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"Are highly literate Australian adolescents really more confident speakers than American? Using the PRCF Scale."

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ABSTRACT: McCroskey's (1977) Personal Report of Communication Fear (PRCF) scale was used with attitude questionnaires on classroom speaking to survey 1746 adolescents (Grade 7-12) in Australia, USA, some European countries and HongKong. The American sample scored higher confidence and lower apprehension than McCroskey's average, possibly because the sample was from highly literate honors classes in USA, rather than any attitude change since the PRCF was validated. The PRCF scale suggested that more Australian adolescents were confident speakers and fewer were apprehensive than the literate American group. Comparisons are made with the general questionnaire, and questions raised about the scale and national differences in adolescent attitudes to self reporting.

Introduction:

The popular myth is that Americans are articulate on public occasions--even glib, while Australians mumble awkwardly. In the 1950s, American Davis Cup players made their speeches with smooth humour; Hoad and Rosewall were apologetically monosyllabic. The image has stuck, despite the Melbourne University Debating team beating the Americans a few years ago.

The teaching of speech in USA and Australia has a very different history. American university Speech and Oral Communication Departments date back half a century, with a history of research in speech communication. Speech classes exist in most high schools.

But UK and Australia, oral language teaching covered either elocution, or debating and public speaking skills for inter-school competitions. Only a few would be involved. Most school and university students avoided speaking in public situations and nobody considered it their job to teach them.

However, American Speech and Oral Communication Departments are low in the university hierarchy of disciplines, and Speech in schools is an elective. Those who take Speech classes do so because they are good at it, or because they think they can avoid writing. An exception is Penn State University's compulsory speech requirement, with remedial courses for "reticent" students (Phillips, 1991). At others, like the University of New Hampshire, some courses, for example Animal Husbandry, require a pass in Speech--although you could pass on a written paper.

Now, in UK schools oral language or "oracy" is compulsory and is publicly assessed at CSE level around Year 10. In Victoria, oral language was to be assessed at Years 11 and 12 as part of the VCE, with the Year 12 assessment counting in their final English score--and therefore to be taken seriously. This has been discontinued for the present, because the internal assessment proved inconsistent. The requirement remains at Year 11.

So we might, if teaching speech in schools makes a difference, expect Australian adolescents to be more confident speakers than Americans.

Past Research on Communication Apprehension in Australia:

One study of communication apprehension exists which compares American with Australian undergraduates (Crocker, W., Klopff, D. & Cambra, R., 1979; Crocker, W., Klopff, D. & Cambra, R., 1983; Klopff, D. W., 1984).

The study used self report scales, including the Personal Report of Communication Apprehension (PRCA, McCroskey, 1977) with 219 students from Armidale CAE, aged 18-24 years, in the Diploma of Teaching, and 397 students from the University of Hawaii, similar in age, sex and years in school.

The Australian teachers college students claimed to be significantly less apprehensive than the Hawaiian American university students. (And less apprehensive than the Japanese,

more than Koreans and Filipinos, and the same as Micronesians and mainland Chinese). Of the Australians, 21.9% were highly apprehensive speakers, compared with 33.5% of Americans. Crocker, Klopff & Cambra (1979) add that Australian university students considered themselves to be good communicators, friendly, relaxed, open, able to take charge of speaking situations and highly group oriented.

On the PRCA scale norm referenced across America, 20% of tertiary students are highly apprehensive, so that the Hawaiian students were not typical of Americans. The Australian sample was no different from the American norm.

There are no reports of studies at the adolescent level in Australia.

The Present Study:

Aim: Crocker et al. (1979; 1983) call for further studies in Australia, and recent reports on the VCE English Oral Communication assessment in Victoria suggested that teachers needed to know more about shy adolescents speakers in their classes.

This study, carried out in 1991 and 1992, intended to identify shy students (PRCF scale, McCroskey, 1977), to ascertain their attitudes to various class activities intended to increase confidence in speakers (a Speaking Questionnaire designed for this study), to observe their behaviour during speech activities in class, and to interview shy students about their class speaking tasks, as well as their teachers.

The project had a number of aims, but for the purposes of this paper I compare American and Australian adolescents' scores on the PRCF scale, and their results on the Speaking Questionnaire constructed for this project, in order to comment on the differences between the two groups and how these can be interpreted, given the limitations of the instruments.

Instrument: A modified version of McCroskey's Personal Report of Communication Apprehension (PCRA, 1970, 1977) called Personal Report of Communication Fear (PCRF, 1977) was used, simplified for school students and validated against the original measure. The original self-report scale has consistently been reported, in over 75 studies, as yielding valid results. PCRF adapted for schools correlates highly with the college or university level PCRA. [OVERHEADS: PCRA AND PCRF, (McCroskey, 1977)]

Subjects were 792 Victorian and 721 US adolescents (Grade 7-12) from literate groups of above average ability, without specific language problems. Lack of English competence or low ability did not determine their unwillingness to speak in class.

American high school grades were divided into remedial, regular, advanced and honours groups. The American group were from advanced and honours classes in Texas, Florida, Virginia, Massachusetts and Connecticut.

Victoria does not stream, so schools with a selective academic entry were used. 30% of Victorian children attend non-government schools, but the schools chosen for this study draw from an upper socio-economic level, except for a high school with an academic reputation and few non-English speaking students, situated in an old-established wealthy suburb.

As it happened, in America I was given schools in upper middle class suburbs, and there was also a socio-economic bias in adolescent groups going into advanced and honours classes.

Hispanics in Texas and black students in Virginia, Massachusetts and Connecticut were unlikely to be in them.

The Speaking Questionnaire results (Table 1) (OVERHEAD) indicated that the populations were similarly literate: 90% of the American and 85% of the Australian students planned to go to university, even at Grade 7. Around 80% of American and Australian students liked or didn't mind reading or writing, figures staggeringly high for secondary school students.

I was satisfied that the American and Australian adolescent

populations were, as far as possible, comparable.

Procedure: Students completed the PCRF scale and the Speaking Questionnaire (Tables 1-9) about preferred class activities, taking about 20 minutes. A class discussion on fear of speaking and some speaking games followed and were taped, and I interviewed pairs of volunteers, many of whom were anxious speakers, and their teachers.

The PCRF scale was used to identify students who claimed to be anxious about communicating, and the high (HCA) and low communication apprehension (LCA) groups were compared on the Speaking Questionnaire. The results should indicate which class speaking activities were most favoured by confident or shy speakers, information which may be useful to English teachers preparing students for the VCE Communication Project (Murison-

Travers, 1992).

However, for the purposes of this paper, American and Australian students are compared separately on PRCF and the Speaking Questionnaire.

Problems of Definition: We know that some people are socially confident, make friends easily, take part in group talk and are not too anxious when making a speech; others are shy with people they don't know well, don't say much in a social or class group discussion, and are very nervous when public speaking. The majority are somewhere in between--shy in some situations, confident in others, and generally they cope.

McCroskey (1984) defines Communication Apprehension (CA) as a measure on the Personal Report of Communication Apprehension (PRCA) scale, one standard deviation above the norm, the assumption being that these people will have a level of anxiety which prevents them from communicating in normal social, educational and work situations to such a degree that they are disadvantaged. These people, he says in reporting many studies using his scale, are limited in meeting people of the opposite sex and gaining employment which uses their qualifications fully, so their problem has an effect on every part of their lives. The purpose in identifying these anxious communicators is to give them the kind of help which will make them better speakers, and hence more fulfilled socially and in their work.

The Nature of Communication Apprehension: McCroskey defined Communication Apprehension (CA) initially as "a broadly based anxiety related to oral communication" and later as "an individual's level of fear or anxiety associated with either real or anticipated communication with another person or persons" (McCroskey, 1984, p.13). Communications problems, ranging on a continuum from shyness through levels of apprehension and anxiety to social phobia and avoidant personality disorders, are discussed later.

The Results of this Study:

The results on the PRCF scale for the total sample of American and Australian adolescents were compared to give an overview of communication anxiety (as defined by McCroskey's scale) in the secondary school. On McCroskey's self-report PRCF scale (OVERHEAD, copyright - not included in paper) used across Grade 7 to 12 with Australian (Victoria) and American adolescents (Table 2) (OVERHEAD), Australians who claim to be fearful or 'scared' of speaking in public (5.9%) are significantly fewer than Americans (12.5%), and there are more Australians who claim to be confident speakers (28.7% and 30.1%).

For both Australian and American adolescents, this is well above the American norm for adults (about 20%), possibly because this is a highly literate population, successful at school work, who one would expect to be more confident in using language.

If we divide the group into grades for PRCF, given that levels of normal adolescent social anxiety are highest between the ages of

14 & 17, we can see (Figure 1) (OVERHEAD) that Australian adolescents who report higher anxiety (HCA) are consistently

fewer than the Americans, though the difference is not significant at Grades 8 and 11. Why American self-reports of anxiety are lower at Grade 8 and 11 when Australians are fairly even is hard to guess. Americans move from Junior to Senior High School at Grade 9.

Self-reported high confidence (LCA) is less consistent, though Australian adolescents' reported confidence steadily declines from Grade 7 to Grade 12, perhaps the influence of the VCE Oral Language assessment at Grades 11 and 12, perhaps the pressures of Australian adolescent social life, perhaps the way our schooling is constructed with classroom steadily becoming both more closed and more disruptive from Grades 7 to 12. In some ways, social pressures on American adolescents are greater, though perhaps not school work pressures; these adolescents were nearly all aspiring to reach university. American adolescents' anxiety may fluctuate between Grades 9 and 10 (ages 14-15) because this is the key stage for adolescent cognitive egocentrism (the 'imaginary audience' phenomenon) and identity issues, including anxious self-preoccupation (Cheek & Briggs, 1990). But this would also apply to Australian adolescents.

The Speaking Questionnaire (Tables 1-9) asked about their confidence in general, and their talkativeness in class, at home and with friends (Table 3, Figure 2) (OVERHEAD). On PRCF, more Australians claimed to be confident speakers and fewer to be anxious speakers than Americans. But when asked rather different questions which did not specify speech, fewer Australian adolescents said they were confident, more wanted to increase their confidence, and far fewer were content to be quiet. Australian adolescents appeared to be more worried about being confident.

When asked about their level of talkativeness in particular contexts (class, home, friends), there was little difference between Americans and Australians in the groups who saw themselves as quiet in class or with friends, but more American adolescents were quiet at home. Does that mean Australian parents are more liberal--or have less control over their children?

Tables 4 - 6 (OVERHEAD) list activities which require adolescents to speak in class. Only in a few areas is there a difference between the preferences of American and Australian adolescents. American students are unused to debating (Table 4, Q5) or oral word games (Table 5, Q4). Australian adolescents were happier to work alone and in small groups, though small groups were used equally in both systems (Table 5, Q13).

Reasons for not taking part (Table 7) OVERHEAD showed some national differences, possibly influenced more by idioms used in wording the questions. The results are listed in the order of

American percentages, with "fear of being wrong" (QR10) or "looking stupid" (QR14) affecting around half of both groups-- typically adolescent anxieties. Twice as many Americans were likely to be "too bored to speak" (QR11) and many more were likely not to speak because they "hadn't prepared their work" (QR12) than Australians, confirmed in Table 8 (QIF6) OVERHEAD. But more Australians were likely to say they "couldn't be bothered" speaking (QR7); the difference between this and "being bored" may arise from an unfamiliar idiom--"bothered". Table 8 confirms the problem of boredom (QIF3) for American students-- more of them would speak if the "subject was more interesting". More Australians wanted smaller groups or to be asked directly by the teacher (QIF1 & 4).

Finally, adolescents in both countries were tough on shy speakers. The majority would oblige them to join in discussion and make speeches, and believe assessment puts pressure on them to do so. Although most see teachers as helping shy students to speak up, not so many think shy speakers should have special help. American adolescents did not see assessment as so pressuring; Australians were still reeling, perhaps, from the

effects of VCE compulsory oral assessment, now discontinued. Despite scores on PRCF showing fewer Australian than American students recording high levels of communication anxiety and higher confidence (which supports Crocker et al's findings, using the same scale with teachers' college trainees), their answers on the Speaking Questionnaire do not support such a difference.

DISCUSSION: The Use of Self-report Scales:

Although McCroskey spent 20 years proving the validity and reliability of his Personal Report of Communication Apprehension (PRCA) scale in its various versions, its very simplicity leads to doubt about its effectiveness. McCroskey (1984) discusses self-report measures and justifies his own (pp.81-94) in some detail. He distinguishes anxiety about speaking as trait (an individual characteristic predisposition or personality trait, possibly partly inherited) and state (a constraint on behaviour in a particular situation at particular times). Traits endure, states are variable. It is traits that the self-report scales measure.

Three Ways of Measuring Shyness:

McCroskey discusses three measures of communication apprehension: by (1) self-report, by (2) an observer rating an individual's behaviour, or by (3) tests of psychological arousal (heart beat, blushing etc.). He says, "The primary thing we must determine before we select or construct a measure is what we want to measure" (p.82). Herein lies the problem, for Phillips (1991) says of PRCF, "... although it is almost heretical to do so, we question whether this scale measures anything at all." Phillips'

publication appeared after my use of the scale. We will come back later to Phillips' reasons.

In his discussion of the three methods of measuring communication apprehension, McCroskey dismisses measures of physiological arousal because of the difficulties of analysing and interpreting the data (increased heart-beat etc.). Temporary states (not traits) are measured, and "arousal does not equal anxiety; arousal simply equals arousal" (p.83); the same physiological signs can indicate anxiety in one person and exhilaration in another.

The second method is observing the communication behaviour of an individual. Behavioral observation is the only indicant with strong face validity for reticence--"the inability to perform competent communication behaviors" (p.84), that is, the actual behaviour--which McCroskey distinguishes, with communication avoidance, from the apprehension or anxiety the person feels about communicating, not whether they do it or not. But, McCroskey points out, the presence of the observer alters the behaviour, particularly with shy people. And deciding what behaviour identifies a reticent or shy person is difficult--"operationalism at its worst", McCroskey says--reticence becomes "whatever my measure measures" (p.85). Dillard & Hunter (1989) and Kelly (1982) confirm this.

What the self-report scale measures:

McCroskey favours the self-report scale, for which he is, as Phillips says, famous. He claims strong face validity for his self-report scales measuring communication apprehension, greater than for physiological and observational measures. His PRCA scales do not, he emphasises, measure whether the individual is a competent communicator, only whether he or she feels competent. There is evidence that even social phobics may be good public speakers when they are obliged to do so, but they feel incompetent. Such people commonly misinterpret audience signals and think they have failed when no-one has thought so (Marks, 1987). Thus a boring speaker with high self-esteem may be a Low Communication Apprehensive (LCA) and not notice or be worried by an unenthusiastic audience reaction, and a good speaker with low self-esteem could be a High Communication Apprehensive (HCA) and

see signs of audience rejection when there has been only approval.

In my study, we are talking about confident and anxious speakers, not good and bad speakers, assuming it is the individuals' attitudes which determine whether they will take part in social, educational and work communication. There is, of course, a correlation between reticence and communication apprehension--actual competent performance and anxiety about performing--partly because anxious speakers avoid speaking and therefore lack practice, and people in general have some idea whether they are

successful or not in social encounters. The great majority know when they are not a success, but try again. The too confident never notice when they are not successful or do not care anyway. But the very shy are so aware of lack of success that they withdraw and it takes courage to try again.

McCroskey reports for PRCA "a respectable validity quotient when assessed against observer ratings" (p.87), possibly more valid for trait measurement (a shy personality) than for state measurement (anxiety only in particular situations). However, he actually recommends that behavioral observation, with its strong face validity, should be the measure of choice for shyness and communication avoidance, since self-report measures are doubtful. But for communication apprehension, he claims that self-report scales are acceptable.

Levels of Speech Anxiety:

Distinctions between reticence, shyness, communication avoidance and communication apprehension are confusing. Shyness is general, communication apprehension is about the anxiety one feels, communication avoidance is about avoiding speaking situations, and reticence denotes avoidance. You may feel anxious, but still speak in a variety of situations. That is different from actually avoiding speaking.

Forms of shyness develop at different stages. As defined by Cheek & Briggs (1990) the inherited 'fearful' type of shyness emerges during the first year and is influenced by temperamental qualities or wariness and emotionality that include a substantial genetic component, including different heart rate, lower thresholds of excitability in limbic system structures. Around age 5, a 'self-conscious' type of shyness may appear when the cognitive self is developing, peaking at 14-17 years with adolescent cognitive egocentrism (the 'imaginary audience' phenomenon) and identity issues, including anxious self-preoccupation (P.325).

There are levels of communication anxiety which go beyond anything the teacher can deal with in the classroom, though research suggests (Murison-Travers, 1992) that schools can, if they begin early and are sympathetic, prevent later chronic difficulties.

Thus a socially anxious person has all the usual anxiety about other people, and the physical symptoms. Negative self-statements and self-preoccupation are 'rampant'. "They search for a clue or sign that others have noticed their discomfort or awkwardness" even when focusing outwards (Hartman & Cleland, p.338).

Social phobia (DSM/III, 1980) is more specific:

A. A persistent, irrational fear of, and compelling desire to avoid, a situation in which the individual is exposed to possible scrutiny by others and fears that in a way that will be humiliating

of embarrassing.

B. Significant distress because of the disturbance and recognition by the individual that his or her fear is excessive or unreasonable.

C. Not due to another mental disorder, such as Major Depression or Avoidant Personality Disorder (p.228).

Those who fear performance to this degree have subjective feelings of apprehension, but also physiological signs such as "increased heart rate, palpitations, tachycardia, sweating, muscle tension, irregular breathing, dry mouth, vertigo, nausea, tremors and tics" (p.238).

The most severe form is an 'avoidant personality pattern' (DSM-III, 1980), with "hypersensitivity to potential rejection, humiliation, or shame; an unwillingness to enter into relationships unless given unusually strong guarantees of uncritical acceptance; social withdrawal in spite of a desire for affection and acceptance; and low self-esteem" (DSM-III, 1980, p.323). Hartman and Cleland (1991) add that "like social phobics, avoidant personalities are characterised as hyperalert, constantly scanning those with whom they come into contact in order to detect the most subtle hint of critical appraisal, denigration, or rejection" (p.340).

The difference between someone with an avoidant personality

disorder and the social phobic is in the type of even they avoid. Phobics may avoid specific things (speeches, interviews) whereas avoidant personalities have "disturbed personal relationships in general and this is their enduring style of perceiving, relating to and thinking about the environment and oneself" (DSM-III, p.305). Phobics have better social skills.

What McCroskey's scales claim to measure:

McCroskey dismisses as too specific to be reliable, scales (p.90-91) measuring public speaking anxiety, and shyness about talking in class, two person (dyadic) conversations or small social groups, though these all correlate to some degree. He wanted a scale which covered talking in meetings and classes, in small group settings, in dyadic settings (two person conversation) and public speaking--those speech situations making up our social and work world.

McCroskey's scales of Personal Report of Communication Apprehension (with from 10 to 25 items in four forms) have been used in hundreds of studies. They use 5-step Likert-type response formats, reliability is high, over .90, they all correlate at above .90, and "there is overwhelming evidence for the predictive validity of the measures" (p.92).

McCroskey (1977) recommends the PRCF (Personal Report of Communication Fear) for children. It correlates around .80 with PCRA when used with older children and adults, indicating "substantial concurrent validity but not isomorphism" (p.92).

All these claim to measure trait rather than state communication apprehension. McCroskey recommends physiological indicants or behavioral observation for states. (p.93).

Phillips' Criticisms of McCroskey's Scales:

However, Phillips (1991), as mentioned earlier, dismisses McCroskey's scales. Phillips has run his Reticence Programs at the University of Pennsylvania for three decades, based on behaviourist principles and with considerable reported success. He questions the scholarly literature dominated by studies of "communication apprehension", and programs which claim that the removal of the apprehension or anxiety solves the poor speaker's problem. Phillips' programs work like phobia treatment--frequent practice with ensured success, and no messing about with desensitization.

Phillips claims that the PRCA is unidimensional, and that, since anxiety is a complex concept, only a multidimensional scale could pick up the variety of speaking situations in which a person is a poor performer. McCroskey's distinction between state and trait communication anxiety is not, Phillips says, effective on his PRCA scale. The scale "measures only reports given by individuals addition, Phillips says that the scale treats apprehension as a uniform condition, whereas the connection between anxiety and performance is in doubt (p.235). No-one has proved that some anxiety is necessarily a bad thing, so that "the content validity argued for such scales as PRCA does not predict performance behaviour" (p.235). McCroskey does not deny this, the assumption being only that those with a low anxiety score on PRCA will be better performers--confident in actually speaking in groups. The validity of three similar self-report scales is questioned by Dillard & Hunter (1989), who dismiss the composite scores on two out of three as meaningless, supporting Phillips' view that more careful scrutiny of self-report scales like the PRCA scale is warranted.

Phillips claims that McCroskey's definition of communication apprehension--"a broadly based anxiety related to oral communication...an individual's level of fear or anxiety associated with either real or anticipated communication with another person"--is loaded in favour of his self-report scale, so that the scale cannot avoid measuring consistently.

McCroskey claims he is measuring a personality trait, yet Phillips says the scale is used at one particular time, and state

and trait appear confused. "An instrument like this cannot both classify types of an attribute and simultaneously regard the attribute as a unidimensional interval scale" (p.239).

Phillips also questions the pairing of items (p.240), hence its reliability and validity. Opposites are next to each other, so that calculating reliability on a split-halves basis is unacceptable because respondents can refer to preceding items to

maintain consistency (p.240).

Phillips adds that "no effort is made to validate the connection alleged between reports of apprehension, as measured by the scale, and actual performance by observation and interview." Face validity is claimed; "face validity refers to a scale containing items representing the universe of constructs available" (p.240), unlikely in a 14 to 24 item scale.

And so Phillips says, "Thus, although it is almost heretical to do so, we question whether this scale measure anything at all. We charge that it does not measure apprehension. The authors claims it measures reports of apprehension, but these reports lie within such a limited range that the later broad claims made for the scale simply cannot be defended" (p.240).

Phillips' main objections lie in the definitions of apprehension and anxiety, the assumption that feeling this way about communicating means performing in this way, and McCroskey's belief that reducing anxiety will improve performance, using desensitization. He explores the idea that many competent performers hide their anxiety successfully through repression. In fact, McCroskey supports this, agreeing that a High Communication Anxiety (HCA) scorers may well be good public performers.

To select students for his own courses to help reticent speakers, Phillips uses interviews and self-report of actual behaviour and does not encourage report of feelings of anxiety. McCroskey does, as noted above, recommend observation to assess actual performance. However, Pavitt's (1989) study of evaluating communication competence--that is, how a shy speaker is judged by an observer--shows how complex the observer's process is in making judgements. Kelly (1982) in a study of observers' impressions of students in special courses for anxious speakers and students in regular speech courses, noted that "most people cannot distinguish a person who calls himself or herself shy from one who does not" (Phillips, 1991, p.37).

OTHE PROBLEMS IN USING AND INTERPRETING THE SCALES:

The Use of Terms "Fear" and "Scared":

A minor objection is the use of the term "fear" in the PRCF (for children and adolescents), fear being aroused by novel situations, increasing alertness and concentration and providing energy to take action against the thing feared. Anxiety, however, is debilitating.

I had further doubts about the use of the word "scared" in the PRCF scale with Australian adolescents. "Scared" as used by American adolescents would be too strong a word for Australian adolescents, who would be more likely to use "frightened", "nervous" or perhaps, most accurately, "worried" in that context.

Telling the Truth on Scales:

McCroskey (1984) says that self-report scales are the most effective way of measuring communication apprehension because "if you want to know something about somebody, you ask them". He adds briefly, "It is only correct if the person knows the answer and

if the person is willing to tell you the truth" (p.86). The self-report scales work only when "the respondent has no reason to fear negative consequences from any answer given" (p.86). So for measuring communication apprehension, the self-report scale is better than the other two methods above, "if care is taken to avoid causing the respondent to provide false answers" (p.86). But the possibility of false answers is no small problem with adolescents who may not wish to appear unconfident (Figure 2). Admitting you are "scared" is unacceptable with boys,

particularly. Some years ago (Murison, 1976), I used Sorensen's Test Anxiety with Grade 4 and 6 boys in some of the same schools in Melbourne. A 'lie detector' was built in, and, as Sorensen predicted, the boys lied about their fear of tests much more than girls did. Some of the same behaviour (defacing question sheets, crude answers etc.) was evident from Australian but not American boys.

On Being too confident:

The group of adolescents in both America and Australia who registered on the PRCF as having Low Communication Anxiety, assumedly see themselves to be, given all the reservations above, extremely confident speakers in any social situation. However, these adolescents may not necessarily be good speakers or even socially adequate. They may be loud, brash, insensitive, ignorant and boring. There is an image overseas of the loud-mouthed, usually drunken, young Australian male. This type of pseudo confidence is commonly interpreted as a form of cultural cringe, a noisy and objectionable cover-up for secret feelings of national inferiority, or simply as ignorance. Confident adolescents on the Speaking Questionnaire had little fear of being wrong or looking a fool (Murison-Travers, 1992), which means they may well be both wrong and foolish, not attractive or useful attributes. Teachers' lives are made difficult by noisy students, not quiet ones, as they repeatedly noted in the Teacher Questionnaire.

I mentioned in the beginning the myth of the inarticulate Australian, mumbling his thanks while the American had his speech off pat. The loud and mindless Australian male is another myth, of course. But it does raise questions about the value of confidence about communicating if you are ignorant or a bore, and herein lies a major difference between the self-report scale and an observational report.

Whether the higher reported confidence and lower anxiety in Australian adolescents compared with Americans (if the scale is valid) has something to do with such a myth is a question worth asking. Certainly, discipline in American classrooms was stricter, and corridors, cafeterias and classrooms much quieter than in a typical Melbourne school, though the undercurrent of violence in the American schools seemed more sinister than in

Victoria--guns in lockers for instance. American teachers visiting Australia do comment on the uncontrolled noise in our classrooms.

McCroskey (1977) does, incidently, note that those with very high confidence (LCA) scores may well have problems of insensitivity.

#### CONCLUSION:

The whole question of what is actually being measured, if anything, is an important one. To simplify such complex states, or traits, could be to reduce findings to a level of meaninglessness.

Nevertheless, teachers in class must act, and measures of skill must be used, however doubtful in their finer distinctions. At best, the scale and questionnaire tell classroom teachers that there are adolescents in their classes who are too anxious to speak in groups and they need help. We do not leave non-readers and writers alone with a clear conscience.

Whether there is a difference between American and Australian adolescents in their attitudes to speaking and, as a result, in the level of their performance, my research does not show in any conclusive way. Small comparative samples of German and Italian adolescents claimed far less anxiety and far more confidence than either the Americans or Australians, while the HongKong sample nearly all merged into the "average" group in the middle.

Attitudes to attitude scales may be part of the problem.

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TABLE 1: Speaking Questionnaire:

American & Australian Student Sample, Grades 7 to 12:

	USA (N=721)		Aust (N=792)	(Sign)
Q19 Likes/doesn't mind reading	83.9	>	90.4	(.0004)
Q20 Likes/doesn't mind writing	79.7	>	87.8	(.00000)
Q21 Is a better writer	39.7	>	52.7	(.00000)
Is a better speaker	60.3	<	47.3	
Q25 Going to university/college	90.0	<	85.1	(.01)
Q26 Will enter the professions	40.5	<	34.3	(.01)
(Don't know)	36.4	>	42.9	

TABLE 2: Personal Report of Communication Fear (McCroskey):

American and Australian Total sample: HCA and LCA:

USA	Australia	Confident (LCA)	28.7	(N=207)	>	30.1	(N=238)
Anxious (HCA)	12.5	(N=90)	<	5.9	(N=47)	Total	
sample	(N=721)			(N=792)	(Significance: Chi-Square - Pearson .00005)		

TABLE 3: Speaking Questionnaire:

Perception of Own Confidence:

	USA		Aust	(Sign)
Q8 I'm already confident	26.7	<	22.8	(.0000)
I want to be more confident	56.8	>	68.4	
I don't mind being quiet	16.5	<	8.9	

Q9	I speak more in class than others	14.9	16.6	(NS)
Q15	I'm quiet in class	17.4	18.1	(.001)
Q16	I'm quiet at home	8.1	5.5	(.01)
Q17	I'm quiet with my friends	4.0	3.8	(NS)
Q18	My friends say I'm quiet	16.5	19.9	(NS)

FIGURE 2: Speech Questionnaire: Perception of Confidence - USA & Australian Sample:

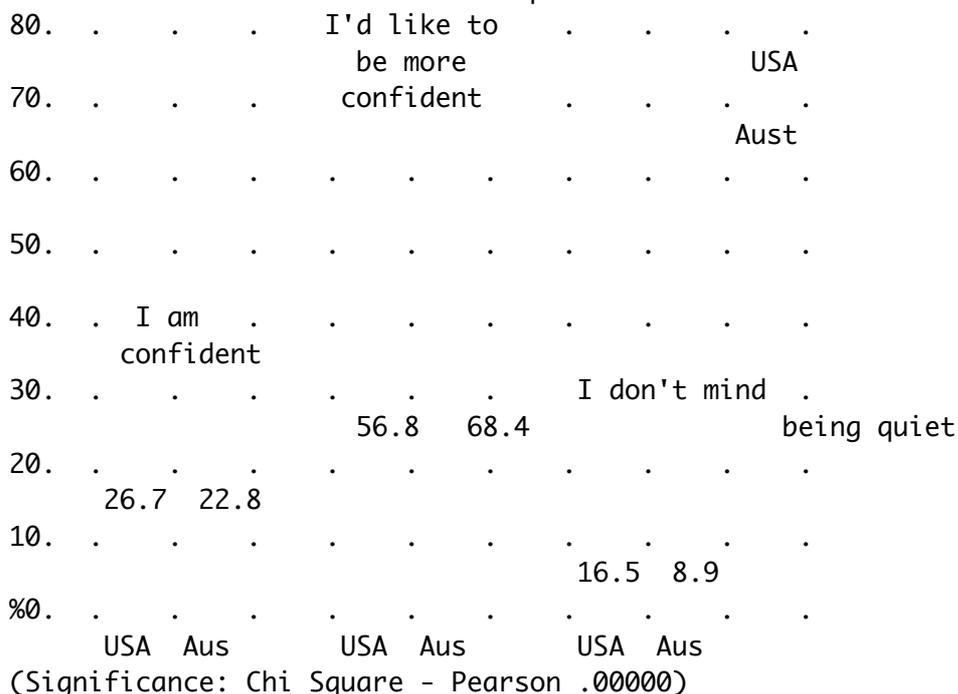


TABLE 4: Speaking Questionnaire: Speaking Activities Enjoyed:

	USA	Aust	(Sign)
Q1 Reading a part in a play	41.8	39.9	(NS)
Q2 Acting a part in a play	42.0	43.8	(.02)
Q3 Role playing	44.3	42.3	(.05)
Q5 Taking part in a debate	45.4	> 53.7	(.004)

TABLE 5: Speaking Questionnaire: Activities Which Help Your Confidence:

	USA	Aust	(Sign)
Q11 I like teacher asking me	45.1	> 51.1	(.01)
Q4 Oral word games help	54.5	> 62.9	(.002)
Q7 Group presentations help	67.6	< 62.3	(.02)
Q14 Small groups are good	86.4	83.3	(NS)

Q13 We often have small groups      70.9      67.5      (NS)

TABLE 6: Speaking Questionnaire:  
How I Like to Work:

	USA		Aust	(Sign)
Q22 H1 Alone	40.4	>	51.3	(.0000)
H2 In pairs	55.9		53.8	(NS)
H3 In small groups	40.8	>	50.3	(.0001)
H4 Whole class discussion	54.2		59.0	(.05)

TABLE 7: Speaking Questionnaire:  
Reasons for not taking part in class discussion:

	USA		Aust	(Sign)
R1 Someone says it first	68.0		72.2	(NS)
R10 I might be wrong	53.9	<	46.5	(.003)
R14 I might look stupid	44.3		41.6	(NS)
R8 I get embarrassed	34.0	<	29.2	(.03)
R5 My mind goes blank	31.5	<	25.6	(.008)
R13 I don't know the answer	29.6		28.4	(NS)
R11 I'm too bored	27.2	<	13.1	(.00000)*
R6 I get mixed up & stutter	26.9		24.1	(NS)
R12 I haven't prepared the work	22.1	<	14.7	(.0001)*
R4 Teacher only asks special Ss	13.8		15.4	(NS)
R9 I go red	13.7		13.9	(NS)
R3 Everyone else talks rubbish	13.4		11.6	(NS)
R2 I mean to but take fright	13.3	>	18.5	(.004)
R7 I can't be bothered	8.2	>	21.0	(.0000)*

TABLE 8: Speaking Questionnaire:  
Conditions Making Class Discussion Easier:

	USA		Aust	(Sign)
IF3 If it was more interesting	67.1	<	56.7	(.00002)
IF8 If I knew the answer	49.7		47.1	(NS)
IF1 If the group was smaller	37.9	>	45.1	(.003)
IF7 If I understood the question	32.9		32.1	(NS)
IF5 If I was less embarrassed	31.8		27.5	(NS)
IF2 If others were more helpful	30.2		26.1	(NS)
IF4 If the teacher asked me	23.8	>	29.5	(.01)
IF6 If I'd prepared the work	23.1	<	17.6	(.006)

TABLE 9: Speaking Questionnaire:  
Making Shy Students Speak:

	USA		Aust	(Sign)
Q10 Shy students must discuss	83.1	>	92.9	(.0000)
Q12 They must make speeches	80.5		78.3	(NS)
Q28 Assessment forces them to	73.0	<	63.1	(.0000)
Q29 Shy students need help	57.4		60.3	(NS)
Q6 Teachers do help them			73.8	< 68.2 (.01)

FIGURE 1: PRCF: American and Australian Grades 7 to 12: High (HCA) & Low (LCA) Communication Apprehension:

TABLE 6: Speaking Questionnaire:

USA	Aust	H4 Whole class discussion
USA	Aust	USA Aust
USA	Aus	USA Aust
Aust		USA

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