



Principles of **Psychology** for Graduate **NURSES**



PR Nalini



Contents

1. Introduction to Psychology

1

- History and Origin of Science of Psychology 1
- Scope of Psychology 4
- Branches of Pure Psychology 4
- Branches of Applied Psychology 7
- Sub-fields in Psychology 9
- Psychology Relevance to Nursing 10
- Career in Psychology 13
- Methods of Psychological Assessment 14

2. Biology of Behavior

19

- Body-Mind Relationship: Modulation Process in Health and Illness 19
- Genetics and Behavior 20
- Nervous System 29
- The Neuron 31
- Psychology of Sensation 32
- Muscular and Glandular Behavior 34
- Nature of Behavior of the Organism 35
- Integrated Response 35

3. Cognitive Processes

38

- Areas of Cognitive Processes 39
- Attention 39
- Perception 46
- Learning 55
- Memory 67
- Thinking 79
- Intelligence 85
- Aptitude 93

4. Motivation and Emotional Processes

100

- Motivation, Emotion, and Stress 100
- Motivation: Meaning, Concepts, Type, Theories, Motives, and Behavior, Conflict Resolution 100
- Emotion 116
- Stress and Stressor 120
- Attitude 123
- Psychometric Assessment of Emotions and Attitudes 124
- Alterations in Emotions 125

5. Personality	128
<ul style="list-style-type: none"> • The Type Approach 129 • Trait Theories of Personality 132 • Learning and Behaviorist Theories of Personality 136 • Psychometric Assessment of Personality 139 	
6. Developmental Psychology	147
<ul style="list-style-type: none"> • Development of Psychology of People at Different Ages (Infancy to Old Age) 147 • Psychology of Vulnerable Individuals—Challenged, Women, Sick, etc. 152 • Psychology of Groups 155 	
7. Mental Hygiene and Mental Health	159
<ul style="list-style-type: none"> • Origin of the Mental Hygiene Movement 159 • Concepts of Mental Hygiene and Mental Health 159 • Characteristics of Mentally Healthy Person 163 • Warning Signs of Poor Mental Health 164 • Promotion of Mental Health: Strategies and Services 165 • Prevention 165 • India—Mental Health Facilities 168 • Ego Defense Mechanisms 169 • Personal and Social Adjustment 173 • Guidance and Counseling 174 	
8. Psychological Assessment and Tests	178
<ul style="list-style-type: none"> • Psychological Tests and Assessments 178 • Psychological Tests 179 • Development of Psychological Testing 181 • Characteristics of Psychological Testing 182 • The Principles of Psychological Assessment 183 • Uses of Psychological Tests 184 • Nature and Use of Psychological Tests 184 • Professional Psychology 185 • Forensic Psychology and Legal System 186 • Role of a Nurse in Psychological Assessment 186 	
9. Application of Soft Skill	189
<ul style="list-style-type: none"> • Concept of Soft Skill 189 • Types of Soft Skill—Visual, Aural, and Communication Skills 190 • Way of Communication 192 • Building Relationship with Client and Society 192 • Interpersonal Skill (Interpersonal Relationship) 193 • Barriers and Strategies to Overcome Barriers 193 • Survival Strategies—Managing Time 193 • Applying Soft Skills in Workplace 194 • Use of Soft Skills in Nursing 195 	

10. Self-empowerment	197
• Dimensions in Self-empowerment	197
• Planning in Decision-making	197
• Creative Input	198
• Sources for Novelty	198
• Support of Working Group	198
• Group Decision-making	198
• Importance of Women's Empowerment on Society	198
• Professional Etiquette in Personal Grooming	199
• Role of Nursing in Empowering Other	200
<i>Previous University Examination Papers</i>	203
<i>Index</i>	213

Developmental Psychology

Learning Objectives

- Developmental psychology
- Psychology of people at different ages from infancy to old age
- Psychology of vulnerable individuals—challenged, women, sick, etc.
- Psychology of groups

Developmental psychology explains the changes occurred in human growth from birth till death. Developmental psychologists try to understand complex behavior by studying their beginning and in orderly ways which they change or develop over the lifespan. It depends on past experiences, genes, and environmental conditions of human life.

It focus upon development during childhood, adolescence, adulthood, and old age. Developmental psychologists also study on a wide range of theoretical areas, such as biological, social, emotion, and cognitive processes. In 1980, researchers of Japan concentrated more in this field.

Finally, developmental psychologists hope to optimize development, and apply their theories to help people in practical situations (e.g., help parents develop secure attachments with their children).

Definitions

The human being is never static from conception to death. Development means “a progressive series of changes that occur in an orderly predictable pattern as a result of maturation and experience”.

The branch developmental psychology studies physical, cognitive, and social changes throughout the lifespan. It brings awareness of goals and values in modifying human behavior to reach their destinations.

DEVELOPMENT OF PSYCHOLOGY OF PEOPLE AT DIFFERENT AGES (INFANCY TO OLD AGE)

The industrial growth gave more prominence to study developmental psychology in workforce, stress, emotional levels, etc. Some other causes depend on childhood experiences of family, education, and social aspects of the individual.

Theories of Developmental Psychology

Evolutionary Developmental Psychology

Charles Darwin in 1877 published a paper with details on development of innate forms of communication based on scientific observations of his infant son, Doddy. He was the first person who conducted systematic study of developmental psychology.

Charles Darwin applied basic principles on natural selection in Theory of Evolution. Darwin gave importance to environment in social and cognitive development of the individual.

Later in 1882, another German physiologist, Wilhelm Preyer published a book based on specific discipline "The Mind of the Child".

In 1900, some other theorists dominated the field with their extensive theories of human development, Jean Piaget (1896–1980), Lev Vygotsky (1896–1934) and John Bowlby (1907–1990).

Cognitive Development

Jean Piaget explained that the moral development is different in children (**Fig. 6.1**) compared to adults. Each child may be different from another.

Expanding on Piaget's work, Lawrence Kohlberg determined that the process of moral development was principally concerned with justice, and that it continued throughout the individual's lifetime.

Most of these theorists explained all these from their personal lives of family members.

Lev Vygotsky (**Fig. 6.2**) was a Russian theorist from the Soviet era, who posited that children learn through hands-on experience and social interactions with members of his/her culture.

Jean's piaget-cognitive development.

- Piaget provided support for the idea that children think differently than adults and his research identified several important milestones in the mental development of children

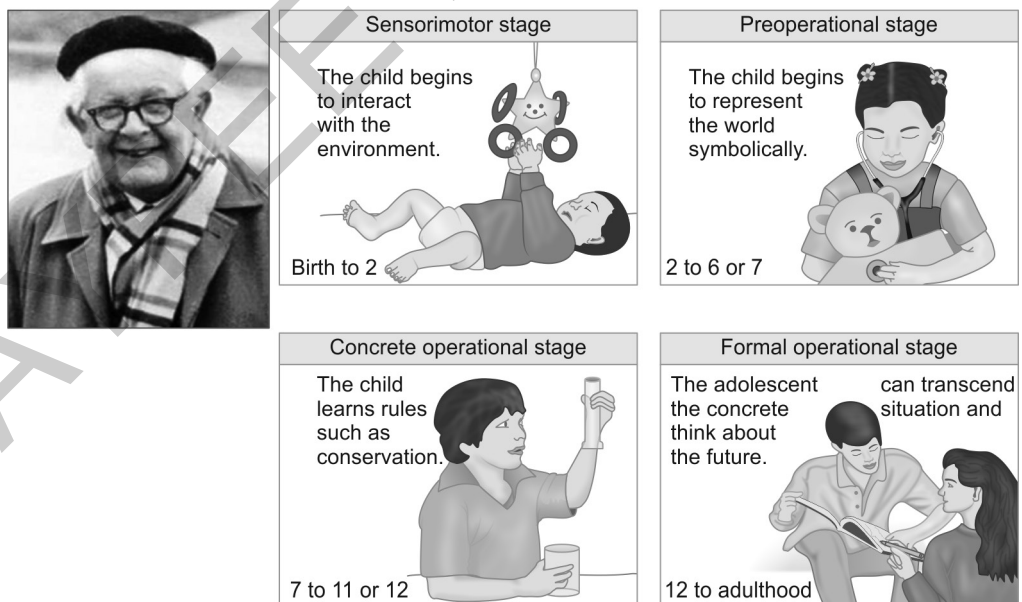


Fig. 6.1: Jean Piaget stage of cognitive development

Vygotsky's theories stress the fundamental role of social interaction in the development of cognition.

Attachment Theory of Development

He was the first attachment theorist, describing attachment as a lasting psychological connectedness between human beings.

According to Bowlby (**Fig. 6.3A**), attachment developed in children by providing basic necessities for survival. Bowlby described attachment as a biological system of support of warm, intimate, and close relations from mother to infants to face impulses in improvement of their survival. It is also associated with emotional bonds of children.

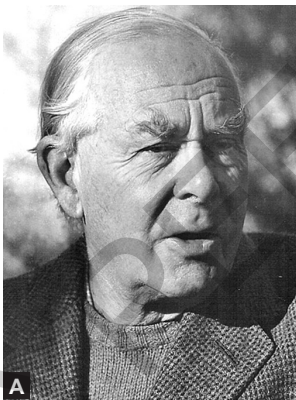
Attachment feeds on body contact and familiarity (**Fig. 6.3B**). It forms basis of personality development and socialization (evolutionary and biological significance).



Fig. 6.2: Lev Vygotsky

Psychosexual Development

Sigmund Freud believed there is tension between the conscious and unconscious because the conscious tries to hold back what the unconscious tries to express. Freud developed three personality structures which are id functions on pleasure principle, ego on realistic, and super-ego stands on morality. Based on this, Freud proposed four universal stages in personality development. It is the source of the child's psychosexual energy (**Table 6.1**).



A



B

Figs. 6.3A and B: (A) John Bowlby; (B) Example for attachment theory

Table 6.1: Stages of psychosexual development

S. no.	Stage	Age group	Erogenous zone
1.	Oral	0 to 8 months	Mouth
2.	Anal	18 months to 3 years	Bowl and bladder elimination
3.	Phallic	3 to 5 years	Genital
4.	Latent	6 years to puberty	Sexual interest mature
5.	Genital	Puberty to death	Matured sexual interest

Some developmental psychologists studied developmental change covering the lifespan from conception to death (**Fig. 6.4**). Among the different developmental psychologists, the views presented by Erickson and Havighurst appear to give a comprehensive picture of development of human individual from infancy to old age.

Erik Erickson (1902–1994) was a student of Sigmund Freud. He offered a modified Freudian view of development of personality (**Table 6.2**). He gave importance to social and cultural aspects of development of personality.

According to Erikson, the developmental task arises in individual in certain period. The development of psychology is classified into different stages in human growth. Infancy, childhood, adolescence, adulthood, and old-age.

Infancy (Birth to 18 months): This stage covers early days after birth, nearly two weeks of life. It is oral stage. The development is very short in this level. The new born infant must make four major adjustments to postnatal life. The child has to adjust to the changes of temperature from mother’s womb to outside of it.



Fig. 6.4: Stage of proximal development

Table 6.2: Erikson psychosocial development

Childhood	Trust vs. mistrust	Faith in the environment and future environment	Suspicious, fear of future events
	Autonomy vs. doubt	A sense of self-control and adequacy	Feelings of shame and self-doubt
	Initiative vs. guilt	Ability to be a “self-starter,” to initiate one’s own activities	A self of inadequacy to be on one’s own
	Industry vs. inferiority	Ability to learn how things work, to understand and organize	A sense of inferiority at understanding and organizing
Adolescence	Identity vs. confusion	Seeing oneself as a unique and integrated person	Confusion over who and what one really is
Adulthood	Intemacy vs isolation	Ability to make commitments to others, to love	Inability to form affectionate relationships
Old age	Integrity vs. despair	A sense of integrity and fulfillment, willingness to face death	Dissatisfaction with life, despair over prospect of death

The infant may feel difficulty in early hours of birth and slowly adjusts to new atmosphere. The infant may struggle to fulfill hunger drive by breast feeding (sucking), swallowing, and elimination.

This period extends from birth to 18 months of age. This is called the age of trust vs. mistrust.

Trust versus Mistrust

The infant who comes to the new environment from mother's womb needs only nourishment. The baby responds to noises and other stimuli. The infant may feel discomfort in adjustment. The caregivers provide attention toward infants in every second of early 18 months while learning new tasks of crawling, sitting, standing, and in imitation creates trust in them. Thus, a child cannot learn to walk or toilet training without the support of mother or caregivers.

In this period, child observes the attention of mother and family members who are assisting them in learning process which gives clarity on trust. The infant learns to trust others and develops confidence. It provides affection and love toward them and expectations from them in fulfilling their desires. If the infant fails to get attention from caregivers, it causes mistrust which affects the personality in later stages of life.

- **Toddler:** This stage ranges from 18 months to 3 years.
- **Autonomy versus shame:** The child learns new tasks by imitation of family members, friends, and neighborhood. The children try to solve their problems by managing friendly relations. The child needs guidance. It is called autonomy vs. shame. The child takes solids in this age and eliminates body wastes. He tries to speak openly in the presence of family members and others. The child develops doubt about its abilities. The child attends to school by learning all these and tries to adjust with classmates.

The child's needs and environmental factors, requires the caretaker's careful and constant attention.

- **Preschool:** This stage extends from 3 years to 5 years.
- **Initiative versus guilt:** The child will begin to imitate the parents of the same sex and unconsciously wish to replace that parent in the family. The caretaker recognizes that the child's creative effort in attempting to do some activities is encouraged, the crisis will be resolved in favorable direction and this outcome, if repeated, should influence the future initiative. Otherwise, the child develops feelings of guilt.

During this period, the little boy who always had a great deal of attention and love from his mother begins to feel very possessive toward the mother. He develops competitive feelings toward his father and tries to gain mother's love. Similarly, the girl wants to gain father's attention toward her and tries to develop competitive spirit in gaining attention of father toward her instead of their mother.

- **School age:** This period ranges from 5 years to 12 years.
- **Industry versus inferiority:** During this period, child develops interest toward opposite sex. In latency stage, child suffers insufficient sleep by fantasy. The child wants spare life with peer group to share their feelings and thoughts. He develops skills which are useful to compete and cooperate in getting success in his future. The child develops sense of industry versus inferiority. The failure of tasks makes him to feel inferior in the presence of elders.
- **The adolescence (Teens):** This period is from 12 years to 20 years.

It is called as transition period; many changes occur in this age in both genders. It is puberty period for sexual, social, and emotional changes in human behavior.

Stanley Hall has rightly described this period as a **"period of storm and stress"**.

- **The role confusion/identity confusion:** The boys and girls get attraction to opposite sex. The adolescence is newly concerned with how he or she appears to others. The children develop a sense of sexual identity.

It is a turning point in human life; by following good guidance, he will develop a sense of self or identity which makes him a good human being. The wrong guidance or indiscipline makes him to suffer from role confusion/identity confusion.

- **The adulthood:** The early adulthood extends from 20 years to 30 years.
- **Intimacy versus isolation:** The new responsibilities can create tensions and frustrations, and one solution involved is an intimate relationship with family. This situation leads to a crisis called intimacy vs. isolation.

The adults also deeply think to choose life partner to share his feelings of love and affection. Sometimes isolations lead to conflicts and frustrations. The unemployment may lead to suffering economic problems.

The later adulthood starts from 30 years to 65 years. Most of the people face difficulties in managing family, adjustment to life-partner, supporting old parents, taking care of new entries in family, and managing finances for well and healthy being of the family. This stage is called generativity vs. stagnation. If this goal is not achieved, the individual will be disappointed and experience a feeling of stagnation.

- **The old age:** The old age starts after 65 years. Most of the people in this age want to settle down the issues of family and try to plan for rest in this period.
- **The integrity versus despair:** The crisis in this stage is the integrity vs. despair in which the person finds meaning in memories or instead looks back on life with dissatisfaction. There is lack of strength, physical energy, and decreased income, sometimes death of spouse and unfulfilled desires lead to decline of health.

PSYCHOLOGY OF VULNERABLE INDIVIDUALS— CHALLENGED, WOMEN, SICK, ETC.

According to South African Concise Oxford dictionary, “Vulnerable” originated from the Latin term “vulnerare,” which means “to wound.” Dictionary meaning of vulnerable: “exposed to being attacked or harmed, either physically or emotionally.”

The vulnerability of individuals is extended to race, ethnicity, age, gender, and other causes to feel weak for their progress. Vulnerable groups are classified into three categories.

The defects in physical growth are one of the risk factors for infants and sick group. The chronic conditions, respiratory problems, diabetes, hypertension, and heart diseases also may cause vulnerability.

Managing mentally retarded and providing mental recovery are difficult tasks to family members. It is of high risk to control the chronic patient without the support of psychiatrist or clinical psychologist. The isolation and addiction for alcohol and drugs may lead to suicidal tendencies in individuals.

The social circumstances lead to another type of vulnerability; for example: Poverty, unemployment, illiteracy, caste system, racial and ethnic minorities, and maladjustment etc. Superstitions in orthodox families are also one of the social domains of vulnerability.

In late childhood, children are not strong compared to elders. The physical handicap is also another drawback to fulfill their desires of completing tasks. It causes for difficulty in motor and sensory activities.

Some other social factors of vulnerability in children are broken families, step-parents, ill treatment, and poverty. It gives chance of isolation and depressed life in children. Disability, emotional problems, substance use, direct experience of physical or sexual violence, and severe chronic illness are also causes of vulnerability (**Fig 6.5**).

Some other factors of vulnerability in girl children (**Fig. 6.6**) are negligence and gender partialities among the parents and other family members. Discouragement of education, employment, and lack of freedom are also social domains of vulnerability in girl children.

With an estimated 12.6 million children engaged in hazardous occupations (2001 Census), for instance, India has the largest number of child laborers under the age of 14 in the world. Among children, there are some groups like street children and children of sex workers who face additional forms of discrimination. A large number of children are reportedly trafficked to the neighboring countries. Trafficking of children also continues to be a serious problem in India.

National girl child day celebration was started by the Women and Child Development Ministry in 2008.

The aims of these programs are to bring awareness on gender equality, importance to female literacy, legal rights, medical care, and protection from discrimination. It is also aimed to eradicate child marriages and violence to women.

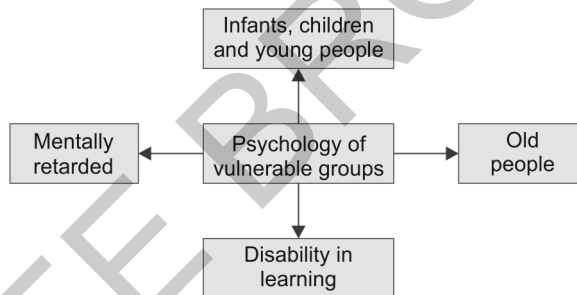


Fig. 6.5: Health domains of vulnerable populations



Fig. 6.6: Vulnerability in children

Women

The vulnerability of women and sick is connected to the inability to cope with day-to-day life. The women are vulnerable in pregnancy, in early days after delivery, menstrual disorders, etc. This situation affects different aspects of an individual's life—which may be physical, psychological, social, spiritual, or developmental in nature.

Some women face problems such as marital problems, dowry harassment, sexual harassment, and gender inequalities in working areas. It creates psychological disturbance, depression, and frustration and even leads to suicidal deaths.

In India, the average maternal mortality ratio at national level is 540 deaths per 100,000 live births (National Family Health Survey-2, 2000).

The rural MMR (maternal mortality death) is 617 deaths of women aged between 15 and 49 years per one lakh live births (NFHS 2000).

Sick

The thought of severe sickness may reduce hopes in life, which leads to depression in sick group. The burden of managing family, children, and old parents also causes frustrating moments for sick. It reduces lifespan.

For example, the number of uninsured patients younger than 65 years of age grew by nearly 6 million between 2000 and 2004, with the greatest growth in those who are poor (46%) or near-poor (22%). In this population, approximately 35–45% have at least one chronic medical condition. More than half (58%) of those with a chronic illness without insurance reported that they did not buy a prescription drug in 2003 because of cost compared with 39% of those with publicly funded insurance and 34% of those with private insurance.

The numbers of these vulnerable populations are increasing, not only as the ranks of the uninsured grow, but as the population ages. Some of the health conditions make him to depend on others and make him to become handicap.

Disabilities are another barrier to suffer life-long. They suffer for food, psychological support, and other basic needs. It creates tensions and irrational fears in leading life. In India, nearly 21.9 million people are suffering with disabilities. 2.13% of disabled population are suffering.

Elderly

In India, elderly was not a vulnerable group in previous decades.

According to data on the age of India's population, in Census 2001, there were a little over 76.6 million people above 60 years, constituting 7.2% of the population. The number of people over 60 years in 1991 was 6.8% of the country's population. Overall, women in 45 to 64 years of age who are unemployed and uninsured with lower incomes and education levels tend to report the poorest health status (**Table 6.3**).

The death of spouse, poverty, and drought situation are the causes of elderly as vulnerable. The isolation, migration, and lack of love and attention create tension in elderly. The lack of psychological support reduces the life span in our country. Recently, Government supported special schemes to reduce the vulnerability in elderly by improving medical facilities, insurance schemes, and traveling benefits to senior citizens. Some organizations provide special opportunities to the retired group.

Table 6.3: The number of disabilities in India in 2002

Disability Data as per National Survey Organization (NSSO) 2002	
Disability	Percentage among total population
Movement	51%
Seeing	14%
Hearing	15%
Speech	10%
Mental	10%

Mentally Retarded

The chronic illness and prolonged disability make the person feel anger on him and on others. They need the support of relationships to recover from vulnerability. The psychological support is more essential for mentally retarded. The proper attention of love and affection in family and economic support are important aspects to reduce the mentally retarded.

The lack of awareness on psychological disorders is the main cause of vulnerability. At primary level, depression, distress, isolation, and other psychological disturbances can be solved by counseling.

Eighty-seven percent of those of 65 years and older have one or more chronic conditions, and 67% of this population have two or more chronic illnesses.

The strength of psychologists, clinical psychologists, and psychiatrists in the country can reduce the vulnerability of mentally retarded.

Mental Health Act drafted by Parliament in 1987 replaced the Indian Lunacy Act in 1912.

Sexual Minorities

The sexual minorities are identified as gay and hijra. The discrimination of these creates inferiority among this group. Individuals who are identified as having the same-sex sexual preferences are ridiculed and ostracized by their own family and are left with very limited support structures and networks of community that provide them conditions of care and support. Their needs and concerns are excluded from the various health policies and programs. In recent days, these are also forming groups to solve their problems with the support of Government.

India declares freedom of sexual orientation a fundamental right. "Discrimination against an individual on the basis of sexual orientation is deeply offensive to the dignity and self-worth of the individual."

The stress-related problems are increased in sexual minorities due to stigma. In sexual minority group, behavioral changes of stigma lead to problems of coping regulation, social and cognitive process, and risk factors of psychopathology.

PSYCHOLOGY OF GROUPS

The group is an important process in managing healthy social relations of society.

WE Bogardus defined that the term group refers to "number of units of anything to close proximity with one another."

MacIver and Page said a group refers to "any collection of human beings, brought into social relationships with one another."

These are also useful in learning, working, problem solving, and planning of major projects in day-to-day life. The group activity is an essential activity in every path of life. The individual's behavior is entirely different when he is in group. The addiction therapies of alcoholism and drug addiction are treated by group therapies.

Group Structure

In structure of group, two or more are necessary to form a group. The forming of group is based on purpose and role of the member and managing group activities. The responsibility is an important process in achieving goal and social interactions in every level of the process.

There are mainly two types of groups:

1. Primary groups
2. Secondary groups.

Primary Groups

CH Cooley "by primary group meant "those characterized by intimate face to face association and cooperation. They are primary in several senses, but chiefly they are fundamental informing social-nature and ideals of the individual." For example, Family, friends, etc.

Primary groups are also the key means of socialization in society, the main place where attitudes, values, and orientations are developed and sustained.

Secondary Groups

According to Cooley, "Secondary groups are wholly lacking in intimacy of association and usually in most of the other primary and quasi-primary characteristics." E.g.: State, University, Trade unions, etc.

The secondary groups are large in size and usually formally organized. They are an important place for socialization, but secondary to primary groups.

The Psychological Significance of Groups

The people are capable to live alone, but they prefer to be in company by sharing the values, problems in social interaction. They may get solution to several issues and feel pleasure leading life in group.

The Group Affiliation in Groups

The group interaction may provide support in solving major projects by role of different members to face the challenges by assistance, cooperation, and group discussion for both psychological and social support in all levels of their process. It is responsibility of each individual in the team to accept with group norms.

Leon Festinger's Theory of Social Comparison (1950, 1954) suggested that in many cases people join with others to evaluate the accuracy of their personal beliefs and attitudes.

Stanley Schachter (1959) explored this process by putting individuals in ambiguous, stressful situations and asking them if they wished to wait alone or with others.

Individuals in groups can secure advantages and avoid disadvantages by their interest in adjusting to different people in the groups.

A group may include many talented individuals, but they must learn how to pool their individual abilities and energies to maximize the team's performance. In team work, success

depends on coordination from all sides of direction in reaching destination. They may face barriers or frustration in getting solutions. The noncooperation leads to failure in reaching targets.

Social loafing can be a problem because one way to overcome it is by recognizing that each group member has an important part to play in the success of the group.

Group Dynamics

Group dynamics is a system of behaviors and psychological processes. The choice in choosing leaders, allotting work is based on talent, leadership qualities, impartial of caste system, racism, gender inequalities, personal interest in purpose of success, and peaceful atmosphere in achievement. These applications of the field are studied in psychology, sociology, anthropology, political science, epidemiology, education, social work business, and communication studies.

In the modern society, most of the recruitment is getting support of psychologists to deal with behavior. Groups not only generate more ideas and possible solutions by discussing the problem, but they can also more objectively evaluate the options that they generate during discussion.

CONCLUSION

The view of adjustment and dynamics influences on reciprocity between children and family. Developmental psychology helps nurses in understanding emotional, intellectual thoughts, feelings, and attitudes. It gives special guidance in adjusting with patients of different age groups to diagnose and treatment. The knowledge of developmental psychology helps nurses to deal the patients in group therapies of addiction and drugs. The awareness of the psychology of vulnerable may help nurses in understanding their weakness in social adjustment and other complicated situations. The special knowledge on psychology of social groups helps nurses in health awareness of development of community projects in immunization programs and prevention of infectious diseases. It also helps nurses in changing superstitions and beliefs in rural communities.

QUESTIONS

Essay Questions

1. What do you mean by group of psychology? Describe psychology of people of different ages.
2. Discuss the behavioral changes that occur in stages from infancy to old age.

Short Notes

1. Vulnerable groups.
2. Psychological development during adolescence.
3. Explain the stages of development.
4. Describe psychological needs of patients.
5. Assessment of personality.
6. Explain psychological needs of women.

Brief Questions

1. Geriatric problems.
2. Psychological needs of women.
3. Explain the psychology of adolescence.
4. Enumerate the types of developmental psychology.
5. List any four features of psychology of sick people.

Fill in the Blanks

1. Developmental psychology explains the changes occur in _____ from birth till death. (human growth)
2. Freud proposed four universal stages in personality development of child's psychosexual energy—oral stage, _____, phallic stage, and genital stage. (anal stage)
3. _____ called as transition period as many changes occur in this age in both genders. It is puberty period for sexual, social, and emotional changes in human behavior. (adolescence)
4. Infants, children, and sick are called as _____ group. (vulnerable)

Multiple Choice Questions

1. Autonomy vs shame and doubt is seen in
 - a. Infancy
 - b. Toddler
 - c. School age child
2. Intimacy vs isolation is seen in
 - a. Young adulthood
 - b. Adolescence
 - c. Late adulthood
3. Sigmund Freud psychosexual development stages
 - a. Anal
 - b. Oral
 - c. Both

Answers

1. b

2. a

3. c

Principles of Psychology for Graduate **NURSES**

Principles of Psychology for Graduate Nurses provides valuable insight into the nature and the background of the subject Psychology. This book is designed on the principles of psychology and set as per revised Indian Nursing Council (INC) syllabus. It is also useful to those working in the disciplines of all the categories of the nursing professions, sociology, education, social work and social sciences.

The entire book is updated according to the current concepts of the subject. The diagrams are presented with examples for easy understanding of the topics of the general psychology. It helps in preventing and rehabilitate steps to achieve the targets of the individuals and their behavior. This book is not just theory-oriented but also deals in all aspects of practical knowledge. This book satisfy the academic needs and help them in understanding the nursing course. It also enables the nursing students for better understanding of the general psychology of people.

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