Laloscopophobia: Variables that Empower and/or Impede Effective Delivery and Articulation in the Art of Public Speaking

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ABSTRACT

Public speaking is an issue that has imposed serious problems for a large number of individuals in different situations, occasions, settings and fields of study and/or work. It is a source of affliction that is likely to interfere though with varying degrees, with speakers’ academic achievements as well as career enhancement and eventually promotions.

The present study lends itself to exploring laloscopophobia (public speaking anxiety) from various dimensions and perspectives. It also attempts to discuss the nature of laloscopophobia by investigating its background in terms of definitions, labels, rank and symptoms. More specifically, it seeks to demonstrate factors that debilitate successful speaking required to meeting speakers’ and audience expectations. A further goal is to present key principles, intervention techniques and reduction procedures that have been developed to help phobic combat their fear and boost their confidence. Basic elements that constitute a good speech are also highlighted. In addition, the applicability of the offered strategies to apprehensive speakers is further investigated. Research findings show that public speaking anxiety is found in versatile categories of speakers, presenters, performers, students and individuals who are assigned to accomplish a certain oral task. Moreover, these findings reveal that it is treatable on the grounds that afflicted persons acknowledge their fear and their level of communication apprehension, make use of the successful applicable methods, benefit from relaxation exercises and visualization strategies investigated so far, and adopt an audience centered approach in order to solve this problem.

KEYWORDS: Communication, anxiety, presentation, preparation, performance, speeches, audience, judgment, embarrassment, avoidance, scrutiny, withdrawal, success, failure.

INTRODUCTION

Language is an indispensable tool of communication. Using language effectively facilitates successful communication. Conversely, ineffective use of language impairs mutual understanding. However, in a wide range of speeches and presentations that require a sound delivery, other factors are involved irrespective of language incompetence. Until presently, the whole bulk of research has been conducted on performers whose first language is English, laloscopophobia in particular. This phenomenon ramifies to all walks of life. Broadly speaking, performers have been incessantly encountering a legion of difficulties and obstacles in public speaking. Delivering speeches constitutes an integral part of many vital jobs and professions including teaching (McCroskey, 1977; Engelberg, 1994; Orman, 1996; Osborn and Osborn, 1988; Snowden, 2000; Antonoff, 1990; Motley, 1986 and Katz, 2000), management and sales training (Rosenthal, 2003), among others. Laloscopophobia also takes place in a wide range of such jobs, professions and fields as teaching and learning (Katz, 2000; Sathoff, 2002) sales, insurance, education and clerical work, music, acting, promotions and advertising (Marchetti and Geoffrey, 1995).

Significance and Problem of the Study

It is a well-known fact that many individuals in the course of their work and/or study are relatively speaking, required to deliver a presentation or give a speech on a specific topic either imposed or willingly selected. However, this task is likely to summon fear, nervousness and a bountiful proportion of anxiety to the extent of excruciation.

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Motley (1986:47) observes that communication apprehension ranks at the top of all kinds of phobias (mounting to hundreds) beating out the fear of death. A phobic might even sabotage his/her field of study to shun having to do a presentation. (Ibid)

As regards laloscopophobia, to the researcher’s best knowledge, no other study has been devoted either partially or exclusively to investigating this phenomenon whether at Jordanian universities or at any other Arab universities. In other words, there is a paucity of research on this issue. Therefore, the present theoretical study is addressing the issue of public speaking at length. Moreover, it functions as a pioneer in the realm of the art of public speaking and delivering oral presentations. Based on a large corpus, the study seeks to explore laloscopophobia from different angles. Furthermore, it attempts to find factors that summon stage fright once a presentation is in tact. Definition, ranking, reasons, symptoms and therapy will be intensively investigated. It further seeks to unfold certain behavioral patterns pertaining to such anxiety-provoking situations as is the case of delivering presentations. A further goal is to explore vital aspects that constitute the core issue of powerful and effective presentations. These variables include reasons that trigger fear, and strategies and techniques that are employed to alleviate fear and equip phobic with the fundamentals of the art of public speaking. It is hoped that this research paper will provide some valuable information on multiple levels: communicative, psychological, physical and physiological.

Research Questions

This study is an exploratory theoretical research designed to examine the role of public speaking anxiety in various settings. It is in quest for the following questions:

1. What are the fundamentals of the art of public speaking and the basic elements that characterize a good speech?
2. What are the most crucial factors that cause public speaking anxiety in various settings and judgmental environments?
3. What are the most beneficial strategies and reduction techniques to handling public speaking anxiety?
4. The applicability of effective researched tools to eliminating public speaking anxiety.

Literature Review

The theoretical framework of this research paper adheres to what has been stated in some behavioral theories of public speaking anxiety.

A vast amount of research has been carried out on oral communication apprehension. Due to the negative associations of public speaking anxiety on performers, researchers have been motivated to investigate helpful ways and means that can be implemented to reduce if not dissolve public speaking anxiety. Cogito (2002:40) observes that in this day and age where overwhelming demands are placed on intellectuals constituting a major part in the workforce thus enjoying accessibility to the highly advanced technologies as the Internet, more of us have to stand up beside the data show and deliver a speech. Such delivery is inclusive of performers at different levels and diverse backgrounds and fields of work as well as study. By the same token, Katz (2000:1) demonstrates that 20 – 85% of students at colleges exhibit anxiety if confronted with the task of presentations.

McCroskey (1970) holds the view that Communication Apprehension CA, refers to real or anticipated communication with a person or persons. Oral CA is the most common form.

In an attempt to measure communication-bound anxiety, McCroskey (1970) conducted a study to measure Communication Apprehension (CA). Elsewhere, three instruments have been used: Observer ratings, devices for indexing physiological changes and self-report scale. Subjects varied according to the kind of measurement. McCroskey excluded observer ratings device due to difficulties encountered in getting reliable ratings since such ratings should be based on observable behaviors. Likewise, devices for indexing physiological changes have been ruled out because they fail to measure withdrawal responses in an actual communication environment. McCroskey selected self-report scales, the so called, the Likert type to index communication apprehension reliability.

Advantages of this approach are easy accessibility in terms of costs, implementation, applicability to a wide range of communication contexts at one time, and high reliability. He tested this approach by developing four scales: The Personal Report Of Communication Apprehension for College students (PRCA-College), the Personal Report of Communication Apprehension for Tenth graders (PRCA-Ten), and the Personal Report of Communication Apprehension for Seventh graders (PRCA-Seven), and the Personal Report of Public
Speaking Apprehension (PRPSA). The first three are designed to measure CA while the fourth is designed to measure public speaking context. With regard to PRCA-College, it is composed of 20 statements concerning feelings about communicating with other people. It was administered to 2,479 college students at Illinois State University. Findings showed that this instrument is reliable and somewhat valid. As for PRCA-Ten, it consisted of the same material though with rewording of the statements to fit the needs of tenth grade students, and the addition of ten items. Subjects were 123 students at the university high school in Normal, Illinois. This scale showed no test-retest reliability estimate. The third scale PRCA-Seven contained the same material as tenth graders. It was administered to 72 students in Metcalf Junior High School, Normal, Illinois. Results were the same as tenth graders. The fourth scale PRPSA substituted public speaking situations for test situations. It consisted of 34 statements concerning feelings about communicating with other people. It was administered to 945 students in a public speaking course at Michigan State University. Results showed a general anxiety level in individuals in many situations as public speaking, test taking, and communicating at a small scale among others. Findings showed consistency with theoretical expectations. In a study, McCroskey (1977) says that much of the research done on oral communication has highlighted the impact of a person’s anxiety about communication on a person’s communication behavior. It has revealed that some people yield oral communication apprehension more than others resulting in a negative impact on their lives as well as their communicative behavior. In this study, he distinguishes between two levels of CA: high and low. A person with a high CA tends to avoid communication thus attempting to shun experiencing fear. This being the case, one cannot claim that a person with a high CA never engages in oral communication but his engagement is less than a person with a low CA. He further distinguishes among the constructs of CA, reticence and unwillingness to communicate. Research has used these labels interchangeably the matter, which caused confusion and inaccuracy. “Reticence” is the most global one since it refers to a trait of a person who chooses to be silent rather than participating in communication. “Unwillingness to communicate” focuses on global predisposition to shun communication and identifies with a multiplicity of potential causative elements that pave the way for the emergence of predisposition as apprehension, alienation, low self-esteem, introversion and so forth. Seen in this light, the construct of CA is considered a sub constituent of reticence or unwillingness to communicate. This construct categorizes people with high CA as avoiding or withdrawing from communication. It specifies only anxiety as its main causal element. CA theory considers avoidance and withdrawal behavioral patterns as a result of other causes. Distinction is also made between state and trait apprehension. Trait apprehension involves fear or anxiety relating to many different types of oral encounters. This includes talking to a single person or a small group to delivering speeches before a large audience. State apprehension on the other hand is specific to a certain oral communication situation as giving a speech to a group of strangers, interviewing an important person for a new job at a certain time and place. The most notable example of state CA is “stage fright” which is viewed as a normal response experienced by most people when confronted with oral communication tasks publicly. People have varying degrees in experiencing public speaking. Some may exhibit little difficulty but undergo high state CA when interacting with strangers or a talking to superior person. Conversely, trait CA is not a characteristic of well-adjusted individuals. People with high levels of trait CA undergo high levels of apprehension about the majority of oral communication encounters, these threatening as well as less threatening. Studies on college students show that 20% of students at major universities have high trait CA. This is also true of public school settings although people suffering from high levels of trait CA exhibit speech problems as articulation, voice disorder (stuttering), yet the vast majority does not encounter problems with basic speech skills. McCroskey maintains that measurement of communication apprehension highlighted state rather than trait CA, stage fright in particular. This instrument has a great advantage with respect to its applicability and implementation on a wide range of communication contexts. The reliability of this research instrument was over .90. An eight year survey conducted on 20,000 college students at Michigan State University, Illinois State University, and West Virginia University showed that between 15% and 20% of American college students suffer from debilitating CA. McCroskey (1976) observes that CA is not only stage fright but entails broad-based apprehensions about oral CA including talking to a single
peer to delivering a speech on television. 

In line with the views expressed on trait vs. state CA, Ayres (1986) attributes a significant role to both traits in public speaking fear realms. He uses the terms: audience anxiety (1990c), public speaking apprehension anxiety (1990a) and stage fright (1986). He relates CA to cognitive processes and psychological perceptions. Both domains result in negative outcomes. Ayres’ research has been conducted on public speaking anxiety in the classroom. This anxiety is ascribed to the speaker’s inability to achieve self-presentation and/or instrumental goals. Incongruent goals are at play when a speaker fails to adopt a suitable communicative strategy to execute a task thus revealing fear to the audience. Self-presentation goals, which include credibility and self-esteem, have the most influence on public speaking anxiety. On the other hand, instant goals deal with the speaker’s purpose to inform and/or persuade the audience. Consequently, the audience’s interaction plays a considerable role in determining the relationship between instant goal incongruence and public speaking anxieties. Ayres found those speakers who had incongruent instant and self-presentation goals exhibited higher CA levels than those exposed to other combinations. Regarding psychological perceptions, Ayres explains stage fright in terms of adopting a social comparison perspective. Speakers compare their understanding to audience expectations. If audience expectations outweigh their abilities, public speaking anxiety transpires. Nevertheless, a speaker should understand that there exist enough discrepancies between their ability and audience expectations. These discrepancies are important and will be revealed and accordingly, communication should take place. Ayres focuses on the role of the audience in public speaking apprehension (1990c) Audience characteristics as size, familiarity, and similarity with the speaker, status, and behavior are significant factors that have to be considered when speaking in public. According to his view, audience composition influences situational anxiety. Negative thoughts on the part of the student and poor preparation have negative effects on speaking. Students with high CA show high levels of public speaking anxiety (Ayres, 1992b). These students have less task related thoughts and retrieve less information from lectures attended before a speaking assignment, thus resulting in low grades and low academic achievements. In a subsequent paper, Ayres (1996b) observes that high CA students use poor preparation strategies, devote less time to the communicative aspect of a speech preparation and spend more time on preparing notes in the library. Low graders have poor preparation techniques rather than lack of preparation. Poor techniques result from negative thoughts. Therefore, they seem to be at a disadvantage in the classroom.

The negative effect of public speaking anxiety in the classroom necessitated the resorting to reduction techniques. If an increase of anxiety is bound to audience composition, a decrease could be achieved by changing this composition. In contrast, if anxiety is related to the speaker’s cognitive process and psychological perception, the speaker should use reduction strategies. Much of Ayres’ (1997) research focused on effective reduction strategies. Imagery serves as one of the major strategies. It has three components: vividness, valance and control. High CA students show less control, negative valance and fewer details when assigned a public speaking activity. Imagery has the benefits of helping students reduce apprehension and increase positive thoughts. The use of reduction techniques in imagery is systematic desensitization, rationale emotive therapy and visualization (Ayres and Hopf, 1987). Systematic desensitization aids people in imagining speech scenes while sensing relaxed feelings in a relaxed manner. Rationale emotive therapy helps people identify irrational thoughts processes by substituting them by rationale ones by creating or recreating sensations associated with real or hypothetic experiences. Visualization supports people in imagining executing a task successfully. These techniques showed efficiency in reducing public speaking anxiety. Visualization proved to be more beneficial due to its implementation within the restrictions of the classroom and requires no specialized training for instruction. However and irrespective of these advantages, deficiencies have also been explored. Practice as a required skill was effective in decreasing anxiety while perceived competence was not. As a result, a combination of skills training, systematic desensitization and visualization is the best technique to reduce anxiety. Ayres and Hopf (1992) studied combining intervention techniques. They found that the order, in which these variables were administered, showed differences. Students who were exposed to skills training, visualization, and systematic desensitization in a workshop, showed a slight reduction in CA. In contrast, if they were exposed to systematic desensitization, visualization, and then skills training, showed the greatest
reduction. Also, students who were presented first to skills training then systematic desensitization and visualization, showed no noticeable difference from those who received no intervention methods. Ayres et al. (1993) described a self-help method for decreasing CA. It advises the student to watch “coping with the fear of public speaking” videotape. Such instruction is much more advantageous as compared to personal instruction. Editing techniques and absence of concern (on the part of the instructor) are helpful. Although videotaping reduces CA, yet it does not improve speaking.

Hypothesis

This study is intended to investigate the following hypothesis and its corollary.

Hypothesis: Public speaking anxiety is the main delimiter of delivering speeches and presentations.

Corollary: More experienced performers exhibit less public speaking anxiety and vice versa.

Irrespective of the numerous settings in which individuals seem to be vulnerable to speaking in front of others, the major hindrance is likely to be bound to the fear of public speaking. Speakers in diverse fields encounter difficulties in the way they should cope with giving speeches and delivering good presentations in the presence of small and/or large audiences. The hypothesis of the study claims that experience plays a role in the way a speaker delivers a presentation or a speech successfully.

Background

Orman (1996:1) maintains that people in different countries have to deliver a speech at some time in their career to accomplish a certain task. This delivery is performed either at a relatively small scale amongst friends and acquaintances as is the case in toastmasters, or at a large scale as is the case of academic/managerial bodies at universities, schools, business meetings or advertising. In some other particular jobs, it functions as a safety valve that promotes earning a decent living. By actors, tycoons and politicians, the making of a decent standard of living is immensely reliant on delivering speeches and presentations (Katz, 2000:1). Regarding the etymology of laloscopophobia, the term is traced back to Greek; “lalo” means speaking, “scopo” means “being seen”. Similarly, “glosso” means “tongue” and “phobia” means “dread” or “fear” (Leeds, 1998:1).

Concerning labeling, research has enumerated a variety of labels. The following terms have been used interchangeably: laloscopophobia, (Clark and Edwards 2000) stage fright, (Clevenger, 1959; Ayres, 1986) glossophobia (Leeds, 1998; Boyle, 2001), public speaking anxiety (Katz, 2000; Ayres, 1990a), podium panic, apprehension, speech fear, the butterflies, the jitters (Sathoff, 2002) reticence (Phillips, 1968) shyness (Zimbardo, 2004) communication apprehension (McCroskey 1970) talking terror, panophobia/panphobia /pantophobia, speech anxiety, speech trepidation, topophobia, performance anxiety, state and trait anxiety (Ayres, 1986) audience sensitivity (Paivio, 1964; Qtd in McCroskey, 1977). However, the present study will use the label “public speaking anxiety”.

As evident from this display, the terms fear, anxiety and phobia have been used variably. Before delving into discussing the differences, it is worth pointing out that contrary to popular belief, phobias are not a disorder, but a learned response of excessive fright to a certain stimulus, and since it is learned, it can be either unlearned or rectified so that it can be overcome. With regard to public speaking, it is defined as:

“The art or practice of making speeches to large audiences.” (Collins York English Dictionary).

By the same token, McCroskey (1977:79) defines communication apprehension as:

“An individual level of fear or anxiety associated with either real or anticipated communication with another person or persons”.

Elsewhere, McCroskey (1977:88) defines it as:

“The fear or anxiety observed in a person while communicating orally where other individuals are in a position to pass judgments. It is experienced by most people at one time or another”.

Similarly, the term phobia is defined as an unjustifiable fear from a certain object or situation (Encyclopedia Britannica). In psychiatry, it is given this definition: It is an abnormal intense and irrational fear of a given situation, organism or object (Collins York English Dictionary). Fear on the other hand reads as follows: A feeling of distress, apprehension or alarm caused by impending danger, pain …etc. Anxiety in sense 1 is defined as: A state of uneasiness or tension caused by apprehension of possible future misfortune danger, etc; worry. In sense 3, psychology, a very similar definition is stated:

A state of intense apprehension or worry often accompanied by physical symptoms such as shaking, intense feelings in the gut, etc, common in mental illness
or after a very distressing experience. To compare, Karmi (1999) refers to it as an entire unreasonable obsession, that is to say, extreme fear, which has its dominant grip over the phobic.

Katz (2000:1) defines a phobia as a fear that is out of proportion to the danger. In view of these definitions, there is an aggregate explanation of phobia, which is excessive fear.

**Fear, Phobia, Anxiety and Paranoia**

Although these terms have something excruciating in common which might cumber the lubrication of a sound delivery, yet they do exhibit grave differences. To explain, paranoia is defined as: A pervasive and unreasoning fear of personal danger. In addition, it is almost certain to strike at some time in every person’s life (Main, 2002:1). On the other hand, fear is considered a normal human emotional response, a sort of in-built survival device that all individuals possess involving both body and mind. When something happens, the mind sends a signal called flight or fight response according to which the body reacts (Ibid: 3). As soon as the incident is over, fear itself is unleashed.

Fear can be short or intense depending on the stimulus provoking it. Depending on its duration, the brain transmits a signal indicating its end. However, if this signal is not received, fear is persistent thus paving the way for the emergence of phobia. In turn, it might cause disruptions in a person’s life, which further facilitate the steering away from any intense provocative incentive; as a result, phobia has its dominion over the phobic to the extent that it impedes the execution of daily tasks and chores. In contrast, anxiety involves physical and mental tension though nothing might be taking place at the onset of anxiety. It just stems from a mere anticipation of something dangerous or bad that eventually might happen in the future. Individuals between now and then experience both fear and anxiety (Ibid: 1). Anxiety can be classified into mild, moderate and intense. A moderate amount of anxiety can be quite profitable since it recharges both body and mind to get ready in anticipation for something fearful or stressful. Nonetheless, when anxiety becomes intense, it can interfere with one’s ability to perform well. By the same token, fear functions as a protective device announcing danger and thus preparing one to deal with it accordingly (Ibid: 2). To sum up, performers are apt to experiencing full-blown and/or bouts of stage fright. A mild or moderate proportion of both fear and anxiety is likely to be helpful in undertaking certain duties, but an excessive amount entails the surfacing of phobia causing impediment of proper performance. In fear, there is a confrontation with the stimulus whereas in anxiety there is nothing in progress just mere anticipation. In phobia, fright is extended to cover the whole screen of one’s life leading to an entire paralysis.

**Ranking**

It is claimed that public speaking anxiety is the third largest mental health care problem in the world today. According to Eisenberg (2003:1), the dilemma of this phobia is not resolved yet. He says:

“I have been teaching and writing on the subject for more than 25 years, and I still cannot figure out why standing up in front of an audience and speaking is such an intimidating experience…. the problem continues to remain an enigma.”

Many researchers share him this view. Leeds (1998:1) says that the fear of public speaking outranked death ranking at the top being the foremost fear in our present day life. Other scholars consider it America’s leading phobia (Eisenberg, 2003:1). Likewise, Antoin (2002:2) maintains that in accordance with surveys, many people prefer to die rather than to deliver a speech. In accordance with these views, Otte (2002:2) says that it ranks near the top teaming with blindness and death. Another researcher, Motley (1986:46) cites different diseases, heights, reptiles, pets and spiders and burial alive, as amply surpassing speech anxiety. Also, losing a job, financial ruin, closed and open places, thunderstorms, blood, and elevators all of which speech fear takes the lead. (Ibid). Bruskin Associates (1973) (Qtd in McCroskey, 1977:80) found that speaking in public was the most frequently reported fear in a survey of American adults. Likewise, Ayres (1988:289) maintains that public speaking ranks as one of the foremost fears of people ahead of death. An even greater number of people do not avoid public speaking yet experience a certain degree of stress and anxiety that deters them from communicating properly in accordance with their wish. This observation applies to students, job candidates, business professionals and workers.

**Symptoms**

Public speaking anxiety is almost always accompanied by a host of symptoms ranging from the
plain to the most severe ones. The following domains have been identified: (Eisenberg, 2003:1)

1. Cognitive/behavioural
   It deals with the negative associations of the phobics with the way they picture themselves as being prone to humiliation, embarrassment, disorientation, evaluation blackmindedness, lightheadedness, others’ scrutiny and judgements, and excessive worrying.

2. Behavioural
   This encompasses avoidance as an outlet, gaze aversion, slumping of shoulders, flawed delivery, poor diction, ineffective posture, faulty gestures and improper grammar among others.

3. Physical /Physiological (Ibid: 2)
   This domain displays a whole array of umpteen symptoms. The phobic might experience some of these individually and/or collectively at a time. These are:
   a. Blushing and flushing of the face until turning crimson red,
   b. Getting nauseatic,
   c. Having a dry mouth/throat,
   d. Experiencing tachycardia (accelerated heart palpitations),
   e. Dizziness and vertigo,
   f. Trembling, quivering, and wobbliness,
   g. Tension, shortness of breath, being off balance,
   h. Stomach disorder, diarrhoea, frequent urination, perspiration,
   i. Gastrointestinal disturbances,
   j. Fidgeting, squirming,
   l. A sense of urgency to quit the situation, and a sensation of choking or drowning,
   m. Undergoing tremors and limb tremors.

Types
   It is expedient at this stage to shed light on types of phobia to have a clear picture of its components the matter, which helps in its analysis. McCroskey(1977: 82) identifies three major types of phobia:

1. Simple /Specific
   It is called as such since it relates to a specific stimulus, situation or an object connecting to past experiences denoting certain animals (reptiles, cats, bees, spiders) germs, heights, illnesses, blood, odors, storms, enclosed restrictive places like tunnels or traffic jams, and driving an automobile. In such a phobia, fear is excessive, irrational and also unjustifiable. Also, there is no intervention in the execution of daily tasks and chores. According to Abdelrahim (2003:31), it inhibits men more than women since men regard it as a lack of their manlihood designating cowardice and a weak personality.

2. Social Phobia
   Public speaking anxiety is a major type of social phobias and is the most severe kind since it literally cripples the phobic and hinders him/her from socializing with people at various occasions. The individual feels debilitated to activate extroversion. This is bound to the fact that the phobic feels that s/he is avid to painstaking scrutiny and judgement of others, which results in considerable interference with one’s life.
   Ayres (1988:292) identifies three types of social phobia:
   a. Baseline stress: It is the average stress level that is experienced at any certain time yet subject to modification through biofeedback, diet plans, sleep patterns and preparation tips.
   b. Critical stress: It is a part of baseline stress that can strike at a fixed point at which apprehension causes performance to suffer.
   c. Trait and state anxiety: Trait refers to a natural tendency of having certain qualities as calmness, nervousness and the like. It is genetically acquired while state deals with experiencing anxiety when a specific task is assigned and approached.

3. Agoraphobia
   (The term ‘agora’ was a place where the market was located in ancient Greece). An agoraphobic is afflicted with panic disorders to the extent that s/he cannot venture outside her/his own home unless accompanied by a friend, or a relative to safeguard outgoings. Plagued by this phobia, a sufferer avoids going to open places of all sorts as public places and situations including buses, trains, travelling, queues, and crowded shopping centers. In the light of this, they are hopelessly housebound. Unlike social phobics, agoraphobics fear their own internal cues (McCroskey, 1977: 82). Rshheidat (2003:31) demonstrates that it affects women more than men amounting to 63% where curing without medical treatments totals 37%.
Causes

Some researchers have attributed induced causes to biological and genetical factors. (Eisenberg, 2003:3). Others say that social phobia is usually a problem that might persist for a whole life that eventually attenuates in severity in adulthood. It is maintained that certain biological features, which are transmitted in families, may influence the brain’s chemical regulation of mood thus affecting the sensitivity or reaction of an individual. General personality traits as reticence, shyness and quietness cause speech anxiety. Moreover, some people have inborn natural propensity to be more cautious and inhibited while others are more bold and uninhibited. Leeds (1998: 3) cites three major fears that have a strong grip over the presenter. The first one relates to the performer’s own presentation by means of which the phobic fears of poor and insufficient presentation. Also, s/he might think that the audience notices her/his nervousness where in most instances the audience hardly notices that the presenter is jittery or panicky. In most cases the audience observes only a tenth of the real felt anxiety. The second reason is closely related to the information conveyed on the topic that lacks inadequacy (Ibid). Clark and Edwards (2000:1) on the other hand, compare between speechifying and reading from a written paper. They believe that in reading, the performer is shielded by the armour of the written information whereas an oral presenter is robbed from this chance. They argue that quite many brilliant people often give such soporific speeches due to speech reticence. Leeds (1998:4) attributes the next reason to fears revolving around the audience, for instance, having hecklers, being inattentive, being indifferent, talking to someone else, shifting focus, faulty conduct, lacking interaction and the like. In this sense, the presenter is afraid of interruptions, questions, own’s errors, being antipathetic, misunderstandings, and viewing the audience as an enemy. Another cause is relevant to fears about the speaker (Ibid). These pertain to lacking the necessary skills, exhibiting reluctance and reticence, making mistakes, getting forgetful, speaking at a low voice, being monotonous and going through a black out. In line with these views, Carolyn (1999:2) demonstrates that the overall fear is that of being apt to ridicule and its consequences. The final reason dwells on the novelty of the situation itself and the amount of its exposure (Ibid).

On the whole, there is a general consensus that a speaker, realistically speaking, cannot and must not be a perfectionist in order to get the intended message across. Another point is that fear is not impasse.

Treatment

So far, a battery of methods, strategies, approaches, tools and techniques have been recommended to battle this phobia. Laskowski (1996:1) says that even experienced speakers exhibit some anxiety when delivering a speech although this anxiety is subject to a gradual disappearance after each presentation. The following treatments are suited to both experienced and inexperienced public speakers. Teachers having large classes also can utilize them. These are:

1. The conventional/behavioral approach (Foa and Kozak, 1986; cited in Boyle, 2001:1)

The key principle of this approach is “in vivo” treatment, i.e, exposure to the dreaded object in a protected and controlled manner or setting. It is done either by gradual or total exposure. Gradual involves subjecting the phobic to a frightening object step by step until reaching the highest point in the anxiety hierarchy where fear is extinguished.

The total exposure is that of flooding so called because the phobic is immersed in the fear reflex until it is entirely vanquished. Phobics who are invulnerable to this method resort to the gradual exposure method. Ironically enough, not always is fear faced, in some cases it is imagined or visualized rather than confronted. Another component of this therapy is resorting to antidepressant pills and drugs or beta-blockers/tranquilizers, which basically function as palliative remedies. A final device is to join a “Toastmaster International Club”. This is a non-profit worldwide educational organization that promotes the advocacy of effective verbal communicative skills and leadership skills to the advancement of mankind.

2. The technological/cognitive/behavioral therapy approach

Rothbaum et al. (1995 cited in Boyle, 2001:2) refer to a Virtual Reality approach (VR). This approach has the appeal of being more practical and realistic than the exposure therapy. The whole coaching has to take place in the presence of the therapist who gets a surrogate audience to attend the speech delivery. The phobic rehearses intrepidly in front of the substituted audience until sound presentations are achieved and fear is
diminished. To this end, phobics attend various pricey sessions at their expense (Boyle, 2001:2). Likewise, other scholars believe that this therapy adheres to correcting the irrational thoughts of catastrophic/perfectionistic performance to a reality-based approach (Osborn and Osborn, 1988:23). To formulate it differently, phobics often overrate the danger of embarrassment and underrate the ability to manage the situation.

3. Physical treatment (Ayres, 1990c: 285)

It embraces a variety of relaxation techniques (as breathing exercises, muscle training, soothing positive self imagery, teaming a relaxation sensation with a stimulus that has caused fear), tips on proper demeanor and posture, and tips on easing tension as yoga practice and meditation.

4. Visualization strategies and suggestions
   (Laskowski, 1996:4)

These incorporate a large display of precepts that ought to be heeded by phobics in order that self-actualization, and self-poise are achieved. Recommendations about the presentations as well as the presenter themselves are given, for example, the fundamental components of invigorating and upbeat presentations as organization and preparation. Laskowski (1996:4) enumerated what he has called, the 9 Ps.: Proper preparation prevents poor performance of the person putting on the presentation. Moreover, other essential factors include the lay out of a presentation, diction, behaviour, body language, facial and gestural devices, etiquettes and settings. In addition, strategies that have to be used before, during and after the taking place of assigned speeches are demonstrated. Another important factor is that of acknowledging fear as something existent that can be overcome because camouflaging does not help in performing better (Ibid: 5). Finally, strategies about the audience, and ways and means on how to deal with it, and the use of supportive visual aids are reported (Tepper, 2002:3).

The Importance of Delivering Speeches and Presentations

It has often been demonstrated that quite many individuals are tasked with this sort of requirements. Cogito (2002:40) talks about key speeches that turned the tidal wave of history in times of hardships and crises. Some of these speeches are engraved in people’s iconic memories until our present day. The Americans take pride in the ‘Gettysburg Address’ talking about a government: And that government of the people, by the people, for the people shall not perish from the earth. The English recall Churchill’s: “Blood, toil, tears and sweat.” Indians are reminded of Nehru’s commemorative speech upon Gandhi’s assassination: “A glory has departed”. Lastly, Martin Luther King’s speech that captured the whole world’s attention to the plight of the black people and their discrimination: “I have a dream.” (Ibid). Apparently, it is rather unrealistic to regard every speech or presentation as having this kind of global appeal. Nonetheless, it is realistic to plan how appealing a presentation could be if abided by those precepts that add sparkle and inject life to every speech and/or presentation. In the final analysis, delivering gallant speeches is fairly implementable. It contributes to the betterment of mankind by disseminating information and knowledge at the national level as well as at the international arena.

Basic Elements that Characterize A Good Presentaion

1. Audience

It is the ultimate goal of every presenter to deliver a successful presentation that attracts the audience’s attention by providing new information or insights into a particular topic.

In his pivotal work on the art of public speaking, Laskowski (1998:1) focuses on the importance of audience’s involvement while presenting. He holds the view that familiarity with the audience breeds success. Speakers should adopt a positive attitude towards their audience. This includes knowing what they want to hear and how to get the message across. Establishing an acceptable level of rapport is quite important. Analyzing the audience includes gaining some information about certain categories as age, education, career, geographic location, and male/female composition. Variables as setting, level of formality and line of business among others, determine which categories have to be prioritized or eventually totally ignored. Laskowski’s emphasis on the role of the audience is best illustrated in his words: “A well-prepared speech that is ill suited to the audience can have the same effect as a poorly prepared speech delivered to the correct audience. Both speeches fail terribly”.

Professional speakers conduct a multi-page questionnaire about their audience prior to a presentation.
Elsewhere, he says that much of the nervousness before a presentation is bound to the lack of information about the audience and the speaking environment. Tips as greeting and chatting with early comers are helpful in releasing tension. Tips on how to deal with a hostile audience and hecklers as being friendly, telling the truth, answering directly and concluding smartly are highly useful in creating a friendly atmosphere (1996:1). Similarly, Leeds (1998:3) believes that enthusiasm and excitement on the part of the speaker are contagious in involving the audience. Sharing these views, Orman (1996:20) ascribes poor presentations partly to the absence of audience’s recognition. Another decisive factor is attributed to audience’s inflexibility, that is to say, absence of freedom that an audience should enjoy. On many occasions, some individuals are inattentive; others are fidgety or in extreme cases fall asleep. Therefore, a speaker is not to control the behavior of the audience unless this behavior causes intentional disruption.

Nor should he expect that his/her presentation will be a complete success. Due to the fact that any audience is diverse in many aspects, 5% will not like the presentation being in tact anyway.

In general, an audience is usually aware of the negative associations coupled with presentations. This being the case, they are almost always forgiving. Their appraisal and judgment are in favor of the speaker.

2. Speaker

In essence, the purpose of public speaking is to give the audience something of value.

This is best achieved by tapping into the following points: (Laskowski, 1998: 3)

2.1. Motivation: Rewards or possible outcomes of a presentation are motivating factors that a speaker usually considers. It has been observed that more experienced speakers perform more efficiently and consequently get satisfied audience.

2.2. Credibility: It basically depends on the amount of effort exerted while preparing a speech; the poorer the presentation, the less credible it sounds, conversely, the richer, the more credible it appears. A well-organized, enthusiastic speaker earns more credibility than one who is not (ibid).

A credible speaker has to show competence by being knowledgeable in the way ideas and materials are skillfully conveyed and absorbed. Besides, he should have a trustworthy character by showing concern to the audience, dwelling on similarities, avoiding bias, and showing tolerance in mentioning others’ opposing views. A charismatic speaker displays a positive outlook, acts assertively, and uses body language efficiently to manifest a certain point of view. This includes dressing appropriately, using facial and gesture expressions when deemed necessary, being aware of posture and movements, proximics, voice and tone. Laskowski (1996:5) highlights the advantages of ridding one’s self of distracting mannerisms by eliminating vocal and visual impediments as leaning on the podium, playing with keys, coins, or accessories just to name few.

2.3. Delivery: The graceful style in which a presentation is delivered has a significant impact on the outcome. Irrespective of the setting, a speaker has always to give a strong impression that seems convincing and capable of establishing a good contact with the audience (Laskowski, 1998: 4).

Along these lines, Orman (1996:5) talks about the relativity of success, that is, how the audience and the speaker regard it. If the audience is given something of value, success is achieved. However, a speaker does not have to be brilliant or perfect to be considered successful. Opposing views on this point are given elsewhere which say that small errors might seriously ruin a presentation.

Useful tips on how to perform well are stated by Masiewicz (2000:20) getting sufficient sleep, thinking positively, drinking tepid water and abstaining from caffeine containing beverages are some workable suggestions.

To sum up, inadequacies of a speaker impair powerful presentations. A speaker should not disregard the role of a responsive, attentive and interactive audience. Boring speeches and poor presentations are clear indications of overlooking the role of the audience. In the final analysis, any audience invests its time to attend something interesting and informative delivered in an appealing way that radiates confidence.

3. Presentation

Preparation is a key word in achieving good presentations. Laskowski (1996:1) provides valuable insights into this area. He says that preparation and rehearsal reduce fear by about 75%; sound breathing techniques by 15%; and one’s mental state by 10%. In
addition, they help build confidence.

Presentations have clear and realistic objectives: to inform; instruct; describe; persuade; introduce; entertain, etc. The verbal component should include three basic elements: content, what the speaker wants to convey, style how it is conveyed, and structure how it is organized. A well-organized presentation includes an introduction, a body and a conclusion.

In an introduction, the speaker usually welcomes the audience, introduces the subject, explains the structure of the presentation (agenda), identifies the aim and explains rules for asking questions. An opening grabber to attract the attention could be an anecdote, an illustration, a question, a quotation or even a humorous remark or a shocking statistic.

The body outlines the main points. It is common to have three to five main points in addition to the supporting material. Depending on the topic itself, organization could follow a chronological order, spatial, cause and effect, problem and solution, sequential order, deductive reasoning (general to specific), inductive (specific to general), compare and contrast, rhetorical, and magnitude (starting from something small and familiar to something large and less familiar). Generally speaking, audiences have trouble following a presentation that data dumps (People remember only 5% of a presentation). Time balance in conveying the main points has to be considered. The language should be clear and easy to understand. However, it should not be overtly easy which weakens the presentation neither should it be overloaded with unfamiliar words that might block understanding. Transitional statements alert the audience and function as interaction busters.

Laskowski has investigated specific channels that reduce fear and expand understanding of the topic (1998:5). Nonverbal tools as body language, pictorial (visual aids) and aural (tone, variations in pitch and volume) are useful tools in enhancing the quality of a presentation. Nonetheless, visual aids are not substitutes for the speaker; nor are they to steal the show; they merely serve as an aiding device that should not divert the audience’s attention from the speaker. The vast majority of all the information that is understood, enters through the eyes, 80% is absorbed visually, while 20% aurally. This is highly indicative of the efficacy of visual aids. However, a speaker should not use them excessively unless deemed necessary in accordance with the topic. (Visual aids include photographs, drawings, and charts in different designs, graphs, transparencies, flip charts, OHPs (overhead projectors), slide projects, videos, and handouts.

The conclusion contains a summary of the main points, a review, recommendations, a word of thanks, a closing grabber and an invitation to questions.

Discussion, Conclusion and Recommendations

The whole bulk of research that the researcher has been investigating has been carried out on performers whose first language is English. This being the case, it rules out that public speaking anxiety could be attributed to language inadequacy. It has been observed that other factors are involved in cases of speech delivery and presentations. As previously mentioned, the art of public speaking is not confined to specific settings as teaching and learning, but is also extended to include many other fields as well. A wealth of information has been conveyed dealing with factors that trigger anxiety. It has been found that the onset of anxiety is in tact regardless of the performer’s experience or language. This onset can take different shapes and forms. Consequently, it could be argued that public speaking anxiety is the main delimiter of proper delivery. The researcher believes that every speech has its own thrill and troublesome conditions. No one can deny that speeches and presentations do contain some frightening elements pertaining to the speech itself, the audience and its response, and eventually, the speaker. Similarly, no one can deny that we do enjoy listening to presentations that have enticing, informative content conveyed in an elegant and suspenseful style. By the same token, we cannot deny that in the remotest of our hearts, there lurk some bits and pieces of one or more of these unwelcome symptoms associated with public speaking. Were phobia to be ascribed solely to poor language, then how would we explain the constant witnessing of failing, unimpressive performances even in one’s own mother tongue as is the case of Arabic? This observation not only consolidates the desperate need for successful communicators but also invites future research on the topic particularly on diglossic Arabic.

Due to the Arabic diglossic special status, that is, standard and colloquial, educated Arabs speak their dialects natively but standard Arabic (mostly used in public speaking) is used sparingly so to speak, as a second language, which is ‘pseud-natively learned’ through formal education. In such given circumstances, is
public speaking anxiety attributed to the degree of competence achieved in standard Arabic or to well-known associations of public speaking?

The present study has revealed that public speaking anxiety is a phenomenon that exists amongst individuals from different categories and professions, henceforth; it is one of the top fears that afflict performers ranging from professionals to ordinary ones though with varying degrees. Many researchers, therapists and psychologists have reckoned that it is treatable in the final outcome, though it needs rich insights, sterling efforts and a plenty of instructive materials on the subject, as is the case of students. In addition, physiological, psychological, and circumstantial orientations are of utmost importance to achieve a successful presentation or speech. Being armed with knowledge, this nightmarish event could turn into a triumphant reality. In view of the conveyed information, it is recommended that prior to any task that demands a speech delivery or a presentation, performers should prioritize coaching in all its perspectives and dimensions.

Such training should regard theoretical orientation as well as implementable strategies as visualization, systematic desensitization, and audience analysis. Visual aids serve as anxiety busters or communication boosters due to the fact that they somehow divert the undivided attention usually placed on the speaker to the message conveyed through them. One should also bear in mind that preventing or eventually alleviating speech anxiety is a huge task. However, it could be immensely reduced provided that the phobic should recognize and acknowledge the presence of anxiety. Having reached a good level in preparation and rehearsal can be a strong spur toward achieving a successful speech or presentation.

Shouldering a responsibility has never been haphazardly accomplished neither has stockpiling successes.

REFERENCES


MDB Industrial Graphics LTD, South Africa.


(Cited from Ayres 1988).


Laloscopophobia: Variables …
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