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# A Proven Public Speaking Course Design to Help Reduce Speakers Anxiety

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### РАЗДЕЛ І. ОБЩИЕ ПРОБЛЕМЫ ОБРАЗОВАНИЯ. ПРОФЕССИОНАЛЬНОЕ ОБРАЗОВАНИЕ

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### УДК 378

## РАЗРАБОТКА КУРСА ОРАТОРСКОГО ИСКУССТВА, НАПРАВЛЕННОГО НА СНИЖЕНИЕ УРОВНЯ ВОЛНЕНИЯ ВЫСТУПАЮЩИХ A PROVEN PUBLIC SPEAKING COURSE DESIGN TO HELP REDUCE SPEAKERS' ANXIETY

Аннотация: В статье описан курс ораторского искусства, направленный на снижение уровня волнения при публичном выступлении. Этот курс оказался эффективным как при онлайн-обучении, так и при аудиторных занятиях, что позволило нашему отделению получить данные для отчета об успешном внедрении курса для администрации.

**Abstract:** This pedagogical idea shares our course design as a model for a public speaking course crafted to help students reduce their public speaking anxiety (PSA). This design and the quantitative measurement of its outcomes have been effective in both online and face-to-face course delivery modes, providing our department with assessment data to help communicate the course's success to our administration.

**Ключевые слова**: волнение при публичном выступлении, боязнь общения, разработка курса, оценка, обучение ассистентов.

**Keywords:** public speaking anxiety, communication apprehension, course design, assessment, graduate teaching assistant training.

**Rationale.** Scholars assert that nearly everyone experiences fear of public speaking to some degree, making it the most common form of communication apprehension (CA) [Richmond, Wrench, &McCroskey, 2013]. In fact, studies show that thirty to forty percent of people in the United States experience this fear, known as public speaking anxiety (PSA), to the extent that it hinders their ability and willingness

to speak publicly, potentially hindering career aspirations, personal relationships, and self-image [for a full review of the literature surrounding PSA, see Richmond, Wrench, &McCroskey, 2013]. Although data appear to be sparse for the extent to which Russian citizens experience PSA, studies have shown that Finnish, Puerto Rican, and Japanese students have experienced equivalent or greater levels of public speaking anxiety as those in the United States, although the implications of their PSA may differ from those in the US [Richmond, Wrench, &McCroskey, 2013]. Numerous studies have used the same 34-item questionnaire, the Personal Report of Public Speaking Anxiety (PRPSA; http://www.jamescmccroskey.com/measures/prpsa.htm) [McCroskey, 1970], to determine students" PSA at the beginning of a public speaking course and measure any change in their PSA by the end of the course. Our department in a mid-sized, Midwestern University in the United States created an online survey including the PRPSA (contact us for the link) to measure changes in PSA for thousands of students over the past five years as a determinant of the effectiveness of the course design described in this manuscript.

The pedagogical idea offered in this manuscript presents our model for the design of a public speaking course crafted to help students" reduce their PSA during a single semester. This design has been used for decades with great success in both online and face-to-face course delivery modes, reducing students" PSA by an average of 10% in the face-to-face environment [Hunter, Westwick, &Haleta, 2014] and 7% in online courses [Westwick, Hunter, &Haleta, 2015].We have also used the change in our students" PRPSA scores as an assessment measure to help communicate the course's success to our administration. As a result, we have received support and resources for a Speech Communication Center/Speech Lab to aid students in further PSA reduction and to help us continue to research best practices toward that end. Additionally, the course design described below, in conjunction with our work to measure its success, led to our department's being awarded by the National Communication Association Basic Course Division as the 2013 Program of Excellence. **Public Speaking Anxiety.** PSA is a form of social anxiety that is specific to the fear of giving a speech [for a thorough review of PSA research, see Hunter et al., 2014]. PSA can be activated before, during, or even after giving a speech. Many people even experience it at the mere mention of a speaking assignment. The symptoms of PSA go beyond mere psychological discomfort – PSA is commonly accompanied by physiological symptoms like sweating, shaking knees and hands, increased heart rate, nausea, shaky voices, muscle tension, and even loss of one's voice. In extreme cases, more severe physical and neurological consequences--heart palpitations, dizziness, and mental confusion--can result [Bodie, 2010]. PSA can also lead to relational, emotional, and financial problems. Even worse, research suggests that PSA can be contagious, meaning that one highly apprehensive student can increase anxiety for subsequent speakers in a classroom. These problems are especially relevant within the basic speech course because it is designed to improve public speaking for personal development and future employability, yet highly apprehensive students often drop out of the course or even out of college altogether as opposed to facing the first public speech.

Considering the research on the implications of anxiety and the past research establishing the success rate of some of its treatments, speech communication programs stand to benefit by enhancing their ability to serve this apprehensive population through a course design proven effective at reducing apprehension or anxiety. We have further, at times, used the PRPSA to help individual students analyze the causes of their own PSA. In this way, we can assist an apprehensive individual by pinpointing particular focal points to aid in anxiety-reduction in his or her particular case. In at least one case, this method yielded a student's PRPSA score being reduced by 30 percent.

The Course Design Model. The course assessed in this study is a multi-section, standardized course taught mostly by graduate teaching assistants (GTAs) and adjunct instructors. Every year, new instructors are required to attend a face-to-face, two-week, intensive training session and weekly training meetings for their first semester teaching the course to "calibrate" instruction and critiques with the proven methods used in our

department. Every section uses the same textbook, Power Point© lectures, competency rubrics, and exams. The training includes a required sample lecture for departmental faculty members and peers, as well as training to optimize reliability of grading procedures. All assigned speeches in the course are to be delivered extemporaneously--the most anxiety-producing mode of speaking. Therefore, an effective, research-based approach to the treatment of PSA – one which includes elements of exposure therapy, cognitive modification, and skills training – is necessary. Blending these methods maximizes their effects and long-term results because each treatment focuses on the solution to a different foundational cause for PSA. Exposure therapy treats psychological arousal, cognitive modification addresses negative thought patterns, and skills training increases aptitude, but the interaction among the three methods maximizes outcomes.

The course begins with a relatively simple speaking situation and then "stacks" increasingly-challenging speaking experiences on that foundation so that students can become desensitized gradually to the fear-producing stimulus (speaking) in a safe and supportive environment. Additionally, every time a student gives a speech or even discusses his or her topic, ideas, or source material with the instructor or with other students, he or she is engaging in this type of repeated exposure therapy which, akin to the principle of classical conditioning, seeks to create neural and emotional connections between feared experience and positive outcomes. The course also involves cognitive modification by training those with high levels of speaking anxiety to identify their negative self-talk and replace it with positive thoughts. In keeping with the course standardization discussed above, each instructor is required to present an entire day's standardized lecture and Power Point presentation on speaking anxiety, offering the students a restructured, alternative view of anxiety. By seeing the normalcy and frequency of speaking anxiety and receiving the instructor's encouraging feedback, the student can reframe attitudes toward speaking. Additionally, as a part of the two-week long training and "calibrating" for the course, instructors are directed to identify in each speech one or two strengths for every constructive criticism or limitation mentioned, and to elicit positive feedback and constructive criticism from the students" peers as they critique one another"s presentations. Finally, competence training builds public speaking skills throughout the course. As students demystify the process of effective public speaking, learning about proven methods for choosing an engaging topic, determining an effective thesis statement, crafting a simple outline, providing evidence for their arguments, and delivering their speeches using nonverbal techniques that enhance audience impact, they reduce communication anxiety. For more information about the course and training process, a summary can be located at the following link: https://www.natcom.org/sites/default/files/pages/Basic\_Course\_and\_Gen\_Ed\_POE\_Sou th Dakota State University Summary.pdf

Assessment of Course Design. Measurable and statistically significant PSA reduction for our students has been documented in several studies. Hunter et al. (2014) employed a paired-samples t-test that indicated that the posttest mean score of 102.19 (SD = 51.72) was significantly lower than the pre-test mean of 114.83 (SD = 22.54) (t (468) = 5.37, p < 0.00). Westwick et al. [2015] showed that the mean PRPSA score for online public speaking students (M = 117.04, SD = 20.79) also decreased significantly (M = 108.90, SD = 21.17) upon completion of the course (F(1, 145) = 28.05, p < .001).

**Outcomes.** Assessment data derived from PRPSA measurement in our multisection, standardized course has resonated strongly with our administration, especially with regard to the student success model on our campus. Our findings have also led us to forge relationships with the counseling center to provide resources for highly apprehensive students. Most importantly, our data continue to show that our students come into our course highly apprehensive and benefit from our continued focus on PSA treatment. We have found that our rigorous course design and assessment can resonate strongly with a wide range of teaching philosophies and can allow academic freedom for most any instructor and department.

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