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ABSTRACT

The community services department of an eastern community college offers a noncredit course called Overcoming Speech Anxiety. The students range from those who avoid conversation with most people to those who speak publicly often but with a great deal of discomfort. Their reasons for taking such a class suggest that most people suffer situational rather than general apprehension. Their fears fell into two predominant categories: fear of certain audiences and fear of speaking on certain topics. Generally, four types of approaches are used in the three two-hour class sessions: (1) creating a support group atmosphere; (2) employing relaxation exercises and systematic desensitization techniques; (3) improving confidence through cognitive restructuring; and (4) completing an abbreviated public speaking assignment. By the final class, most students state in written evaluations that they are less anxious because they better understand their anxieties. Making the course separate from the speech department--noncredit, not graded, and without a speech requirement--helps produce a relaxed atmosphere. The greatest advantage to such a course is the acknowledgement that learning to speak publicly and learning to feel confident in speaking publicly are different skills that need to be taught in different ways. The major disadvantage to teaching apprehension reduction in a course completely separate from any speech course is that there is no clear way to measure progress. (HTH)

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AN OVERCOMING SPEECH ANXIETY COURSE FOR THE COMMUNITY

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Of great importance to all of us as teachers are those moments of tangible results from our efforts to assist our students. I was most curious, then, the day I ran into a speech student in the hallway who had recently completed my non-credit Overcoming Speech Anxiety course.

"How did your first speech go, Lynn?" I asked.

She paused before answering, "I threw up before I gave the speech..."

She must have noticed my disappointment through my attempts to look as though I could accept that outcome.

She quickly continued, "...but I gave it! I could never have given the speech if it hadn't been for your course!" And indeed, she was feeling quite good about her progress in her bout with communication apprehension.

Much has been written about the widespread existence of communication apprehension among Americans. James McCroskey defines communication apprehension as a "level of fear of anxiety associated with either real or anticipated (oral) communication with another person or persons."¹ In the 1982 publication, The Quiet Ones, McCroskey and Virginia Richmond argue that "[a]lmost 95 percent of the population reports having communication apprehension about communicating with some person or group in their lives."² Seventy percent of college students tested scored in a moderately high or high anxiety range in the public speaking situation.³ Those of us who teach communication and want to assist with this problem are probably in this field as a result of having suffered very little of the pains these people experience.

At present many of us devote a day or two of our speech class schedule to understanding this apprehension and some useful tricks of the trade to allow speaker to live with the fears. We don't have room in the syllabus for more. We often reassure the most apprehensive that experiences through the semester will ease the discomfort.

But it only works for some. What about the effective consultant who speaks each week to large groups, but during three years on the job, she always gets sick first? John Bee and Linda Moore of the University of Akron found that, following a semester's speech course, (Personal Report of Communication Apprehension) "scores for high apprehensive remained the same over the semester, while scores for both the low and middle groups rose significantly."⁴ Lauren Vicker of St. John Fisher College had students volunteer to attend their Speech Anxiety Reduction Program even after they

had successfully completed their required speech course.⁵

Our approach for dealing with the communication apprehension problem at Prince George's Community College is a Community Service, noncredit, \$10, evening course called Overcoming Speech Anxiety. It was developed by Deborah Ross and Darlyn Wolvin. It focuses on public speaking apprehension. I would like to identify the population, the format and the advantages and disadvantages of such as independent noncredit course.

The course was publicized through Community Services catalogues which are mailed to all residents of the county and through announcements in all speech classes. The announcement clearly stated that no speeches would be required in this course. Offering it in the fifth or sixth week of the semester seems to be best, allowing students in the classes a chance to assess their own needs for extended work to reduce apprehension. They can complete the three-week noncredit course before major final speeches are due in their required speech classes.

Though we expected to find many students for PGCC speech classes enrolled, they are in fact greatly outnumbered by people from the community who have never attended PGCC. The average student age is 40. They range from those who avoid conversation with most people to the speaker I mentioned earlier who speaks often interpersonally and publicly but with great discomfort.

Testing them with the PRCA (Personal Report of Communication Apprehension) showed that these students do not score higher than average speech class students, in fact, they scored lower than my interpersonal class members. Scores ranged from 57-116, with a mean of 92. What sets them apart seems to be their motivation to overcome their anxieties rather than the severity of their problem.

The reasons for taking such a class suggest that most suffer situational, rather than general, apprehension. Their fears fell into two predominant categories; fears of certain audiences and of speaking on certain types of topics. Fears of audiences were of those who were older than the speaker, in positions of higher authority (as a nursing practitioner lecturing to doctors), or total strangers. Fears related to subject matter were those of talking on material quite new to the speaker or on material that would be controversial to the audience. Class discussion suggested that most felt competent to do their jobs but not to communicate their knowledge to any more than a few people at one time.

It was this barrier to speaking that brought most to the course. A striking example was the advertising manager who explained he had just turned down a \$20,000 a year raise because the new position would have required extensive public speaking.

Retirees may face a different fear. A colleague's student had been a successful speaker, but voiced doubts that he could now, without his job title supporting him.

Generally four types of approaches were used in the three two-hour class sessions. The first was support group in a sense. Knowing that everyone in the group felt speech anxiety seemed to create a climate which allowed even the shyest to articulate her concerns. We created a list of all the bodily symptoms everyone had experienced, logical reasons to be fearful of public speaking, and the greatest fears they had. Perhaps it was therapeutic to know there was no cool, calm, confident speaker sitting in the room, silently chuckling. Even in classes of 20, people did not demonstrate anxiety when speaking in this class about their anxieties.

The second approach was relaxation exercise and systematic desensitization. Use of a relaxation tape as those used in stress management courses, stop smoking clinics, etc., is helpful to show people how to relax and how to recognize when a part of the body is tense. Students brought blankets to lie on the floor or occupied soft chairs. Deep breathing exercises were also introduced. Students were encouraged to practice these exercises at least three times during each week.

Systematic desensitization provides a hierarchy of speaking situations which the student is asked to imagine while in a relaxed state. The student must self-monitor and envision the scenes only while maintaining a relaxed body. McCroskey's College Hierarchy was used with some modification for these older, on-the-job participants. The student participant learned to see him/herself in the act of speaking or preparing to speak while keeping the body relaxed. The hierarchy was covered over three weeks of class; as the students improved their abilities to relax the situations to envision were increasingly more threatening.

McCroskey and Richmond explain "[t]he underlying rationale for this treatment is that anxieties (in this case communication apprehension) are learned, and anything that is learned can be unlearned."⁶ They report an eighty to ninety percent success rate with this method.⁷

Because students in this class were not speaking, there was no way during the time period of the course to sense improvements as a result of systematic desensitization. And I felt students needed to assess further their fears. For these reasons I turned to cognitive restructuring and found it very effective in improving self-confidence. Restructuring involved asking students to list their negative expectations regarding public speaking. After a lengthy list was written, we worked through each issue, responding with coping statements; more realistic expectations, or ways to decrease the probability of the problems. For example:

EXPECTATION: I'll forget everything.

COPING STATEMENTS: I can prepare a simple outline ahead.
I can use a notecard with my outline's main ideas on it.
I know my subject.
I have prepared well for this speech.
It happens to every speaker.

EXPECTATION: I'll get asked a question I won't be able to answer.

COPING STATEMENTS: It is all right to say, "I don't know."
I can refer the person to someone who does know.
I know my subject.
I have prepared well for this speech.

The fourth subject covered in the course was public speaking, in a quite abbreviated form. More accurately students learned through some suggestions for their problems what a public speaking course could do for them. Many planned to enroll at the college to take a class in following semesters. Students learned that public speaking class training in audience analysis, organization, research, nonverbal communication, etc., was specific to the questions they had.

By the final class most stated in written evaluations that they were less anxious about their anxieties because they better understood them. With the same reasoning, they felt that if they were trained in public speaking, their anxieties would decrease.

One unexpected advantage to offering apprehension reduction courses as Community Service courses, then, is that more people in the community are introduced to the college and specifically, speakers are introduced to the speech courses available.

In their survey of SCA colleges and universities, Hoffmann and Sprague found 73.4 percent of respondents believing apprehension problems should be handled in the classroom, not by other services on campus.⁸ Perhaps they were not considering that speech faculty could instruct these courses even when housed outside of the department. I found some unique advantages to the use of a Community Services, noncredit course.

I also believe making the course noncredit and thus not graded helped produce the relaxed atmosphere needed to face challenging self-concept issues. This was more like a workshop than a course. This was reinforced by offering the course through Community Services instead of the Speech Department.

I believe it essential to the success of such a course that a statement be written in the course description guaranteeing that no speeches will be required. Some students stated that they would not have signed up

otherwise. Ironically this factor may have helped a few want to speak to the class the last night when the option was given.

The greatest advantage to such a course I perceive to be the acknowledgement that learning to speak publicly and learning to feel confident in speaking publicly are different skills that need to be taught in very different ways. I sought to project a changed temperament in this classroom, replacing the energetic you-can-do-it attitude with a more mellow relax-and-get-to-know-yourself attitude. It was a relaxing change for me. To be effective the classroom had to feel comforting, not competitive or demanding.

The major disadvantage to teaching apprehension reduction in a course completely separate from any speech course is that there is no clear way to measure success. Some students were going to speak in the near future, others may not speak for another year. Whether they maintain their ability to relax during the interim will determine the success of systematic desensitization for them.

I also found that three weeks were insufficient to teach relaxation and systematic desensitization while also fulfilling the needs that encouraged the other three teaching approaches. I plan to extend the course to four weeks next year.

For the students who were concurrently enrolled in the basic speech class, written evaluations convey that this course helped their confidence in public speaking immensely. The student referred to in my introduction was ready to drop her speech class before Overcoming Speech Anxiety. She is delighted to have earned a "B."

Another student later explained that the relaxation exercises allowed her to get back to sleep when panic woke her up the night before Speech #1. At least she was rested for the occasion.

The goal should not be ending all anxieties, but understanding them and tempering them. This course seems to be an effective step in that direction.

NOTES

¹James C. McCroskey, "Validity of the PRCA as an Index of Oral Communication Apprehension," Communication Monographs, August, 1978, No. 45, p. 192.

²James C. McCroskey and Virginia P. Richmond, The Quiet Ones: Communication Apprehension and Shyness (Dubuque: Gorsuch Scarisbrick, 1982), p. 20.

³Ibid., p. 15.

⁴John D. Bee and Linda Moore, "The Effects of Speech Course Content on the Reduction of Communication Apprehension," Paper presented to the Speech Communication Association, Louisville, Kentucky, 1982, p. 3.

⁵Lauren A. Vicker, "The Speech Anxiety Reduction Program: Implementation of the Large-Scale Program for Reducing Fear of Public Speaking," Paper presented to the Speech Communication Association, Louisville, Kentucky, 1982, p. 1-2.

⁶McCroskey and Richmond, p. 35.

⁷Ibid.

⁸Jan Hoffman and Jo Sprague, "A Survey of Reticence and Communication Apprehension Treatment Programs at U.S. Colleges and Universities," Communication Education, July, 1982, No. 31, p. 189.

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