

AP Research Academic Paper

Sample Student Responses and Scoring Commentary

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Academic Paper 5 Points

Score of 1	Score of 2	Score of 3	Score of 4	Score of 5
Report on Existing Knowledge	Report on Existing Knowledge with Simplistic Use of a Research Method	Ineffectual Argument for a New Understanding	Well-Supported, Articulate Argument Conveying a New Understanding	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 intext), with multiple errors and/or an inconsistent use of a discipline specific style.	Cites AND/OR attributes sources (in bibliography/ works cited and/or intext), 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 develop an evidence-based argument that clearly communicates a conclusion or new understanding stemming from a clearly articulated research question or project goal. 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 its implications to a larger community of practice;
- 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 the student's voice and that of others;
- Generate a paper in which word choice and syntax enhance communication by adhering to established conventions of grammar, usage, and mechanics.

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Word count: 1195

Ap Research

30 March 2023

Inequality in healthcare

Healthcare is an important aspect of living, it's what allows you to be diagnosed and to be treated so as to continue to be able to live. It's such a vital thing to living that there's always the question of, 'should healthcare be free?', and while it's not much of a debate to see which side is right, does it truly matter? Of course in the long term it would matter as the future continues to become the present, even if it's at a short pace; but even with free healthcare, the issue of good healthcare being readily accessible to everyone wouldn't be solved. One of the larger issues in healthcare is healthcare equity. Healthcare equity wouldn't be fixed simply by free health care being given to all; while it would be great to not have to worry about affordability, it wouldn't solve the issues of healthcare inequalities, those being availability and discrimination.

One unavailability that's being seen and talked about more recently but has yet to be fixed is the availability of competent healthcare. Women, people of color, and members of the LGBTQIA+, are more likely to be discriminated against and/or receive inadequate healthcare treatment. People of color aren't being given the same availability compared to a white person and also continue to live in a place where the only type of people that mattered when the healthcare system was being built, were white men. Slavery was only abolished in the US around 160 years ago; give or take due to the circumstances of news traveling slow due to communication issues, the civil rights act of 1964 only having happened 59 years ago, and

racism and racial discrimination still being a prominent issue; the healthcare system hasn't been on everyone's side and while there may be medical discoveries and whatnot continuing to be found, there's a lack of strive to include people of color into this system from those in influential and significant positions. Women and queer people of color are even more mistreated by the healthcare system, as they also have to face being mistreated due to gender or sexual preference. Many women and people assigned female at birth have gone on to said they find healthcare to be an issue as many problems seem to stem from being misdiagnosed based on weight and menstrual cycles. Oftentimes these misdiagnoses lead to tragedies happening, and at that point, would free healthcare still matter with such inequalities? It also makes you think of other places and how they run the whole healthcare thing.

Availability of healthcare is something not all can have. Areas that lean more towards rural tend to have less healthcare chances than those areas that lean towards urban. Area of living is something often seen to be an issue in the media when it comes to health care. We've all seen at least one scene where someone is injured and they're being rushed to the nearest hospital, sitting at the edge of your seat since apparently the nearest hospital is 30 miles away and you're hoping that they don't kill off your favorite character. It doesn't help with those living in rural areas having big chances of being farmers and being more susceptible to harsher injuries with all those chances at disease. Harsh injuries, or unintentional injuries, are one of the reasons why people living in the countryside have a higher death rate than those living in the city. The issue of area doesn't just stop at urban and rural; it also includes low income neighborhoods. The thing about it is that, should there be more hospitals put into rural areas and low income

neighborhoods, the issue would still continue. This leads to another availability; availability of competent care. Availability of competent services is why simply saying, 'well let's build more hospitals!', wouldn't work, it also strings along the truth that is the weakness in rural healthcare as not many good, top notch doctors are willing to go live where there's not much to do.

With all the improvement and new finds in health care it's odd how doctors are still able to have such big room for mistakes but it really has you thinking if they have bias when it comes down to the patient.

Discrimination is something we all assume would be gone by now, especially in such a formal and safe place like a hospital. It's not as if it's the 60's and the doctor will deny you treatment or care, simply for who you are, is it? While doctors do deserve the right to deny helping a patient, it's ludicrous what many doctors choose to deny to do. Racism in the health care world is very prominent and it tends to come in the form of treatment. There was a study done by Burgess, Diana J., et al. where they studied opioid treatment with veterans and found that where black were less likely to receive treatment such as opioids, than their white counterparts. There's a lot of people who aren't given treatment similarly. Others who face discrimination are people assigned female at birth. Birth rates are important, especially with children being the future and all, but why is it should a woman decide children aren't for her, should she need to talk to 5 doctors before finding one who will sterilize her without the inappropriate question of her husband wanting children, and then a conversation of how she may want children further into the future? It's a bizarre situation to even think up, but it's even more terrifying how it's the reality of many people. Even if it's not about being sterilized, and instead

some other procedure or treatment which makes the patient feel better, physically or mentally, there's many instances where doctors use their power to deny, and instead discriminate based on their own personal beliefs. In a modern day where people are freely being who they want to be, laws aren't the only issue keeping them from their identities and freedom. Women and transgender people tend to be near the bottom of the stepping ladder when it comes to receiving treatment and actually getting what they ask for. With all the new laws, women and transgender people have had to face the most within the healthcare world, women being unable to get an abortion in many places, and transgender people having to have very strict qualities in order to receive gender affirming care.

Compared to other countries, the US isn't as good as it can be. The US doesn't have free healthcare leaving many to live without health insurance due to the price of it. So all of that means that there's less money being spent on healthcare, right? Wrong. The United States is the number one country when it comes to spending money on healthcare.

To say something as foolish as, 'racism doesn't exist anymore.' is stupid; but to say that the healthcare system isn't full of inequalities other than having to do with the medical bill is just as foolish. There's a lot to fix within the healthcare system, from the pricing of treatment and procedures to the way a doctor should act.

O'Donoghue, Grainne, et al. "A Qualitative Exploration of Obesity Bias and Stigma in Irish Healthcare; the Patients' Voice." *PLoS ONE*, vol. 16, no. 11, Nov. 2021, pp. 1–15. *EBSCOhost*, https://doi.org/10.1371/journal.pone.0260075.

Janevic, Teresa, et al. "Pandemic Birthing: Childbirth Satisfaction, Perceived Health Care Bias, and Postpartum Health During the COVID-19 Pandemic." *Maternal & Child Health Journal*, vol. 25, no. 6, June 2021, pp. 860–69. *EBSCOhost*, https://doi.org/10.1007/s10995-021-03158-8.

Hall, William J., et al. "Implicit Racial/Ethnic Bias Among Health Care Professionals and Its Influence on Health Care Outcomes: A Systematic Review." *American Journal of Public Health*, vol. 105, no. 12, Dec. 2015, pp. e60–76. *EBSCOhost*, https://doi.org/10.2105/AJPH.2015.302903.

Matthew, Dayna Bowen. "Toward a Structural Theory of Implicit Racial and Ethnic Bias in Health Care." *Health Matrix: Journal of Law-Medicine*, vol. 25, Jan. 2015, pp. 61–85. *EBSCOhost*, discovery.ebsco.com/linkprocessor/plink?id=48a73714-6274-3fcf-aae8-b829d61e9f1c.

Stepanikova, Irena, and Karen S. Cook. "Effects of Poverty and Lack of Insurance on Perceptions of Racial and Ethnic Bias in Health Care." *Health Services Research*, vol. 43, no. 3, June 2008, pp. 915–30. *EBSCOhost*, https://doi.org/10.1111/j.1475-6773.2007.00816.x.

Yu Tong, et al. "Rural-Urban Healthcare Access Inequality Challenge: Transformative Roles of Information Technology." *MIS Quarterly*, vol. 46, no. 4, Dec. 2022, pp. 1937–85. *EBSCOhost*, https://doi.org/10.25300/MISQ/2022/14789.

Pacheco Barzallo, Diana, et al. "Unmet Health Care Needs and Inequality: A Cross-country Comparison of the Situation of People with Spinal Cord Injury." *Health Services Research*, vol. 56, Dec. 2021, pp. 1429–40. *EBSCOhost*, https://doi.org/10.1111/1475-6773.13738.

Hardin, Heather K., et al. "Unmet Health Need and Perceived Barriers to Health Care among Adolescents Living in a Rural Area." *Children's Health Care*, vol. 50, no. 1, Jan. 2021, pp. 108–23. *EBSCOhost*, https://doi.org/10.1080/02739615.2020.1833333.

Elola, Javier, et al. "Health Indicators and the Organization of Health Care Systems in Western Europe." *American Journal of Public Health*, vol. 85, no. 10, Oct. 1995, pp. 1397–401. *EBSCOhost*, https://doi.org/10.2105/AJPH.85.10.1397.

Wendt, Claus, et al. "Confidence in Receiving Medical Care When Seriously III: A Seven-Country Comparison of the Impact of Cost Barriers." *Health Expectations*, vol. 15, no. 2, June 2012, pp. 212–24. *EBSCOhost*, Confidence in receiving medical care when seriously ill: a seven-country comparison of the impact of cost barriers - Wendt - 2012 - Health Expectations.

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Burgess, Diana J., et al. "Association between Pain Outcomes and Race and Opioid Treatment: Retrospective Cohort Study of Veterans." *Journal of Rehabilitation Research & Development*, vol. 53, no. 1, Jan. 2016, pp. 13–24. *EBSCOhost*, https://doi.org/10.1682/JRRD.2014.10.0252.

Academic Paper

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

Sample: J Score: 1

This paper earned a score of 1. The paper presents an overly broad topic of inquiry "Inequality of Healthcare," but the focus is not narrowed or sustained throughout the paper. The paper provides a broad overview of issues surrounding healthcare inequalities and healthcare availability on pp. 1–3 without referencing literature. Though there are many scholarly sources in the references listed on p. 6, only one source is referenced within the body of the paper, on p. 3 "There was a study done by Burgess" to support the broad discussion.

This paper did not earn a score of 2 because the paper does not attempt to describe or use a method. The paper merely reports on existing knowledge with minimal use of sources to contextualize the broad discussion.

The paper did not earn a score of 0 because the paper does have an overly broad topic, the "Inequality of Healthcare".