

## Guidance for Writing Entries in an Annotated Bibliography

Education 603

A bibliography consists of a list of scholarly sources (articles, books, technical reports, etc.), typically limited to citation information such as author, title, when and where published, etc. An annotation is a comment or explanation. Therefore, an *annotated bibliography* includes an explanation for or commentary on each scholarly source. When an annotated bibliography is prepared as a stand-alone document, however, each annotation should provide a full summary as well as any explanatory or critical comments that may be offered. This document provides a suggested protocol for writing annotated bibliographies, along with a rationale for that protocol.

To oversimplify things, research publications have two parts: the setup and the outcomes. That is, there are a number of preliminaries that must be addressed before what was learned from the study gets reported. This is “the setup” part. Once the preliminaries have been addressed, the rest of the publication reports the results and interpretations of the investigation. This is “the outcomes” part.

When summarizing a research publication, which is what you do when writing an entry in your annotated bibliography, there is more to it than simply the setup and the outcomes. The approach to writing a summary for this course is to use what is called a structured abstract, which typically has five sections. The setup part has three sections: the background on the study, the purposes or questions to be answered by the study, and the conduct of the study. Here is an outline of the setup in terms of key question words along with approximately how many sentences should be written for each section.

### ***The Setup for the Study*** (gets no more than 12 sentences)

#### The “Why” of the Study (gets **6 sentences**)

1. Background/Context/Literature (*3 sentences*)
2. Research Question(s)/Purpose(s)/Objective(s)/Focus of Study/Hypotheses (*3 sentences*)

#### The “Who, Where, and When,” the “What,” and the “How” of the Study (get **6 sentences**)

3. Research Design/Methods
  - a. Participants/Subjects/Population/Sample/Setting (*2 sentences*)
  - b. Data Collection (*2 sentences*)
  - c. Data Analysis (*2 sentences*)

The outcomes part has two sections: the findings or results of the study and the conclusions of the study. Here is an outline of the outcomes part with approximately how many sentences should be written for each section.

### ***The Outcome(s) and Recommendations of the Study*** (get about 6 sentences—large or complicated studies may need an extra sentence or two)

4. Findings/Results (get about **3 sentences**)
5. Conclusions/Recommendations/Implications (get about **3 sentences**)

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Education 603

On this and the following page is an example of what an annotated bibliography entry should look like when you follow the structured abstract format.

Mitchell, R. E., & Karchmer, M. A. (2006). Demographics of deaf education: More students in more places. *American Annals of the Deaf*, 151(2), 95-104.

Background/Context/Literature:

This paper addresses “the perception that the population of deaf and hard of hearing students is steadily shrinking and becoming more dispersed, that they are ‘pebbles in the mainstream’” (p. 95). The roots of this perception are twofold. Federal special education law has encouraged “mainstreaming” students with disabilities, rather than having them attend special schools for the deaf, and vaccination and other modern health practices have eliminated a number of causes of childhood deafness.

Purposes:

This paper answers two questions. First, is the deaf and hard of hearing student population shrinking? Second, are deaf and hard of hearing students more dispersed across the nation’s schools than was true in previous years? The paper also discusses research challenges arising from the size and dispersion of this special student population.

Research Design/Methods:

Participants/Subjects/Population/Sample/Setting: This study reanalyzes annual (cross-sectional) data over a three-decade timeframe (to the present at time of publication) from two national-scale data collection activities pertaining to the characteristics of deaf and hard of hearing students enrolled in schools and programs that have identified them for special education or related services, namely, the *Annual Survey of Deaf and Hard of Hearing Children and Youth* (hereafter, *Annual Survey*) the federal Child Count reported in each *Annual Report to Congress on the Implementation of the Individuals with Disabilities Education Act* (hereafter, *Child Count*). The former is a large-scale convenience sample of the national population while the latter is intended to be a complete census of students whose primary disability classification is deaf or hard of hearing.

Data Collection: Most of the reanalysis summarizes aggregated and previously published data reports, in particular, the *Child Count*. However, some original analyses are reported based on data from the 2002-2003 *Annual Survey*, which collected individual student data report forms recorded by school officials from the schools and programs in which these students received their special education services.

Data Analysis: The *Child Count* was analyzed graphically in order to identify trends in relation to the two research questions (i.e., whether the population were shrinking and whether it were more dispersed). The *Annual Survey* data were analyzed using a weighting scheme that corrects for convenience sampling bias to calculate more recent prevalence estimates.

## Guidance for Writing Entries in an Annotated Bibliography

Education 603

### Findings:

Mitchell and Karchmer found that since the late 1980s the deaf and hard of hearing child population has been on the increase and is not shrinking, though its prevalence has remained stable. However, it is much more dispersed than at any previous time, i.e., the most dispersed it has ever been. Additionally, the deaf and hard of hearing student population tends to reflect the diversity of students in the nation as a whole, but reports of co-morbidity and cochlear implantation have increased.

### Conclusions:

The authors conclude that identifying “what works” with deaf and hard of hearing children is likely to become more difficult with the increasing dispersion of this low-incidence disability group because identifying and obtaining a large sample will be very expensive. It will be even more difficult to study any subgroups within this diverse and heterogeneous population of students with hearing loss or deafness. Finally, without assistance in interpreting federal laws relating to education and health data, schools may be reluctant to provide data without a variety of data release provisions being met.