



FOOD FOR THOUGHT

# Taking Good Notes & Finding the Main Idea

# Note-Taking Exercise

- **Listen** to the following video on the French Revolution and take notes in the way you *normally* take notes:
  - <https://www.youtube.com/watch?v=BDWqwcTtZao>
- Examine your notes:
  - What habits do you notice?

# Note-Taking Exercise: Example

## The French Revolution

- Indep. from monarchy
  - ↳ overthrew monarchy (Amer. Rev was just indep.)
- 1<sup>st</sup> time for Europe

**1789** ← start of Revolution

### FACTORS

- ① poverty
  - but Louis XVI & family were rich (Versailles)
- ② # wars (costly)
  - American Rev. (get back @ UK)
  - 7 Years War (aka French-Amer War)
    - drained \$
- ③ starvation
  - but nobility & monarchy were rich (living it up!)
  - people paid taxes (nobility did not)

Important  
↓

# Note-Taking Exercise: Example

## ④ Enlightenment

- Ideas: people can rule themselves  
↳ led to Amer. Rev.

## Convocation of Estates General

- meeting of 3 estates (social classes)

1) Clergy (.5%)

2) Nobility (1.5%)

3) Everyone Else (98%) ← more people, less power

↳ met @ Versailles

- people angry

- Louis XVI didn't allow them to meet w/ other estates

↓

May 1789

Response: people declared themselves:

## Nat'l Assembly of France

• Louis XVI locked door - didn't allow people to vote.



People go to indoor tennis court → Tennis Court OATH

make

• Louis XVI

allows people to assemble

but troops converge on Paris

Want to make constitution of France

• had sympathy from clergy & nobility

→ (Neker sp?) Financial Advisor is sympathetic to people & wants king to allow constitution

↳ king FIRES Necker (sp?)

Response: people storm Bastille (place for political prisoners) & WEAPONS

↳ people try to fend off troops

Bastille Day  
July 14, 1789

August 1789

- Declaration of the Rights of Man & the Citizen (decl. of Indep.)

... led to Bloody Revolution (French against French)

# Notes: Spotting Bad Habits

- Attempting to write down **EVERYTHING** the instructor says
- Messy and illegible handwriting
- No structure or organization to notes
- Writing down unimportant information and missing important information

# Notes: Where do I begin?

- Ask yourself: **what's my purpose for listening to this lecture?** (*Answer: check the syllabus!*)
- **Prepare!** Read (or skim) your assigned reading **BEFORE** class so you will be able to make connections between the textbook and lecture. (*Making connections is how **LEARNING** occurs in your brain*)

# Notes: Increasing your speed

- **Do NOT attempt to write down everything your instructor says**
  - Use a digital recorder if you have trouble keeping up (*we have recorders available for loan*)
- **Use abbreviations:**
  - *Ex. = Example*
  - *Def. = Definition*
  - *Tst. = Test Question*
  - *Sum. = Summary/Conclusion*



# Notes: Non-Technical Classes

*English, Social Sciences and History are considered "non-technical" classes as they focus on ideas and historical events.*

- **The GOAL of your notes should be to:**
  - Outline the lecture
  - Find the main ideas
  - Record examples

# Notes: Non-Technical Study Aids

- Glossary of terms
  - Create a glossary of keywords and definitions (in your own words!)
  - If possible, provide an example of the term (this will help you apply the information)

**It is not enough to simply memorize the information, you need to be able to apply and synthesize it!**

# Notes: Technical Classes

*Math, Chemistry and Physics are considered "technical" classes as they focus on formulas, proofs, etc.*

- **The GOAL of your notes should be to:**
  - Outline and annotate the steps of a formula
  - Define when to use a particular formula
  - Capture as many example problems as possible

# Notes: Technical Study Aids

- **Math Formula Flash Cards**
  - One side details formula
  - One side gives example problem
- **Compile a worksheet with all the example problems given during class**
  - Try to complete all problems without the help of your notes

# Reading: What's the purpose?

You may be reading because you are...

- Doing research for a paper
- Studying for an exam
- Looking up important information
- Scanning for general ideas
- Preparing for a class discussion

# Reading: What do you want?

- Your purpose is not simply to read the assigned pages. You need to be specific about why you are reading for the material.
- **You need to know what you want from the material if you expect to find it.**

# Reading: Consider the test style

- If you are reading for a test you need to consider what **type** of test you will be taking.
  - For multiple choice tests: Read for **specific information** such as keywords, definitions and dates .
  - For short-answer tests: Read for **specific information** and **ideas**.
  - For essay tests: Read for **big ideas** and **specific examples**.

# Reading: Organization is key

- Now that you've defined the **purpose** of your reading and what you **want** from the material you need to simply read it, right?
- **Not so fast!**
- You need to know **where** to find what you want and **how** to record it so that you will remember it.



# Reading: Getting the Big Picture

**The MOST important parts of the text are:**

- Chapter Title
- First and Last Paragraphs of the Chapter
  - Read the entire paragraphs, since they often sum up the few key ideas
- Section headings and subheadings
- Tables, graphs, charts, pictures and diagrams
- The first and last sentence of each paragraph

# Reading: Engagement and Learning

Now that you know **where** to find the information you need to develop a system that allows you to engage and learn it.

- **What are some practical ways we can engage the material?**

# Reading: Highlighting System

- Develop and consistent highlighting system
  - Create a color key that you place in the front of your textbook:

## Example: Non-Technical

Keywords
Definitions
Important People/Events
Conclusions

## Example: Technical

Keywords
Definitions
Important Formulas

# Reading: Draw & Annotate

- Use the margins of your textbook to:
  - Summarize paragraph content in a few words
  - Note any examples
- **Circle** unknown words
  - Find the definition and write it in the margin
- Draw arrows to show connections between ideas, people or events
- Draw boxes around **important dates**
- Note confusion with a (?)
  - Be sure you leave your lecture or tutoring session with an answer

# Reading Exercise

- Use the Highlighting and Annotation system described in previous slides to complete the Reading Exercise.
- Did you find you were more engaged in the information?

Normally, you've got a pretty good grip on reality. You can easily distinguish between external reality and the different kinds of mental states that you routinely experience, such as dreams or daydreams. But as we negotiate life's many twists and turns, the ability to stay firmly anchored in reality is not a given. Rather, we're engaged in an ongoing process of verifying the accuracy of our thoughts, beliefs, and perceptions.

If any mental disorder demonstrates the potential for losing touch with reality, it's schizophrenia. **Schizophrenia is a psychological disorder that involves severely distorted beliefs, perceptions, and thought processes.** During a schizophrenic episode, people lose their grip on reality, like the woman screaming "Fire!" in the chapter Prologue. They become engulfed in an entirely different inner world, one that is often characterized by mental chaos, disorientation, and frustration.

## Symptoms of Schizophrenia

The characteristic symptoms of schizophrenia can be described in terms of two broad categories: positive and negative symptoms. **Positive symptoms reflect an excess or distortion of normal functioning.** Positive symptoms include (1) *delusions*, or false beliefs; (2) *hallucinations*, or false perceptions; and (3) severely disorganized thought processes, speech, and behavior. In contrast, **negative symptoms reflect an absence or reduction of normal functions, such as greatly reduced motivation, emotional expressiveness, or speech.**

According to DSM-IV-TR, schizophrenia is diagnosed when two or more of these characteristic symptoms are actively present for a month or longer. Usually, **schizophrenia also involves a longer personal history, typically six months or more,** of odd behaviors, beliefs, perceptual experiences, and other less severe signs of mental disturbance (Malla & Payne, 2005; Torrey, 2006).

### Positive Symptoms

Delusions, Hallucinations, and Disturbances in Sensation, Thinking, and Speech

A **delusion is a false belief that persists despite compelling contradictory evidence.** Schizophrenic delusions are not simply unconventional or inaccurate beliefs. Rather, they are bizarre and far-fetched notions. The person may believe that secret agents are poisoning his food or that the next-door neighbors are actually aliens from outer space who are trying to transform him into a remote-controlled robot. The delusional person often becomes preoccupied with his erroneous beliefs and ignores any evidence that contradicts them.

Certain themes consistently appear in schizophrenic delusions (Woo & Keatinge, 2008). **Delusions of reference** reflect the person's false conviction that other people's behavior and ordinary events are somehow personally related to her. For example, she is certain that billboards and advertisements are about her or contain cryptic messages



**Glimpses of Schizophrenia** This drawing was made by a young man hospitalized for schizophrenia. He drew the picture while he was hallucinating and extremely paranoid. The drawing provides glimpses of the distorted perceptions and thoughts that are characteristic of a schizophrenic episode. Notice the smaller face that is superimposed on the larger face, which might represent the hallucinated voices that are often heard in schizophrenic episodes.

People with schizophrenia might hear the roars of Satan or the whispers of children. They might move armies with their thoughts and receive instructions from other worlds. They might feel penetrated by scheming parasites, stalked by enemies, or praised by guardian angels. People with schizophrenia might also speak nonsensically, their language at once intricate and impenetrable. And many would push, or be pushed, to the edge of the social landscape, overcome by solitude.

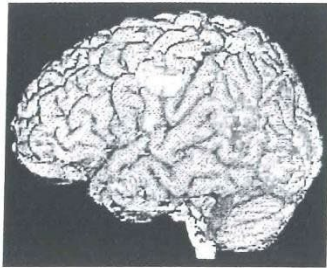
R. WALTER HEINRICH, 2005

### Types of Delusions

- delusions of reference
- " " " grandeur
- " " " persecution
- " " " being controlled

## FOCUS ON NEUROSCIENCE

## The Hallucinating Brain



Researcher David Silbersweig and his colleagues (1995) used PET scans to take a “snapshot” of brain activity during schizophrenic hallucinations. The scan shown here was recorded at the exact instant a schizophrenic patient hallucinated disembodied heads yelling orders at him.

The bright orange areas reveal activity in the left auditory and visual areas of his brain, but not in the frontal lobe, which normally is involved in organized thought processes.

directed at her. In contrast, *delusions of grandeur* involve the belief that the person is extremely powerful, important, or wealthy. In *delusions of persecution*, the basic theme is that others are plotting against or trying to harm the person or someone close to her. *Delusions of being controlled* involve the belief that outside forces—aliens, the government, or random people, for example—are trying to exert control on the individual.

Schizophrenic delusions are often so convincing that they can provoke inappropriate or bizarre behavior. Delusional thinking may lead to dangerous behaviors, as when a person responds to his delusional ideas by hurting himself or attacking others.

Among the most disturbing experiences in schizophrenia are **hallucinations**, which are **false or distorted perceptions**—usually voices or visual stimuli—that seem vividly real (see Figure 13.4). The content of hallucinations is often tied to the person’s delusional beliefs. For example, if she harbors delusions of grandeur, hallucinated voices may reinforce her grandiose ideas by communicating instructions from God, the devil, or angels. If the person

harbors delusions of persecution, hallucinated voices or images may be extremely frightening, threatening, or accusing. The content of hallucinations and delusions may also be influenced by culture and religious beliefs.

## CULTURE AND HUMAN BEHAVIOR

## Travel Advisory: The Jerusalem Syndrome

Whether it occurs in Baltimore or Beijing, Minneapolis or Moscow, schizophrenia is usually characterized by delusions and hallucinations. However, the *content* of the person’s delusions and hallucinations is often influenced by cultural factors, including that culture’s dominant religious beliefs. Consider one interesting example: the *Jerusalem syndrome*, which has been described by psychiatrist Yair Bar-El and his colleagues (2000) at Kfar Shaul Mental



A Pilgrimage Gone Awry Being in the presence of a historic religious site like the Wailing Wall in Jerusalem is an overwhelming emotional experience for many tourists. In some vulnerable people, such experiences trigger a temporary episode of psychological instability and religious delusions.

spontaneously experiences a psychotic episode while in Jerusalem.

# Reading Exercise: Example

When a schizophrenic episode is severe, hallucinations can be virtually impossible to distinguish from objective reality. For example, the young woman in the Prologue probably did see vivid but hallucinated images of fire. When schizophrenic symptoms are less severe, the person may recognize that the hallucination is a product of his own mind. As one young man confided to your author Don, "I know the voices aren't real, but I can't make them stop talking to me." As this young man got better, the hallucinated voices did eventually stop.

Other positive symptoms of schizophrenia include disturbances in sensation, thinking, and speech. Visual, auditory, and tactile experiences may seem distorted or unreal. For example, one woman described the sensory distortions in this way:

Looking around the room, I found that things had lost their emotional meaning. They were larger than life, tense, and suspenseful. They were flat, and colored as if in artificial light. I felt my body to be first giant, then minuscule. My arms seemed to be several inches longer than before and did not feel as though they belonged to me. (Anonymous, 1990)

Along with sensory distortions, the person may experience severely disorganized thinking. It becomes enormously difficult to concentrate, remember, and integrate important information while ignoring irrelevant information (Barch, 2005). The person's mind drifts from topic to topic in an unpredictable, illogical manner. Such disorganized thinking is often reflected in the person's speech (Munetz, 2006). Ideas, words, and images are sometimes strung together in ways that seem nonsensical to the listener.

## Negative Symptoms

### Flat Affect, Alogia, and Avolition

Negative symptoms consist of marked deficits or decreases in behavioral or emotional functioning. One commonly seen negative symptom is referred to as flat affect or affective flattening. Regardless of the situation, the person responds in an emotionally "flat" way, showing a dramatic reduction in emotional responsiveness and facial expressions. Speech is slow and monotonous, lacking normal vocal inflections. A closely related negative symptom is alogia, or greatly reduced production of speech. In alogia, verbal responses are limited to brief, empty comments.

Finally, avolition refers to the inability to initiate or persist in even simple forms of goal-directed behaviors, such as dressing, bathing, or engaging in social activities. Instead, the person seems to be completely apathetic, sometimes sitting still for hours at a time. In combination, the negative symptoms accentuate the isolation of the person with schizophrenia, who may appear uncommunicative and completely disconnected from his or her environment.



Young Adulthood and Schizophrenia The onset of schizophrenia typically occurs during the 18-to-25 age range. Amber Main fit that pattern when she started hearing voices during her freshman year of college. She also started believing that hidden cameras were tracking her. Usually an excellent student, her grades plummeted because she couldn't concentrate. In January she was hospitalized. Fortunately, Amber responded well to an antipsychotic medication and was able to return to school.

Amber has chosen to openly discuss her illness, even appearing in an MTV documentary. As she explains, "I don't want to hide what I am, or what's a part of me. But I'm not my mental illness, it's just something I have to deal with."

↑ isolation & disconnection

### hallucination

A false or distorted perception that seems vividly real to the person experiencing it.



Table 13.9

## Types of Schizophrenia

**Paranoid Type**

- Well-organized delusional beliefs reflecting persecutory or grandiose ideas
- Frequent auditory hallucinations, usually voices
- Little or no disorganized behavior, speech, or flat affect

**Catatonic Type**

- Highly disturbed movements or actions, such as extreme excitement, bizarre postures or grimaces, or being completely immobile
- Echoing of words spoken by others, or imitation of movements of others

**Disorganized Type**

- Flat or inappropriate emotional expressions
- Severely disorganized speech and behavior
- Fragmented delusional ideas and hallucinations

**Undifferentiated Type**

- Display of characteristic symptoms of schizophrenia but not in a way that fits the pattern for paranoid, catatonic, or disorganized type

## Types of Schizophrenia

Figure 13.5 shows the frequency of positive and negative symptoms at the time of hospitalization for schizophrenia. These symptoms are used in diagnosing the particular subtype of schizophrenia. DSM-IV-TR includes three basic subtypes of schizophrenia: *paranoid*, *catatonic*, and *disorganized* (see Table 13.9).

The *paranoid type* of schizophrenia is characterized by the presence of delusions, hallucinations, or both. However, people with paranoid schizophrenia show virtually no cognitive impairment, disorganized behavior, or negative symptoms. Instead, well-organized delusions of persecution or grandeur are operating. Auditory hallucinations in the form of voices talking about the delusional ideas are also often evident. Convinced that others are plotting against them, these people react with extreme distrust of others. Or they may assume an air of superiority, confident in the delusional belief that they have “special powers.” The paranoid type is the most common type of schizophrenia.

The *catatonic type* of schizophrenia is marked by highly disturbed movements or actions. These may include bizarre postures or grimaces, extremely agitated behavior, complete immobility, the echoing of words just spoken by another person, or imitation of the movements of others. People with this form of schizophrenia will resist direction from others and may also assume rigid postures to resist being moved. *Catatonic schizophrenia* is often characterized by another unusual symptom, called *waxy flexibility*. Like a wax figure, the person can be “molded” into any position and will hold that position indefinitely. The catatonic type of schizophrenia is very rare.

The prominent features of the *disorganized type* of schizophrenia are extremely disorganized behavior, disorganized speech, and flat affect. Delusions and hallucinations are sometimes present, but they are not well-organized and integrated, like those that characterize paranoid schizophrenia. Instead, people with the disorganized type experience delusions and hallucinations that contain fragmented, shifting themes. Silliness, laughing, and giggling may occur for no apparent reason. In short, *the person’s behavior is very peculiar*. This type of schizophrenia was formerly called *hebephrenic schizophrenia*, and that term is still sometimes used.

Finally, the label *undifferentiated type* is used when an individual displays some combination of positive and negative symptoms that does not clearly fit the criteria for the paranoid, catatonic, or disorganized types.

# Reading: Built-In Tools

- **Chapter summary**
  - Use the author's summary to test your own ability to summarize the material
  - Be careful not to rely on the chapter summary to do your job for you (*Remember, you are trying to learn and build skills, not find short-cuts*)
- **Questions at the end of the chapter**
  - Use these questions to test your understanding of the material

**We hope that you enjoyed the presentation!**

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