Example of good academic writing: level 5

Nursing and Social Work Examples

This extract is based on a critique of a research article from a Nursing submission.

Verdi (2007) focuses on the views of the nurses when they care for older people with dementia in an acute care setting. The researcher conducted interviews with experienced nurses in a small scale study. The nurses found it challenging to meet the needs of this group of patients, mostly because of their other duties in the ward. The conclusion was that the environment was not suitable for these patients.

The critiquing framework for qualitative research developed by Donmar (2014) was used to critique the sample in this study. According to Houseman (2014), being able to critically analyse the sample can assist in establishing how this adds to the quality and strengths of the study. The author clearly identifies their sample as a purposive sample of seven female nurses. Pridi and Koosters (2014) describe purposive sampling as a non-probability sampling which means there is no random sampling. Khan (2010) suggests that using purposive sampling ensures selection of those that have experience and knowledge in the phenomenon. Although the sample can be subject to bias as it relies on the researcher's judgement (Puccini, 2015), Wagner (2014) suggests there is a higher chance of bias in the selection only if the population is more diverse.

The researcher chose these participants because they met the expectations of the research. Rossini (2013) explains that to be eligible for research, the participants have to meet specific criteria and Jones et al. (2007) suggest participants should be chosen because of their experience. In this study, the participants were all registered general nurses with different levels of education and experience of nursing older people with dementia. Therefore, it is clear that participants had the experience in the subject area and were appropriate for the study.

According to the critiquing framework, sample sizes in qualitative research are usually small. Lambert (2013) explains that there is no agreed sample size for qualitative research as there are no rules on how small or large a sample should be. It is more important to obtain good quality information to ensure meaningful analysis and Dully et al (2014) suggest that having a small but appropriately chosen sample can lead to collection of information that is relevant to the study. In this study, the researcher used a small sample size of seven nurses. Bryant (2013) states that having a large sample size in qualitative research is often not necessary and it does not show quality or importance.

Commented [AM1]: Research clearly outlined and cited

Commented [AM2]: Good that the method and sample are noted

Commented [AM3]: Good that the findings of the study are noted

Commented [AM4]: Justification for this aspect of this paper

Commented [AM5]: Evidence supplied to support the topic under discussion

Commented [AM6]: Good evidence to link into the specific example from the research.

Commented [AM7]: An example from the study is used, therefore showing the application.

This is an example of good academic writing at Level 5 from a Nursing submission. The introduction clearly maps out the content of the essay and is followed by a clear and informative first paragraph.

This essay will elaborate on chlamydia as a health issue and discuss the health promotion activity recently conducted in an attempt to raise awareness. The essay will include an assessment of health needs, based on the epidemiology and demographics of chlamydia. This will lead to the selection of a specific target group, explaining why health promotion is needed for this group. Also, it will discuss essential factors, relevant policies, and Bradshaw's model of needs (1972). It will explain why the educational approach was selected and it will discuss the strengths and limitations of this approach. Finally, it will evaluate the resources used, the data collected and will consider possible improvements to the health promotion activity.

Chlamydia remains the most common sexually transmitted infection in the western world (Hardy, 2015). It is passed on through unprotected vaginal, anal or oral sex, infecting the epithelium tissue that lines the urinary and reproductive tracts (Philips & Jones, 2014). Philips and Jones (2014) further explain that chlamydia can cause symptoms such as discharge and pyrexia. In addition, the long term health consequences are significant and include infertility, ectopic pregnancies and inflammation of the epididymis and testes (Cayse & Musil, 2016). This shows the importance of health promotion in preventing this condition.

Example from a Social Work submission:

During the assessment, an exchange model would be adopted to encourage Leon to lead the discussion (Bailey & Mofoa, 2015). This process of exchange would encourage Leon to act as the expert in his life and define what actions need to take place (Bailey & Mofoa, 2015). As Leon presents with a history of depression, it would be helpful to administer a standardized assessment such as the Patient Health Questionnaire or Beck Depression Inventory to assess any current symptoms of depression (Primal et al., 2017). While doing this, it would be important to keep in mind that Leon may not have insight into his own difficulties, and that his self-report scores from his assessment may not be entirely accurate (Sato & Bernstein, 2017).

It would be appropriate to engage Leon in Cognitive Behavioural Therapy (CBT) as this therapy has been shown to be a highly evidenced based method of intervention with adults experiencing depression and substance use (Jones et al., 2014; Pinn, 2017). Application of cognitive restructuring throughout ongoing sessions with Leon would be beneficial in assisting Leon to achieve a greater understanding of his maladaptive thoughts and behaviour (Schiraldi, 2014; Brandt, 2015). The process of cognitive restructuring could commence through collaborative, open discussions about Leon's ability to parent and conducting tasks which would encourage a separation of thought, feelings, behaviours and an overall evaluation of his belief systems (Chicco & Wong, 2016). This could subsequently lead to implementations of new positive and desired behaviours and management of these

Commented [AM8]: It is good to identify the details of the evidence

Commented [AM9]: This is a good introduction that maps out clearly the content of the essay. Also, there is a good use of signposting words and phrases to guide the reader.

Commented [AM10]: A very good first paragraph summarising briefly the significance of chlamydia in terms of prevalence, symptoms and long term health consequences. A variety of sources has been used.

Commented [AM11]: A good concluding sentence to the paragraph

Commented [h12]: Choice of model and justification concisely expressed.

 $\label{lem:commented} \textbf{Commented [h13]:} \ \ \textbf{Demonstration of criticality}.$

Commented [h14]: Again, rationale given for choosing a specific intervention. Two sources of evidence effectively integrated into the writing.

(Baudelaire, 2016; Kothari et al., 2015). Successful application of this would be likely to encourage Leon to ascertain the relative truth behind his thought processes, his problematic behaviours of drug and alcohol misuse and the emotional abuse of Victoria.

Commented [h15]: A well-developed paragraph expanding on the topic sentence, addressing the 'Why?' and 'How?' questions.

Example from a Physiotherapy submission:

Jones (1995) highlights the importance of considering contributing factors during clinical reasoning. This refers to any predisposing or associated factors that may have contributed to the development of ML's condition. ML's symptoms are located unilaterally, in her dominant right arm which is more commonly affected in LE. ML's recent increase in badminton training, prolonged computer use, and regular DIY work can be considered the main contributing factors. Studies by Taylor et al. (2014) and Scrivener at al. (2016) conclude that the prevalence of LE is higher in individuals exposed to repetitive upper-limb movements, non-neutral hand and arm postures and forceful activities. Scrivener at al. (2016) (a comprehensive study of 4,783 participants) also finds that the prevalence of LE is highest in female subjects aged between 45-54. Murphy et al. (2013) state that those with poor racket technique are also at higher risk. Furthermore, a study by Defour et al. (2015) shows that those with reduced shoulder internal rotation often compensate with excessive wrist flexion during tennis. Although a small study of just nineteen participants, ML's shoulder should be assessed. Psychosocial factors should also be determined. Prolonged writing is an aggravating factor for PA, yet ML continues through pain for fear of judgement from colleagues: a clear blue flag (Kumar & Becker, 2012). This is an aggravating behaviour and an obstacle to recovery, so must be addressed during management. As has been shown, there are multiple justified contributing factors that support the hypothesis of LE for PA.

Commented [h16]: Clear topic sentence.

Commented [h17]: Short and clear explanation of contributing factors.

Commented [h18]: Good examples drawn directly from the case study.

Commented [h19]: Evidence effectively integrated.

Commented [h20]: This evidence is transferable to the case study, and therefore is particularly relevant.

Commented [h21]: Good concluding sentence and evaluation.

Commented [h22]: This is an excellent paragraph. It is well developed and well structured, following PEEEL (Point, explanation, evidence, example, evaluation, linking to the question).