



Reading Academic Journal Articles



University
of Manitoba





TRADITIONAL TERRITORIES — ACKNOWLEDGEMENT —

The University of Manitoba campuses are located on original lands of Anishinaabeg, Cree, Oji-Cree, Dakota, and Dene peoples, and on the homeland of the Métis Nation.

We respect the Treaties that were made on these territories, we acknowledge the harms and mistakes of the past, and we dedicate ourselves to move forward in partnership with Indigenous communities in a spirit of reconciliation and collaboration.





University of Manitoba's Library

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Challenges of Reading Academic Texts

- Tone and intention
- Length
- Difficult concepts and complex ideas
- Dense with information





Know the Parts/Typical Structures of an Article

- Abstract
- Introduction
- Literature Review
- Methodology
- Results/Discussion/Conclusion





Abstract

- A brief summary of the article
- 150-250 words
- Allows readers to survey the article
- Allows readers to decide if they want to read further

Jena, P. C. (2013). Effect of smart classroom learning environment on academic achievement of rural high achievers and low achievers in science. *International Letters of Social and Humanistic Sciences*, 3, 1–9. <https://doi.org/10.18052/www.scipress.com/ILSHS>





Background

According to social norms theory, our perceptions and beliefs about the “normal” behavior of others influences our own behavior [1]. For example, the belief that others drink alcohol, smoke

Most of the substance use perceptions research has been conducted among students and focused on alcohol use. As such, there is a lack of knowledge on perception of tobacco use and cannabis use by others. Determining how frequently overestimations occur in the general population and how perceptions of use by others are associated with substance use (not limited to alcohol use) will yield information about perceptions as a potential factor to target in preventive interventions. Since both substance use and perceptions may be influenced by the behavior of close peers or family members, it is important to take into account whether or not individuals have been exposed to a heavy substance use environment [22].

and actual behaviors of others (i.e., “correcting” the overestimation of use by others) [1,20]. In a recent test of the theoretical underpinnings of social norms theory, Johnson [21] showed that individuals whose perceptions of normative alcohol use became more accurate drank less alcohol.

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Bertholet, N., Faouzi, M., Studer, J., Daeppen, J. B., & Gmel, G. (2013). Perception of tobacco, cannabis, and alcohol use of others is associated with one’s own use. *Addiction Science & Clinical Practice*, 8, 15. <https://doi.org/10.1186/1940-0640-8-15>





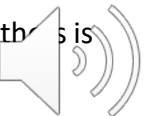
Cohort study assessment

Substance use

The study questionnaire contained questions on drinking frequency (*How often do you have a drink containing alcohol?*) with answer choices of number of days per week (open-ended), 2–3 times a month, monthly or less, or never; and on alcohol quantity (*How many drinks containing alcohol do you have on a typical day when you are drinking?*) with a single open-ended answer (number of standard drinks). The time frame was the past 12 months. Number of standard drinks per week was obtained by multiplying the frequency and quantity questions. A standard drink was defined as 100 ml of wine, 250 ml of beer, 275 ml of pre-mixed drink containing spirits, or 25 ml of spirits (each containing about 10 g ethanol). Pictures of the drink equivalences accompanied each questionnaire.

Tobacco use was assessed with the following items: participants reporting any cigarette use over the past 12 months completed questions on tobacco frequency (*How often, in general, have you smoked cigarettes in the past 12 months?*) with answer choices of every day, 1–2, 3–4, or 5–6 days a week, 2–3 days per month, or once

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Discussion

Perceptions of substance use by others are associated with one's own use among young men; specifically, our results show that overestimating substance use by others is associated with greater consumption. In addition, underestimating the substance use by others appears associated with less use, except for tobacco. Our study adds important information about the frequency of overestimation, underestimation, and accurate estimation of substance use and the association of overestimation of use by others with current use, especially for tobacco and cannabis use where evidence has been scarce [2,16,26].

The magnitude of the associations between perceptions and usage was similar in the models where variables, such as having close friends with alcohol or drug problems or having a family history of alcohol or drug problems, are added or taken out. The relationship most affected by the addition of these variables in multivariable models was overestimation of cannabis use by others and participants' own cannabis use (IRR 1.59 versus 1.43 in the model containing the close friends with alcohol or drug problems and family history variables). These results are in line with the literature [11,13,14,16]. The magnitude of the observed

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Know the Purpose

- General knowledge/background
- Prepare for class discussion
- Testable material
- Source material for an essay
- Review and evaluate the article



Article Title

Helen Andreas
University of Manitoba

Abstract

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INTRODUCTION

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METHODS

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During Reading:

Knowledge

→ No differences found
(knowledge was already high)

The levels of nurses' knowledge were high initially and no differences in levels of knowledge were found pre-education and post-education. In this study we also found that 50% of the nurses had undertaken training in falls education within the past two years, which may have contributed to the high knowledge level present in this sample. In a study by Liu *et al.*^[14] nurses' falls knowledge increased and remained high at the three month level. Although most knowledge items in this study were correctly answered, further education on using the risk screening tool, and how medications influenced the risk of falls is recommended.

Behavior

→ Behavioural change was found (14/27 actions improved)

Considerable behavioral change was found in this study. Of the 27 behavioral actions assessed, 14 were improved following the education. Using the internally consistent factor structure of the Falls-Prevent Scale, a significant improvement in strategies to prevent falls ($P < .001$) and also changes to post-fall management practices ($P < .05$) were demonstrated. These data do suggest an improvement in falls prevention behaviors. It has been suggested that checking of staff compliance with these behaviors should be regularly undertaken^[27], and the Falls-Prevent Scale provides a suitable tool.

Falls incidents and severity

→ No changes found

The analysis of the data highlighted that the two hospitals differed in their frequency of falls and severity of falls, although the characteristics of patients (mean age, falls screening risk severity score of possible fallers) in the hospitals during the

Johnson, M., Hime, N., Zheng, C., Tran, D. T., Kelly, L., & Siric, K. (2013). Differences in nurses' knowledge, behavior and patient falls incidents and severity following a falls e-learning program. *Journal of Nursing Education and Practice*, 4(4), 33. <http://doi.org/10.5430/jnep.v4n4p28>



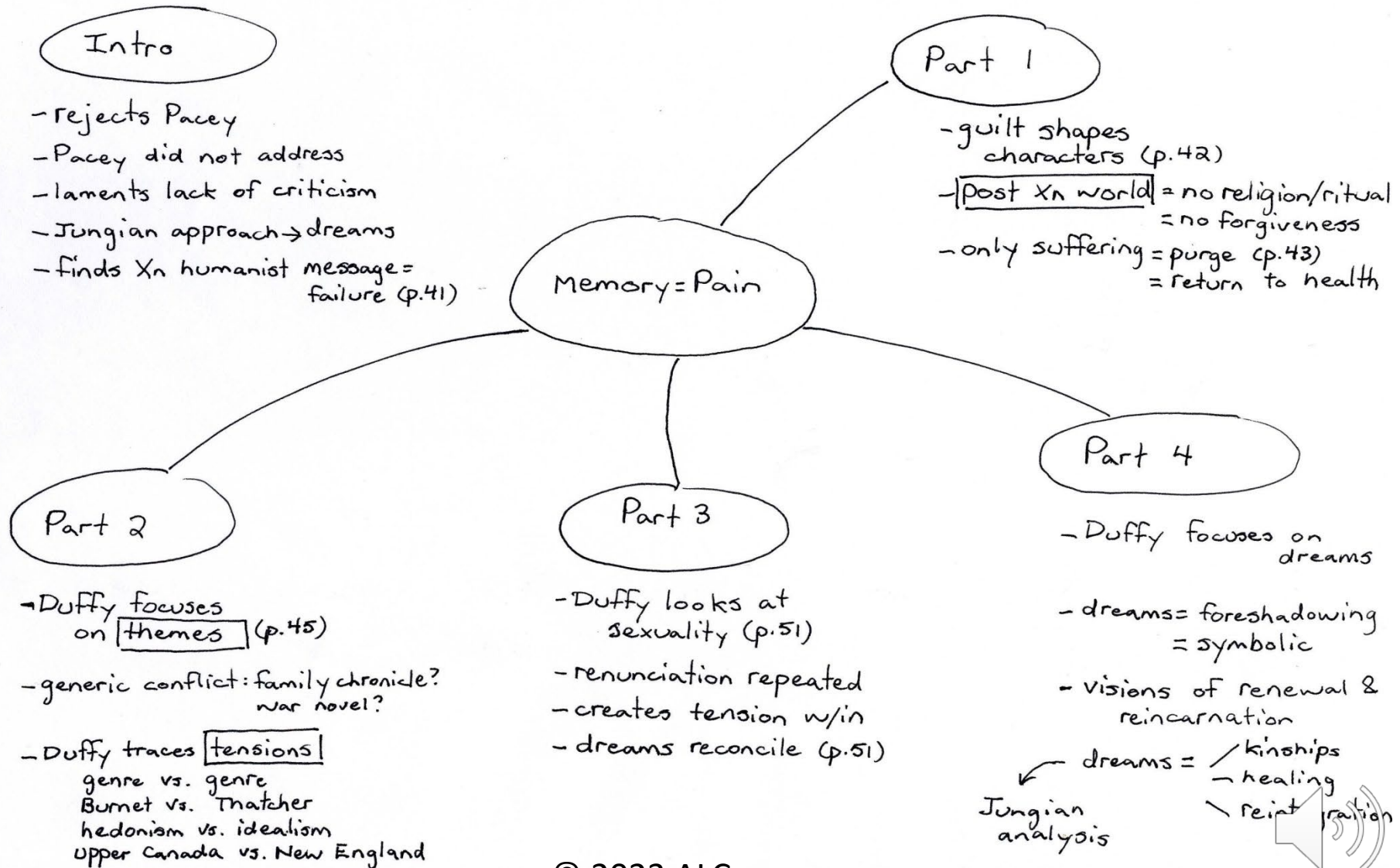
Managing New Vocabulary

Most people who bother with the matter at all would admit that the English language is in a bad way, but it is generally assumed that we cannot by conscious action do anything about it. Our civilization is decadent, and our language—so the argument runs—must inevitably share in the general collapse. It follows that any struggle against the abuse of language is a sentimental archaism, like preferring candles to electric light or **hansom cabs** to aeroplanes.

Orwell, G. (1946). Politics and the English language. *Horizon*, 13(76), 252-265. <https://www.orwellfoundation.com/the-orwell-foundation/orwell/essays-and-other-works/politics-and-the-english-language/>



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204-480-1481



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