2020

AP[°] Research Academic Paper

Sample Student Responses and Scoring Commentary

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- **☑** Scoring Guideline
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The Response				
Score of 1 Report on Existing Knowledge	Score of 2 Report on Existing Knowledge with Simplistic Use of a Research Method	Score of 3 Ineffectual Argument for a New Understanding	Score of 4 Well-Supported, Articulate Argument Conveying a New Understanding	Score of 5 Rich Analysis of a New Understanding Addressing a Gap in the Research Base
Presents an overly broad topic of inquiry.	Presents a topic of inquiry with narrowing scope or focus, that is NOT carried through either in the method or in the overall line of reasoning.	Carries the focus or scope of a topic of inquiry through the method AND overall line of reasoning, even though the focus or scope might still be narrowing.	Focuses a topic of inquiry with clear and narrow parameters, which are addressed through the method and the conclusion.	Focuses a topic of inquiry with clear and narrow parameters, which are addressed through the method and the conclusion.
Situates a topic of inquiry within a single perspective derived from scholarly works OR through a variety of perspectives derived from mostly non-scholarly works.	Situates a topic of inquiry within a single perspective derived from scholarly works OR through a variety of perspectives derived from mostly non-scholarly works.	Situates a topic of inquiry within relevant scholarly works of varying perspectives, although connections to some works may be unclear.	Explicitly connects a topic of inquiry to relevant scholarly works of varying perspectives AND logically explains how the topic of inquiry addresses a gap.	Explicitly connects a topic of inquiry to relevant scholarly works of varying perspectives AND logically explains how the topic of inquiry addresses a gap.
Describes a search and report process.	Describes a nonreplicable research method OR provides an oversimplified description of a method, with questionable alignment to the purpose of the inquiry.	Describes a reasonably replicable research method, with questionable alignment to the purpose of the inquiry.	Logically defends the alignment of a detailed, replicable research method to the purpose of the inquiry.	Logically defends the alignment of a detailed, replicable research method to the purpose of the inquiry.
Summarizes or reports existing knowledge in the field of understanding pertaining to the topic of inquiry.	Summarizes or reports existing knowledge in the field of understanding pertaining to the topic of inquiry.	Conveys a new understanding or conclusion, with an underdeveloped line of reasoning OR insufficient evidence.	Supports a new understanding or conclusion through a logically organized line of reasoning AND sufficient evidence. The limitations and/or implications, if present, of the new understanding or conclusion are oversimplified.	Justifies a new understanding or conclusion through a logical progression of inquiry choices, sufficient evidence, explanation of the limitations of the conclusion, and an explanation of the implications to the community of practice.
Generally communicates the student's ideas, although errors in grammar, discipline-specific style, and organization distract or confuse the reader.	Generally communicates the student's ideas, although errors in grammar, discipline-specific style, and organization distract or confuse the reader.	Competently communicates the student's ideas, although there may be some errors in grammar, discipline-specific style, and organization.	Competently communicates the student's ideas, although there may be some errors in grammar, discipline-specific style, and organization.	Enhances the communication of the student's ideas through organization, use of design elements, conventions of grammar, style, mechanics, and word precision, with few to no errors.
Cites AND/OR attributes sources (in bibliography/ works cited and/or in- text), with multiple errors and/or an inconsistent use of a discipline- specific style.	Cites AND/OR attributes sources (in bibliography/ works cited and/or in- text), with multiple errors and/or an inconsistent use of a discipline- specific style.	Cites AND attributes sources, using a discipline-specific style (in both bibliography/works cited AND intext), with few errors or inconsistencies.	Cites AND attributes sources, with a consistent use of an appropriate discipline-specific style (in both bibliography/works cited AND intext), with few to no errors.	Cites AND attributes sources, with a consistent use of an appropriate discipline-specific style (in both bibliography/works cited AND intext), with few to no errors.

Academic Paper

Overview

This performance task was intended to assess students' ability to conduct scholarly and responsible research and articulate an evidence-based argument that clearly communicates the conclusion, solution, or answer to their stated research question. More specifically, this performance task was intended to assess students' ability to:

- Generate a focused research question that is situated within or connected to a larger scholarly context or community;
- Explore relationships between and among multiple works representing multiple perspectives within the scholarly literature related to the topic of inquiry;
- Articulate what approach, method, or process they have chosen to use to address their research question, why they have chosen that approach to answering their question, and how they employed it;
- Develop and present their own argument, conclusion, or new understanding while acknowledging its limitations and discussing implications;
- Support their conclusion through the compilation, use, and synthesis of relevant and significant evidence generated by their research;
- Use organizational and design elements to effectively convey the paper's message;
- Consistently and accurately cite, attribute, and integrate the knowledge and work of others, while distinguishing between their voice and that of others; and
- Generate a paper in which word choice and syntax enhance communication by adhering to established conventions of grammar, usage, and mechanics.

How can the implementation of disability education and treatment programs in schools and hospitals across developing countries decrease the extremely high rates of disabilities, such as schizophrenia and dyslexia, in these nations?

Introduction

According to the United Nations Factsheet on Persons with Disabilities, around 15 percent of people in the world are living with a disability, making them the world's largest minority (Factsheet on Persons with Disabilities). What makes this statistic even more startling is that around 80% of those people come from developing countries. The World Population Review describes a developing country as a nation that has progressed less in terms of industry and human development when compared to other nations (World Population Review). This lack of development causes far-reaching shortages in technological and medical advancement. While disabled people living in developed nations, such as the United States or France, are able to seek out medical and educational methods of treatment for their disability, those living in underdeveloped countries don't share this same luxury. According to the Organization for Economic Co-operation and Development (OECD), an organization made up of developing countries, disabled people have exponentially lower educational attainment as opposed to their non-disabled counterparts (Nuñez). When there is no way of treating a disease or disorder, you cannot expect the patient to improve their condition. These people are not receiving aid that they desperately need. According to Arne H. Eide, PhD, the poverty rates for those who are disabled greatly exceed the rates for those who don't have a disability (Eide). All in all, the already unimaginable hardships some with disorders such as schizophrenia and PTSD face, combined with the lack of treatment options for these people in developing countries, isn't improving the issue. According to the 2018 Disability Statistics Annual Report, disability rates are actually rising (2018 Disability Statistics Annual Report). We are moving in the wrong direction, and little to no research is actually being done in these countries to test the benefits of possible

treatments. Exploring possible options for treatment could potentially help solve problems with the economic well-being and the quality of life of those with disabilities in developing nations.

Economic

India is a prime example of a developing country in which those living with disabilities are economically suffering. According to Pooja Singh, whose thesis details the economic hardships disabled people in India face, disabled people are denied work and are even discouraged from becoming self-employed because of the stigma that surrounds them and the very obvious socio-economic barriers that are still prominent today (Singh). There actually have been a few state-funded programs intended to aid disabled Indian citizens in boosting their economic status, but their effectiveness has been minimal and still very few disabled people are able to find work. It seems as though it is a trend among developing nations to create a cycle like this: disability in their country becomes a problem, but instead of offering real, effective aid to these suffering people, they look at them as a seemingly lesser group of people. This lack of treatment and support makes sure that these people stay in the economic gutter for longer, basically guaranteeing that their condition will not improve. There are some who believe that the employment of those with mental illness can actually be one of the only ways to help improve economic conditions for the disabled at little to no cost to the employer. In developing nations, it is very common for those with a disability to work. In fact, in spite of the low rates of employment for these people in developing countries, disabled people still hold jobs at about 2/3of the rate of the general population, many of them even as high-ranking officials (Mechanic). It has been agreed upon by many that the ability of a person to learn is the major factor an employer should look for in a potential employee, not just the presence of a disability, or lack

thereof. Disabled people have proven that they can work the jobs they are given, it is just that the stigma that follows them in developing countries oftentimes prevents them from even getting a chance. If this doesn't change, then it seems economic prosperity for the disabled is still far off.

Quality of Life

Those with disabilities also have, undoubtedly, lower qualities of life compared to those without disabilities. A person's disability doesn't just affect them, it affects all of the people around them. According to Deon Filmer, a member of the World Bank Group, adults with disabilities often live in poorer households and disabled, primary-school-aged children are much less likely to attend school and receive a proper education in comparison to the unaffected children (Filmer). This lack of reliable income doesn't allow for a house with a disabled person to meet the needs necessary for its inhabitants. The fact that it is very difficult for them to receive an education means that the next generation will also, most likely, face economic turmoil. This problem doesn't only affect eastern countries, such as India. In fact, Mexico's disabled population suffers from some of the worst living conditions in the world. According to Randal Archibold, an experienced writer for the New York Times, about ten years ago, it was revealed that many disabled people in Mexico had been living in absolutely bleak conditions. They were forced to live in germ-ridden mass homes, were extremely malnourished, and were even forced to undergo operations without their consent (Archibold). Since then, the nation has promised to improve conditions, but disabled citizens still experience extreme neglect. Even after it was exposed to the world how awful some disabled people's quality of life truly is, we see little to no improvement. There is a consensus on this topic that if disability is just neglected and left unnoticed, like in this case, no improvement will be seen.

Conclusion

So, obviously disability is an overwhelming problem around the world, as demonstrated by the fact that 15% of the world is indeed disabled. This problem is especially apparent in developing and underdeveloped countries, where the lack of technological and cultural progress, along with the lack of treatment options have made it almost impossible for those with disabilities to get better. The obvious answer seems to implement treatment centers in these developing nations in order to, hopefully, reduce the limitations disability has placed on these people. But really, people can't really even be sure this would be effective. There is such a small sample size of consistent, continued, effect work being done in these nations, so we don't know if treatment programs and centers can really be a long-term solution. Now, studies done in developed countries do suggest that the use of medicinal drugs (Researchers Identify Potential Treatment for Learning Disability in Neurofibromatosis) and even art study (Derby) can be extremely beneficial in treating those with disabilities. The only problem is that researchers can't be sure that the effectiveness of these methods will translate, and the implementation process could be long and difficult. It could be possible to first enter programs such as these on a very small scale, but even then the long-term effects will still be in question. Future research should tackle whether or not treatment options such as these could help fix the disability epidemic in all developing nations.

Proposed Methods Of Inquiry

As previously stated in the paper, treatment and financial aid options for disabled persons and their families in developing countries are extremely underwhelming (Singh, 2014). This fact becomes even more apparent when you look at the plethora of options for those suffering from disabilities in developed countries, such as the United States, which include both medical treatment and hands-on aid in the classroom. This seemingly would go hand-in-hand with the fact that while disability rates have recently been rising in developing nations, developed nations' disability rates continue to drop (2018 Disability Statistics Annual Report, 2018). However, there is actually little concrete evidence of a direct connection between more satisfactory treatment options and lower rates of disability. I plan to use a mixed-method approach in order to find this connection. This would include the use of both meta-analysis and comparative research. Meta-analysis being the use of several data sets to form new connections between data, and comparative research being the comparison, primarily, across different countries or cultures to find distinct similarities and differences. Both of these methods of research seem to go hand-in-hand, as the data I am able to create or obtain from meta-analysis will hopefully help me in finding differences between nations with rampant issues with disability and nations whose disability rates seem to be continuously improving, leading directly into my comparative research.

Focus of Research

The purpose of doing this research is to find solutions to the disability epidemic that may have not been widely uncovered yet. If there are effective ways to both treat and prevent disability among those living in developing nations, then they need to be found sooner rather than later. The use of meta-analysis, mainly focusing on places in different styles of treatment have been implemented and their effectiveness, will help to determine the best ways to help those dealing with disability. The findings gathered from this research may even aid in finding new ways to treat those with disabilities, even if they have not been utilized up to this point. The use of comparative research will mostly focus on the differences between countries with the lowest disability rates and those with the highest, and also show which countries deal with the worst problems facing disability, hopefully allowing for researchers to find trends between trends demonstrating why these problems exist. This research will also help identify possible preventative solutions, since it seems as though countries with high rates of disability are doing something that leads to these high rates. These could include low quality of life for disabled people, lack of funding for treatment, and the perpetual stigma that often surrounds the afflicted persons.

Procedure and Data Collection

As previously stated, a mixed-method approach will be taken to the research. The process of this research will contain 4 steps, all leading to solutions regarding the disability epidemic.

Step one of the research will consist of finding sources online containing information about treatment options in several different countries. Researchers intend to look at as many different types of treatment as possible in order to find out which methods have proven most effective. This will be made simpler if the information about these specific instances of treatment also come with data figures containing the effect they had on the surrounding disabled community. The information garnered from this research will then be compiled into several charts and other displays of ideas to more easily compare and determine the effectiveness of each type of treatment. Some helpful sources have already been located, most of which detail specific examples of different treatment options. These include newer and fresher takes on treatment, including helping patients through art (Derby, 2011), and more classic options, such as optimizing health care in countries ravished by disability (Saxenian, 1995). The problem is that some of them, while containing plenty of information on their certain treatment options, don't contain enough hard evidence and statistics proving their effectiveness.

Step two will be researching several different countries of varying class and development and examining their various rates of disability. After this information has been obtained, it will display different characteristics of these countries that are contributing to their increasing or decreasing disability rates. These will most likely be based on the presence of treatment options and general quality of life. This will go more towards the area of the paper focusing on preventative measures rather than treatment solutions.

The next step in the research will be likely to take the data gathered and put it into one easily-accessible spot, most likely on a singular document. The data will be inputted into various charts to make the data easily comparable. This will be the simplest method of data organization to help locate trends and differences, hopefully exposing solutions to the disability problem.

The final step in the research should be either locating or crafting solutions to the problem. The data must be analyzed, after which new data connections will hopefully emerge that will offer a clear and realistic solution to the problem. However, the solution may not necessarily be an entire new form of treatment or preventative process at all. It is also possible that the information will show that a viable solution already exists, just that maybe it has not been utilized properly or on a wide enough scale. The analysis of the data gathered through the

mixed-method approach and several expert interviews will hopefully offer solutions that will eventually help reduce disability rates around the world.

<u>Results</u>

During the process of my research, data was gathered from a plethora of diverse sources. However, the ones that turned out to be the most vital actually seemed to come from government-funded websites, such as The National Center for Biotechnology Information or the Center for Disease Control (Disability and Health Inclusion Strategies), though some vital information was gathered from other scholarly sources, such as experts on youth disability law Sue Burrell and Loren Warboys. The data that was collected was not necessarily put into actual charts/graphs but the principles of those methods of organization were still upheld. All relevant information was displayed on one document, with important pieces of information clearly shown in order to aid in spotting trends. This allowed me to sift through and figure out the most effective ways to both treat and prevent the furthering of disabilities. The data showed that while many people do not even realize they have a disability until later in life, disability education early in life can actually help improve the quality of life for those suffering. For example, according to Youth Law Board members Sure Burell and Loren Warboys, qualifying disabled students in California are entitled to a totally free public education, with fees and lunch costs being waived throughout (Burell and Warboys). This means that even low-income families, from which disabled persons often hail, are able to better educate their children with disabilities whilst also exposing them to life outside of the home. An article found on the US National Library of Medicine website also stated that education both for disabled people and the people that surround them can be a vital part in improving the quality of life for persons with disabilities (Health and

Wellness for Persons with Disabilities Today). They go on to state that even literature on ways to better lessen the toll a disability takes on a person may be written at too high of a reading level for a person with a learning impairment to properly understand. Basically, it becomes very difficult for those with learning disabilities, the largest group of disabled people in the world, to figure out how to better themselves. This goes back to the issue of education.

Discussion

Either the ways we present ideas to treat the disability epidemic needs to be written to suit those with mental disabilities, or, better yet, those afflicted need to receive more proper and specialized education early on in life. The common trend that was seen throughout all sources that identified effective examples of treatment was early education, not only of those with disabilities, but also the people around them. Young disabled students who received education on their individual ailment along with their peers even demonstrated lower rates of juvenile crime and less time spent in juvenile detention (Burell and Warboys). One of the most problematic issues that has risen from the disability epidemic has been the extremely high levels of those with disabilities in prisons all over the world. They are made out to be outcasts when young, being especially excluded in developing countries, ending up in juvenile detention centers from a very young age. This just further perpetuates the stereotype of those with disabilities as "worse", to say it simply, and drives them further down into an unsuccessful existence. This issue is constantly argued. One of the only ways to get the incredibly high number of disabled people out of prison is to not drive them into an existence where they feel they need to commit crimes to survive. Early education for students, specifically in grade school, can help make their disabled peers seem less taboo, allowing them to integrate further into society, thus improving their future quality of life. We see these attempts at normalizing those with disabilities in developed

countries, such as the United States, fairly often. However, in developing nations, schools don't seem to be making any strides in trying to further educate their students, as demonstrated by their 48% primary school completion rate for students with disabilities (Education: Children with disabilities are being left behind, says World Bank/GPE report). But schools are not the only place developing countries can improve. Many developed nations have also passed government legislation in an attempt to better their disabled citizens' lives. For example, in the United States, the Americans with Disabilities Act of 1990. This act was very simple, providing disabled Americans with a guarantee they would receive access to things such as steady employment, transportation, and basic government services (Center for Disease Control). They were not allowed to be alienated or discriminated against by businesses when hiring. This allowed for those suffering from various ailments to flourish. Increasing opportunity and wellness for disabled persons in America. If people with disabilities are offered the opportunity to go better themselves and contribute to society, then they oftentimes will take it. Disabled workers oftentimes can perform tasks as well as those not suffering, especially in simpler jobs that do not require much skill. They may seem like menial jobs to some people, but even the slightest responsibility and cash flow can help these people tremendously. The issues we face, however, is that governments in developing countries are not providing their disabled citizens with employment opportunities, but rather discouraging them from it. This is demonstrated by the previously mentioned issues in Mexico, where rather than sending their disabled citizens out into the real world to contribute and become upstanding people, they sent them away to segregated places meant to "improve" their quality of life, while really doing the opposite. If underdeveloped governments could be educated on the success that so many people with disabilities are having in countries like the United States, then they might realize that the most

effective way to help their disabled people isn't to remove them completely from the rest of the population, but really to do the opposite. If underdeveloped governments could be educated on the success that so many people with disabilities are having in countries like the United States, then they might realize that the most effective way to help their disabled people isn't to remove them completely from the rest of the population, but really to do the opposite. It appears that education seems to be laying the groundwork for the success of those with disabilities, while specific legislation builds off of it. Basically, we see through the data that education has proven to be the most effective method of improving the quality of life of those with disabilities. However, individual schools can only do so much. If all schools do not choose to properly educate, then some students will be left in the dust. The only way to ensure a uniform system is through government mandates on disability education. This is how the most people's lives will be improved. Another reason to provide everyone with this education and not just those with disabilities, is that many disabilities are relatively undetectable until later in life. If those with disabilities have already been taught about their own ailment and understand how to deal with it from an early age, then they will be much more understanding of what they have, making for a much smoother transition into the real world.

Conclusion

There is an international disability epidemic happening right now, as 15% of the entire population of the world suffers from some type of affliction (United Nations), having major negative effects on the economic well-being and the quality of life of people having disability in their life, whether they are the afflicted or merely are associated with some who is. This problem, as mentioned time and time again, is especially serious in developing countries, with 4 out of every 5 people with a disability, hailing from one. In order for this epidemic to be solved, or at least show any signs of improvement, it is clear there needs to be an increase in two things: education and legislation. More developed countries, such as many countries in Europe or the United States, are the ones taking this sort of action, and they are the countries seeing improvement in disability self-sufficiency and finding themselves with lower disability rates. And as the aforementioned article from the Organization for Economic Co-operation and Development states, developing countries that mandate little to no education on or for the disability are the ones that are seeing exponential growth in their disability rates. The original hypothesis was that developing nations would simply need to borrow techniques that had been proven useful in developed nations and apply them to their own hospitals and schools. However, it was originally thought that these treatments would center more around specialized treatments of the medical variety, including scans of the disabled patient's brain. It was believed that this would be the best way to further understand various disabilities and would help the afflicted the most. However, it has now been proven that education, especially in early schooling, has actually proven more effective than scientific treatments and medication in terms of bettering both quality of life and economic stability, the two perspectives examined in this paper. When looking at quality of life, it was seen that an increase in education about disability allowed students to better integrate and create less of a stigma around them, while also making them less of a burden at home. Economically speaking, when these figurative ropes are torn away from society and those with disabilities are looked at as equals, they are able to find careers in many fields, even if they are often with lower-paying jobs, and are able to perform at a high level. The reason that these were the two facets of life observed throughout the study is because they really go had-in-hand. If disabled people really are given work opportunities and are able to better themselves, they will

not be as likely to need the assistance of useless government programs, such as the ones that exist in India. While these programs are put in place in order to help disabled people, they really only exist because of the backlash they would face without them, as previously mentioned. What this means is that the longer this problem is put off and ignored, the bigger the problem will grow. Action must be taken now. If more and more leaders of developing countries recognize the lack of self-sufficiency their overwhelming numbers of disabled persons display, and decide to mandate education for and about the aforementioned group in schools, then an incredibly large number of those people's lives will be positively affected. But those taboos still exist in these nations, and they will not be easily removed. It has been a mainstay for so long with so many people that those afflicted with disabilities are less capable or meaningful. Awareness must be raised in these places before anyone will see any movement. In order to set this plan in motion, people need to step up and do their part to make change. When children are educated from a younger age before they have been affected by parents or other outside influences, they are more likely to be able to make their own assumptions or decisions regarding people, disability or not. This will play an integral role in integrating these people furthermore into society. The most effective solutions that have been found can be broken down into early education and economic opportunity. Both of these can be improved in developing nations through increasing legislation. The first step is to require schools to specialize education for these students and not to deny them the same chance at learning as the other students. These students can not be allowed to be shunned away and hidden early on or they will never be seen as peers. Next, although work placement programs do exist in some of these countries, most are basically useless and don't provide nearly enough opportunity, especially when compared to these same programs that exist in the United States. These countries, including India and several other countries in Asia, must

recognize the potential of those with disabilities and give them a fair chance to find employment. This would include ensuring employers aren't discriminating against this group of people and are giving them equal opportunity with the rest of the crowd. Only then will those with disabilities improve their quality of life and economic status. The disability epidemic can be solved, but it's the governments of these countries' duty to do it.

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Academic Paper

Note: Student samples are quoted verbatim and may contain spelling and grammatical errors.

Sample: H Score: 2

How can the implementation of disability education and treatment programs in schools and hospitals across developing countries decrease the extremely high rates of disabilities, such as schizophrenia and dyslexia, in these nations?

This paper earned a score of 2. The title of the paper suggests a number of potential ways in which its topic has been narrowed: by specific nations and disabilities. But the paper does little more to narrow its focus. Instead it makes broad claims such as there are a "Huge number of people with disabilities" and "Exploring possible options for treatment could potentially help solve problems with the economic well-being and the quality of life of those with disabilities in developing nations." Neither schizophrenia nor dyslexia, variables alluded to in the paper's title, are explicitly explored, and instead the paper engages with sources of questionable scholarly repute about high rates of disability in developing countries and economic and quality of life issues facing people with disabilities (pages 2-4).

Additionally, while there is a mention of a research method on page 5—"... a mixed-method approach... use of meta-analysis and comparative research"—any criteria to select sources for the meta-analysis goes unidentified. Thus, the method is oversimplified and not replicable. Results and conclusions are scanty, and the paper concludes with statements of opinion that are not supported by literature or evidence from the inquiry.

The paper didn't earn a score of 1 as it goes beyond a mere search and report, and the paper makes attempts at both narrowing its focus and providing a method.

The paper didn't earn a score of 3 as it does not offer a reasonably, replicable method, nor does it offer a new understanding, but simply restates what is already known in the professional community. Additionally its topic is too broad, as previously mentioned.