical thought process. Failure can lead to reduced school performance.
- 4) <sup>Adolescence</sup>: Delayed puberty / sexual maturity (secretion of testosterone in males; estrogen & progesterone in females) can cause distress and delay the progression towards adulthood.



Ans 9.) Emotional Development during infancy —

- i) Rapid brain and sensory development takes place in infants which influences their emotional capability.
- ii) Infancy (period from birth to 1 yr) includes development of emotions like:
  - Distress (crying, for example)
  - Joy (smiling)
  - Contentment (laughing, sighing contentedly)
- iii) Infants form strong attachment with caregivers:
  - Separation Anxiety develops after 6 months
  - Example: Infant cries when mother puts him down on the bed; cries in the absence of familiar guardians (mother/father), etc.
- iv) Emotional basic needs are expressed by cooing, babbling, crying and laughing.
- v) Infants show more emotional responsiveness by beginning to make eye-contact, waving, grasping, smiling, etc.

Ans.  
h)

## Cognitive Development in Early Childhood —

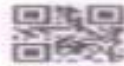
As per Jean Piaget's theory of Cognitive Development, the early childhood period ranges from 2-7 yrs of age. It is called the Preoperational Stage.

### Preoperational Stage (2-7 yrs)

- i) During these "Play Years" of the child's life, he/she develops language, use of symbols, pretend-play and imagination.
- ii) However, logical thought is not yet developed.
- iii) Thinking is dominated by egocentrism (inability to see from others' perspective; thinking <sup>one</sup> can see the world in the way they <sup>see</sup>), centration (focusing only on one aspect at a time and lack of conservation).

For example: i) Child believes that a taller, narrow-glass holds more water than a short, wider glass even though the quantity is same. (centration present; lack of conservation)

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- ii) Child engages in making <sup>\*</sup>imaginary food during kitchen-related pretend play.

Logical thought is developed in the age of 7-11 yrs. (mid Concrete Operational Stage).

Ans) Social development in adolescence —

- i) Marked by a shift <sup>✓</sup> from primary familial ties to interest in forming friendships and becoming a part of a peer group.
- ii) Friendships become central to one's development. They are not based on play anymore; rather they are based on loyalty, trust and shared values.
- iii) Sometimes, adolescents may engage in deviant and risky behaviour to <sup>\*</sup>gain peer approval —
- i) Changing appearance
  - ii) Using substances
  - iii) Adopting values of peer group of interest
- iv) Peer Pressure is a crucial component. Some teenagers experience bullying and mistreatment if they do not conform to a popular group's demands.

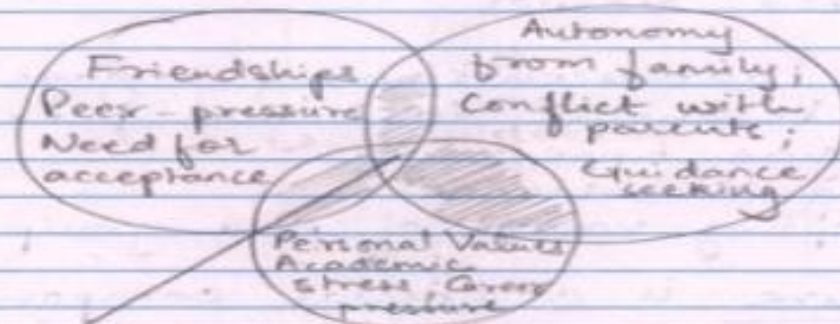


v) Familial ties are important but primarily for guidance purposes.

vi) Identity Formation is the key component. Adolescents explore different personal values, goals, roles to figure out what they align with.

Example: An adolescent explores different career paths in psychology, journalism, arts, law, etc. He talks to mentors, does internships, talks to adults, focuses on his interests and eventually makes a firm decision (Identity formation).

vi) Independence and autonomy from family can cause parent-child conflicts.



↓  
SOCIAL DEVELOPMENT FACTORS IN ADOLESCENCE

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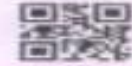
### Section B

- Q2) Human development refers to the systematic consistencies or changes that occur throughout the lifespan — from conception till death. It is made up of interacting factors like:
- i) Physical development: Genetic, heredity, biological growth (height, weight, size, brain development, etc.)
  - ii) Cognitive development: Memory, concentration, problem-solving, decision-making, attention, planning development.
  - iii) Socioemotional development: Relationships, emotional regulation, career building, etc.

Human development is a lifelong, continuous and dynam process.

The stages of human development are

- i) Prenatal (Conception to Birth): A single-celled zygote transforms into a neonate with astounding capacities to adjust to life outside the womb. The stages in this are:
  - i) Prenatal Development
  - ii) Childbirth (labour)



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ii) Infancy (Birth-1 year) and Toddlerhood (1-3 yrs)

Rapid brain development and sensory-motor development takes place. The infant establishes first intimate ties with caregivers, toddler learns to walk with improved co-ordination, develops language and a sense of the world.

iii) Early Childhood (3-6 years)

- The "Play Years"; Language develops properly.
- Child indulges in imagination and pretend-play.
- ~~Initial~~ Caregiver relationship is strong.
- Initial peer connections begin to develop via playing.

iv) Middle Childhood (6-11 yrs)

- The "School Years"
- Improved reading, writing, math capabilities
- Improved & refined motor skills (climbing, jumping, running)
- Develops logical thought process (concrete).

v) Adolescence (Usually till 18 yrs)

- Period of "Identity Formation"
- Puberty hits; sexual maturity and growth



Spurt occurs.

- Exploration of values, goals, beliefs, lifestyles, career paths
- Autonomy needs from family

#### vi) Early Adulthood (18-40 yrs)

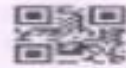
- Young adults move away from home, pursue higher education.
- Focus on developing intimate relationships, careers, child-rearing, and exploring lifestyle choices.

#### vii) Middle adulthood (40-65 yrs)

- Most people are at the peak of their careers.
- Help their parents with ageing and their own kids with navigating independence.
- Become aware of their own mortality.


#### viii) Late Adulthood (65 yrs - death)

- Most people reflect on the meaning of their life (Erikson's Integrity v/c Despair)
- Adjust to retirement, physical decline, death of an intimate partner
- More acceptance of death.

Section - C

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Ans-7) Identity Formation during adolescence

- i) James Marcia (1966) expanded Erik Erikson's Identity v/s Role Confusion stage of adolescence.
- ii) Where Erikson described the importance of identity formation, Marcia described the components and mechanisms of how identity ACTUALLY develops!
- iii) Marcia said that identity formation depends on two processes:
  - 1) Exploration (Crisis): Actively searching for alternative options like values, beliefs, goals, career paths, etc.
  - 2) Commitment:  Taking a firm decision to a specific pathway in life.

Based on high/low exploration and high/low commitment, 4 identity statuses are developed.



### A) Identity Achievement

- High Exploration / High Commitment
- Adolescent has actively explored their options and made a firm decision.
- E.g.: A teenager explored career paths, talked to mentors, did internships and chose a career that best fits.
- "Most Mature" ~~Stage~~ Status.

### B) Moratorium

- High Exploration / Low Commitment
- Classic "Identity Crisis Stages"
- Individual is actively searching options but no firm decision is made
- Characterized by: Confusion, curiosity, lack of self-awareness
- Most adolescents are in this stage.



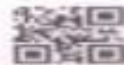
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### C) Foreclosure

- Low Exploration / High Commitment
- Adolescents usually adopt parents' mentors' or society's expectations.
- E.g.: A student wants to become a doctor because their parents want them to.
- There is stability but no autonomy or self-awareness.
- May cause dissatisfaction in future if pathway doesn't align with internal values.


### D) Identity Diffusion

- Low Exploration / Low Commitment
- Adolescent has no interest in exploring options nor deciding future goals.
- Usually due to low self-esteem, chaotic environment at home, depression, anxiety or substance addiction.



iv) As per Erikson's Identity v/s Role Confusion, successful identity achievement leads to a stable, well-adjusted personality in adulthood.

Failure can cause confusion about identity and roles and responsibilities and hinder growth.

Marcel's Identity Approach	Low Exploration 	High Exploration
Low Commitment	Identity Diffusion	Moratorium "Identity crisis"
High Commitment	Foreclosure	Identity Achievement "Most mature Status"

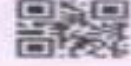


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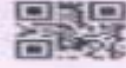
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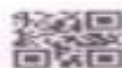
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