Argument Development Pitfalls
Making invalid arguments

- **Premise A:** Large cities in Holland have higher stork populations than smaller cities (empirical evidence to support this)
- **Premise B:** Large cities in Holland have higher birth rates than smaller cities (empirical evidence to support this)
- **Argument:** Storks bring babies in large cities in Holland (using evidence in support of premises A and B)
Alternative explanation to the argument that storks bring babies in Holland

- Third variable accounts for correlation between number of storks and number of births
  - Storks like to roost in high buildings
  - Higher buildings in big cities
  - Higher birth rates in big cities due to increased population

Alternative explanation: size of city accounts for both increased stork population and increased birth rate—storks don’t bring babies!
Lack of logical progression of argument

Argument: Those who have been sexually abused as children **must** recall the abuse in order to heal

Lay-out of argument in illogical way:
- Evidence that children are sexually abused
- Evidence that some treatments require survivors to recall abuse
- Evidence that those who have recalled abuse have healed

Problem: does not logically show that those who have healed **must have** recalled abuse, only that those who have recalled abuse have healed
Failing to anticipate counterarguments

- Possible counterargument: Any survivor of child sexual abuse who is treated will heal, regardless of whether or not they recalled the abuse.

- Evidence needed to counter this counterargument:
  - Studies showing that only those who have recalled abuse in treatment have healed.
  - Studies showing that those who have not recalled abuse in treatment have not healed.
A logical argument

- Argument: Those who have been sexually abused as children **must** recall the abuse in order to heal

- Lay out of argument logically
  - Sexual abuse is traumatic (evidence)
  - Untreated trauma leads to difficulties including PTSD, depression, etc. (evidence)
  - Critical debriefing after trauma deflates the traumatic aspects of an event (evidence)
  - Therefore, recall of a traumatic event like sexual abuse is vital so that it can be adequately debriefed, thus reducing the negative effects of the trauma
Self-handicapping (making/creating excuses) serves to protect the self from poor performances (evidence).

Many people who engage in self-handicapping also believe that intellectual abilities are fixed rather than changeable (evidence).

Believing that abilities are fixed is also associated with trying less (evidence).

Prediction: Individuals primed to think about how intellectual abilities can change/improve should be less likely to make excuses prior to taking an important exam.
Self-handicapping (making/creating excuses) serves to protect the self from poor performances (evidence).

The tendency to engage in self-handicapping is associated with the belief that intellectual abilities are fixed rather than changeable (evidence).

People may engage in self-handicapping because they interpret a poor performance as indicating poor ability.

Prediction: Individuals primed to think about how intellectual abilities can change/improve should be less likely to make excuses prior to taking an important exam.
Lack of depth of argument

- Argument: SAT scores should not be used as part of college admissions criteria because those who do poorly on SATs do not always do poorly in college, and some people are just not good at taking standardized tests.

- Ignores the depth of the argument—do SAT scores provide information above and beyond other college admissions criteria that add to predictive ability in selecting the best students?
Argument is not novel

- Ritalin should be used to treat AD/HD children because these children have an underaroused CNS
- Social support should be provided for those diagnosed with chronic illnesses because individuals with chronic illnesses are often unable to meet all their needs independently
Argument: Individuals with mental retardation should be mainstreamed in regular classrooms because they will benefit from the social interactions

What is unclear?
- What are the criteria for mental retardation?
- Should all individuals be mainstreamed regardless of level of mental retardation?
- What other options besides mainstreaming for increasing social interactions?
Avoiding the review of the literature trap

- Argument: Cognitive-behavioral treatments are more effective than other types of therapy for treating individuals with depression.
  - Evidence: studies that show that cognitive-behavioral treatment are effective for treating depression and other studies that show alternative methods are not as effective—where is the argument development beyond a review of the literature?