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Communication Apprehension Among Community College Students: A Phenomenology

John R. Bragg Jr.
East Tennessee State University

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Communication Apprehension Among

Community College Students:

A Phenomenology

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A dissertation

presented to

the faculty of the Department of Educational Leadership and Policy Analysis

East Tennessee State University

In partial fulfillment

of the requirements for the degree

Doctor of Education in Educational Leadership

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by

Johnny Bragg

May 2017

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Dr. Bethany Flora, Chair

Dr. Ginger Christian

Dr. Bill Flora

Dr. Virginia Foley

Keywords: Communication Apprehension, Public speaking, Education, Community College

ABSTRACT

Communication Apprehension Among

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by

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A qualitative investigation was conducted to explore the phenomenon of communication apprehension among a purposeful sample of five community college students with high levels of communication apprehension. The phenomenon of Communication Apprehension (CA) is "an individual's level of fear or anxiety associated with either real or anticipated communication with another person or persons" (Beatty, McCroskey, & Heisel, 1998, p. 197; McCroskey, 1970, p. 269). All individuals experience some level of CA, and between 30% and 40% of individuals are estimated to experience high levels of CA. For the community college student with high levels of CA, the introductory communication course can be difficult, causing significant emotional and physical distress. For the high CA student, the experienced anxiety has academic, social, and emotional implications. A phenomenological qualitative methodology was selected to give voice to the high CA student and to understand the lived experience of high CA during the introductory communication course. This study provides a rich, thick description of the lived experience of the high CA community college student.

A purposeful sample of five high CA community college students enrolled in the introductory communication course was selected. Participants were identified as high CA using the Personal Report of Public Speaking Apprehension (PRPSA) (McCroskey, 2017). Study participants were

selected as follows: those with high levels of CA as determined by the PRPSA instrument, and who were willing to offer insight into the lived experience of high CA. Data were gathered in two 50-minute interviews with each participant and from participatory action research (PAR) personal diaries created by study participants. Data were also gathered from field observations by the primary investigator.

The lived experience of high CA is comprised of seven themes: (1) ongoing and pervasive difficulty, (2) ongoing curricular and co-curricular difficulty, (3) no division exists between real and imagined CA, (4) high CA students frequently avoid anxiety-inducing scenarios, and (5) high CA students have not been effectively equipped with mitigating techniques and in turn, use self-developed mitigation. The study is significant because it contributes to the body of knowledge related to CA for the high CA community college student.

DEDICATION

To JB and Katherine.

ACKNOWLEDGEMENTS

I would like to acknowledge the support of my wife and children throughout the doctoral process. I am thankful. Thank you to my dissertation chair, Dr. Bethany Flora, for your guidance, wisdom, and humor. Thank you to my committee members, Dr. Bill Flora, Dr. Virginia Foley, and Dr. Ginger Christian, for your time and expertise. Thank you to Dr. Xiaoping Wang for the encouragement to begin the journey. Thank you to Dr. John Davison and my colleagues at Northeast State Community College. Special thanks to my doctoral cohort members, Dr. Mark Jee, Dr. Rebecca Lasher, and Dr. Cheri Gregory, for sharing the load.

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CHAPTER 1

INTRODUCTION

Communication apprehension (CA) exists as a phenomenon among all individuals (Blume, Baldwin, & Ryan, 2013; Byrne, Flood, & Shanahan, 2012). The fear of speaking publically or interpersonally is an experience all individuals encounter to some degree and with this fear comes the accompanying feelings of reticence, nervousness, and anxiety (Bodie, 2010). Approximately 35% of individuals may experience high levels of CA causing significant anxiety in interpersonal communication scenarios, and this anxiety creates relational, academic, professional, intrapersonal, and interpersonal problems and disruptions over the course of a lifetime (Hunter, Westwick, & Haleta, 2014; Shi, Brinthaupt, & McCree, 2015). While all individuals experience CA and CA has been researched for numerous years, there remains a significant gap in the understanding of the CA experience (McCroskey, 2007a; McCroskey, Teven, Minielli, & Richmond-McCroskey, 2014). Indeed, little is known about the CA experience from the qualitative perspective, and even less is known about CA from the community college student or high CA individual perspective (Blume et al., 2013; Laanan, Jackson, & Stebleton, 2013; Laanan, Starobin, & Eggleston, 2011). This phenomenological study gives voice to the high CA community college student by providing a rich, thick description of student experiences with high CA during a community college introductory communication course.

Feelings associated with CA may be traitlike with ongoing anxiety experienced across multiple communicative scenarios, or may be situational with anxiety experienced in specific situations such as a public speech or job interview (Blume et al., 2013; Byrne et al., 2012). Individuals may be viewed on a continuum experiencing both traitlike CA and situational

CA in different levels throughout a lifetime (Byrne et al., 2012; McCroskey, 2009). For the high

CA individual, the implications of CA in day-to-day life are significant as CA may cause

disruption to interpersonal communication, personal and professional relationships, and job

performance (McCroskey, 2009; 2011; McCroskey, Heisel, & Richmond, 2001). Indeed, high

CA individuals face ongoing challenges and the experienced anxiety may at times be debilitating

(Shi et al., 2015). For the community college student, no communicative scenario may be as

difficult as the classroom, particularly the introductory communication course experience

(Morreale, Worley, & Hugenberg, 2010; Valenzano, Wallace, & Morreale, 2014).

<u>Statement of the Problem</u>

Communication research indicates that all individuals experience CA and between 30%

and 40% of individuals may experience high levels of CA at some point during their lifetime

(Hunter et al., 2014). The experience of communication-bound anxiety for all individuals has

ongoing physical and emotional implications, but the college experience for the high CA student

may be especially debilitating and has ongoing effects for the student socially, academically, and

cognitively (Choi, Honeycutt, & Bodie, 2015; Hunter et al., 2014). For the purpose of this study

CA is defined as "an individual's level of fear or anxiety associated with either real or

anticipated communication with another person or persons" (Beatty, McCroskey, & Heisel,

1998, p. 197; McCroskey, 1970, p. 269). High CA is defined as Personal Report of Public

Speaking Apprehension (PRPSA) scores above 131 (McCroskey, 1970; 2017).

While the phenomenon of CA has been studied for some decades, the etiology and full

understanding of the experience remains incomplete (McCroskey, 2011; Russ, 2013). Past

research has focused almost exclusively on the quantification and correlation of CA and the

current body of knowledge contains limited description or insight related to the lived experience

of the phenomenon (Ayres & Hopf, 1993; Cissna, 2010; Honeycutt, Choi, & DeBerry, 2009).

To date, limited studies on the lived experience of CA have been conducted and few have

described the phenomenon from the qualitative tradition or from the perspective of the high CA

student (Choi et al., 2015; Cissna, 2010). Moreover, studies have largely focused on the

treatment of communication-bound apprehension rather than seeking to understand the lived

experience of CA (Hazel, Keaten, & Kelly, 2014; Hickson & Stacks, 2010).

Most current community college programs of study require students to complete the

introductory communication course (Tennessee Board of Regents, 2017). Current curricula offer

limited acknowledgement or help for the high CA students and these students often have

considerable difficulty with the course (Hunter et al., 2014; Morreale et al., 2010). Current texts

offer limited mitigation techniques and what methods are offered have been historically

ineffective in dampening the feelings and effects of CA for the introductory communication

course student (Choi et al., 2015; Verderber, Verderber, & Sellnow, 2016). High CA students

are offered little help in mitigating the feelings associated with communication-bound anxiety

and research indicates that students begin and complete the introductory communication course

with the same level of CA (McCroskey, 2011; McCroskey et al., 2014). Additional research is

necessary to understand the phenomenon and to assist communication pedagogues in developing

curricula sensitive to the needs of the high CA student (Payton & Scott, 2013). Indeed, a greater

understanding of the lived experience of high CA is needed.

<div align="center">Purpose Statement</div>

The purpose of this phenomenology is to understand the lived experience of high CA

students enrolled in an introductory communication course at a community college in Tennessee.

For the purpose of this study, high CA students were defined as scoring above 131 on the PRPSA.

<div align="center">Research Questions</div>

Although phenomenological researchers attempt to enter the field of study without specific hypotheses related to the central phenomenon, research questions must be developed to serve as a guide to the research (Taylor, Bogdan, & DeVault, 2016). Creswell (2013; 2014) suggests qualitative researchers limit studies to several questions which offer guides in exploration of the studied phenomenon. Research questions should be as broad as possible, allowing the individual narrative to guide the overall research (Creswell, 2013; Hays & Singh, 2011). Thus, the following research questions were used as a guide for this study:

1. How do community college students describe the physical and emotional experience of communication apprehension?

2. How do community college students describe communication apprehension in real interactions?

3. How do community college students describe communication apprehension in imagined interactions?

4. How has communication apprehension affected individual decision-making in curricular and co-curricular community college activities?

5. During curricular and co-curricular community college activities, what techniques have high CA students used to mitigate the effects of communication apprehension?

<div align="center">Significance of Study</div>

The current body of knowledge does not address four areas. First, while there is an exhaustive level of research on CA, the research is almost entirely quantitative (McCroskey,

2009). Few researchers have addressed CA from a qualitative perspective; further, the lived experiences of high CA individuals have been given little voice (Cissna, 2010). While researchers spent decades focusing study on CA from the social learning paradigm, few researchers have addressed an understanding of CA from the communibiology framework with intent to understand rather than treat the high CA individual (Bodie, 2010; Byrne et al., 2012; Kelly & Keaten, 2000; Eysenck & Eysenck, 1985). In sum, the rich, thick description of the lived experiences of high CA is incomplete.

Second, communication course curricula have not been effective in decreasing CA in the general population and mitigating the effects CA across all communicative scenarios (Hunter et al., 2014; McCroskey et al., 2014).   While some techniques are effective in specific situations, particularly systematic desensitization and visualization in reducing the effects of CA in public speaking, current CA intervention methods are not effective in day-to-day life for most individuals (Hunter et al., 2014). Additional research must be conducted to better refine CA mitigation methodology (Hazel et al., 2014; Hickson & Stacks, 2010).

Third, in the current state of transition for the community college system with increased emphasis on tailoring educational programs that meet the specific needs of an increasingly diverse population of students, administrators and pedagogues have a responsibility to address the needs of all students (Morreale et al., 2010). However, little is known about the central phenomenon from the high CA community college student perspective (Francis & Miller, 2008; Laanan et al., 2013). Few researchers have focused on the CA experience for the community college student, and current research does not address the curricular or co-curricular needs of the high CA community college student (Cissna, 2010).

Finally, the introductory communication course may be particularly difficult for the high CA student (Hunter et al., 2014; Laanan et al., 2013; Morreale et al., 2010). Given the curricular requirements that students complete the introductory communication course in most academic programs of study, the high CA student is required to complete the course alongside individuals with low levels of CA (Tennessee Board of Regents, 2017; Valenzano et al., 2014). Current introductory course curricula require the same course assignments and experiences to all students, regardless of individual level of anxiety and apprehension (Hunter et al., 2014). While some researchers have suggested the development of introductory communication courses specifically for the high CA student, the current communication studies and education body of research does not address a curriculum specific needs of the high CA student (Cissna, 2010).

Indeed, a greater understanding of the high CA experience is needed. Higher education institutions that offer introductory communication course curricula that addresses the needs of the high CA student will equip students for greater levels of success in college, the job field, and interpersonal relationships (Laanan, 2000; Laanan et al., 2013). Further, as the CA body of knowledge grows to include a qualitative perspective, there are implications for a greater understanding of the CA experience thus providing assistance to educators in developing classroom CA mitigation techniques resulting in positive implications beyond the classroom (Choi et al., 2015).

<u>Definitions of Terms</u>

1. Communication apprehension (CA): "An individual's level of fear or anxiety associated with either real or anticipated communication with another person or persons" (Beatty et al., 1998, p. 197; McCroskey, 1970, p. 269).

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2. Three levels of CA: Individuals with low CA are defined as those scoring below 98 on the PRPSA. Moderate CA is defined as scoring between 98 and 131. High CA is defined as PRPSA scores above 131 (McCroskey, 1970; 2017).

3. Curricular activities: Activities students are involved in that are academic and specific to the individual program of study (Levin & Kater, 2013).

4. Co-curricular activities: Activities students are involved in outside of the classroom and are peripheral to academics. These activities are often referred to as "extra-curricular" and often complement and enhance academic instruction (American Association for Higher Education et al., 1998).

5. Real interactions: Real-world communicative scenarios which take place between two or more individuals and may include face-to-face, group, social, public, or mass media communicative scenarios (Bodie, Honeycutt, & Vickery, 2013; Honeycutt, 2003; Verderber et al., 2016). Real interactions may take place across a variety of channels including interpersonal and electronic channels and are viewed as distinct from imagined interactions (Choi et al., 2015; Verderber et al., 2016).

6. Imagined interactions (IIs): "The process of social cognition in which individuals imagine, and therefore, indirectly experience themselves in anticipated and/or past communicative encounters with others" (Honeycutt, Vickery, & Hatcher, 2015, p. 201). IIs are viewed as "possessing many of the same characteristics as real conversations in that they may be fragmentary, extended, rambling, repetitive, or coherent" (Honeycutt, 2003, p. 13).

7. Introductory communication course: The first and often only communication course that is required in most programs of study (Valenzano et al., 2014). This course, often

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denoted in communication studies literature as the "basic" communication course, covers introductory communication concepts with an emphasis on interpersonal communication and public address (Laanan et al., 2013; Valenzano et al., 2014). The two introductory communication courses at the community college where the current study was conducted are SPCH 2300 Public Speaking and SPCH 1010 Fundamentals of Speech Communication.

<div align="center">Study Limitations and Delimitations</div>

The current study was subject to limitations and delimitations. Limitations are influences on the study which are outside the control or influence of the researcher (Creswell, 2005; 2013; Patton, 2015; Wiersma, 2000). Delimitations are influences on the study which are within the control or influence of the researcher (Creswell, 2013; 14; Lindlof & Taylor, 2011; Patton, 2015).

First, the study was limited by ethical considerations. The current discipline-accepted ethical methodology in communication studies requires researchers to avoid purposefully placing an individual in any anxiety-inducing situation or communicative scenario (Lindlof & Taylor, 2011; Sieber & Tolich, 2013). While it may appear evident that if the goal of a study is to describe the experience of CA during a public speaking performance, then perhaps a study may be conducted by creating public speaking situations for the purpose of allowing participants to describe feelings experienced during a public address. However, this is not in line with accepted research practice as current discipline guidelines do not allow for individuals to be placed by researchers into public speaking situations for the purpose of inducing high levels of CA (Lindlof & Taylor, 2011; Sieber & Tolich, 2013). There is some evidence that by interviewing and questioning an individual, CA may be induced within the the study participant thereby creating

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anxiety that a researcher may have been working to understand for the purpose of mitigation (Lindlof & Taylor, 2011). Indeed, there is need for caution and bracketing of anxiety-inducing scenarios for the high CA student. Thus, the current study is limited in that study participants' public address communicative scenarios were limited to the number of speeches each student delivered publically in their respective introductory communication course and any other individual CA experiences prior to participating in the study. During the course of the current study, no communicative scenarios were created for the purpose of inducing CA.

Second, the study was limited by the self-reporting nature of the PRPSA questionnaire, personal diaries, and interviews (Hunter et al., 2014; Maxwell, 2013). Self-reporting questionnaires and interviewing rely on the honesty of the study participants and are susceptible to self-report bias raising validity concerns (Fielding, 2012; Maxwell, 2013). Fielding (2012) underscores the need to recognize the fallibility of any specific instruments or methods in qualitative research design. However, validity concerns over self-report bias have been bracketed and are addressed further in the confirmability subsection of Chapter 3.

Third, the study was limited by the use of an informed consent form prior to the Phase I PRPSA administration and the Phase III participant interviews. Some researchers hold that informed consent forms may influence study results, cause anxiety to potential study participants, and have the potential to alter or spoil the mood of a conversational interview session (Lindlof & Taylor, 2011; Nelson, 2004). Additionally, there may be a level of bias in the use of informed consent forms in that the forms have an assumption of literacy in potential participants and may not give respect to a diversity of backgrounds in that many non-Western cultures have an aversion to making marks on paper (Marshall & Rossman, 2016). Because of the institutional review board (IRB) restrictions on the current study for both ETSU and the

hosting community college, the informed consent form was not within the control of the researcher and was considered a limiting factor. However, because of the need to protect potential study participant human rights, the informed consent form was created thoughtfully and with regard to participant protection and is presented in Appendix A (Creswell, 2005; Patton, 2015). There does exist some research that indicates the negative influence of the informed consent form may be mitigated with clear communication by research staff, earning the respect of participants, and gaining rapport between participants and interviewer (Creswell, 2013; Lindlof & Taylor, 2011).

Fourth, the study was limited by the sample selected for study. The study was limited to five students enrolled across five sections of an introductory communication course at the hosting community college. Therefore, the results may not be generalizable to other community colleges or other academic disciplines.

Finally, the study was limited by the selected research methodology. The phenomenological traditional is limited by the individuals selected for study and a reliance on the truthfulness and articulation skills of the study participants (Creswell, 2013; Patton, 2015). The current study included the lived experiences of five community college students and all conclusions and findings depend on the particular study participants and individual ability to communicate the CA experience (Lindlof & Taylor, 2011; Taylor et al., 2016). One strength of the phenomenological tradition is that the study method gives voice to the individual and validity to the lived experience; yet the studied individual also serves as a limiting factor to the study (Creswell 2013; 2014; Patton, 2015). With regards to the truthfulness of the study participants as a limiting factor, the phenomenological method is focused less on the "truth" of participant

statements, and more on how individuals organize and communicate their perceptions of the central phenomenon (Linde, 1993; Maxwell, 2013).

The study was also subject to a series of delimitations. First, the study was delimited by the literature selected for review. Studies which sought to replicate and reaffirm the work of McCroskey were omitted. McCroskey's research has been repeatedly validated, affirmed, and accepted into the cannon of communication studies CA body of knowledge (McCroskey et al., 2014). The current study incorporated the complete body of McCroskey's research.

Second, while qualitative inquiry allows for flexibility of study design during the research process, the study was delimited by the site selected for the study and the number of participants (Taylor et al., 2016). Boundaries of the population were based upon a population of high CA students which were identified using the PRPSA from five introductory communication courses at the participating institution. The findings from this study reflect the lived experiences of five students at a single community college, thus limiting the transferability of the study findings (Taylor et al., 2016).

Third, the study was delimited by the use of a recording device during interviews (Lindlof & Taylor, 2011). Recording devices create an inherent atmosphere of formality in an interview situation and a risk is incurred that the formality may induce self-censorship and masking by study participants (Lindlof & Taylor, 2011; Makagon & Neumann, 2009). However, a need remains to document the lived experience of the individual and the researcher chose to use an unobtrusive recording device during interviews (Creswell, 2014). To mitigate the effects of the recording device, each participant was informed of the audio device prior to the interview and the need to document the experience of the individual (Patton, 2015). Additionally, some research indicates that audio documentation may have a positive effect on study participants by

giving validity to the content of the interview and serve to stimulate personal narrative and contemplation of individual experience (Makagon & Neumann, 2009). Patton (2015) underscores the necessity in conversational interviewing to use audio recording as the use of an electronic device will document the data without bias and records participant words verbatim.

Finally, a delimitation of the study was my role as the primary investigator. I have served at the research site as a communication faculty member since 2009. I currently serve as Assistant Professor of Communication and my primary teaching function is in the introductory communication course. In this capacity I have extensive first-hand experience in working with high CA students during the introductory communication course. Any potential power imbalances in the study have been bracketed and are documented in Chapter 3. In consideration of my role as the primary investigator as a delimiting factor, the experience and insight this position affords me as a researcher at my institution outweighs any negative influence on the study. The limitations and delimitations to the study have been considered and the challenges have been bracketed with contrasting and offsetting benefits to the study.

<div align="center">Overview of Study</div>

The focus of the research effort manifests from the central research question, "How do high CA community college students describe the lived experience of communication apprehension?" The study includes five chapters. Chapter 1 establishes the necessity for the research and includes a study introduction, statement of the problem, research questions, definitions of terms, and study limitations and delimitations. Chapter 2 is a review of current literature and emergent themes of supporting scholarly CA research. Chapter 3 is a presentation of the research methodology and study design. Chapter 4 is a presentation of data interpretation,

coding of the descriptive data, and research findings. Chapter 5 is a summary of the findings,

conclusions, implications for community college practice, and recommendations for future study.

CHAPTER 2

REVIEW OF LITERATURE

In the field of communication studies, communication apprehension (CA) and feelings associated with anxiety from communicative scenarios are frequently occurring topics of research in the communication disciples, spanning over one hundred years of research (McCroskey, 2007a; McCroskey et al., 2014). Fear of communication was the most often researched phenomenon in the communication discipline during the 1970s through the 1990s and a significant body of knowledge exists (Byrne et al., 2012; McCroskey, 2011; McCroskey et al., 2014; Morreale et al., 2010). Anxiety associated with communication is prevalent as every individual experiences some level of CA, although individual experience of the phenomenon has a significant level of variance from person to person (Blume et al., 2013; Blume, Dreher, & Baldwin, 2010; Byrne et al., 2012). The experience of CA is powerful and affects individual behavior and choices; individuals may experience CA across a variety of social settings and individuals take considerable action to mitigate or avoid the feelings associated with CA (Shi et al., 2015). CA is found consistently across all demographics with no differences attributed to subculture, gender, or age in how an individual may experience interpersonal CA (Barraclough, Christophel, & McCroskey, 1988; McCroskey, 2011).

These feelings of nervousness appear across a variety of communicative settings including dyadic and group scenarios and CA may be experienced while alone, in common day-to-day interactions with others, or during high anxiety-inducing situations such as the public speaking scenario (Blume et al., 2013; Bodie, 2010). Emotional manifestations of CA may include feelings of disquiet, unease, apprehension, or nervousness (Byrne et al., 2012; McCroskey, 2009). Physical manifestations of anxiety may include a racing heart, sweaty

palms, shaking knees, quivering voice, and disfluencies of speech (McCroskey, 2007a; McCroskey et al., 2014). These physical manifestations are something every individual may experience regardless of individual level of CA, although public speaking and the college experience may serve to exacerbate CA (Blume et al., 2013; Bodie, 2010). In addition, numerous researchers have studied interventions that aid and mitigate CA (McCroskey et al., 2014). Recognizing the importance of communication skills for personal and professional success, colleges and universities include an introductory communication course in the general education curriculum with effort toward mitigating the effects of CA (Morreale et al., 2010).

Researchers use a variety of terms to define the experience of communicative anxiety, including oral communication apprehension (OCA), willingness to communicate (WTC), public speaking apprehension (PSA), communication reticence (CR), and public speaking anxiety (PSA) (Hunter et al., 2014; McCroskey et al., 2014). The current study is focused on the phenomenon of CA first defined by McCroskey (1970) as "an individual's level of fear or anxiety associated with either real or anticipated communication with another person or persons" (p. 269). This definition of the phenomenon remains the standard definition for CA among current researchers and serves as the primary bridge between communication studies and other social science disciplines including the current educational study (McCroskey et al., 2014; Shi et al., 2015). In addition to multiple definitions of CA, individual experience of CA may occur in multiple channels of communication such as speaking, writing, or singing, and in intrapersonal communicative scenarios such as imagining, thinking, or scenario replay (Bodie 2010; Bodie et al., 2013; McCroskey, 2011).

CA research reveals three major themes concerning students and the CA experience. First, Blume et al., (2013) hold that CA must be separated from communication ability. High

CA individuals may be effective and competent communicators and yet still experience feelings of anxiety during communicative encounters (Blume et al., 2010). However, physical attributes of CA may be misleading. An individual with poor communication skills may display nonverbal cues associated with nervousness, yet may in actuality be feeling calm and experiencing low levels of CA (Blume et al., 2013). Thus, feelings experienced because of CA should be viewed as distinct from communication skills and performance (Blume et al., 2013). Additionally, high CA individuals may be effective public speakers, have high GPAs, and may perform well academically throughout a college career (Bodie, 2010; Butler, Pryor, & Marti, 2004),

Second, while all individuals experience some level of anxiety in presenting a public speech, CA is not limited to structured communicative situations such as the formal presentational scenario (Bodie, 2010). Rather, individuals may experience anxiety in all interpersonal settings including dyadic conversational communication, interacting in a group scenario, or participating in a formal meeting (Blume et al., 2013). CA may be pervasive and ongoing and students may be particularly susceptible to anxiety as CA affects all aspects of college life including interactions in the dormitory, the classroom, and all curricular and co-curricular interactions (Hunter et al., 2014; Morreale et al., 2010).

Third, CA is not limited to real-world exchanges (Choi et al., 2015). Anxiety felt in anticipation of social encounters can be just as debilitating as real encounters, and this anxiety—and the tendency of individuals to make decisions in order to limit or avoid these fear-inducing scenarios—may interrupt and interfere with the functions of everyday life (Honeycutt et al., 2015). This role of imagination is critical to the understanding of CA for the individual (Choi et al., 2015; Honeycutt, 2010; Honeycutt et al., 2015). McCroskey's (1970) original CA definition dichotomizes between real and imagined communicative scenarios and the feelings associated

with imagined interactions or scenarios may be just as debilitating or fear-inducing as a real

situation (Choi et al., 2015). Imagined interaction is defined as the "process of social cognition

whereby actors imagine and therefore indirectly experience themselves in anticipated and/or past

communicative encounters with others" (Honeycutt, 2003, p. 2). Imagined interactions have a

direct effect on levels of CA and an individual can experience high levels of anxiety by

imagining past or future communicative scenarios (Choi et al., 2015; Honeycutt et al., 2009;

Honeycutt et al., 2015). Anxiousness associated with future communicative scenarios is

especially powerful and individuals may experience significant feelings of social anxiety in

anticipation of dyadic interaction with unknown individuals or interpersonal encounters in new

or unfamiliar surroundings (Blume et al., 2013). It is important to note that IIs may be directly

related to real interactions, but the feelings associated with IIs may be different than the feelings

associated with the same, real scenario (Honeycutt, 2009). For example, following a real-life

scenario an individual may replay the communicative exchange mentally (II) and the two

scenarios become distinct with different feelings associated with each scenario (Richards &

Sillars, 2014).

Finally, it must be noted that while McCroskey (1970) delineated between real and

imagined scenarios, there may not be an easy or clear bifurcation between what is real and what

is imagined. Honeycutt (2003; 2010) indicates that IIs have an effect on real scenarios and that

the activities within the mind play an important role in the conscious, real-world decisions of the

individual. Thus, while all individuals experience CA in both real and imagined scenarios and

that the two scenarios affect one another, the overall definition of CA remains dynamic and the

understanding of CA continues to evolve.

Evolution of CA Understanding

The discipline of communication studies is rooted in the Hellenistic era public address education efforts of Aristotle, Plato, Isocrates, and Socrates (Hauser, 2002). During the mid-twentieth century communication scholars focused on the study of disfluencies of interpersonal communication including communication reticence, shyness, social introversion, and social anxiety (Barraclough et al., 1988; McCroskey, 1977; 1982; Morreale, Backund, Hay, & Moore, 2011; Valenzano et al., 2014). The current understanding of CA began with the early work of McCroskey (1970), and the CA body of knowledge cannot be separated from the work of McCroskey (Beatty, 1987; McCroskey et al., 2014; Valenzano et al., 2014). McCroskey (1970) defined CA, delineating CA from shyness, reticence, social introversion, and stage fright, and this definition remains in current use in communication studies (McCroskey, 2011; McCroskey et al., 2014). Through McCroskey's career, CA understanding evolved to include traitlike and situational CA, willingness to communicate (WC), the communibiology paradigm, and a variety of intervention and mitigation pedagogical methodologies (Beatty, McCroskey, & Valencic, 2001; Mazer & Graham, 2015; McCroskey et al., 2014).

The current understanding of CA is transitioning from the social learning paradigm to the communibiology view (Beatty et al., 2001; Beatty & McCroskey, 2009; Byrne et al., 2012). The social learning paradigm defines CA as a behavior that individuals learn early in life and CA behaviors may be unlearned through training and intervention techniques (Bodie, 2010; McCroskey, 2009; Meichenbaum,1977). For some decades, this paradigm led pedagogues to develop introductory communication course curricula aimed to cure or fix CA within students (Bodie, 2010; Hunter et al., 2014). Where the social learning researcher is interested in prescriptive measures for reducing or treating CA, the communibiology perspective defines CA

as innate and somewhat incurable, although measures may be taken by educators to create environments to assist students with high levels of CA (Hazel et al., 2014; Hickson & Stacks, 2010). More simply, the social learning researcher views CA intervention as a cure, whereas the communibiology researcher views CA remediation as a help. The social learning framework is grounded in the treatment and curing of CA within individuals, where the communibiology framework serves to understand the phenomena in order to assist individuals coping with CA traits which will endure through an individual's lifetime (Hazel et al., 2014; Hickson & Stacks, 2010; Hunter et al., 2014).

The evolution of the understanding of CA is relevant to the current study. To date, scholars have primarily focused the CA research line of inquiry on causes and treatment of CA (Bodie, 2010, Waldeck, Kearney, & Plax, 2001). More recently, researchers have investigated the experiences of CA rather than focusing on CA mitigation (Bodie, 2010; Byrne et al., 2012). In sum, the communibiology CA line of inquiry seeks to understand rather than treat CA (Blume et al., 2010; Hickson & Stacks, 2010).

Scholars have developed an understanding of CA and how the phenomenon affects students in the classroom. Researchers are calling for a "revisioning of communication training" in the classroom (Choi et al., 2015, p. 41), the development of new pedagogical methods to address CA, and the need to create supportive classroom environments for students with high levels of CA (Rattine-Flaherty, 2014). While CA can be resistant to intervention, effective communication education may lessen CA experiences or assist high CA students with anxiety management or difficulties that arise during a college career especially in classroom public address communicative scenarios (Blume et al., 2013). De La Mare (2014) underscores the necessity for a new exploration of communication classroom practices. In order to design

college classroom practices around CA and its effects on the student, it is important for instructors to understand the types of CA which affect individuals (Byrne et al., 2012; Mazer & Graham, 2015).

<center>Types of CA</center>

CA may be viewed on a continuum (Figure 1) between traitlike CA and situational CA with context-based CA and audience-based CA as points along the continuum (McCroskey, 2011). All individuals have some level of CA and the body of CA knowledge is rooted in the assumption that all individuals fall somewhere on the continuum (Blume et al., 2013).
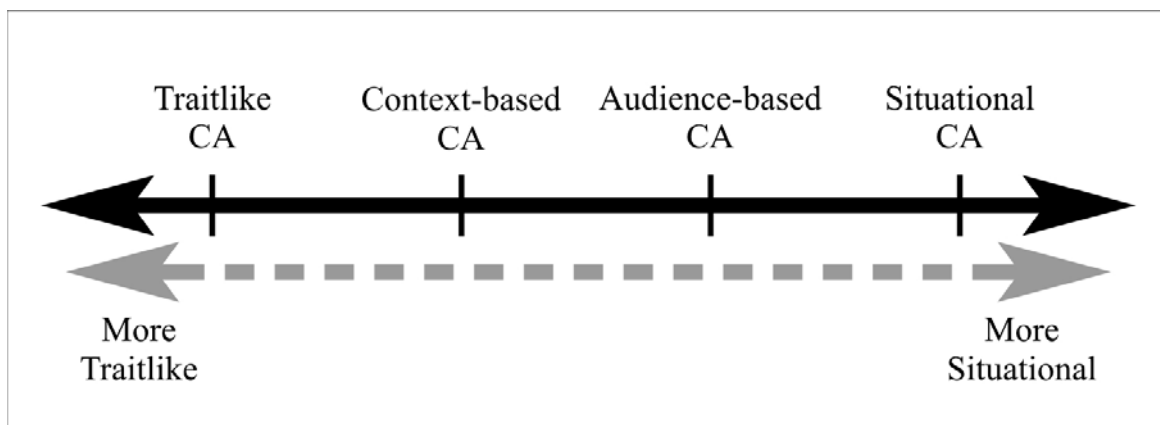
Figure 1. CA Types Continuum. (Richmond, Wrench, and McCroskey, 2013)

Traitlike CA is an ongoing personality attribute where an individual experiences anxiety in all or most real and imagined social interactions and is the most common type of communicative anxiety (Bodie, 2010; Choi et al., 2015; McCroskey & Beatty, 1998). Traitlike CA is enduring and more likely to recur over an entire individual's lifetime than situational CA (Hazel et al., 2014; Hunter et al., 2014). While some researchers hold that traitlike CA may not be cured or eliminated, others posit that traitlike CA may be modified, limited, or reduced through effective intervention (Blume et al., 2010; Bodie, 2010). An individual with high traitlike CA may remain silent in communicative situations or avoid communicative situations altogether (Choi et al.,

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2015; Hazel et al., 2014; McCroskey, 1977).   Additionally, individuals with high traitlike CA tend to dissociate the emotions experienced during a communicative exchange and hold on to negative views about personal communication over time (Beatty et al., 1998; McCroskey 1997). Individuals with high traitlike CA may experience negative feelings in anticipation of, during, and following social interactions and these feelings may be intrusive and overpowering (Blume et al., 2010; McCroskey, 2011).

Although the majority of studies advancing the understanding of CA were historically constructed to research traitlike CA (Beatty & McCroskey, 2000; 2009; Beatty et al., 2001), the understanding of situational CA research is expanding (McCroskey, 2011). In contrast to traitlike CA, situational CA is the general tendency for an individual to have feelings of anxiety in a specific situation (Bodie, 2010; Sawyer & Behnke, 2009). Where an individual with traitlike CA may experience anxiety in many or all communicative settings, the situational CA individual may feel calm in a group setting but experience anxiety in a dyadic exchange (McCroskey, 2009). Relevant to the current study, an individual may have no feeling of anxiety during day-to-day college classroom activities, yet during a public speech scenario may experience overwhelming and debilitating situational CA (Bodie, 2010). Situational CA is considered more manageable than traitlike, as the individual does not have pervasive ongoing anxiety and may be able to use coping skills across many settings to mitigate the feelings associated with high levels of communication-bound anxiety (Blume et al., 2010; Blume et al., 2013). Due to the prevalence of traitlike and situational CA among all individuals, communication scholars have designed instruments to measure and observe CA (McCroskey, 2011).

A number of instruments have been developed to measure individual CA (Bodie, 2010). Two instruments are most often used among CA researchers. First, situational CA and traitlike CA can be measured by the Communication Anxiety Inventory (CAI) developed by Booth-Butterfield and Gould (1986). The CAI contains a 4-point Likert scale across 41 questions and has reliability greater than .90 (Bodie, 2010). Second, the Personal Report of Communication Apprehension (PRCA) uses a 5-point Likert scale to measure CA in specific communicative situations, including public speaking, one-on-one interpersonal (dyadic) communication, group communication, and meeting communication (Levine & McCroskey, 1990). The PRCA contains 24 questions and has a high reliability range (α = .80 – .85) (Bodie, 2010; McCroskey, Beatty, Kearney, & Plax, 1985). Additional instruments used in CA research include the State Communication Apprehension Measure (McCroskey, 1984a; 1984b), State-Trait Anxiety Inventory (Spielberger, Gorsuch, Lushene, Vagg, & Jacobs, 1983), Personal Report of Confidence as a Speaker (Paul, 1966), Cognitive Public Speaking Orientation (Motley & Molloy, 1994), Perceptions of Speaking Ability (Ayers, 1986), and Cognitively Experienced Speech Anxiety (Beatty, Kruger, & Springhorn, 1976).

The Personal Report of Public Speaking Anxiety (PRPSA) is the most frequently occurring instrument used in current CA research (McCroskey et al., 2014). Although the PRCA has strong validity for assessing general CA and feelings of apprehension in situations across channels of communication other than public speaking, McCroskey recommends the use of the PRPSA for settings which include public address (Hunter et al., 2014). McCroskey, who developed both the PRCA (Levine & McCroskey, 1990) and the PRPSA (McCroskey, 1970) recommends the use of the PRPSA over the PRCA for research conducted in the communication

course classroom (Dallinger 2007a; 2007b; Hunter et al., 2014). Thus, the PRPSA was the

instrument selected for the current study to prescreen potential participants during Phase I and

identify a sample of participants with high CA (Bodie, 2010). Individuals with high levels of CA

experience complications in both personal and professional interactions; indeed, there are many

implications of high CA levels.

<div align="center">Implications of High CA</div>

CA is prevalent throughout the US. It is estimated that between 30% and 40% of

Americans have high levels of CA which produces significant relational, emotional, and

financial difficulties (Hunter et al., 2014). McCroskey (2009) found that 70% of Americans

have to some degree a specific fear of public speaking and that women have a slightly higher

prevalence of public speaking fear. The consequences for the individual with high CA are

significant. Emotional manifestations of CA may include feelings of disquiet, unease,

apprehension, or nervousness (Byrne et al., 2012; McCroskey, 2009). Physical symptoms of CA

may include sweating, muscle tension, shaking hands, increased heart rate, hindered breathing,

heart palpitations, dizziness, confusion, and speech disfluencies (American Psychiatric

Association, 2013; Hunter et al., 2014). High CA individuals may experience a quivering voice,

nausea, and a temporary inability to speak (Bodie, 2010). In a communicative situation, the high

CA individual can experience intruding thoughts which can be disproportionately negative, and

the high CA individual may avoid thinking about situations which increase or trigger

communication-related anxiety (Bodie, 2010). Additionally, high CA individuals experience

false cognitions that hinder communication resulting in ongoing negative consequences (Blume

et al., 2013; Bodie, 2010).

CA also has significant implications for interpersonal relationships (McCroskey, 2007a; 2007b; Wrench, Brogan, McCroskey, & Jowi, 2008). High CA individuals tend to avoid communicative situations and during unavoidable scenarios may be less oral or even silent in order to minimize feelings of anxiety or fear (Blume et al., 2013; McCroskey, 1997). High CA individuals tend to use minimal verbal and nonverbal communication with others which can hinder, debilitate, and erode relationships (Ayres, Heuett, and Sonandre, 1998; Hunter et al., 2014). Rather than focusing on others in interpersonal relationships, high CA individuals tend to focus on self-deficiencies and personal weaknesses (Clark & Beck, 2010). High levels of CA are associated with a variety of maladaptive behaviors including high levels of self-criticism, ongoing social anxiety, depression, and self-injury, all of which disrupt normal relationships and interpersonal interaction (Shahar et al., 2012). Additionally, CA is associated with high levels of negative thinking and negative attitudes toward self and others (Shi et al., 2015). While it is clear that high levels of CA can have serious effect on the individual, current research has produced a series of CA remediation methods.

<div align="center">Current CA Remediation</div>

Curricula for communication courses offer a number of techniques to equip individuals with intervention methods for anxiety associated with communication, especially the fear of the unknown or imagined situational communication anxiety, and fear or anxiety in delivering a public speech (McCroskey, 2009). The most successful remediation technique is visualization (Ayres & Hopf, 1985; Bodie, 2010; Shi et al., 2015). Developed by Ayres and Hopf (1985) visualization (VIS) is a technique for assisting individuals with high levels of CA and uses systematic desensitization (SD) that allows individuals to visualize success in an imaginary communicative scenario (Freeman, Sawer, & Behnke, 1997). Individuals are instructed to

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anticipate events that may potentially produce anxiety such as a public speech, job interview, or first date, and then practice behaviors that may be used in the given situation (Bodie, 2010; Choi et al., 2015). The individual is instructed to imagine progressively more difficult interactions, to relax, and to visualize success (Choi et al., 2015; Honeycutt et al., 2009). Because of individual ability to create anxiety through imagined interactions (IIs), VIS may be particularly effective as a CA remediation, especially for individuals with natural tendencies to create imagined interactions (Bodie et al., 2013; Choi et al., 2015; Hunter et al., 2014). More simply, if an individual has an active imagination which causes the individual to have anxiety from anticipating or replaying communicative scenarios, VIS may allow an individual to use the imagination for mitigating the anxiety (Bodie et al., 2013; Honeycutt et al., 2015). This tendency to create IIs in an imagined communicative scenario may allow an individual to anticipate the anxiety and feeling of nervousness in a given situation and effectively plan content or a personal strategy for addressing CA (Choi et al. 2015; Honeycutt et al., 2015; Hunter et al., 2014). VIS and IIs have particular benefit for addressing CA for individuals in the context of the classroom and may help to relieve anxiety and uncertainty associated with a public communicative scenario (Hazel et al., 2014; Honeycutt et al., 2009). Rosenblatt and Meyer (1986) first identified the effectiveness of IIs in assisting individuals in developing effective decision making skills in the classroom environment, and the VIS method remains effective (Choi et al., 2015). While SD and VIS were developed as separate cognitive modification techniques, the two strategies are similar, have overlapping definitions, and are often used together as a combined mitigation strategy (Choi et al., 2015; Hunter et al., 2014).

VIS has been shown to be especially effective in two areas of CA remediation. First, in the specific communicative scenario of a public address, VIS has been shown to minimize the

disfluencies of vocal pauses and silence during a speech (Choi et al., 2015). Second, through the strategic use of IIs and rehearsal of communicative messages in a potentially anxiety-inducing situation, overall levels of CA may be reduced (Choi et al., 2015; Daly, Vangelisti, & Weber, 1995; Edwards, Rapee, & Franklin, 2003; Honeycutt et al., 2015).

In addition to the VIS technique, current communication curricula offer three CA reduction methods. First, communication-orientation modification therapy (COM therapy) assumes that individuals have a performance mentality toward public speaking and that communication-bound anxiety is a result of this performance orientation (Bodie, 2010). COM therapy serves to re-orient the high CA individual to view public speaking as a conversation with an audience rather than as a public performance to be scrutinized by an audience (Bodie et al. 2010). The COM therapy has received empirical support for effective CA remediation (Ayers, Hopf, & Peterson, 2000; Bodie, 2010). Second, skills training (ST) offers communication-specific techniques to high CA individuals for reducing CA levels (Francis & Miller, 2008). ST remediation techniques include rehearsal, speech preparation, coaching, modeling, feedback, and reinforcement. The ST therapy method has been shown to effectively reduce anxiety in public speaking students in introductory communication course public address scenarios (Bodie, 2010; Francis & Miller, 2008; Hunter et al., 2014). Third, the use of humor has been shown to be an effective CA remediation technique (Francis & Miller, 2008; Frymier, Wanzer, & Wojtaszczyk, 2008). Individuals participating in classroom environments with effective use of lightheartedness both by the student and instructor tend to have lower levels of CA and serve as an effective mitigation of communication-bound anxiety (Francis & Miller, 2008; Wrench & McCroskey, 2008).

Overall, current CA treatment during an introductory communication course has been shown to be only moderately effective in reducing CA (Bodie, 2010; Emanuel, 2005; Francis & Miller, 2008; Richmond, Wrench, & McCroskey, 2013). The most effective remediation technique is the use of several methods in combination (Bodie, 2010). This multi-method technique is referred to in communication studies as blended therapy and is more effective than any single method of remediation in both the immediate and long term reduction of CA (Hunter et al., 2014). The blended therapy method of using VIS, IIs, SD, ST, and rehearsal is particularly effective in decreasing overall CA among introductory communication course students (Honeycutt et al., 2015; Hunter et al., 2014). Scholars of CA have effectively identified methods and practices that successfully help to mitigate the effects of CA within individuals; however, challenges remain in isolating the causes contributing to CA.

<div align="center">The Challenge of CA Etiology</div>

There exists little knowledge about the causality of CA; most researchers employ a significant level of speculation in CA etiology development (McCroskey, 2011). Research methodology for identifying and isolating CA predictor and criterion variables via controlled environments can be ethically questionable (Dwyer & Davidson, 2012; Lindlof & Taylor, 2011; McCroskey, 2011). Causal research has been limited to understanding traitlike CA etiology (Russ, 2013). And while the distinction between traitlike CA and situational CA is useful for researchers, McCroskey (2011) holds that the bifurcation between traitlike CA and situational CA has muddled CA understanding and does not serve to address the foundational need for identifying CA causality.

In the social science disciplines two attributed causes of CA exist: heredity and environment (McCroskey, 2011; Richmond et al., 2013). Individuals may either be born with

CA or individuals maybe develop CA during the developmental years of life (Bodie, 2010). McCroskey (2011) views both as applicable to the etiology of CA. Researchers have developed an understanding that there may be an interaction between the two causes (Blume et al., 2010; Blume et al., 2013). It appears that heredity plays a part in traitlike CA but that development of traitlike CA is based on something beyond environment indicating that CA causality may be grounded in both genetics and environment (Bodie, 2010; McCroskey, 2011). However, communication researchers continue to debate between CA as an ongoing personality trait that is inherited or as an emotional state which ebbs and flows according to situational stimulation (Blume et al., 2013). And while it remains unclear whether CA is primary based in heredity or environment, CA has significant implications for the community college student.

<center>CA and the Community College Student</center>

High levels of CA significantly impact the community college student (Horwitz, 2002; Hunter et al., 2014). Anxiety caused by CA affects the daily life of individuals and the college years are particularly difficult for students with high levels of CA (Bodie, 2010; Hazel et al., 2014). The avoidance of anticipated social situations affects individual student behavior and performance including choice in program of study, academic success, daily schedule, classroom engagement, student-faculty relationships, and overall retention rates (Butler et al., 2004; Francis & Miller, 2008; McCroskey, Booth-Butterfield, & Payne, 1989). Community college students have reported significant levels of CA leading to anxiety, language and communication problems, as well as ongoing academic problems associated with CA (Francis & Miller, 2008; Hunter et al., 2014). Despite decades of research and higher education efforts, community college retention rates have not increased to the levels of comparable four-year institutions, and researchers are calling for a greater understanding of community college students; indeed, more

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research is needed to understand the community college experience for the high CA student (Duggan & Williams, 2010; Hunter et al., 2014).   Researchers continue to refine CA assessment measures in effort to assist students with high levels of CA, creating programs and educational curricula to address ongoing student anxiety in the classroom and the overall college environment (Hazel et al., 2014; Hunter et al., 2014).   However, these programs and efforts continue to be grounded in the social learning perspective of CA. This paradigm holds that programs should be created to treat high CA in individuals rather to broaden the understanding of the experience of individuals with high CA (Bodie, 2010; Byrne et al., 2012).

High CA can have particular effects for individuals enrolled in an introductory public speaking course (Choi et al., 2015). High CA students may experience severe anxiety before, during, and following an oral presentation (Francis & Miller, 2008; Hunter et al., 2014). These individuals may display behavior detrimental to an academic career including avoiding coursework, poor preparation for assignments, poor decision making, and ongoing poor academic performance (Bodie, 2010). High CA students tend to be silent during communicative scenarios and at times have ongoing disorganized thinking patterns due to anxiety (Choi et al., 2015). Additionally, students with high levels of CA have ongoing fear of negative evaluations from peers and instructors which may lead to poor academic performance and limited social engagement in the classroom (Francis & Miller, 2008; Hazel et al., 2014).

Anxiety associated with interpersonal communication has ongoing implications for students in the classroom (McCroskey, 1976; Horwitz, 2002; Hunter et al., 2014). High CA students tend to avoid practicing for oral presentations in order to avoid IIs (Shepherd & Edelmann, 2007). During classroom interactions with both peers and instructors, high CA students have ongoing difficulties in managing thoughts and tend to experience thought patterns

which may be mired in complexity (Rosenblatt & Meyer, 1986). CA affects how students interpret personal classroom performance and high CA students tend to be highly self-critical (Shahar et al., 2012; Shi et al., 2015). Normal academic experiences may be difficult to manage for the high CA student and these experiences may be interpreted unnecessarily negatively (Shi et al., 2015). CA affects student willingness to take on leadership responsibilities, adapt to new situations, and accept or appreciate other individuals of multicultural backgrounds (Blume et al., 2013; McCroskey, Richmond, & McCroskey, 2002; 2009). Overall, the negative feelings associated with high CA tend to overshadow positive experiences in the classroom which has significant implications in student success and retention (Blume et al., 2013; Shi et al., 2015).

CA erodes student willingness to communicate with others in the classroom environment (Horwitz, 2002; Sawyer & Behnke, 2009). Empirical research has shown that while students may understand the need to speak up, engage, and have an ongoing willingness to communicate with others, high CA students may both subtly and actively avoid engagement (Blume et al., 2010). When faced with new opportunities for engagement, over one-third of high CA students avoid communicating with others, choosing to remain silent in the classroom rather than risk appearing foolish in front of others (Hazel et al., 2014). The feelings associated with CA are intrusive and over time undermine student motivation and willingness to engage with others (Blume et al., 2013; Shepherd & Edelmann, 2007). Because of the lack of willingness to engage, the high CA student may not be perceived as a team player or as a leader and may have ongoing negative consequences for in-classroom relationship development and student-instructor interaction (Blume et al., 2013). These negative consequences for high CA students can occur in any course for any student on any college campus; however, the introductory communication course is ripe for high CA manifestations because of the curricula and sequencing (Morreale et

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al., 2010). Introductory communication courses are normally required early in a student's

college career in order to provide a foundation for written and oral communication skills

throughout the college experience (Dwyer & Davidson, 2012). And while the implications of

high CA are significant for the community college student, in many states including the state of

the current study, all community college students are required to complete one introductory

communication course regardless of personal choice or individual level of CA (Tennessee Board

of Regents, 2017). Indeed, high CA has curricular and co-curricular implications for the

community college student. However, community colleges as a sector of higher education have

been in transition in recent decades which has implications to the high CA student.

<div align="center">Community Colleges in Transition</div>

While research among higher education trends reveals the current strength of community

college as an undergraduate education option with 41% of all first-time freshmen enrolled in

community college institutions nationally, the place of the community college has not always

been so robust (American Association of Community Colleges, 2017; Aud et al., 2011). And

while the understanding of the history of the community college model is murky at best, it is

clear that during the 1970s and 1980s the "junior college" system as it was known at that time

had a reputation as a second-rate education compared with four-year institutions (Cohen &

Brawer, 1987; Cohen, Brawer, & Kisker, 2014; Dougherty, 1994). During this time junior

college was the only option for many students with lower academic abilities (Cohen et al., 2014).

The lower academic acceptance requirements, nontraditional instructional schedules, and lower

tuition gave some students the only option for higher education as for many it was junior college

or nothing (Cohen et al., 2014; Duggan & Williams, 2010). Compounding the challenge of

perceptions of lower educational standards, junior colleges had the challenge of meeting the

needs of a more diverse student body and needs for a larger variety of academic programs than

four-year institutions (Bragg, 2001).

Beginning in the 1990s a trend developed among junior colleges of reevaluating

institutional standards and curricular practices (Banta & Associates, 2002; Ewell 1997a; 1997b;

2002). This reevaluation included increased institutional accountability, the beginning of

outcomes-based practices and increased quality standards (Bresciani, 2003; 2006; 2011; 2012;

Brown & Burke, 2007; Ewell, 2002; Laanan, 2000; Palomba & Banta, 1999). This revolution in

educational practices, and with it a transition to the system being nationally accepted as

"community college" rather than "junior college," included the development of new academic

considerations including new definition quality education, tailoring of curricula to individual

students, and relevant to the current study the beginnings of CA mitigation in the classroom

based on empirical data (Elbaz, 1990; Ewell & Jones 1996; Flynn, 1999; Maki, 2010;

McCroskey, 2007a; McCroskey et al., 1989; McCroskey et al., 2014; Palomba & Banta, 1999).

The current state of the community college system is strong by most measures (American

Association of Community Colleges, 2017; Cohen et al., 2014). The last decade included

increased rates of successful transfer to four-year institutions, increased graduation and retention

rates, and an overall increase in quality of education (American Association of Community

Colleges, 2017; Chrystal, Gansemer-Topf, & Laanan, 2013). Nationally, community college

enrollment continues to grow, offering educational programs tailored to the needs of students

with diverse personal needs and academic goals (Bresciani, 2003; 2011; Chrystal et al., 2013;

Laanan et al., 2011). Relevant to the current study is the increased focus on an outcomes-based

pedagogy which aids communication students in a curriculum with increasing focus on skills

training (Bresciani, 2006; 2011; 2012; Bresciani, Zelna, & Anderson, 2004; Cunningham &

Villaseñor, 2016; Duggan & Williams, 2010). Currently, nearly all community college degrees and programs in the State of Tennessee require the completion of an introductory communication course (Tennessee Board of Regents, 2017).

<div align="center">The Introductory Communication Course and the Community College Student</div>

The introductory communication course serves two purposes, both of which are critical to the development of the community college student (Duggan & Williams, 2010; Lippert, Titsworth, & Hunt, 2005). First, the primary and most important function of the introductory communication course is to mitigate the effects of CA within an individual student (Hunter et al., 2014; Valenzano et al., 2014). The college experience may serve to exacerbate CA within individuals and the resulting anxiety is a detriment to the overall academic success of the high CA student (Duggan & Williams, 2010; Shi et al., 2015). The introductory communication course offers intervention for both high and low CA students, equipping students with coping methodologies and skills to reduce anxiety associated with communicative interactions (Blume et al., 2013; McCroskey, 1982; Morreale et al., 2010). Beyond learning new skills for coping with CA, effective communication curricula may serve to create authentic change within the trait of the individual student effectively helping to remediate the effects of CA to some level (Hunter et al., 2014). However, it must be noted that while the view of the introductory communication course as primarily serving to mitigate the effects of CA may be held by educators, there remains a divide in that legislators may hold a differing view of the function of this course (Phillips & Burbules, 2000). Some hold that the primary function of the introductory communication course is less about CA mitigation and more about developing public and interpersonal communication skills (Bresciani, 2011).

Second, introductory communication curricula prepare students for the workforce (Morreale et al., 2010). Employers continue to place increased emphasis on interpersonal communication competence, functioning within the teamwork paradigm, and effective oral communication skills (Blume et al., 2013; Cunningham & Villaseñor, 2016; Shi et al., 2015). The introductory communication course assists the community college student in identifying areas of communicative difficulties, training for effective communication in the business and professional environment, and allows students to reach full potential with effective soft skills training and practice (Blume et al., 2013; Duggan & Williams, 2010; McCroskey, 1982; Morreale et al., 2010). Because employers today have increasing dissatisfaction with the soft skills competency of recent graduates, the need for the introductory communication course continues (Cunningham & Villaseñor, 2016; Makki, Salleh, Memon, & Harun, 2015). However, current research reveals that CA may serve as a direct inhibitor to soft skills training, underscoring the need for a continued development in CA mitigation curricula (Byrne et al., 2012).

While most community college programs of study require an introductory communication course, additional pedagogical refinement is necessary as the current curricula does not offer effective CA mitigation and often does not provide help specific to the high CA student (Hazel et al., 2014; Valenzano et al., 2014). Hunter et al. (2014) called for additional course development and refinement to address the ongoing struggle of students with high levels of CA and to explore the development of communication intervention courses specifically for the high CA student. Byrne et al. (2012) posited that in the introductory communication course, CA should be mitigated first before communication skills for the workforce are taught, and that the first step in this mitigation-first approach is a greater understanding of the CA experience. Yet

the classroom environment continues to be a challenge for students with high CA and a significant gap remains between student need and current CA pedagogical interventions aimed toward teaching and assisting students who experience CA (Choi et al., 2015; Valenzano et al., 2014).

CA mitigation, especially if offered early during a community college program of study, may assist the student in multiple areas. Communication difficulties may be a detriment to student success across an entire program of study and high potential students may not reach full potential due to effects of CA (Blume et al., 2013). Because of CA, students may make career choices in order to avoid specific communicative situations (Hunter et al., 2014). Additionally, CA affects instructor-student relationships as high CA students are less likely to seek help and advice from authority figures; thus CA serves to inhibit relationships between students and professors and hinder overall academic performance and student self-perceptions of overall college success (Bodie et al., 2013; Hunter et al., 2014; Russ, 2013).

Finally, the challenge remains for communication educators in that across most higher educational systems, the introductory communication course is the only communication course that the vast majority of undergraduate students will be required to take during a program of study (Morreale et al., 2010). This exacerbates the onus for communication educators to assist the 30-40% of the population which is high CA, as the single introductory communication course is a one-shot opportunity for communication faculty to work with high CA students for the purpose of CA intervention and mitigation training (Morreale et al., 2010; Morreale et al., 2011). To understand the CA experience for the high CA community college student, a conceptual framework was adopted.

Conceptual Framework

The lived experience of the high CA community college student was explored using four constructs as a framework for conceptualization. First, CA is conceptualized as the level of fear or anxiety which an individual may experience during real or imagined communicative interactions with others (McCroskey, 1970; 1976). This communication-bound apprehension may be experienced both emotionally and physically (Byrne et al., 2012; McCroskey, 2009). Second, the lived experience of the high CA student is an unobservable, unverifiable, personal narrative which is created by the individual (Adams & van Manen, 2008; Alkin, 2013). The study focused on the perceptions of the high CA individual and how study participants "narrate their own versions of reality" with the experience of the central phenomenon (Taylor et al., 2016, p. 21). Third, the research is focused on the high CA experienced during real world scenarios (Alkin, 2013; McCroskey, 2011). These real world scenarios are viewed as communicative interactions with others across all channels of communication including digital, face-to-face, dyadic, and group scenarios (Verderber et al., 2016). Fourth, the lived experience of the high CA individual was explored through IIs and the emotional and physical experiences of communication-bound apprehension in imagined interactions (Honeycutt et al., 2015). IIs may be experienced at any moment within the mind of the individual and may take place before, during, or following real world communicative scenarios (Hunter et al., 2014).

Chapter Summary

The emergent theme within the review of literature is that all individuals experience some level of CA and the feelings of anxiety associated with communicative scenarios may serve to make college a particularly difficult experience for high CA individuals (Blume et al., 2014; Bodie, 2010; De La Mare, 2014). Clearly, students with high levels of CA benefit from CA

intervention and from current course curricula with remediation goals and objectives, especially within the trait characteristics of individual CA levels (Hunter et al., 2014; McCroskey et al., 2014; Valenzano et al., 2014).

However, the need remains for additional understanding of the CA phenomenon and ongoing course refinement and remediation technique development for high CA students. This is for two reasons. First, understanding the lived experiences of students with high levels of CA remains incomplete (McCroskey, 2011; McCroskey et al., 2014; Valenzano et al., 2014). While researchers have devoted decades to the quantification of CA levels and the correlation of high CA with other personality traits and demographics, little research has been published exploring the qualitative nature of the CA experience and little voice has been given to the high CA student (Byrne et al., 2012). Additionally, the etiology of CA has yet to be conclusively addressed (Dwyer & Davidson, 2012; McCroskey, 2011). While the current study does not address CA causality, qualitative exploration methods will further the understanding of the CA phenomenon by providing a rich, thick description of the CA experience and assist future researchers in CA etiology development.

Second, a greater understanding of the phenomenon is necessary to understand the experience of CA for the community college student in order to refine and develop communication course curricula and CA remediation methodology (Hazel et al., 2014; Hunter et al., 2014, Valenzano et al., 2014). To date, limited CA research has been conducted within the framework of the community college introductory communication course (De La Mare, 2014; Hunter et al., 2014; Shi et al., 2015; Wehlburg, 2010). The current study may offer a greater understanding the CA experience and thereby may aid future educational researchers and curriculum developers in creating and refining CA intervention methodology, assist in

introductory communication course curricula development, provide insight to communication

faculty and refine CA mitigation techniques for the high CA student.

CHAPTER 3

RESEARCH METHODOLOGY

The purpose of this phenomenology is to understand the lived experiences of high CA students enrolled in an introductory communication course at a community college in Tennessee. For the purpose of this study CA is defined as "an individual's level of fear or anxiety associated with either real or anticipated communication with another person or persons," and high CA students were defined as scoring above 131 on the PRPSA (McCroskey, 1970, p. 269; 2017; Beatty et al., 1998, p. 197). Using this definition as a framework, five constructs were used to gather data from study participants: (1) describing the physical and emotional experience of CA, (2) describing the experience of CA in real scenarios (3) describing the experience of CA in imagined scenarios, (4) reflection on how CA affects individual behavior in community college curricular and co-curricular activities, and (5) reflection on individual techniques used to mitigate CA. The study focused on the lived experiences of five community college students with the central phenomenon of high CA.

Research Questions

The central research question is: How do community college students describe the lived experience of high CA? Data collected from interviews with five participants, personal diaries created by the participants, and a field journal created by the investigator were analyzed to answer the central research question. The research questions which guided the investigation included:

1. How do community college students describe the physical and emotional experience of communication apprehension?

2. How do community college students describe communication apprehension in real interactions?

3. How do community college students describe communication apprehension in imagined interactions?

4. How has communication apprehension affected individual decision-making in curricular and co-curricular community college activities?

5. During curricular and co-curricular community college activities, what techniques have high CA individuals used to mitigate the effects of communication apprehension?

<u>Qualitative Design</u>

The research design begins with a single, overarching question of how do high CA community college students describe the phenomenon of communication apprehension (Creswell, 2014; Koro-Ljungberg, Mazzei, & Ceglowski, 2013). The initial question and following subquestions allow for the narratives of the participants to guide the overall research (Creswell, 2013; Taylor et al., 2016). The research questions address the description of the phenomenon, the lived experience of CA among study participants, and the CA mitigation techniques used by the participants (Adams & van Manen, 2008; Lindlof & Taylor, 2011). The questions address a description of the CA phenomenon and themes emerged from the study of the CA experience (Creswell, 2014). The phenomenological investigation seeks to understand the "meaning, structure, and essence" of the lived experience of the high CA community college student (Patton, 2015, p. 98).

<u>Constructivism and the Phenomenological Tradition</u>

The current study was influenced by the constructivist paradigm which attempts to make meaning from the human experience and allows each individual to have a unique description of a

lived phenomenon (Alkin, 2013, Crotty, 1998). The constructivist researcher assumes that the reality of each individual is constructed by the individual and that the interpreted meaning for each person is unique, valuable, and worthy of study (Lincoln & Guba, 1985; 1990; Patton, 2015). This framework assumes that a substantive reality exists in the individual mind and this reality may be "apprehended" by gaining an understanding of the mental construct of the individual (Taylor et al., 2016, p. 28). Relevant to the current study, the constructivist researcher assumes that while the CA experience may be mostly unobservable, the CA experience is real, even palpable to the individual, although much of the lived experience is constructed and experienced mentally (Adams & van Manen, 2008; Alkin, 2013).

The phenomenological tradition allows for individuals to describe a lived experience and seeks to understand the very nature of a phenomenon (Giorgi, 2009; Patton, 2015). The paradigm allows for extensive and thorough inquiry and gives full voice to the individual who is willing to share about personal experience (Creswell, 2013; 2014). Additionally, the tradition is especially useful for educational researchers as it allows for practical insight and experiences which take place in the educational environment (Creswell, 2005).

Guba and Lincoln (1989) posit four assumptions of the constructivist framework which have implications to the current study. First, a lived experience may only be understood and studied within the context of the phenomena (Guba & Lincoln, 1989; Maxwell, 2013). The CA experience from the community college student must be studied within the context of the participant's experience at the hosting institution. The constructivist paradigm does not allow generalization to other contexts or settings and the individual narrative has no implications on other community college students or institutions (Maxwell, 2013).

Second, the constructivist research is not interested in facts or objective truth (Guba & Lincoln, 1989; Patton 2015). Instead, the focus is on the perceptions of the individual, and how study participants "narrate their own versions of reality" (Taylor et al., 2016, p. 21). Thus, rather than studying what is observable and verifiable, the current study seeks to understand what is unobservable: the lived experience of an individual, and how the studied individual organizes and communicates these experiences (Linde, 1993; Maxwell, 2013).

Third, knowledge and reality are a social construct and reality for the individual only exist within the framework of society (Alkin, 2013; Guba & Lincoln, 1989; Maxwell, 2013). Thus, constructed realities, including CA and the effects of CA on the community college student, are a result of societal structure created by individuals (Taylor et al., 2016). The very nature of communicative rules and norms—and with these rules come anxiety associated with rule-following and pressure to follow the constructs—are a constructed reality created by the participants (Nagel, 1994). While the nature of CA is not fully understood, the constructivist researcher assumes that at least part of the reality of the CA experience is a result of societal rules of normalcy within the conscious reality of the individual (Adams & van Manen, 2008; Patton, 2015).

Finally, the constructivist researcher approaches epistemology as subjective and the framework of acquiring understanding is unique for both the individual and the researcher (Patton, 2015). The idea that lived phenomena are unique and subjective and that the method for exploring a particular lived phenomenon is also subjective, has implications for the current study (Alkin, 2013; Guba & Lincoln, 1989; Lincoln & Guba, 1990). The assumption that the experience of CA is a unique phenomenon for each individual underscores the value of the

individual narrative (Creswell, 2014; Taylor et al., 2016). Thus, the constructivist paradigm

places emphasis on the role of the researcher during an investigation.

<div align="center">Role of the Researcher</div>

Gatekeepers may have significant influence on a qualitative study including limitation of

access to study site and participants, approval of study, and limiting study scope (Marshall &

Rossman, 2016; Maxwell, 2013). As the investigator I served as the primary gatekeeper for the

study, serving a necessary role which affects the study design (Creswell, 2014; Patton, 2015).

As the primary gatekeeper I defined the central phenomenon to be studied, the central question,

limited the conditions of entry to the study, the scope of the reviewed literature, and restricted the

scope of analysis (Lindlof & Taylor, 2011; Marshall & Rossman, 2016).

Taylor et al. (2016) recommend that the primary investigator have a genuine interest in

the subject matter and underscores a need for compatibility between researcher and phenomena.

I have taught at the study site since 2007, first as an adjunct instructor and then as a full

communication faculty member since 2009. There is some indication that there is an advantage

to conducting research in a familiar environment as data may be more accessible, study

permission may be easier to obtain, and participants may be more at ease with an institutional

insider such as a faculty member (Patton, 2015; Taylor et al., 2016).

My primary responsibility is teaching community college students in the introductory

communication course. During my service to the college I have viewed and critiqued over

10,000 public speeches by introductory communication course students. During the course of

my career I have lectured to, developed instructor-student relationships with, and viewed public

presentations by hundreds of high CA students. Earlier in my early career I worked in a field

where a significant portion of my responsibility was public speaking. I have traveled as an

itinerate speaker and storyteller, delivered over 2,500 public speeches to groups of varying sizes, and taught communication studies at the elementary, secondary, and postsecondary levels. I have experienced high levels of both traitlike and situational CA, especially during my tenure as an undergraduate speech communication major, and I identify with the experiences of many of my high CA students.

I have interest in communication education at the community college level, the CA experience among introductory communication course students, and am particularly interested in CA mitigation for individuals who are new to public speaking, inexperienced in purposeful communication, and who experience ongoing communication-bound anxiety. My role as a storyteller, speaker, and assistant professor of communication uniquely position me to understand and observe the central phenomenon among high CA community college students.

While all phenomena are experienced at a personal level, and outsiders will never fully understand or appreciate the totality of the lived experience of another individual, the phenomenological inquiry process requires significant collaboration and rapport between the participant and the researcher (Hepworth, Grunewald, & Walton, 2014; Marshall & Rossman, 2016). This collaboration requires a significant level of willingness by the participants to develop a relationship of trust and openness with the researcher (Patton, 2015; Webster & Mertova, 2007). Although there may be difficulty of identifying and voicing a relationship in terms of rapport between investigators and study participants, most phenomenological methodologists place emphasis on the relationship between researcher and study participant (Marshall & Rossman, 2016; Maxwell, 2013)

In addition to receiving research permission from the sanctioning institution via the IRB, the researcher obtained study permission from the Tennessee community college where the study

took place (Patton, 2015). Permissions to conduct the study are presented in Appendix B.

Gatekeepers at the hosting institution received prompt and clear communication, and I

communicated that the investigation was to be conducted with minimum disruption to

educational and extracurricular activities at the institution (Creswell, 2014; Maxwell 2013).

The constructivist researcher assumes that experiences such as CA are subjective and that

each individual has a unique interpretation and construction of the lived phenomenon (Creswell,

2013; Crotty, 1998). The shared experiences were interpreted by the researcher and this

interpretation of the data by the researcher is a construction in and of itself (Lincoln & Guba,

1990). The current study acknowledges that like all individuals, I have a lived experience with

the CA phenomenon (Bodie, 2010; Hammersley & Atkinson, 2007). This additional experience

of the phenomenon by the researcher is inherent in phenomenological methodology, although the

effects on the study were mitigated in two ways (Creswell, 2014).   First, the researcher used

reflexivity to identify and bracket personal and experiential bias, defining the role of the

researcher, and documenting the background of the researcher (Ahern, 1999; Marshall &

Rossman, 2016).   Second, during the investigation the researcher created a field journal to

document potential biases and to explore the personal narrative of the CA experience (Creswell,

2014; Sarantakos, 2005). This step involved consideration of how assumptions and experiences

by the researcher affected the study design, the interviewing process, the interpretation and

presentation of the data, and a series of ethical issues were considered (Ahern, 1999; Lauckner,

Paterson, & Krupa, 2012).

Ethics

Qualitative research methodology has a series of ethical considerations and has inherent

risks for the researcher, participants, and sanctioning institution (Creswell, 2014; Sieber &

Tolich, 2013). General ethical guidelines were followed including doing no harm, respecting

participants, telling the truth, gaining informed consent, and allowing participants to withdraw

from the study without consequence (Sarantakos, 2005; Sieber & Tolich, 2013). Five areas of

ethical considerations were addressed in the study design and methodology.

First, prior to undertaking the study, research approval was obtained from the Human

Research Protection Program at East Tennessee State University (ETSU). I completed IRB

training at ETSU in April, 2015. Additional research approval was obtained from the IRB

because the study involved research with human participants. A copy of the IRB approval letter

is provided in Appendix B.

Second, potential power imbalance was considered for the study procedure (Kvale,

2007). The primary power imbalance arose because I serve as an assistant professor of

communication at the institution and with this position comes a potential power imbalance. To

mitigate a potential power imbalance, the studied sample did not include students in courses

which I served as instructor. Additionally, study participants were informed in the consent form

and verbally that participation in the study was voluntary and that withdrawal at any time, for

any reason, would be inconsequential for the participant (Creswell, 2014).

Third, two clear and succinct informed consent forms were created and approved by IRB

at East Tennessee State University and the hosting institution. The first form was for Phase I and

included an informed consent for all students who were administered the PRPSA instrument. A

copy of this consent form is presented in Appendix A. The second form was created for Phase

III of the study and was presented to potential study participants during Phase II. This second

form detailed the purpose of the study, confidentiality of the data, identification of the

sponsoring institution, identification of the researcher, benefits for participation, guarantee of

confidentiality, contact information, and a guarantee that the participant may withdraw from the study without consequence (Marshall & Rossman, 2016; Patton, 2015; Sarantakos, 2005; Sieber & Tolich, 2013). The second consent form is identical to the initial PRPSA form, with the instrument omitted, and is presented in Appendix A.

Fourth, in addition to the consent form, the privacy of each participant was considered. No potentially harmful information was collected and the narrative of each individual was presented with accuracy of tone and content (Patton, 2015; Saldaña, 2009). Following the Phase III interviews of the five study participants, each student was presented a copy of their respective interview transcription as an additional level of data accuracy and to protect each individual from data shifting (Seidman, 2013). In regard to privacy, a certainly level of risk was involved in the event that the master list of names and pseudonyms could possibly be viewed by an individual outside the study staff. However, all precautions were undertaken to separate the pseudonym master list from the collected data and all study files were stored securely and will continue to be stored for a period of six years following the study (Creswell, 2014; Patton, 2016).

Finally, during the research process, the researcher implicitly followed the American Psychological Association Ethical Principles of Psychologists and Code of Conduct (American Psychological Association, 2010). This code of conduct includes a policy of nonmaleficence, respect for the participants, gatekeepers, and institutions involved in the study, personal responsibility towards other individuals, and respect for individual rights (American Psychological Association, 2010).

<div align="center">Setting</div>

The primary method of gathering data in a phenomenological study is interviewing in a natural setting where the individual experiences the phenomenon (Patton, 2015). The physical

setting of the interviews was at the hosting community college. Interviews were conducted in a classroom familiar to the study participants, free of distraction, with exterior windows, and a window on the doorway to the public hallway (Chenail, 2009; Turner, 2010). The current study defined a natural interview setting as one without staged dialogue, with minimal interference by the interviewer, a flexibility in the interview structure, and a freedom to engage in open-ended dialogue (Lindlof & Taylor, 2011). The one-on-one interviews were audio recorded during specified times of convenience to the study participants during the months of October and November, 2016. Settings for personal diary entry were the personal decision of each study participant, and details of the personal diary settings were not documented by the researcher (Chevalier & Buckles, 2013).

<div align="center">Sampling Strategy</div>

The sampling strategy employed in this study was a purposeful or criterion sampling strategy. Purposeful sampling is grounded in the assumption that the researcher is interested in a specific central phenomenon, and that the selected sample of individuals have information-rich insight into the studied phenomenon (Patton, 2015; Merriman & Tisdell, 2016). Identification of individuals by purposeful sampling assumes that the participants will be selected with a rigorous sampling strategy and that the selected individuals have specific experience with the central phenomenon that they may "purposefully inform" the researcher on their experiences (Creswell, 2013, p. 156). Purposeful sampling strategy requires an identification of specific criterion which qualify individuals to be considered for a study population (Creswell, 2013). The criteria for the current study were enrollment in an introductory communication course, identification of having high CA by the PRPSA, and a willingness to share personal experiences with high CA (Marshall & Rossman, 2016). Thus, the purposeful sampling strategy occurred in two phases.

Phase I employed the PRPSA instrument to select individuals possessing the highest levels of experience with the phenomenon under study: CA. Phase II of the sampling strategy included a pre-screening interview of students who scored 131 or higher on the PRPSA instrument. One aspect of the phenomenological investigation process requires a willingness to participate by the individual, willingness by participants to develop a working relationship with the researcher, and a high level of rapport between the researcher and participants (Creswell, 2013; Marshall & Rossman, 2016; Webster & Mertova, 2007). Thus, following the identification of the high CA population, each individual was interviewed to assess the level of fit between the individual and the study (Lindlof & Taylor, 2011; Patton, 2015). Four criteria were considered in the Phase II sampling process.

First, the phenomenological process includes an emphasis on information-richness (Stanley & Nayar, 2014; Taylor et al., 2016). While all individuals experience some level of CA, the high CA individuals identified in Phase I were asked to consider personal ability to reflect on the CA experience, the depth or richness of individual experience with CA, whether the individuals felt they may be able to explore the central phenomenon (Bodie, 2010; Creswell, 2013; Stanley & Nayar, 2014), and an overall willingness to participate in the study (Merriman & Tisdell, 2016). Second, because the CA experience can be intensely personal and may be associated with anxiety and negative feelings, each individual was asked to consider their willingness to share their story (Blume et al., 2013; Byrne et al., 2012). Third, because the interviewing process required a significant amount of interaction between the researcher and participant, personal rapport was considered in the sampling strategy (Marshall & Rossman, 2016; Merriam & Tisdell, 2016). During Phase II of the purposeful sampling process, the researcher made field journal notation of individual perceptions of rapport, ease of interpersonal

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interaction, and an overall communicative flow between the researcher and population member (Maxwell, 2013; Patton, 2015). Finally, because of the time commitment by the participants, each potential member was asked about personal schedules and academic and personal responsibilities in order to address the practical feasibility of participating in the study (Creswell, 2013; Lindlof & Taylor, 2011; Merriman & Tisdell, 2016). Phase II interviews were conducted in a classroom familiar to the students and were conversational and open-ended (Creswell, 2014; Patton, 2015; Turner, 2010). Potential study participants were presented the purpose of the study, requirements and benefits for participating, guidelines for quitting the study, and an informed consent form. The guide used by the investigator in the Phase II interviews is presented in Appendix D. During the Phase II interviews, the researcher made notes in a field journal of perception of rapport, communicative ability, ease of dialogue, and perception of interest in and experience with the central phenomenon. Thirteen students were identified as having high levels of CA. Eleven of these students were contacted and asked to consider participating in Phase II of the study. The other two high CA students did not provide contact information on the PRPSA. Following the Phase II interview and reflection by the investigator, seven students were selected to consider participating in the Phase III section of the study. Two students declined to participate in the study due to scheduling conflicts. Five high CA students ultimately agreed to participate in Phase III section of the study.

<u>Sampling Frame</u>

The researcher does not attempt to generalize findings to individuals outside of the study but instead seeks to understand and explore the described experiences of high CA of five community college students (Creswell, 2014; Plummer, 1983, Taylor et al., 2016). The sampling frame for the study was identified by first administering the PRPSA to five sections of an

introductory communication course at the hosting Tennessee community college. The introductory communication courses were 2 sections of SPCH 1010 Fundamentals of Speech Communication and 3 sections of SPCH 2300 Public Speaking. A copy of the PRPSA is presented in Appendix C (McCroskey, 2017). Individuals scoring above 131 on the PRPSA were considered as high CA. This step was undertaken to identify individuals who score high on the PRPSA thereby meeting the high CA selection criterion (McCroskey, 1970).

McCroskey, who developed the PRPSA (McCroskey, 1970; 2017) recommended the use of the PRPSA to measure and identify individuals with high CA (Bodie, 2010). The PRPSA uses a 5-point Likert-type scale across 34 questions (McCroskey, 1970; McCroskey, 2016). Reliability is generally high ($\alpha > .90$) and the instrument has a 10-day test-retest reliability of .84 (Bodie, 2010; McCroskey 1970). The PRPSA scores individual CA between 34 and 170 with a validated mean of 114.6 and standard deviation of 17.2 (McCroskey 1970; 2017). McCroskey (1970; 2016) suggests individuals who score one standard deviation above the mean or higher (> 131) should be considered high CA. Although the PRPSA was developed to measure traitlike CA in the specific communicative setting of a formal public speech, the instrument has been repeatedly affirmed as a trustworthy, valid, and reliable instrument in measuring general CA within individuals (Hunter et al., 2014).

The feelings associated with a formal presentation serve as a valid indicator of CA levels in other communicative settings (Choi et al., 2015). Therefore, the feelings of anxiety associated with public speaking serve as an indicator of CA in other areas of the community college student's curricular and co-curricular experience (Hunter et al., 2014). A total of 88 students were administered the PRPSA. Following the PRPSA, 13 students scored as high CA individuals and were identified as potential research participants for the study.

<u>Sample</u>

As presented in Chapter 2, there appears to be some level of migration of first year students from the four-year institutional system to the two-year model and the current state of the community college system is robust (American Association of Community Colleges, 2016; Cohen et al., 2014). Despite the prevalence of the two-year college, current research largely overlooks community college and the community college student (Bresciani, 2011; Chrystal et al., 2013; Laanan et al., 2011; Strauss & Volkwein, 2004). The community college system continues to grow and yet little is known about the lived experience of both the community college student and the high CA student. Because the introductory communication course is required in most academic programs, and the course may serve to exacerbate feelings associated with communication-bound anxiety, the high CA students enrolled in the introductory communication course were selected for study (Blume et al., 2013; Bodie, 2010).

This study does not attempt generalization to the population at large and uses nonrandom purposeful sampling to identify individuals as having high CA, are information-rich, and have a willingness to share their narrative (Clandinin & Connelly, 2000; Patton, 2015). The sample was specifically identified to provide insight on the lived experience of the central phenomenon (Adams & van Manen, 2008; Lindlof & Taylor, 2011). Demographics, academic programs of study, academic achievement, or semester level of student were not considered in the selection of study participants. There was no attempt to influence the gender representation of the study sample, however only female participants emerged from the Phase II sampling process and all five final study participants were female. Thus, the sample consisted of five female high CA community college students. Three participants were ages 18-25, two were ages 34-39, one is married, and two students have children.

The qualitative paradigm allows for an emergent design, and following the initial interviewing, the sample may have an emergent theme (Creswell, 2014; Taylor et al., 2016). For example, emergent design for the sample may include a sample of five male students, five homeschooled students, or five nontraditional students (Hays & Singh, 2011; Taylor et al., 2016). Three themes emerged to the current study sample. First, all five study participants are female. Second, all five students are enrolled at the community college in university parallel pre-professional programs and each has plans to transfer to a four-year university. Four of the participants indicated plans to attend medical or graduate school. The purposeful sample emergent design did not include any two-year, certificate, or technical program students. Third, all five students self-reported high-achievement academics including scholarships, honors programs, and high GPA standards. Thus, the emergent design of the purposeful sample included five high CA female community college students enrolled in an introductory communication course, who each identify as academically high-achieving, and are enrolled in university parallel programs.

<center>Data Collection Procedures</center>

Qualitative phenomenological research design allows for a variety of interview methodology for obtaining a rich, thick narrative as individuals describe a lived experience (Creswell, 2013; Hays & Singh, 2011). Following the identification of the purposeful sample, the first step in data collection was to conduct two pilot interviews. These interviews were conducted to assist the researcher in assessing the feasibility of the study, to practice the interview protocol, and to identify any flaws or ambiguity in the semi-structured questions (Creswell, 2014; Taylor et al., 2016). Participants in the pilot interviews were volunteers from the hosting community college student population and were not members of the study

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population. Both of these students were enrolled in an introductory communication course and were identified as high CA by the PRPSA. Participation in the pilot study by the volunteers did not influence the data collected from the purposeful sample participants. The pilot interviews were conducted at the hosting community college in September, 2016.

Following the pilot interviews, two adjustments were made to the Phase III interview protocol. First, the initial interview protocol consisted of 35 questions divided into two sections. The initial plan was for one section to be used for each of the Phase III interviews. An adjustment was made to group all 35 questions together which allowed for both interviews to take a natural course in the conversational dialogue and to limit influence by the investigator. Second, illustrative examples were added to the protocol to give the study participants a broader understanding of the central phenomenon as well as the secondary phenomena (Patton, 2015). The final, adjusted Phase III interview protocol is presented in Appendix E.

The lived experiences of community college students with high CA was studied on the campus of the hosting community college in an environment that was comfortable and familiar to the participants (Patton, 2015; Sieber & Tolich, 2013). Interviews were conducted at the convenience of each participant and included minimal interference by the researcher, semi-structured dialogue, open-ended questions, and freedom for the participant to describe the CA experience (Creswell, 2014; Hunter et al., 2014; Patton, 2015). Each participant met with the investigator twice, and each session lasted between 45 and 65 minutes. The average duration of the sessions was 53 minutes. Data were collected during October and November, 2016 and included an initial interview and two full interviews.

To assist in data collection, the researcher utilized a field journal for chronicling how time was spent while on-site and all participants were referenced using the assigned masking

pseudonyms (Creswell, 2014; Hays & Singh, 2011). The journal was primarily a hand-written document, however some of the notes were recorded using an audio recording device (Taylor et al., 2016). The field journal was used by the researcher to document personal feelings, impressions, perceptions of the data and participants during the research process, and perceptions of participant nonverbal communication throughout Phase III. The field journal included both descriptive and reflective documentation as well as documentation and bracketing of any potential researcher biases (Ahern, 1999; Creswell, 2014).

<div align="center">Interviews</div>

Following the pilot interviews and adjustments to the interviewing protocol, each participant was interviewed during October and November, 2016 to gather data on the lived experience of CA among the sample group. Phenomenological interviewing protocol in qualitative research allows for a semi-structured conversational format with limited involvement by the interviewer (Creswell, 2013; 2014; Patton, 2015). Interviews were conducted with a level of flexibility and were planned to allow individuals to respond freely to questions (Lindlof & Taylor 2011). A series of open-ended questions were prepared in advance of each session and as the interview unfolded, the interviewer asked follow-up, additional, and probing questions (Hays & Singh, 2011; Hunter et al., 2014; Patton, 2015).

Interviewing for qualitative investigation requires a planned interview protocol for asking questions, recording data, and obtaining a rich, thick narrative (Creswell, 2014). The interview protocol for each session included six components. First, all data were identified with time, date, setting, and participant information. Second, the researcher offered instructions to the participant. These instructions were prepared to ensure similarity between interviews for each study participant. Third, the interviewer offered ice-breaking and sensitizing questions to assist

in creating an open dialogue, acclimate each participant to the focus of the study, and to develop

additional rapport between the participant and the researcher (Marshall & Rossman, 2016;

Taylor et al., 2016). Fourth, each interview consisted of four to five probing questions

(Creswell, 2014). These questions allowed the participant to describe the lived experience of CA

and this section of the interview included follow up questions or requests for elaboration or

additional detail from the participant (Creswell, 2014). Fifth, during the first Phase III interview,

participants were instructed to create a personal diary to document any feelings, experiences, or

thoughts regarding the research the participant had between interviews (Chevalier & Buckles,

2013; Maxwell, 2013). Finally, each interview was concluded with an expression of gratitude

from the researcher for each participant's time and willingness to share (Creswell, 2014).

<div align="center">Personal Diaries</div>

The emic researcher provides an insider prospective in part by collaborating with the

study participants (Gallagher, 2012; Patton, 2015). This study used participatory action research

(PAR) which allows individuals to self-report on an experienced phenomenon (Chevalier &

Buckles, 2013; Kemmis & McTaggart, 2000). Thus with the emic methodology of allowing

study participants to actively guide the research, to a level the researcher transitioned from

investigator to facilitator (Patton, 2015).

Phenomenological research methodology allows for flexibility in data collection

techniques (Creswell, 2014; Smith, 2004). In addition to the interviewing process, data was

collected via participatory action research (PAR) personal diaries (Creswell, 2014). Although no

prescriptive direction was given to the students, each participant was asked to record

impressions, feelings, or experiences on the CA phenomenon in the personal diary (Patton 2015).

This method of participatory action research allowed each student to self-report on the lived

experienced of the central phenomenon, and generate a social artifact that elicited additional data for the research study (Chevalier & Buckles, 2013; Kemmis & McTaggart, 2000). The guideline for introducing the personal recorded reflection to the study participants is presented in Appendix F.

Personal diaries as a method of data collection for qualitative research allows participants time to reflect on subjects discussed in the interview process (Creswell, 2014). Personal diaries can reveal an additional layer of insight into the lived experience of the study participant, generating stories about real and imagined events not discovered during the interview process (Chevalier & Buckles, 2013; Smith, 2004). Strengths of using personal diaries for qualitative research includes gaining a deeper understanding of what is important to study participants, how participants manage problems associated with the central phenomenon, and additional insight into the scope of the problem (Chevalier & Buckles, 2013). However, PAR personal diaries present a challenge as a data collection method: the data may be difficult to organize and analyze, and the experience of producing the data may be anxiety-inducing for the study participant (Chevalier & Buckles, 2013; Saldaña, 2009). Following the first Phase III interview participants were asked to reflect upon the interview questions and to document feelings, narratives, or further insight into the CA experience.

<div align="center">Data Management</div>

Interview data were collected using a digital audio recording device which was purpose-built for recording conversational dialogue between individuals (Makagon & Neumann, 2009). All data was stored securely and digital backups of the data were created (Taylor et al., 2016). All interviews were transcribed verbatim and digitally organized using Evernote.

Individual names of each participant were masked during the coding process whereby each participant was given a pseudonym and pseudonym master list was created (Patton, 2015). Participant pseudonyms were stored securely in a file separate from the original data files. Masking pseudonyms were used for all data including transcripts, participant diaries, observations, and researcher field journal. Additionally, no identifying data was included with the study or research notes. Per ETSU IRB recommendation, following interview transcription all audio files were destroyed. Transcription data will be kept securely for six years according to ETSU IRB protocol and then destroyed according to APA recommendations (Taylor et al., 2016).

<u>Measures of Rigor</u>

The four criteria used to establish rigor in the study were credibility, transferability, dependability, and confirmability (Patton, 2015; Taylor et al., 2016; Zhang & Widemuth, 2009). To achieve credibility, transferability, dependability, and confirmability, the following strategies were used: triangulation, pilot interviewing, member checking, rich, thick descriptions, a purposeful sampling strategy, audit trail, code-recode strategy, triangulation, expert scholarly review, and reflexivity (Creswell, 2013; 2014; Marshall & Rossman, 2016).

<u>Credibility</u>

One strength of qualitative research design is validity (Lincoln, 2001; Patton, 2015). The researcher considered a number of verification and validity strategies and used three: triangulation, pilot interviewing, and member checking (Creswell & Miller, 2000; Rolfe, 2006).

<u>Triangulation.</u> Triangulation is useful in qualitative research as a method to increase validity, strengthen the rigor of a study by combining data gathering methods, and decrease potential for systematic biases (Lindlof & Taylor, 2011; Maxwell, 2013; Patton, 2015).

Triangulation is the process of comparing multiple data sources or forms of evidence with the intent of testing that the multiple sources are in agreement (Fielding, 2012; Lindlof & Taylor, 2011). The current study compared data from Phase III interviews, data gathered from participant personal diaries, and the researcher field journal as justification for the building of themes (Creswell, 2014; Fielding, 2012). Data were categorized and common themes documented between participant responses. This step strengthened internal validity to reach the point of data saturation, when the gathering of additional data "no longer sparks new insights or reveals new properties" and continuation of data accumulation is no longer necessary (Creswell, 2014, p. 189).

Pilot Interviewing. Seidman (2013) suggested the use of pilot interviews are a critical step in the qualitative research process. Prior to Phase II and III interviewing, pilot interviews were conducted with two high CA community college students enrolled at the hosting institution. Pilot interview participants were not part of the study sample population and were identified as having high CA using the PRPSA instrument (McCroskey, 2017). The pilot interviews served to assess the feasibility of the study and to identify potential flaws in the interview protocol and to identify ambiguity in the interview questions (Creswell, 2014; Taylor et al., 2016). As documented above, following the pilot interviews, two changes were made to the interview protocol.

Member Checking. Following the transcription of both Phase III interviews, each participant was presented a copy of the data and to check for accuracy of content and tone (Creswell, 2014). No participants requested changes and all transcriptions were approved by study participants.

<u>Transferability</u>

Transferability describes the external validity of a study, or the ability of a study to be applied to other contexts or settings (Guba & Lincoln, 1989; Lincoln & Guba, 1985; Patton, 2015). The current study uses two methods to enhance the transferability of the findings: purposeful sampling strategy and rich, thick descriptions.

<u>Purposeful Sampling Strategy.</u> Purposeful sampling for qualitative research allows for studied individuals to be marginalized, significant, or ordinary (Creswell, 2013; Plummer, 1983; Taylor et al., 2016). The researcher purposefully sampled five high CA students from a community college who were each enrolled in an introductory communication course, scored 131 or higher on the PRPSA and had a willingness to participate in the study following Phase II interviews. Each participant was selected for having experience with the central phenomenon, and a rigorous sampling procedure was used (Creswell, 2013; Merriam & Tisdell, 2016). The researcher purposefully sampled five high CA students from the hosting community college who were enrolled in an introductory communication course. The purposeful sampling strategy also included an emergent design which was documented previously in Chapter 3.

<u>Rich, Thick Description.</u> The use of rich, thick descriptions facilitates or allows for greater transferability (Merriam et al., 2015). The narrative of each participant was presented to offer the reader an element of the phenomenon and insight into the private, lived experience of the study participants (Creswell, 2014). The researcher provided detailed descriptions of the setting, individual perspectives, perceptions of the phenomenon, and descriptions of the CA experience (Patton, 2015). These detailed descriptions may allow readers sufficient description to make a determination if the participants' described experiences may be transferred to the reader (Merriam et al., 2015).

<u>Dependability</u>

Gibbs (2007) described phenomenological research dependability as the stability of a study's methodology and suggests that researchers must enhance the dependability of a study to ensure the consistency of methods during the research process. Qualitative researchers must document as much of the research processes as possible to address a potential shift in methodology as the study unfolds (Gibbs, 2007; Wolcott, 2009). This documentation for the current study included an audit trail, code-recode strategy, triangulation, and expert scholarly peer review. Additionally, an effective dependability protocol may allow future researchers to replicate the study procedure (Creswell, 2014; Creswell & Miller, 2000).

<u>Audit Trail.</u> To establish further rigor, the researcher established an audit trail which recorded the entire research process (Patton, 2015). The audit trail included exhaustive documentation of the field notes, data, written and audio researcher notes, pilot interviews, and rationale for the emergent design (Lindlof & Taylor, 2011). Documentation for the audit trail were filed and stored with exactness.

<u>Code-Recode Strategy.</u> Following the initial coding stage, a code-recode process was implemented (Saldaña, 2009). The strategy involved a pre-code process and three iterations of coding (Miles, Huberman, & Saldaña, 2014). The coding strategy is presented in Chapter 4.

<u>Expert Scholarly Peer Review.</u> The investigator utilized three colleagues at the hosting institution to participate as expert scholarly peer reviewers (Zhang & Widemuth, 2009). Reviewers gave specific insight into the study design, including interviewing methodology, strategies for ensuring transcription accuracy, and bracketing of investigator bias. The investigator utilized the expert peer panel in scholarly discussion concerning the study design throughout the two-year investigation process.

<u>Confirmability</u>

Study confirmability refers to objectivity of the research design and methodology

(Anfara, Brown, & Mangione, 2002). Two methods were used to increase study confirmability:

triangulation and reflexivity (Creswell, 2014; Patton, 2015).

<u>Triangulation.</u> Triangulation refers to the study of a central phenomenon by the

utilization of multiple data sources (Patton, 2015). The study documented the lived experience

of five separate high CA individuals. Interviews were conducted with each participant and

additional data were collected via PAR personal diaries and researcher field journal.

<u>Reflexivity.</u> Reflexivity was used to bracket potential bias in the study design and to

document any potential biases of the principal investigator (Ahern, 1999; Creswell, 2014). The

researcher documented potential bias in the researcher field journal and engaged in ongoing

scholarly discussions concerning potential bias with the expert peer review panel.

<div align="center"><u>Data Analysis</u></div>

Qualitative data analysis involves transferring raw data into logical groups and allowing

themes to emerge which describe the central phenomenon (Bazeley, 2013; Patton, 2015). The

purpose of data analysis is to bring "meaning, structure, and order to data" (Anfara et al., 2002,

p. 31). Data analysis began with the commencement of the recorded interviews (Saldaña, 2009).

During the Phase III interviews the investigator created a field journal which documented initial

themes, impressions of each participant, nonverbal behavior during interviews, and meta data

about the sessions. The recorded interviews were transcribed verbatim and participants were

presented a copy of the transcription for member checking. The Phase III data collection process

also included participant-created personal diaries. All data and master list of pseudonyms were

stored securely. Following completion of member checks, the transcriptions and personal diaries

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were coded line-by-line which allowed for logical and systematic arrangement of classifications and categories (Saldaña, 2009). Codes were applied and reapplied to the data to identify and explain the central themes of the studied phenomenon and to provide a rich, thick description of CA (Grbich, 2012; Miles et al., 2014).

Data analyses was logical, systematic, and used intensive personal judgement of the primary researcher (Punch, 2006; Patton, 2015). The first stage of the data analysis included an initial inventory of the data set, initial themes identified by the researcher, a pre-coding of the data, and first iteration coding which categorized the data into initial data groupings (Creswell, 2013; Saldaña, 2009). The second stage of the data analysis included a disciplined, logical, and systematic marking and highlighting of the entire data set, and the initial codes were applied and reapplied, and a second iteration of coding emerged (Bazeley, 2013; Taylor et al., 2016). The third stage of data analysis included code reduction, constant comparison, and application of the codes to the data set. The investigator documented emergent themes and meaning was drawn from the data (Miles et al., 214; Patton, 2015). A final theme emerged providing a rich, thick description of the central phenomenon. The study participant profiles, study findings, analysis of the data, and summary of the research findings are presented in Chapter 4.

CHAPTER 4

ANALYSIS OF THE DATA

The purpose of this research study was to examine the phenomenon of communication apprehension (CA) among five community college students identified with high levels of CA. Five research questions guided the line of inquiry. The five community college students participated in two semi-structured conversational interviews and each participant created a personal diary to further document the CA experience. The interviews featured open-ended questions and limited interference by the interviewer. The interviewer used an interview protocol which is presented in Appendix E. The participatory action research methodology allowed for emergent direction during the interviews, and study participants actively guided the research. The researcher served as a facilitator to the exploration of participant experience with the central phenomenon.

Participant Profiles

The participants were enrolled in an introductory communication course at the participating institution during the fall 2016 semester. The participants and participant respective demographics are included in this chapter. Collectively, Emily, Caroline, Layla, Marie, and Katherine represent the nontraditional student, the working single-mother student, the traditional first-semester student, and the high-achieving honors student. Each participant was identified as having high levels of CA. The purposeful sampling represents five high CA students enrolled in introductory communication course at the hosting institution. Each participant provided information and offered insight into the central phenomenon. Participants profiles are presented in the following descriptions:

Emily is an outgoing and assertive middle-aged single mother of two in her fourth semester at the institution. After graduating from a county high school, Emily was a stay-at-home mother for over a decade. Following a divorce and having no previous college experience, Emily enrolled at the institution and is currently an honors student, and is double-majoring in two social sciences. Emily "absolutely loves" the institution where she serves as a mentor to incoming freshmen, offers campus tours to prospective high school students, and has an active mentor-mentee relationship with a faculty member. Following graduation, Emily plans to transfer to a local state university to complete a Bachelor's degree and eventually a Master's in family counseling. Emily chose the community college route because of the close proximity to her residence and because she believed there would be more nontraditional students like herself at the institution than at the regional four-year university. Emily scored 132 on the PRPSA.

Caroline is a traditionally-aged first-generation student majoring in a hard science pre-professional program. After graduating from a county high school, Caroline worked for a semester before enrolling at the institution. Caroline lives at home with her parents and younger sister and currently works part-time at a local mall as a portrait studio photographer. Similar to Emily, Caroline "totally loves" the institution. Caroline chose the community college route because of the affordability, and believes that she has found a home at the institution. Currently in her second semester, Caroline seems to have found her footing at the college: she feels like she has an enjoyable daily routine, has several faculty members which she feels comfortable knowing, and has friends on campus who serve as academic allies. Caroline feels especially comfortable in her introductory communication course. Despite her fear of the oral presentations, Caroline feels close to other students in the class, it is her favorite course this semester, and "everyone just feels like family." Following graduation Caroline plans to transfer

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to a private Tennessee university to complete a Bachelor's degree and eventually enter a doctoral program. Caroline scored 146 on the PRPSA.

Katherine is a traditionally-aged first-semester student majoring in a health-related pre-professional program. A quiet, reticent student, Katherine graduated from a county high school and lives at home with her parents and younger sister. Katherine is active at the institution which she also "loves". Katherine currently serves the institution as a student worker college and is an academic honors student currently on full academic scholarship. Katherine chose the community college route because of the affordability, close proximity to her home, and a longstanding personal relationship with a faculty member. Following graduation from community college, Katherine plans to transfer to a local state university and eventually apply to a Tennessee state medical school. Katherine scored 133 on the PRPSA.

Layla is a traditionally-aged third-semester student enrolled in pre-professional health-related program. After graduating from a local county high school, Layla chose community college for the affordability and is on a full scholarship. A respectful, quiet, and smiling student, Layla deeply enjoys college and lives at home with her mother, step-father, and younger siblings. She feels like she "belongs" at the institution, has active friendships on campus with other students, and has an honors-level GPA. Layla believes professors enjoy her in class and she enjoys the learning process. In addition to her school work, Layla is employed full-time as a manager at a local fast-food restaurant, working over 40 hours per week. She often arrives to work at 4AM and works a full shift before attending her classes at the institution. Following graduation from community college, Layla plans to transfer to a local state university to complete a bachelor's program in a health-related field. Layla scored 136 on the PRPSA.

Marie is middle-aged married mother of four and is enrolled in her fourth semester in a health-related program. Marie graduated from a county high school in rural Kentucky and currently is active in her children's lives and serves as an officer in the local PTA. Although reticent in her demeanor and cautious in her on-campus relationships, Marie feels at peace in her decision to attend community college and is thankful to "finally" be completing a college degree. During the course of her participation with this study, Marie added communication as a second major to her program of study despite her considerable levels of communication apprehension. Following graduation from community college, Marie plans to transfer to a local state university to complete a Bachelor's degree and is considering graduate school. Because of her fear of public speaking, this semester was Marie's third attempt at completing the introductory communication course, having dropped the course twice due to significant public speaking anxiety. Marie indicated that she "has had a great experience" with all aspects of community college, feels like she has connected with many of the faculty and staff, and enjoys the classroom environment and learning process. Marie scored a 140 on the PRPSA.

<div align="center">Researcher Field Notes</div>

During the course of the Phase III interviewing process, the research journaled field notes, personal memos, and thoughts during the semi-structured conversational interviews which took place in October and November 2016. The interview protocol allowed for follow-up questions as they emerged during the conversation, in addition to the open-ended questions included in the protocol. The interview protocol is presented in Appendix E.

Following the Phase III interviews, the researcher noted four initial similarities between each study participant. First, all five study participants indicated that they feel at home at the hosting community college. Four participants used the word "love" to describe their respective

relationship with the institution, and each of the five related anecdotes about the college using words such as "family," "home," and sense of "belonging." Second, each participant placed emphasis on their academic grades. Anecdotes about the central phenomenon were interwoven with grades and feelings associated with academic performance, often with feelings of anxiety associated grades and instructor assessment. Third, all five participants appeared to enjoy the overall research project despite moments of experiencing feelings associated with high levels of CA during the interviews. Finally, the researcher noted all five participants offered commentary on how they felt before and during the interviews with regard to their individual feelings associated with CA. The interview process created high levels of CA for participants and the investigator noted that participants "all seemed nervous, but all seemed willing to share anyway." Each student was reticent of the recording device, showed ongoing physical, emotional, verbal, and nonverbal manifestation of CA, and yet openly and willingly communicated and described their respective experiences with the central phenomenon.

Interviews were held on the campus of the study site during regular daytime business hours. The interview room was comfortable, quiet and was selected for its central location and familiarity to each study participant. The interviewer and participant both in office-type chairs which were able to be rolled, reclined, and turned side-to-side. The room was set up as a conference room with tables pushed together in a rectangular shape. Each participant was asked to sit at a corner of the rectangle with the interviewer on the adjoining corner. This allowed the interviewer and participant to be fairly close in proximity but still have part of the table in between. Bottled water was offered to each participant. The table top was clear and the only items the researcher brought were the field journal, interview protocol, and the small voice recorder which was placed on the table between the researcher and each participant. The

researcher has a background in the study of nonverbal communication and documented the

nonverbal messages that each participant sent along with the recorded verbal messages. The

researcher timed the interviews and made notations in the field journal concerning nonverbal

communication, notated the time of the behavior, and was able to later listen to the dialogue and

compare the verbal responses with the notated nonverbal messages. Notations made by the

principal researcher during the Phase III interviews are provided in the following paragraphs.

Although Caroline deals with persistent high CA, she was the first to respond to the email

which invited her to participate in the Phase II selection process of the research project and

indicated a willingness to help. Following the Phase II communication, Caroline agreed quickly

to participate and was eager to help throughout the remainder of the investigation. When asked

why she was so helpful, Caroline indicated that she deeply believes in karma and always wants

to help anyone who asks for assistance. The researcher noted in the field journal that Caroline

enjoys being involved with all on-campus activities, including each Phase of the investigation.

On the morning of the first interview, Caroline was prompt and pleasant, although she appeared

considerably nervous and hesitant. Throughout the first 15 minutes of the initial interview

Caroline sat with her body directly facing the interviewer and was mostly still with her torso,

while her extremities were fidgety with ongoing hand-wringing and self-adjustment of hair and

clothing. The initial questions were answered slowly, cautiously, and at times with hesitation.

At minute 16 of the first interview, Caroline offered an anecdote about her boyfriend and

transitioned in her nonverbal messages. She began to smile more, and the anecdote appeared to

settle her verbally and nonverbally. The researcher noted at minute 17, "boyfriend story…she

just got happy." For the remainder of the first interview, Caroline laughed out loud multiple

times, smiled often, and spun gently and happily side-to-side in her chair. Caroline seemed to be

open, shared some fairly personal anecdotes, and although she displayed marks of communication apprehension, appeared to enjoy herself. She brought her phone and a purse to the interview, but turned the phone ringer off at the beginning of the session and placed the device face-down on the table. Overall Caroline was polite, reserved, and friendly. Her behavior was fairly formal, typical of how a traditional community college freshman interacts with a professor-acquaintance. Caroline's second interview was marked by less apprehension. She arrived to the room on time and entered smiling. The researcher noted that Caroline was "much MUCH more at ease" and seemed to have grasped the concept of communication more fully, able to explore the phenomenon with greater ease and detail in the second interview. She sat with her body facing a little away from the interviewer and still displayed ongoing hand-wringing, self-adjustment, and general nervousness when speaking of her experience with CA. Similar to her reaction to her boyfriend anecdote, Caroline changed during the interview when she offered a story about her sister. The interviewer noted that she "again…changed a little" during the anecdote. Similarly, the researcher noted that Caroline was "all smiles" when speaking about her biology lab instructor. When speaking about individuals whom Caroline seemed to have warm feelings for, her apprehension seemed to dissolve and her nonverbal communication changed completely. In the second interview Caroline offered her personal diary to the researcher, a small notebook that she bought at a dollar store specifically for the project. Caroline's strongest visible CA was during an anecdote which Caroline indicated was "very private" and took considerable effort to tell. During the anecdote, Caroline became flushed, frowned, and although she was open and willing to communicate the incident, the retelling appeared to cause considerable anxiety. Finally, in the second interview it was apparent that

Caroline put thought into the project and even challenged herself to do a self-created activity which purposefully triggered her communication apprehension.

In contrast to Caroline, Emily seemed more at ease in her first interview. She arrived a little early, was chipper and friendly, and overall seemed comfortable with the communicative scenario. This is typical of the nontraditional community college student who is often more at-ease in the student-professor relationship. Emily brought a drink to the interview along with her phone, which she placed face-down in front of her and did not check throughout the session. The initial section of the interview was not recorded. This acclimating section was informal and was an explanation of what to expect during the Phase III sessions and provided a brief overview of communication apprehension. Following this section, the interviewer turned on the audio recording device to begin the interview proper. Emily immediately appeared to become more formal and the researcher noted the she "got down to business when the light came on," sitting up straighter and changing to a more serious tone verbally and nonverbally. Within just a few questions, Emily's communication apprehension began to be visible. Her neck and face became increasingly red and splotchy with hives. The interviewer observes communication-induced hives in the classroom on a regular basis and made note that Emily displayed typical communication apprehension only after the recorded portion of the interview began. Emily touched her face repeatedly and self-adjusted her hair while talking. Emily smiles and laughs while she talks, is a natural communicator and storyteller, and her first interview was a full hour, the longest of the five initial Phase III interviews. Overall, she seemed to enjoy telling her stories and experiences, maintained excellent eye contact, and laughed out loud repeatedly. Held eleven days later, Emily's second interview was marked with less apprehension and generally less noticeable anxiety, although she did have consistent hand-wringing and scratching of her

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neck and head throughout the interview. Emily became increasingly agitated when speaking about her upcoming classroom presentations. She began tapping on the table with her fingers while scowling slightly, appeared fidgety and nervous, began shifting her body in her chair, and repeatedly rubbed her nose. These nonverbals subsided immediately when the conversation moved on to topics other than public speaking. The personal diary Emily brought to the second interview was four torn-out pages from a spiral-bound notebook with hand-writing in pencil. While Emily displayed multiple physical signals of communication apprehension, she was the most verbally expressive of the five participants. It appeared that Emily enjoyed participating in the research project, used a loud volume several times while offering her anecdotes, was animated throughout, and even thanked the researcher for the opportunity to participate.

Katherine arrived on time to her first interview and although she was smiling throughout the initial moments, she seemed tentative, cautious, and formal. She brought a small bag and a phone, which she placed face-down on the table after turning off the ringer. Katherine's fingers trembled throughout the first 30 minutes, and the researcher noted a self-calming display of "fidgeting with her hair nonstop…seems to calm her." Katherine has a quiet, reticent demeanor, and is polite and respectful. She spun side-to-side in her chair while talking and became visibly nervous when speaking of professor-student relationships. It appeared that she is unsure or apprehensive of how to interact with her instructors, which is typical of some first-semester traditional students. Katherine's biggest change was when she explored imagined interactions (IIs), becoming agitated and frowning while offering anecdotes of how she tends to "get mad" at herself for things she did or said in the past. She indicated that she regularly worries about past interactions, and displayed corresponding nonverbal messages of high levels of II-based anxiety. Katherine's second interview was held two weeks later. She arrived on time and appeared more

at ease, was less fidgety, smiled throughout the conversational interview, and laughed out loud several times while telling personal anecdotes. The researcher noted that she again spun in her chair, but it seemed less intense, as if she was enjoying her time and relaxing in the chair rather than an agitated display like the previous session. Unlike the other four participants, Katherine did not appear to become flushed, or display hives or splotches in her neck or face. Instead, Katherine's external CA displays were in her extremities, facial expressions, and speaking tempo. It appeared that Katherine had put thought into her experience with CA and without prompting offered several anecdotes and revelations about herself that she had prepared before the second interview. Katherine's personal diary was offered without prompting: three pages of typed, single-spaced writing on crisp, white paper. The researcher noted that it seemed as if Katherine was turning in an assignment with the academic exactness typical of the honors student. Katherine noted that she felt like she was being open, that "absolutely no one" gets to see her with her guard down and she nervously giggled during the session whenever she offered self-deprecating anecdotes. Overall, Katherine appeared to be happy to help with the research project, despite her shy natural demeanor, reticence, and persistent high levels of CA.

Layla arrived to the interview on time with an over-the-shoulder backpack and a phone which she turned off and put away at the beginning of the session. She greeted the interviewer with a smile, was pleasant and agreeable to talk, but seemed nervous and displayed persistent nonverbal CA especially in the opening 15 minutes. When the recording device was turned on, Layla spent long moments staring at it and appeared overtly aware of its presence. Layla wears heavy, black-framed glasses which she touched at the beginning of nearly all of her responses throughout the first interview. The researcher noted that the glasses-adjustment seemed to be a self-calming technique. Layla was fidgety throughout the session with persistent hand-wringing,

knuckle cracking, face-touching, and repeated drying of her hands on her jeans. Layla was acquiescent and polite. As the first session progressed, Layla's responses became longer and more open, and she appeared to calm herself, becoming less fidgety and somewhat more self-assured and confident in her responses. The researcher noted that Layla's strongest reaction was to questions about how she feels immediately following a public presentation. Her face became flushed and bright red, her speech became louder and faster, she repeatedly touched her face, and even covered her entire face with her hands while relating an anecdote of feeling "horrified" after a public speech. While several of the participants relayed feelings of embarrassment or self-doubt following a presentation, Layla's external reaction to an II was the most overt. The second interview took place 10 days later and Layla was again punctual and polite. She indicated verbally that she was much less nervous on the second day and her nonverbals echoed a more relaxed demeanor. Layla's face again got red during some sections of the interview and she demonstrated ongoing displays of anxiety including rocking in her chair, hand-wringing, and continued touching of her eyeglasses. As noted above, Layla is a full-time student with a 19-hour overload academic schedule, and works 40 hours per week. On the days of both interviews, Layla worked at 4AM and appeared to be tired in the early afternoon interview sessions. Layla did not have a personal diary to turn in during the second interview, but emailed her thoughts one week after the second interview. Layla was polite, helpful, and respectful. Layla ended her second interview by thanking the researcher for the opportunity to participate.

The researcher arrived to Marie's first scheduled interview 15 minutes early and Marie was already seated alone in the classroom. Marie brought a large handbag, was polite, and initially seemed to be fairly hesitant of the interaction. Of the five participants, Marie appeared to have the highest level of external communication apprehension markers. She began the

interview quietly, and was visually trembling in her fingers. She indicated verbally that her legs shook throughout the interview. The researcher noted that Marie was "super flushed…red and splotchy neck…splotches working their way up her face…hives" all of which are typical symptoms of high CA individuals during communicative scenarios which trigger significant anxiety. Marie faced the researcher directly, did not place anything on the table, and moved her hands repeatedly from her lap to being tucked under her legs. The researcher noted that she "smiled a little…seemed OK overall…and seemed happier and more relaxed" as the interview progressed. Despite Marie's overt displays of anxiety, she was not reticent to communicate. Marie offered personal responses to the questions, seemed open, and teared up several times sharing anecdotes about her struggles with CA. Held one week later, Marie again arrived to her second interview early. She appeared more relaxed, and had several thoughts to share before the interviewer began the recording. When the recorder was produced, Marie reacted strongly, indicating verbally that she "genuinely" did not like the recorder, and stared at the device for long moments after it was turned on. Marie shared that she felt major personal growth because of the first interview, had prepared a speech for her introductory communication course to explore the cause of her anxiety, and was thankful for the experience. Although Marie appeared happy and open during the session, throughout the second interview she grew increasingly red and flushed and spoke with a trembling voice. The researcher noted "BIG HIVES" that crept across her face and at one point Marie indicated that she knew she was flushed, sweating, and trembling, and that it was out of her control. Similar to the first interview, Marie faced the researcher and kept her hands in her lap or under her legs, and repeatedly wiped her palms on her pants. Marie produced a personal diary of seven full, hand-written pages, documenting her feelings about CA throughout five days during November 2016. Overall, Marie was a duality.

The researcher noted that she was "so remarkably nervous" and seemed to have significant external displays of CA, and yet of the five study participant Marie offered the most open and personal insight into the phenomenon. Marie struggled throughout the sharing process, but what she did offer was thoughtful, personal, and at some moments private. Following the second interview, Marie sent the researcher an email indicating her thankfulness for the project, the deep personal growth she felt as a result of exploring her fears, and an anecdote of a successful speech on the topic of confronting the source of her fears which she delivered in her introductory communication course.

Additional notes made by the researcher after the conclusion of the participant interviews included:

- Caroline, the first interviewee, spontaneously offered her experience with CA during her first interview and the IIs she experienced before the interview. While not included in the interview protocol, each subsequent participant was asked to comment on how they felt during the interview. The researcher did not anticipate that high CA students would be willing to talk about their respective anxiety during the interview, but each was willing and open to discuss their apprehension while it was taking place. Additionally, each student was asked during the second interview to compare and contrast how they felt during the second interview compared with the first.

- During the first interview, Caroline mentioned that she was "super nervous" on the drive over to the interview because she "did not know what to expect." The researcher made note of this II-based apprehension and asked the subsequent participants how they felt before the first interview. Each participant indicated complex imaginations and anxieties about the first interview and each had imagined how the process may unfold. Each

participant experienced apprehension about the scenario hours or days before the actual event.

- The tone of the interview changed when the recording device was turned on and the corresponding indicator light glowed red. Each participant reacted to the device. All five participants reacted nonverbally by sitting up straighter, adopting a more formal tone, and as the researcher noted participants "overall acted more official." Additionally, three participants reacted verbally to the recording device.

<u>Interview Analysis and Initial Impressions</u>

The purpose of analysis is to organize the description of the phenomenon so that it is manageable, but there are no prescriptive guidelines for researchers to follow and direction for each investigation's analysis is unique and personal (Patton, 2015). Qualitative researchers have a level of freedom in the analysis and may be fluid in interpretive protocol and analysis design (Creswell 2014; Saldaña, 2009). Patton (2015) indicates that the qualitative investigator should offer a description which "provides the skeletal frame for analysis that leads to interpretation" (p. 606). While there is no single correct method or approach for interpretive analysis (Punch, 2006), the goal is for the investigator to locate patterns within the data and to search for "ideas that help explain why those patterns are there in the first place" (Bernard, 2011, p. 338).

Following the data transcriptions, participants in the current study were offered the opportunity to review the transcriptions and to submit feedback and changes to the researcher. Following the completion of member checks, transcriptions were initially coded line-by-line and classifications, categories, and systematic arrangement emerged (Saldaña, 2009). The researcher read the transcriptions to the point of becoming intimate with the data, made note of initial thoughts in the field journal, and conducted a line-by-line analysis. Codes were "applied and

reapplied" to the data in order to locate an explanation of the central phenomenon and provide a rich, thick description of the central phenomenon (Grbich, 2012). Five initial impressions emerged.

First, CA deeply affects the high CA community college student throughout day-to-day curricular and co-curricular activities. Participants offered anecdotes of moments where CA intruded into their on-campus lives from minor nuisances to crushing, debilitating feelings of physical and emotional anxiety. Students are vomiting in the restroom before classroom presentations, dropping courses because of CA, crying alone before anticipated interpersonal interactions, unable to eat a meal alone on campus, overwhelmed with anxiety from IIs following perceived interpersonal awkwardness, and taking tremendous action to mitigate or avoid the feelings and emotions associated with high CA.

Second, across multiple disciplines, current curricula and in-classroom pedagogy places an emphasis on oral communication and public presentations. The five participants were not prepared for oral-intensive courses in their first semester of community college, and remain unequipped for effective CA mitigation or management. Many students, including three of the five participants, put off the introductory communication course until the final year of their respective program of study and none of the participants to date have been purposefully equipped with any effective mitigation methods. High CA students, with no learned method of mitigations, are regularly giving in-classroom oral presentations in their courses, some months or even years before their introductory communication course.

Third, high CA students go to great lengths to avoid the feelings associated with high CA and in some ways experience life differently than the low CA individual. Each participant indicated that they have complex behavior patterns due to CA and have difficulty in day-to-day

curricular activities such as classroom seat selection, asking a simple question to a professor and communicating with administration and staff. High CA students experience complicated IIs before communicate scenarios, have ongoing apprehension as they anticipate the unknown and live life "always on alert" that the next CA-inducing scenario is imminent. Not knowing what to expect in an upcoming situation causes ongoing anxiety to the high CA student.

Fourth, while the understanding of CA etiology is primeval at best and the purpose of the current study does not attempt to understand causality of the phenomenon, each participant without prompting offered an attempt at understanding their respective CA cause. In five separate ways, participants mentioned *personal standards* as the primary cause of CA and feelings of anxiety associated with CA. While perhaps nebulous to the individual, participants offered causes of CA such as the "need to maintain my grades for my family…and all my nerves are because of grades," and "I'm supposed to be an honors student and I have to maintain the standards I set for myself which makes me nervous." While each participant has a unique story and perspective, all five experience ongoing and complex anxieties because of an internal attempt to adhere to a personal standard.

Finally, the researcher noted that despite the current CA understanding in the communication discipline, participants did not appear to have a clear delineation between real communicative scenarios and imagined interactions. Although the body of knowledge separates the phenomena, the high CA student does not. When imagining an upcoming communicative interaction, participants experience physical and emotional real-world anxiety. And while the scenario is completely within the imagination of the student, the feelings and experiences are certainly real. For the high CA individual, IIs are a real scenario. Similarly, during a real scenario the high CA student has complicated imaginations. All five participants indicated

complex and pervasive thoughts concerning how, during a public speech, they imagine an audience judges them and their overall presentation. The high CA student has ongoing IIs during real scenarios. High CA students also have imaginations during interpersonal interactions, such as "I just know my friends think I'm dumb while we are talking…I can feel them looking at me and knowing that I am dying on the inside, and that makes me react…I get worse…the ways I think while hanging out just gives me anxiety and I act awkward." High CA students experience real-world anxiety over IIs and have ongoing imaginations during moments of real-world interpersonal communication. The following section offers the results of the interviews and personal diaries.

<p style="text-align:center">Interview Results</p>

During Phase II of the investigation each participant received a full explanation of the study, signed an informed consent form, and were provided a copy of the consent form. The informed consent form is presented in Appendix A. Phase II also included an informal question and answer session and brief discussion to allow the researcher to ascertain if the participant was willing to continue with the study. Phase III data collection included two semi-structured conversational interviews with open-ended questions and a personal diary created by each participant. Additional data were generated in the form of a field journal created by the researcher. The interviews were audio recorded and transcriptions were fastidiously created. Direct quotes from the participant interviews relevant to the research questions are provided in the following paragraphs:

Research Question 1: How do community college students describe the physical and emotional experience of communication apprehension?

High CA students describe a pervasive and debilitating apprehension across a variety of interpersonal communicative scenarios. The high CA community college student describes a complex and at times debilitating experience with CA which causes ongoing physical and emotional distress. The purposeful sample included high-functioning and academically excellent students, who each experience personal agony associated with CA across at least some areas of their public and private lives.

Layla describes ongoing anxiety in her day-do-day curricular life:

During my first week here, I was so nervous, and it was just scary. It was awful. I was sick to my stomach every day and I just cried. I did not want to even come over here every day that week. I had trouble going to my classes and this semester in speech class…it's just awful. I get nervous any time I get in front of people. I get awkward. I start looking at people and begin to tense up. If I am sitting down I am fine, but standing up front my anxiety gets bad. I get jumbled and I stutter a lot and sometimes I physically shake. If people listen to me I begin to stutter…but not usually when I talk one-on-one. My hands get real clammy. They're clammy right now and I don't know why. Before I give a speech I have a panic attack and break down almost in tears. Sometimes I sweat and I get sick to my stomach. Like the first time I did a speech in my speech class I got sick to my stomach. I thought I was going to pass out. I was nervous all day leading up to it and when I woke up that morning I was like, 'Oh, no, I have a speech today.' As the day goes on it gets worse. It usually starts getting worse when I get to campus…and grows as the time for the speech gets closer. I start to shake really bad physically. My hands. My heart is racing most of the day and I am just a ball of nerves. I constantly doubt myself leading up to it and I'm like, 'You're going to look stupid or something.'

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During the speech I feel it all in my hands and upper body and tend to lock my knees. I

talk really fast because I am nervous, and then I start stuttering…and once I start

stuttering, it all goes downhill…it's like, 'Oh, my God, I gotta get out of here!' And it

happens all throughout my day, just like every day at school. I've recently noticed that

when I feel uncomfortable talking with people or in any situation, my voice gets quieter

and I speak less. Even when I'm with people that I am close to, if I get nervous, I get so

quiet I can't talk. And I start to touch my face a whole lot. And when I am nervous I

play with my hands, and sometimes I feel myself swaying, and I struggle making eye

contact with people. It's just awful. Awful.

When the researcher presented this transcription to Layla for member checking, her

immediate response was, "Yep, that paragraph describes my entire life. It's always been that

way. Still is."

Marie, the high-achieving, middle-aged honors student describes her overall experience

with high levels of CA specifically in the public speaking scenario:

So this semester I am in the public speaking class. And it is just bad. I feel afraid. Just

plain fear. I can take exams all day long, no problem. But if I have to speak…if it is

specific to speaking I get nervous. Like if people are looking at me and I am the focus it

is just bad. But it's not just anxiety about the speaking. It's nervous whether I prepared

enough. Or whether I am going to do well. And how my grade is going to be. Before

speeches I get physically nervous. I don't throw up but I cry. I cried before my first

speech and I got on the computer to see if it was too late to drop the course. I did, I

swear! I argued with my husband about it because he is in the same class. I snapped at

him and was like I am NOT going to do it. I can't. I'm going to drop the course. And it

is not just emotional, it's physical. I feel afraid. Real fear. Before I spoke I tried to practice my speech at home four or five times and I just couldn't do it. Could not practice my speech, even in front of a mirror. I try and picture myself doing well. I go through the motions. I can even do it by myself sometimes. But if someone comes into the room, I just can't. In my head I know what I am going to say, but it doesn't come out of my mouth. And I just get so nervous. Panic. This is my third time trying to take this course. I have dropped it twice because I just can't do the speeches. I get sweaty. Not bad, but more sweaty than regular. I shake. I tremble. Even like right now. My legs are shaking right now and I am having to breathe deep just talking about it. When I look back at my life it has always been like this. Just being nervous talking and having the attention on me. I have never been able to do this, and especially I'm not able to get up in front of a group of people in a classroom like that and give a speech. It's almost like my anxiety owns me sometimes.

Caroline experiences ongoing high levels of CA with physical and emotional manifestations. Caroline also experiences meta-apprehension, feeling anxiety about her anxiety:

On the days that I know I am going to have to give a speech, I just get sick. I am constantly sick. I get sick to my stomach. Physically sick. And if I am up front, in the process of a speech, in front of everybody, if a word doesn't come out right, my hands…if I have my hands up I can see them physically shaking. Everyone can. So I try and put my hands down so that people can't see. And I think it is so I can't see them, also. Because I think it is embarrassing if people see that you are extremely nervous. In my head I go over it and over it and over it, everything I want to say in my speech, but I just get sick. And it has been like this ever since I got on campus last semester.

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Whenever I registered for the first class my first semester, I was like, 'Oh no!' I got real nervous. I shook. And then going into the class on the first day was just so bad. I was extra nervous, because I did not know what to expect. But now that I am used to college…I kind of know what to expect…but I am still anxious. And I get so frustrated about it. About feeling this way. And I get upset that I'm upset. Upset about feeling this way.

The middle-aged mother of two, Emily describes her apprehension as complex, ongoing, and as genuine fight-or-flight terror.

Sometimes you cannot physically see my apprehension. Like, other people cannot see it. I have always thought that other people could see how nervous I am, but when I started college and had to take my humanities class with all those presentations…we didn't do tests we did speeches…my first presentation I was like, 'I'm going to throw up in front of this professor…I'm going to lose it right here!' Afterwards I was the last one in the classroom and I told my professor how I felt that I had done badly because of my anxiety and how I honestly thought I was going to be physically sick. My professor said that I did not look nervous at all…I was so surprised to hear that! So apparently even though I feel all of these feelings and emotions, and I feel like my chest and face get so red, others can't actually see it. But when I get up there to speak I am terrified…terrified!...that I am going to freeze and nothing will come to mind to say, even though I prepare and go over my material a million times. And my heart starts beating really fast and I can hear my heartbeat in my ears. I start sweating and I feel like I get red. I don't shake, but I have a bad habit of fidgeting. I mess with my papers or whatever I take up front with me and I try to put the podium between me and the audience because I feel like…I feel like they

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are…my fear is they are judging me. And I've talked to enough people in my class to know that they are totally not judging me. They are just as nervous as I am for the most past. Most people are not, say, completely at ease with getting up front, and most people I speak with feel the same way as I do. They are totally not judging me. There have been people who have been up there that I know don't do as well as I do and are more nervous than me and it's not that I'm judging them. And so it's gotten a little bit easier. The more I am having to do it I'm not getting as nervous as I did, say, in my first speech. My first speech was terrible. Just terrible. Not the grade. Just how I felt. So bad. So it's getting easier because I continue to get good feedback. I still can't help myself from panicking and sweating and thinking that I'm going to screw up. But when I speak I know I am going to be be nervous and sometimes I still feel like I am going to throw up. I still feel like my face gets red but it is not as intense. Now, I feel like it is just fear of embarrassment, I don't want to get up front and be embarrassed. And all of this anxiety just sucks. I wish I didn't have it.

Currently in her first semester of college, Katherine experiences ongoing, debilitating apprehension in most interpersonal scenarios, including in the public speaking presentational setting, which causes difficulty:

I'm really an awkward person. Like in high school I was not really one who liked the social scene. I stayed within my group of friends. I was comfortable and had a little comfortable box. But whenever I had to get out of that box it was nerve-wracking and scary. I hated it. So when I got here to college it was the same way. I wanted to be comfortable. But you can't be nervous in college. It's not OK to be like this. You can't act like that and stay to yourself. And then this semester, my first semester, I was signed

up by my advisor to take a speech class. I thought I was going to pass out just when I found out I had to take the class. And in my first speech, physically I was shaking. I was so nervous. Before I spoke, like that morning, I was emotional leading up to it. But when I get up there is when I have a mini-panic attack and sometimes I am almost in tears. I constantly go through what I have to say. I think about the tone of my voice. I'm an organized person, so before I speak I like to prep a lot. I probably spend too much time prepping because of my nerves. So I constantly just go through the process of the speech because I am terrified. I shake bad physically. My hands. My heart is racing the entire time and I am just a ball of nerves. It's emotional and physical. I doubt myself. Constantly. I just think I am going to look stupid. And it's not just in speech class. It's in all five of my classes. I rarely talk. It makes me nervous to talk out loud. I talk to some people, but not many…and I think about it and worry about it…I don't want to seem disrespectful to the teacher. But I am always afraid I am going to say the wrong thing. But overall if I don't have to talk in class, I don't. I don't raise my hand. I just don't talk. Not at all. And it's just bad…it's so bad. First day of class back in August, I was in tears.

Research Question 2: How do community college students describe communication apprehension in real interactions?

High CA students describe feelings of anxiety across a variety of real interpersonal and intrapersonal communicative scenarios. Although the PRPSA measures CA in the specific public speaking situation to identify high CA individuals, the instrument also serves as a predictor of high levels of CA throughout all of an individual's day-to-day life and not just within the public presentational scenario. The distress high CA students experience during a

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public speech is also at times experienced at home, alone, in a group setting, in the classroom, on the job, and across a variety of interpersonal and intrapersonal communicative scenarios. High CA students describe a complexity and range of physical and emotional difficulties in day-to-day life.

Caroline indicates ongoing difficulty and apprehension in a variety of public interpersonal communicative scenarios:

When I go to a store like Walmart or Walgreens, I start to feel nervous and insecure, especially when I am walking around the store and if I am alone. I am nervous the entire time. I start feeling like everyone is staring at me and judging me. And I felt the same way the first time I came to campus, like everyone was looking at me and judging me. When I first registered for classes I was like, 'Oh, no!' I was really nervous. And when I went to class on the first day I was extra nervous because I didn't know what to expect. And going to class still makes me nervous. I get frustrated and upset and I am a ball of nerves. And whenever I go on dates with my boyfriend I just…we'll go out to eat or something and right after we eat I get sick. I don't know what it is but it happens every single time that we eat out. If we are sitting at the house eating, no problem. Nothing. But in a restaurant I get hot and I feel sweaty and I get nauseous. But no matter what the situation is, I feel anxiety…and if I feel like people are looking at me and I'm like 'Oh my goodness I can't do this!'

In situations other than public speaking, Marie experiences physical and emotional distress similar to the feelings she experiences during a public speech. Following her first Phase III interview, Marie wrote in her hand-written personal diary:

After our interview yesterday I thought a lot about how it went and what all I said. I was

surprised at how nervous and anxious I was when the interview started. Unlike the

speeches in my speech class I didn't have any anxiety prior to the interview. I think it

started right before the interview and intensified when the tape recorder was turned on. I

felt the same leading up to one of my speeches. Like my anxiety before a speech felt a

lot like when the recorder turned on. My heart was racing. My blood pressure was up.

And the rash I get when I am anxious or upset was all over my face and chest. I think I

had this reaction even though I wasn't in a room full of people because I was the sole

focus of the room. What I said was being recorded, listened to, and ultimately judged. It

is hard for me to talk about myself in any situation but especially when it is personal. I

thought a lot about the questions asked. Even though I knew the answers to them, saying

it out loud made me realize how much control over me that my apprehension and anxiety

has. Like every day. All day. I have chosen and determined what classes to take here

just to keep myself from speaking in front of others. All my life I have avoided situations

that would put the attention solely on me. I do it all the time. I am proud that I have

made steps to overcome my anxiety. I have almost completed a class this semester that I

have registered for at least two other times. I may never be an amazing speaker, but I

pray I get better.

Layla has feelings on campus and in crowds which are similar to the feelings associated

with high CA that she experiences during a public speech:

Whenever I am just out on the main campus, just walking around, I have anxiety. I feel

nervous. I keep my head down. I don't even look around. Like I said earlier I was

nervous every day when I started here. I just don't like talking to new people at all. It

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makes me nervous. So that's different than speech class. I don't know. I just don't like

it…I don't like meeting new people. Being in those types of situations. I think it's just

big crowds. I get those same feelings as when I have to speak. I went to a concert once,

and just had to make myself…force myself to relax. I looked at my friend and she knew

I was having trouble. But it is the same here on campus. Big crowds…ugh! When

classes let out and everyone is out in the hallway or on the sidewalk at the same time…it

just like, ugh! I don't want to be here right in this hallway with all these people!

Katherine has ongoing pervasive feelings of anxiety during public presentations, and

describes similar feelings in other interpersonal communicative scenarios:

Like I am always nervous when I have to give a presentation. But it kind of feels the

same when I am on campus or just in class. Like it is the same fear, just different, you

know? Whenever I am in class I just have this nervousness. Always. I said earlier that I

don't like to talk to professors outside of class. But I don't like talking in class either. If

I don't have to talk, I don't. I don't raise my hand, and I will only talk if I am called on.

I sit and worry about it and it just feels horrible. And I don't just worry in class, I worry

before class. Like what time I get to class. If I feel like I am going to be late, it stresses

me out. I want my professors to know that I am responsible. And I am. But I still worry

about all of it. I get nauseous about it.

Emily describes feelings of communication-bound anxiety during interpersonal scenarios

where she perceives an imbalance of power or socioeconomic status.

I like the college. I do! And everyone here has just been so nice to me since the first day

I came on campus. And I love working in my department. But if I had to go to another

department and talk to a dean or something…I would just be so nervous. If I had to do

that I would just be terrified. I know I could do it, but just wouldn't want to. Not at all.

And I think I feel like this all the time. Like anytime I have to talk to a group of people I

get those feelings. And it's the same anytime I have to talk to people that are like a

higher status than I am…because I do not have a title. I am just a student. Like if I have

to go talk to other parents…like the other parents of kids that my sons play ball with. A

lot of those parents are like doctors or anesthesiologists and things like that. They have

these huge houses. And I just don't. So I'm nervous whenever I have to talk to

them…nervous about what they think about me. That maybe I am not as educated as

them and that maybe I can't speak the way that they do, you know? And like today I had

to give a campus tour to a group of prospective students. And I was nervous! I was

nauseous. I felt like my face was red and my palms were sweaty. Like in the car ride on

the way here before the tour, I was just so worried. I was nervous that I would freeze and

not know what to say. Because I am the one giving the tour so I am supposed to be the

one to know what is going on. But the thing that was really bothering me is that I did not

know what the ages of the group was going to be. I knew the group was from an ETSU

thing, but I didn't know if it was going to be middle school students, high school

students, or adults. I really did not want to give the tour to adults. Because that would

have been terrifying. I think the tour for those older than me would have been worse.

Much worse.

High CA students believe feelings associated with CA experienced in real scenarios are

connected to other real scenarios. Marie describes significant and complex feelings of

apprehension which she experiences during her introductory communication course public

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presentations. These feelings associated with CA are familiar to Marie, and believes the anxiety
is connected to her past:

Going into class this semester…it brought a lot of old feelings back, fears that have
always stayed with me. Before I speak in class…even though I have gotten past a lot of
my anxiety and put things behind me…it is just something that being up front in class
speaking like that, and being judged and being up there like that…gives me anxiety and
fear. I think it is just something that I am always afraid of…that somebody can see that I
am different or tell me that there is something wrong with me. And I get nervous if the
situation is unknown, if I don't know where I am going or if I don't know what to expect.
I am always nervous on the first day of class. I feel awkward when I go into the room,
and sitting down before the teacher comes in. Especially if I do not know anybody. It is
not as bad as giving a speech, but I worry. I worry about where I am going to sit. I
worry if I will have anyone to talk to. I worry if there is going to be a group assignment
and what the teacher is going to be like. I also get nervous in one-on-one
situations…anytime that I am in a situation where I feel like I am going to be judged or
looked at. Like, I am 39-years-old and I have never been into a restaurant by myself. It
would just be awkward. I would feel like everyone is looking at me. It's like being in
class and not knowing the answer and being called on by the teacher…I worry about not
knowing something. And I can't even practice for my speeches. Like I hate to hear my
own voice. So if I am going to practice my speech I can't do it in front of a mirror or in
the car. I try and practice for my speeches with my husband, but I make him turn around
and not look at me. He thinks I am crazy but he does it. And I just hate it. I hate it. I
hate the feelings I get. I think a lot of the reasons that I have trouble being in front of a

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room has to do with my childhood and how I was raised. It wasn't OK to be the center of

attention or have people focus on me. I didn't have a very good childhood at all. And I

think my stepfather, who adopted me and my sister, I think he always worried about what

we would say when we went into public. Or what somebody would see. So we were

never encouraged to do those sorts of things. They never told me to lay out of school for

a project or public presentation, but I think for me I became maybe somebody that others

could see that was different. And having someone look at you that way…like we were

not even allowed to go to church. I think he was afraid of what we might say or do. That

it may bring back something on him. And so I think those feelings came back in my

speech class. I think it is something that has always stayed with me.

Because of an incident during her final year of high school, Emily describes an ongoing

fear of authority figures which causes persistent interpersonal communicative-bound anxiety.

When asked about real-world scenarios other than public speaking which trigger her

apprehension, Emily indicated:

Like I get nervous any time I am around authority figures. And I know where it comes

from. If I get pulled over by the police, I panic! Even if I know I have not done anything

wrong, and I know it is just speeding, I still get so anxious and nervous and I'm terrified.

When I give a speech in class I don't physically shake, but I always do around cops.

Always. And I know I am not a criminal. It's all because of high school. I got arrested

my senior year. My mom and stepdad were going through a divorce and my stepdad

knew somebody in the system and said I didn't come to court for an appearance even

though I did. And they arrested me. Even though I had never even been in the

principal's office at school. My last day of my senior year they came to my

grandmother's house and put me in handcuffs, and put me in the back of a cruiser. It was

awful. I mean I didn't deserve to be there obviously, you know. Somebody knew

somebody and that was the only way at this point that my ex-stepdad could hurt my

mom…was to hurt her kids. I mean I was turning 18 so it had to be expunged from my

record and everything. I mean it was terrifying for me because I had never had any

experience with getting in trouble or…I mean, hell, I had never even had detention! I

was that kid. And I got handcuffed! I was like sobbing. Sobbing! Begging my

grandfather not to let them take me. The little officer that came, she was a woman, when

she came she even called her superior and was like, 'You can't make me take this little

girl to jail. Like she hasn't done anything, are you really going to make me take her in?'

And it was like a Friday, 4 o'clock in the morning when they knocked on the door. I

thought something had happened to my mom, like he had done something to her, I mean

it was getting pretty volatile and that's why I was staying with my grandmother. And the

officer said to her boss, 'You cannot make me take her in.' I was 105 pounds soaking

wet, bawling my eyes out. She said, 'I have to handcuff you or I will get in trouble.' So

she handcuffed me in the front, and then said, 'If you need anything, tell me. If the cuffs

get too tight I'll pull over.' I'm crying the entire way. The whole bottom of the cruiser is

filled with Kleenexes. I literally was sobbing the entire way. I was terrified! I had never

done anything! Nothing like that had ever happened before! And so today I guess now

that I know that things like that can happen, I know that I didn't deserve that, I know that

I didn't do anything. But now, today as an adult…now whenever I deal with authority

figures I think…OK, they have all this power and obviously it sometimes the judicial

system is not what it should be so something could happen and what if they pull me over

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and they decide to take me to jail for no good reason? What about my kids? I mean it's

happened before. So absolutely. My past absolutely affects my nerves today.

Absolutely. When I get pulled over I think, oh my gosh! Those feelings flood back, you

know?

Caroline has ongoing and pervasive anxiety, especially during an oral presentation. She

believes this is directly as a result of an incident during her secondary school years:

Like during a speech or at Walmart, I just don't like people looking at me. And if I see

someone looking at me, [laughing] I'm like, 'Oh crap!' But where does it come from? I

don't know. I'm nervous before a speech…I don't know…I mean there is something that

happened in high school and then ever since then I have been extremely nervous. It was

a personal situation…and it still affects me when I walk into a classroom. The thing

actually happened in a classroom. It was in high school. In a classroom. Well it was

during eighth grade, but it was in the high school building. Everyone else had left the

room but me and this one guy. And he did…some…very rude things. And it affects my

anxiety today. When I get up and give a speech now about whatever subject my speech

is on, it affects me. Something from my past…it affects how I feel in speech class. And

I think that is the biggest thing. That probably affects my anxiety the most.

Research Question 3: How do community college students describe communication

apprehension in imagined interactions?

    Ongoing fear from imagined judgement. High CA community college students

experience ongoing feelings associated from imagined judgement from others. Emily indicated

ongoing feelings of apprehension from fear of judgement:

Being graded and judged? Absolutely. It affects my nerves totally. Because I hold

myself to a very, very high standard, so if I think that I don't do well on this, I'm really

really hard on myself. And even more if I know that the professor is watching or viewing

the assignment or presentation. Makes me so much more nervous to worry about what

they are thinking. And I have these feelings that come over me when I know I am being

graded on an assignment, judged on what I do. I think about it and it is always on my

mind.

Katherine describes ongoing imaginations which produce intrusive feelings of

apprehension, especially following interpersonal interactions which she believes may have

unfolded in an unintended or awkward manner:

I think about this stuff a lot, like what people think about me after I meet them or after a

conversation or something? I often get mad and tell myself, 'Way to go, you just looked

so stupid. You just made a horrible first impression.' I do things like that all the time.

Doubting. Self-doubting. I just think, 'Oh no, they are going to think you are stupid.' I

just worry. Even though I know it is in the past, and it's already over and done, I just get

nervous still. Even if I have already looked stupid and it is over with. But I still worry

about what or how that person would think if they were to look back and think about me.

It's awful, and after those awkward things I just get emotional. Mad. Even though I

know these things are all in my head.

Marie indicated an ongoing fear of perceived judgement from others, primarily in her

introductory communication course:

Getting up front and speaking worries me. Before I speak I get nervous. I shake. I cry.

And I have fear, like genuine fight-or-flight fear, because I know everyone will be

looking at me…judging me. Well, I am nervous anytime I am in a situation where I feel like I am being judged or looked at. Like job interviews, because the entire situation is focused on me and what I say. And I know they are judging me. So being up front like that and giving a speech, it is just fear. I feel like I am being judged. I do. I really do. And it is hard to get up there because you are talking about yourself and you are in a room full of people. But you are still alone and worried that people will judge you and think less of you. Before I speak I can't even talk to my husband to communicate with myself. That sounds stupid…that they [the audience] are going to think why am I even up there talking about stuff? I'm just anxious. I hate it. I really do.

Layla indicated similar feelings from imagined perceptions of fear of being judged by others:

Walking back to my seat after a presentation is…that's the worst part! Because I feel like everybody is just watching me and if I think that I have done a bad job or messed up on something I just feel terrible. It's awful. And when I sit down I start thinking about my speech, and what others think about it. I know they are judging me. I start to reevaluate and it just feels terrible. It's emotional. The physical feelings are gone by then, but the emotions begin…I feel like I could have done better and everyone knows it. And its other things too. Like I went to a New Year's Eve party last year. Not really a party but a get-together and I only had one friend that I knew to hang out with. I was nervous all day! Like for real nervous, sick to my stomach. I don't know these people and they are going to be looking at me and watching me and watching what I do and listening to what I say and they are going to be thinking about me and judging everything I do. It was just awful.

The personal diary aspect of Phase III was open-ended and the participatory action research (PAR) methodology allowed for each participant to actively choose their own direction for the personal diary. Without prompting, Katherine created a 12-day diary about her apprehension during a variety of interpersonal interactions and her imaginations surrounding each event which caused high levels of apprehension. The diary was kept between her two Phase III face-to-face interviews, and Katherine documented feelings of high anxiety as well as days with no perceived apprehension:

- 10-27. Coming home from my interview with Mr. Bragg today I felt nervous because I thought that I looked like an idiot and a basket case. I was also in shock that I shared as much as I did with him.

- 10-28. No anxiety or nerves today. I stayed home and worked on homework.

- 10-29. Went hiking today with my cousin, her friend from high school, and a friend she works with. At first I was excited because my cousin lives in Florida and I do not get to see her often. But then I realized I had to be around people that I did not know. I don't know what they thought about me. I didn't really talk to anyone and just kept to myself most of the day. It helped I think.

- 10-30. No anxiety or nerves today. I stayed home and worked on homework.

- 10-31. I had to meet with a professor today. Had to go over to campus to meet with her and go over my research paper. The meeting was for a grade, so I knew that I couldn't get out of it. I had to wait outside her office, so that made me even more nervous. When I actually went in to see her, I had to read my paper out loud to her. It might have just been the two of us in the room, but I DID NOT like it. I think I shook and I was just so nervous the entire time. When I was on campus, I had to go

ask a secretary...I am a student worker in that department…I had to ask her for keys. I hate having to bother her and ask for keys and anytime I do it…I just don't like it. I don't like thinking about what they think about me. However, today the office was full of professors. That was even more intimidating, and I almost went and waited in the car. It was awful. The whole entire situation just threw off my game for the rest of the day, and I was excited to finally go home. Was not right or settled until I got home.

- 11-1. In my office job as a student worker, I ran out of staples in the office I work in. I did not know where extra staples are kept, so I again had to go ask the secretary for some staples. She was talking to two professors that I don't know (which made it worse!). I had to interrupt, so now they probably think that I am rude. Once I got the staples, I practically ran from the office. Terrible.

- 11-2. Today I had an advisor meeting with Mrs. C. I wasn't exactly nervous, but I was on edge. I hope that makes sense. Anyways I found out that I have to come back in a week, so I am going to have to work through all of these nerves and feelings again.

- 11-3. Today I found out I have to speak in front of 200 people for TISL. If I didn't care about letting people down, I would have quit. I am not ready to look like an idiot, but I have no other choice. It is going to be so nerve-wracking.

- 11-4. Today I went to take a tour at another college, where I may transfer for my bachelor's program. I did NOT want to go at all. However, I was the only one going on this trip, so I had no other option. I had to talk to different people and I just didn't

feel prepared. After meeting one person, I decided that I had to change my major. I

was already nervous about what they would think about me. This just made it worse.

- 11-5. I had to go help a friend with her stats homework. I don't think her mom likes

    me, but I had to talk to her anyway. My voice was shaking so bad. Nervous.

- 11-6. No anxiety or nerves today. I stayed home and worked on homework.

- 11-7. I actually talked in my composition class today, just because I was ready to go

    home. No one was answering the professor's questions, and I had enough of her

    repeating herself. I know that sounds rude, but it was about argumentative essays.

    That is all we did in my high school sophomore English class, and she was just saying

    stuff I already knew. Made me nervous, but I did it anyway just so we all could get

    done and go home.

Holding self to imagined standards imposed by self or imagined from others. High CA

students describe anxiety from imagined standards which are either self-imposed or the

individual imagines are being imposed by others. Students report feelings of ongoing pressure to

hold themselves to these imagined standards. High CA students describe feelings of anxiety

about how they feel they are supposed to speak or behave because of or according to the standard

in a given situation.

Emily is in her second year as an honors student and is a student assistant and mentee for

a professor at the institution. Emily feels ongoing apprehension because of a self-imposed

imagined standard of excellence as a social science major and as a student currently enrolled in

her mentor's course:

When I give a presentation I can feel my face get red, because I am supposed to be an

honors student, and college is supposed to be easy for me. Other people are supposed to

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be able to look at me and see that I have my shit together in all my classes. I get so

nervous in class. Like sometimes if my professor will be asking questions, and I know

that I know the correct answer, I will raise my hand to answer…and the words just won't

come! They won't come to me. I know what I want to say, but I physically cannot get

the words out of my mouth because I just don't want to mess up in front of [Emily's

professor & mentor] Dr. D. I worry about what he will think, because I want to be

excellent. I want to excel. And when I can't speak in class, I feel like the entire class is

like, 'Really?' and the professor is like, 'Seriously?' But I know this is all in my mind. I

just feel like if I am an honors student, that I should have my shit together in class all the

time. And I stress out worrying about what my mentor thinks…there's even been times

where I've said things…especially in his class because we joke around sometimes

anyway. And so I said something one day in class. And I immediately thought, 'Shit,

maybe that was inappropriate?' Not super inappropriate, but you know what I mean.

Like he's a professor and we are not buddies. I'm the student, he's a professor. Maybe I

should not have been kidding around because there's a standard we need to follow? I

literally am like, 'Oh, crap.' So I went to him as soon as class was over and I was like,

'I'm really, really sorry. Maybe I shouldn't have said what I said in class.' And he was

like, 'What? What are you talking about?' He didn't even know what I was talking

about, and it was all in my mind. I literally was like 'Oh shit. Like that was

inappropriate and I should not have said that in class!' And I felt like I had overstepped

these huge boundaries of him offering to be my mentor even though that is something

that he is not required to do. He has taken me in kind of. And then I'm like…like I had

taken advantage of that. But it was all in my mind, I had imagined this whole thing and

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built it up, and it was all in my mind and I was nervous about it for no reason. I just want

him to think that I am a good student and I want him to think I have my stuff together. In

a few weeks we are going to have to give a presentation in his class at the end of the

semester. And it's really weird because part of me…there's only 9 of us in that

class…it's very intimate. And we all speak and share all the time. So that's really

comfortable. So I would still not…part of it makes me more comfortable since we know

each other well and it's Dr. D...and part of me is 'Oh crap! It's Dr. D.!' And I don't want

to screw it up because it's him and this is my major and I want excel. It's weird because

it is him and I don't want to disappoint. So it makes me extremely nervous and

apprehensive. I won't even be able to breathe on that day. I feel like I'm supposed to be

like flawless because it's his class and he's put so much of his time and effort into me.

You know? And I'm like a community college senior at this point…upper level…I just

want my class and him to see me do well.

Katherine describes ongoing apprehension during interpersonal communicative scenarios

which are related to self-imposed imagined standards. Katherine, who has ongoing and

pervasive anxiety in her day-to-day activities on campus, has a more difficult time with her

family than at school:

I think the worst apprehension I have is at family gatherings. They are just nerve-

wracking for me which makes no sense because they are my family. But between family

stuff and school? I'd rather be here at school. Family gatherings…I am at my worst.

Both school and family things trigger my apprehension, but the judgement from family is

the worst. I have a standard I have to live up to. Because I have done so well so far, so

it's kind of like I have to continue doing so well. I've done well already, but it's like,

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'Oh no I have to keep all this going.' It's kind of like in my senior year of high school, I passed a nationally-certified test. Only two students out of my entire class even passed. And so for the last year I have been like, 'Oh, no. What if I peaked early?' That maybe this is it and I won't achieve anything else. So it makes me nervous to think that.

During the opening 20 minutes of her first interview, Caroline mentioned three times that she gets nervous about saying words wrong or experiences anxiety over not knowing the meaning of a word. The investigator asked her to speak to this, and without pausing Caroline offered:

Like sometimes I struggle with words. And it makes me nervous. I mean I really like my speech class and we all get along. But sometime I just get so upset. So nervous. On our last speech we were doing our speeches, like we are in a panel doing a group presentation and I had slipped up and said the wrong word…it was supposed to 'poachers' and I said 'pulchers' and a girl looked at me and helped me say the word. It really makes me nervous even though she was so helpful. But it was anxiety. Real anxiety. But I am not really sure where it comes from…but it just makes me a ball of nerves to get words wrong. I'm not really sure why…well I do know why. It's because of my dad. It's because my dad expects a lot out of me. And he always has. And it sits on my shoulder like a shoulder-devil talking to me [laughs] and it's just bad if I miss a word because he expects so much of me. My nephew has a disorder, and he doesn't say his r's or k's well. I feel like if I mess up talking to him then what kind of example am I for him? And what would my dad think? He needs somebody to be able to say the words right so he can say them back. And it just makes me worry…nervous. But it's the same in class. I want to

make an A in class. In my speech class. So in a way if I mess up a word, I worry about

it. I have anxiety about it.

Research Question 4: How has communication apprehension affected individual decision-

making in curricular and co-curricular community college activities?

Difficulty with co-curricular activities. High CA students have ongoing difficulty in co-

curricular activities, including negotiating feelings of apprehension during registration activities,

choosing a schedule, and during many aspects of the first week of an academic semester such as

locating classrooms, choosing seats, and meeting new individuals. High CA students have

particular difficulty with eating meals in proximity of strangers. Each of the five participants

indicated ongoing, life-long difficulty in eating meals in public, especially meals eaten alone in

public. Emily indicates that there is "no way" she could eat a meal alone because of her feelings

of apprehension. As mentioned above, Caroline cannot eat any meals in public without feelings

of intense anxiety followed by feelings of nausea. Caroline indicated that "the only time I am

calm when I eat is at home" and that she could "never" go to the campus Subway alone to eat

between classes.

Marie also reported difficulty with anxiety in eating meals:

I think if I had to go sit down and eat at Subway by myself I would…maybe if I had to.

But I never have. I'm not somebody who can go eat by themselves. I could go through a

drive through. But I would not go in and sit down. I have never done that. I don't feel

like I could. Like, I'm 39 and I've never gone into a restaurant by myself. Never. I just

think it would be awkward. I would feel like everyone is looking at me, and it makes me

nervous to just think about.

When asked about on-campus meals, Layla indicated an ability to eat alone on campus, but only with a degree of difficulty:

Like, if I know I am going to have to eat between classes…if I am going to eat on campus…I just eat where people cannot see me. I find a place where no one can watch me eat and I get it done. And I think about it before I get there. In Subway I am very aware of the people around me. And I know this is silly, but it's what I have to do because I am just too nervous. When I get there I look around to see what is going on. Like, I can sit by myself and do it, but I don't want to do it. So I avoid it. And if I have to do it, I look around when I get there and try and find a place where no one can see me.

High CA students also have difficulty in negotiating interactions with institutional staff and administration. Emily indicated feelings of nervousness during her first on-campus interaction:

The first day that I went to admission I was just so nervous. I literally knew that I needed to come back to school because I knew I had kids to support. But I had no idea where to start. I had never taken a college course in my life. I felt like here I am, terrified, and I am 33-years-old and I know nothing. I don't even know anything about college. I literally went up to the window at admissions and said, 'I know I need to be here. I'm a single mom of two kids. I've been home for 10 years. I have no idea what to do or what to say.' It was awful! I was just so embarrassed and it was just difficult to talk to her. I felt like I didn't know what I wanted to be when I grew up! I was lost but I knew I needed to be here. I was so nervous that first day but they made me feel comfortable. Everybody has, but it's still not always easy to go have those conversations with strangers.

In addition to negating anxiety-inducing interpersonal interactions, high CA students have difficulty with the emotions surrounding the process of transferring from the community college institution to the four-year university system. The transfer process requires a series of interpersonal interactions which can be difficult to negotiate for the high CA student.

When asked about transferring, Emily indicated:

I feel supported here. I do. I know these people. I know those in my major. And if something goes wrong I know where to turn…who to turn to. But next August I am transferring and beginning all over again. And so those same feelings of terror come back. And at ETSU I feel like I am going to be lost and alone. It's pathetic, because I am a grown woman. But the entire transferring process is just a mystery and I don't know what to do or how to do it. Or at least I feel I don't, even though I know it is going to be OK. I'm sure it is just the fear of the unknown, but it is fear. It doesn't matter what we are talking about, I do not like the unknown. I want to know what is going on. I keep telling myself that it is ridiculous. It is. When you really think about it, it is ridiculous. And I think I have these feelings because it is out of my control. I'm trying to get everything set. I've already talked to some advisors from ETSU that were here already to find out what I need to do. I have already talked to financial aid. I need to deal with these feelings, and part of is just trying to be super prepared. The more prepared I feel, the more in control I feel, and it helps my anxiety.

Similar to Emily, Marie is also experiencing anxiety about the process of her upcoming transfer to a four-year institution:

I've already applied to ETSU and I'll start next fall. And I am apprehensive about the entire process. It's a big school. I'm nervous. Parking. Getting to class. Everything.

It's a big school and I'm nervous. And it's different…like I get nervous because of all

the unknowns. When I don't know where to go to class or admissions or financial aid or

all those departments. It's unknown, and I think I am just nervous because I do not know

what is going to be expected of me. And these feelings are really similar to how I feel

before a speech. Different. But the same. I get anxious and upset. Like I don't shake

physically when I think about trying to start at ETSU, but everything else is the same.

But I know it is something that I am going to have to do. To get through. Some of these

things we have talked about in here, I've never in my life said them out loud. These

things are things I have got to do. And just knowing I can do them is such a big step for

me. When you are an adult and you do what I have done, avoided classes and skipped

responsibilities out of fear…like it is not just a school thing…it is a professional thing. I

am going to be a professional and I am going to have to be able to talk to somebody

about something…to talk to people about things. I'm going into a career that requires

interaction daily, and I have to address these feelings. And I need to get past all this stuff

on campus. I'll be in education the rest of my life.

The process of interpersonal interactions necessary for transferring to the four-year

institution is causing anxiety for Layla as well:

From what I hear about my next school I already think I am going to hate it. I think it is

going to be those feelings that I had here on the first week all over again. And it's just

not easy, everything I am having to do go get there, like all the questions and requests I

am having to make. And I am worried about the school itself. It is going to be big. And

I don't want to be stuck at a place where I don't want to be. I think I just want to stay

here.

Avoidance. High CA students tend to avoid scenarios which trigger feelings associated with high levels of apprehension. These feelings are obtrusive and cause students to make decisions because of the fear, in order to avoid the feelings associated with the imagined or perceived judgement which was documented in a previous section. The avoidance may include feelings of aversion to interactions with specific individuals, choosing how and when classes are scheduled, and selection of programs of study. In curricular and co-curricular activities, high CA students make decisions to avoid interpersonal situations and communicative scenarios which cause feelings of apprehension and anxiety.

Katherine avoids face-to-face interaction with her professors outside of the classroom and chooses how she interacts with her instructors in order to avoid face-to-face communication. She indicated that she actively avoids going to any professor's office and risking perceived judgement. When asked why Katherine prefers to speak with her professors via email she indicated:

Speaking with professors outside of class? Oh, no, that doesn't happen. Not if I can help it. I would rather bite off my own arm than go to a professor's office and have them judge me…I always email if I need anything. Always. And I always feel nervous around them, like they are watching me. It is totally normal for me to feel this anxiety inside. Like anytime I talk with professors…or with anyone with that kind of authority…I can't describe it. Like in high school I didn't hardly talk to any of my teachers. I was the student who sat in the front and did what she was supposed to do and made A's. I didn't want to talk and risk the judgement. If I went back to high school and asked for a letter of recommendation all they could say was that I attended and made an A because they never saw the personal side of me. I just didn't want them to think things about me so I

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kept quiet. And I still do. I'm a lot better now than in high school, but I still don't like speaking with professors. When professors think of me I want them to think of me as the smart person or the one who tries hard. It's what I try to be like, but it makes me nervous to think about what they think. Pretty much makes me anxious to imagine what they are thinking.

Katherine, who is social and enjoys her friends, also uses avoidance at times to prevent potential anxiety-inducing scenarios with her peers:

It's annoying. I don't want to deal with this the rest of my life. But I do. I have to deal with this stuff every day. I mean I am in college and I want to go out and see people, but at the same time I want to stay in my room and study. Cause it is easier. Like my room is my safe place. Like I usually don't even go out alone if I can avoid it if I am being honest. I try and avoid it at all times. If I have to go out I just get what I need quick and get home. I mean I like my friends. I do. But my apprehension around them really just depends on the situation…where we are going. And it's easy with them, to hang out. But sometimes it isn't. Most of the time, no problem. But other times it is just total anxiety. So nervous. There have been times where I have cancelled my plans with friends because I was not able to be socially interactive. I know it sounds bad, but sometimes I cancel plans just to be alone so I don't have to be anxious. So I just make up an excuse to get out of it.

All five participants experience anxiety before and during interpersonal interactions with their professors and instructors outside of the classroom, fearing perceived judgment. To avoid these feelings of apprehension from imagined judgement, students choose to interact with professors over email rather than face-to-face. The digital communicative channel offers

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students a level of control, limits the level of involvement and length of conversation, and allows the student to avoid the feelings of perceived judgement during face-to-face interaction.

The experience of living with high levels of CA causes Layla to avoid interactions which induce communication-bound anxiety:

Like, if it is anything I can get out of, I just don't do it. I avoid it. I avoid all social situations at all costs. I don't like being around big groups of people. And I have friends, and I am social, but I usually just don't go to big stuff. And I think it goes back to what I was saying earlier about faking it. I just have to fake it sometimes when I am in a situation where I am feeling like that…just act like it doesn't bother me even though it does. It really does.

Community college requires the very things high CA students seek to avoid. High CA students have ongoing difficulty negotiating tasks and interactions which low CA individuals may simply take for granted. High CA students describe anxiety, stress, and difficulty with large crowds, new people, being viewed by others, perceived judgement, graded critique from authority, inability to prepare, emphasis on oral communication, interpersonal reliability in group projects, and fear of the unknown. All programs of study at the institution require students to complete at least one oral-intensive course which, as documented above, causes ongoing, invasive apprehension for the high CA student. The community college curricular and co-curricular experience requires high CA students to actively engage in interactions and situations which they otherwise would actively avoid.

In her personal, hand-written diary, Marie indicated:

I had classes today. Not speech class but just my patient care class and anatomy and physiology II. These are classes which I enjoy because they are lectures and I am

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learning about what I love. The lectures went as they usually do with the teachers talking

and the students listening and taking notes. Dr. L. always interacts with the class and

asks questions to keep the class engaged. Monday was no different. He lectured and

asked questions of the students as he did any other day. I found myself answering many

of his questions, but not loudly and not confidently. I sat in class and my mind drifted

back to one of the questions that was asked in my interview with Mr. Bragg. He had

asked me if I had anxiety in class or if I struggled to participate in class? I had felt like

that was something I did OK with. But the way I answered in class today was just like I

always have done. Quiet. And unsure. So quiet that the teacher asked the same question

again and someone else answered the same question I had just answered. I had answered

so quietly, no one heard me! I don't know why that I won't speak up. I am usually right,

but I am just not confident enough to be heard. I guess subconsciously I am aware that if

I answered loud enough then the class would turn to me and look at me. And in the other

class we are dealing with the group project right now. And I am nervous about it. It is

just hard with everyone's schedules. I am working on my part, but I am nervous about it.

More than I had anticipated. I think the anxiety I am feeling is just worrying about it

coming all together. It's just hard to do this.

In her second interview, Marie continued to describe her on-campus experience with

activities which trigger her high levels of CA:

I have had such a good experience here at this school. I like it. I do. But I think there

just needs to be more support for high anxiety students. I think that since they make

everyone take a speech class, that that is something that needs to be addressed. If they

are going to require you to take classes which require presentations, they need to support

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us. Support the high anxiety students. Because right now they don't. It is not addressed

at all. They do not address anxiety as far as giving a presentation in a class. So I have

had to go around and look for classes that do not require presentations. I'm sure I am not

the only person who does that…who has taken classes specifically because you don't

have to give presentations, or looked for professors that do not require speaking. I don't

think teachers even think about this, what we are dealing with. I think most teachers

think that if you are in the college environment, that everyone has given presentations

before so it's no big deal for students…just get up there and do it. But it's not that easy.

Not for us. I don't know if the professors just don't take it seriously…how big of an

issue it is for the high anxiety students. For the last two years I have avoided these

courses. I am an adult and I just avoid classes where you have to speak. I do. Like I said

last time, I usually drop classes in the first week or two if I find out I have to speak. I

take internet classes whenever I can. I do. Most of the time I look at the syllabus on the

first day of class to see if there are any presentations, and if there are presentations I drop

the course. It's difficult to go through school like this, avoiding giving speeches and

presentations, but I have. I change classes. I've dropped classes. I've cried. I haven't

thrown up, but I get physically sick. I cry. This semester, I think I told you last time, I

got on the computer the first day to see if it was too late to drop my speech class.

Although she acknowledges the necessity of developing on-campus relationships, Emily

describes ongoing apprehension with interacting with instructors and professors:

I think it has gotten better, at least a little bit, since I started working in the office at

school. But whenever I am in the office at school working…I just feel like I am around

all these professors and they are so educated and so much higher than me. I don't know

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how to describe it. I mean nothing that anyone has done has made me feel that way. I

just feel that way on my own. I have always felt that way. Preconceptions are not fair

but sometimes it's hard to interact and talk with my professors. They all have degrees

and some have big degrees. And I know they are human just like I am. And they have

problems just like I do. And that they have crap in their lives just like I do. But it's hard.

Like in 99% of my experience here on campus, from the first day to the last of the

semester, I have some form of being nervous. Always. There is always something

coming at me on campus that makes me wary or nervous or whatever.

During her two Phase III interviews, Caroline indicated she has difficulty with many

aspects of the day-to-day activities on campus, including registering for classes:

It was awful coming over to register. I had an advisor that I didn't know. And it is just

not easy for me to sit down like that with a stranger. But I had to. And he told me what I

was supposed to take and he gave me 19 hours for this semester and had me on two

campuses, in Johnson City and Elizabethton. I was everywhere. And I told him I had a

job. But I didn't have the words to say and he just would not listen to me. It was just

awful. I don't have time for 19 hours but he put me in those classes anyway. I wanted to

be on the Blountville campus or Kingsport campus because I live in Kingsport. I tried to

tell him and he just ignored me and it just stressed me out. I told him all that going into

the meeting and he just like ignored me and did the opposite of what I asked. Like

completely the opposite. I eventually had to come back to campus to get it all fixed. I

had to find a new advisor that I could talk to. So it worked out eventually but it was just

hard before it worked out. All of those meetings make me nervous. Like I am going to

be transferring next year to LMU and I have to go meet people to transfer, like the

transfer advisor. It's not going to be easy to do all that. Most of those meetings you have

to prepare stuff. Like you have to have all kinds of paperwork to go see someone on

campus about anything. Like you have to have an academic plan or whatever it is called.

You have to be ready for the meetings which is not always easy for me. It makes me

nervous to sit in a room with a stranger. Sometimes it makes me want to take someone

with me because it's just so hard to do all that alone.

Katherine also indicated aversion to performing many of the requirements in her

curricular and co-curricular activities:

Like I said earlier, anytime I deal with someone in authority it makes me nervous. I

know I shake. And when I walk into any social situation here on campus I know I am

going to be nervous. I was nervous today before our meeting!   It just goes back to that

first impression thing. Anytime I know I am going to have meet with someone, like

talking to someone on campus, I have to think about what I am going to say. I prepare

what I am going to say. And I have to breathe deep anytime I talk to someone on

campus. It just brings anxiety. It's gotten better. And there is one thing that has helped

is that I have professors I can go and talk to. That helps. And in classes, it has helped to

find out what professors to take classes from. I have to do research on who to take. I

have to find the professors that let me just sit there. I know that that is not good because

it does not get me out of my comfort zone. But I do. I find the classes where I can sit

there and not have to talk. I think it is a help to have professors where you don't have to

talk in class. I just want to be able to go to class and do my work and not have to let them

see my nerves and know anything about this.

Communicative anxiety connected to grades and academic performance. High CA students experience ongoing anxiety connected to personal academic performance and graded feedback from professors and instructors. These feelings are ongoing for the high-achieving high CA student and the anxiety is experienced in both IIs and in real scenarios.

Katherine indicated ongoing apprehension in the classroom setting connected to her academic standing.

> I am pretty much always nervous when I have to get up and give a speech. I'm worried about what people think. But I am also worried about grades. Those are the two big ones, but the grades definitely outweigh what people think. I just want to achieve in everything I do. I just get nervous about not getting the grade that I want. I'm a perfectionist. I like A's. I don't want anything but A's. The grade is the big one, and I'm nervous about it. Always. I want an A on my projects. I want a high A, above a 95. And so how I feel about a speech really depends on the grade. I'm nervous about speaking, but more nervous about being graded while speaking. So far it has been OK in speech class. I got a 99 on the first speech and a 100 on the second. But my feelings go back to my grades…like how long it takes me to calm down after a speech depends on the grade I receive after I speak. And to be honest the 99 bothered me a little…that point that I missed. I went back and told myself, 'Hey, you've got to do better next time…you have room for improvement.' And I know that is silly. But I'm nervous about it. I know in a couple years I am going to transfer to another college, but I just wouldn't do well with 75 students in the classroom to be honest. I think I would be nervous about all the people but also because of the grades. I think it would probably hurt me academically. Probably. I don't know…I'm just really competitive. I like doing better than the people

around me. And even though this apprehension is normal, I still don't think it is normal.

I feel like it is a weakness. It's overwhelming.

In her first personal interview, Caroline indicated experiencing ongoing feelings of apprehension connected with instructor evaluations and graded assignments in her introductory communication course:

Yeah, the grade is really what makes me nervous. I kind of feel nervous even though I know I am making an A in the class. So that feels good to make an A. But in another way, if I mess up I am worried about it, if I say something wrong during a speech or in class, I worry about it. If I don't have the right material for the speech, I worry about it. So, yeah, grades are a big deal and I deal with those thoughts. If I make below a C, I lose all my financial aid. So it's a really big thing because my parents…we can't afford to send me to college so I have scholarships and grants and if I make a low grade then there are consequences and it bothers me all the time.

In her personal diary, Caroline continued to explore the connection between her experience with high CA and grades:

Got nervous today while driving. Not sure the exact reason, but I did. I think it is because I have a test coming up in one of my classes. I'm nervous and anxious about it. I have to make a good grade. I have to. And this morning I was nervous when I woke up, because I had two speeches today, one in public speaking, and one in college and lifelong learning class. Felt sick this morning because they are both graded. My hands were shaky. My hands were sweaty. I wasn't talking straight.

Nontraditional student Emily describes pervasive and complex feelings of anxiety about her life and family which she believes centers around her graded assignments:

Grades absolutely affect my nerves. Absolutely. You know? Being judged by a

professor! After a presentation I constantly obsess over what kind of grade I'm going to

get. If it is a graded project…I need my grade to be a high grade. But when I get my

grades, I'm always shocked. In humanities class, she had a rubric. She gave us our

grades at the end of class, right after our presentations. You didn't have to wait very long

to know how you did. And she made these comments on how great I did. I'm utterly

shocked. Because I think I've done horrible and I am upset and emotional after the

presentation because I know I just did terrible. And when I get the grade, she's like,

'You know, you did so well.' And I'm like what? Is she just really a nice person? There

is always a big divide between how I feel, my nerves, and how my grades turn out. I

mean, like I guess if I was thinking about somebody else having these feelings, I would

assume it has something to do with their self-esteem or something like that. But when I

think about myself I feel like I have high self-esteem, you know what I mean? So, if I

was on the inside looking out and it was somebody else I was thinking about, I would

think it was low self-esteem. But I really don't feel like I have low self-esteem.

Although I sometimes don't give myself enough credit. Because when I started here I

was like, I don't know how I am ever going to do this! I was a good student in high

school. But I was 34 when I started college. A huge gap. And within that gap, 10 years

I spent at home with my children, not speaking to anyone over the age of three or four. I

felt like I had not really even had that much communication with adults…it's very

isolating. I'm thankful I got to stay at home with my kids but looking back it is

extremely isolating. But there were consequences to being home for 10 years. When I

came here I thought do I even know how to study? Am I even going to be able to do

this? Can I even pass these classes? So I am constantly not giving myself enough credit

for what I do. And I'm really, really hard on myself. And if I do not do as well on a test

as I want to do, I completely beat myself up over it. Like majorly. Because I feel like I

need to do better. The grades just make me freak out! Because…and I know that I've

had plenty of professors say that it's not all about the grade…but I'm trying to get there

with myself. When you think about your GPA, I mean that's how you get your

scholarships. And I'm not in a position where I want to start paying for all my schooling

because I have a long way to go. For me, it is about the grades. I'm nervous all the time

about grades. Constantly wanting to know how I'm doing in my classes. And it is also

about my future financially, grades are what they look at. If you don't have a certain

GPA you are not going to get the scholarships. So all of my future and everything I am

dealing with right now…kids, kids' futures, my money, my college, my student loans, all

that stuff…it all funnels down to doing well on my next presentation.

Similar to Emily, Layla experiences high CA associated with imaginations of her future

success connected with graded presentations:

Overall I like to make good grades. I just like it. And sometimes I do have feelings

where I worry about being judged or what other people think. When I was younger I

worried more about what people thought. But I know that they are not going to

remember anything about my speech. But today, it is the grade stuff that I care about. It

bothers me a lot. I want to make good grades. I have to so I can get into my program at

the university and so I can be a success. I know it will not kill me to make a B, but yeah,

I do want the A on my presentations. All assignments, really. If I make a B, it's OK, but

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I always know I could have done better. So yeah, these feelings I have…the anxiety and the nervousness…they're definitely because of grades sometimes.

Marie, who is an honors student and an academic high achiever has ongoing apprehension associated with grades, and despite her academic excellence, has been willing to take lower grades on assignments in order to avoid communicative anxiety.

This semester is the first time I have ever gotten up front and willingly spoken on my own. I used to skip school in high school because of presentations. I was a straight-A student, and I would not go to school because of speeches. Literally would skip school. I have taken zeros as grades multiple times to avoid speeches, and it is just awful. So here, this semester, I worry a lot about grades. I know it is something I have to do…to get up there and speak…and I worry about the grades. But to be honest I was willing in my speech class to take a B or a C, which is a very big deal for me to get a grade that low, just to not have to get up there and speak as much or as long. It's just so stressful. And it's hard.

Research Question 5: During curricular and co-curricular community college activities, what techniques have high CA students used to mitigate the effects of communication apprehension?

Self-learned mitigation. Despite living with lifelong pervasive and intrusive communication apprehension, and daily employing a variety of mitigation techniques, no participant used any coping methods which were taught to the participant in the introductory communication course or learned from others. Instead, High CA students use mitigation techniques which are entirely self-learned. The following sections include regimented daily routing as mitigation, emotional resilience as mitigation, self-talk as mitigation, identification as mitigation, and alternate persona as mitigation.

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Regimented daily routine or repetitive behavior as mitigation. As documented above, Layla has particular difficulty in negotiating large crowds. To mitigate the feelings associated with large group communicative scenarios, Layla employs a repetitive behavior technique as mitigation. In her personal diary, Layla offered:

> After our first interview time, on the way home I was thinking about what I do. The things I do to help myself not be so nervous all the time. One thing I do is I try and do the same stuff almost every day. Like my routine. It's always the same. At school. In class. And when I go places, if I know there is gonna be a big crowd, I really try and do the same thing all the time. I do a routine to feel better. Like if I go to the mall, I'll always park in the same place or same area. Every time. I walk into the same door of the same store every time. I do the same thing every time. I'll go to the same places. I always go to the food court first. Then I go upstairs and get what I need. Then I'll go through the bottom floor. Then I'll circle back around to the food court if I need to. And then I'll leave. It's always the same. And I think it helps my apprehension. And this is a new realization. I've never thought about it before until our meeting last time and thinking about it for this journal. I know a lot of people do this…but I also have a routine when I wake up. When I go to bed. All through my day I do routines, and it helps how I feel. Maybe it helps me feel better, you know?

Layla also indicated her use of repetitive behavior as mitigation during her day-to-day routine both on and off campus. When asked what she does to help herself feel better before or during anxiety-inducing communicative scenarios, Layla responded:

> So yeah, like if I am going to Walmart or the store and I know I am going to feel anxious because of the big crowd or whatever, I always do the same thing. I just don't look

around. I have a plan. I get what I need without looking around. I'm hunting. And I do the same thing on campus. I just keep my head down. I know I do it. I wish I could change it, but I don't know what I can do different. And I always have a plan when I meet new people, like the first week in class. If they look approachable or relatable, I am OK and it's not too bad and I'll talk to them. I know it's bad to judge people, but I am nervous so what do you do? I am overall OK if new people don't look snotty. If they look approachable, I'll talk to them. But…and I know I do this all the time…it is just easier if they will talk to me first. And I just think the whole routine thing makes me feel better.

Caroline uses repetitive behavior to mitigate apprehension she feels in association with her academic work:

Even though I am making an A in my courses right now, if I mess up I am going to worry about it. And if I say something wrong in class, I am going to worry about it. And if I don't have the right material for an assignment or a speech, I worry about it. So I always message or email my professors to double check the assignment and make sure I have everything I need, and that my topic and direction is what it is supposed to be. I always do it before assignments. It helps my anxiety. And no matter what the situation is, I have some sort of anxiety dealing with people. Just like today. I know that it only takes me 25 minutes to get here to campus but I left home an hour early. I always do. It helps. Like when you emailed me last week about today's interview…I emailed you back twice. I double-checked the time. And like on school days, I always get up one hour before I have to leave. I have a very strict schedule. It helps my nerves. It helps me to have a strict schedule…helps with my time and I've got a master calendar in my room, one of

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those dry erase calendars. I've got my work schedule put on it…my school schedule.

Everything. And I'm really neat. I think my anxiety makes me even more neat. But

being neat, and doing things like this all the time really helps. Really helps.

Emily also uses repetitive behavior to self-assist with anxiety associated with public

speaking:

Before a speech it is just bad. I get sweaty and hot…and I worry. And while I am

supposed to be listening to the other students' presentations, what I am really doing is

worrying about myself. Worrying about me getting up there speaking and so I am going

back over my notes over and over again. I sit at my desk and just go over and over what I

am going to say. I know I am already prepared, and I know I am going to do fine, but

maybe…like maybe if I read them one more time then maybe when I get up there maybe

I won't screw this up? Which is ridiculous because when I get up there I always go

prepared. It's not like I need to go over notes, but maybe if I keep reading them, when I

get up there, maybe it will be ok. So I kind of can't help it. I just go over and over my

notes. Maybe it helps, you know?

Emotional resilience as mitigation. Before, during, or following anxiety-inducing

communicative scenarios, high CA students often do not use any specific mitigation techniques

to address their apprehension. All five participants indicated that at times when facing a public

presentation scenario, they "just get up and do it," or "get it over with." The technique of

"sucking it up and just doing it" or some variation of attempting to ignore the feelings associated

with high CA without any specific mitigation, appears to be a mitigation technique in itself.

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Layla, who often cries before a public presentation and deals with high CA in most communicative scenarios in her daily life indicated that she "just pushes through" the apprehension associated with anxiety-inducing scenarios:

If I have to give a speech, I just tough it out. I don't do anything to try and fix it…I just suck it up. I just get up and do it. I'm sure that's not what you want to hear, but I don't think there is really anything I could do to fix it. I just have to get through it. So I just get up there and do it. I don't have anything I can do to make it better. So I just don't think about it. Or at least I try not to think about it. Just suck it up. I don't really do anything. I just power through it and get it over with regardless of how I feel. And even though the anxiety is there all the time, and I know it is there…I just ignore it. I push it down. I deal with it by hitting it head-on. And I think it helps.

Rather than an absence of mitigation technique, the researcher noted that "suck it up and do it" appears to be a mitigation technique in itself. Similar to Layla, Katherine indicated that she was planning to use emotional resilience mitigation for a major presentation during an upcoming institution-sponsored trip:

I'm just one of those people who just has to suck it up and get it over with. I found out the other day that I am going to have to speak next week in Nashville in front of 200 people at the state capital. I didn't know that until the other day and I'm not very happy about it. I would quit if I could. I'm not even kidding! But people are counting on me so I just have to suck it up and get over it. I've never talked in front of a major amount of people…I've only talked to my public speaking class. And it's going to hit me really, really hard when I am down there. My hands will shake and I'll fidget. I'm fidgeting and nervous right now just talking and thinking about it. It's going to be nerve-wracking.

It's going to be awful. But I am going to have to suck it up and do it. And in my

presentations at school, I start to get light-headed and I try and breathe deep. But I'm just

like 'Ok, just get up and do it and get it over with.'

During a public oral presentation scenario, Emily uses emotional resilience as a means to

negotiate her emotions:

Sometimes there's just nothing I can do. I take a deep breath, and I walk up front and

just do it. There's nothing I can do to make myself not feel those feelings. I just get up

and get it over with. I walk up front, put the podium between me and the audience and

just do it. Because I know I have to. It doesn't matter that I am freaking out or terrified

or sweating or fidgeting with my papers. I know that I am being graded, so I just have to

do it. It's required. So there is no way really to change how I feel.

Self-talk as mitigation. During IIs and in real-world scenarios, high CA students use self-

talk to mitigate physical and emotional distress associated with communication-bound anxiety.

These moments of self-talk include self-reassuring and self-admonition.

One study participant who will not be identified to protect privacy, is a member of the

college's debate team and uses self-talk before debating and also while speaking in public:

Before a debate it is just weird. I'm always nervous. Like so nervous. I shake, and

leading up to the competition I start getting light-headed and that's where I just have to

start deep-breathing and I just have to tell myself, 'I'm OK. I have to do this. I have to

get through this. It's only three to five minutes. Or five to seven minutes. You can do it.

Just get it over with.' So, yeah I have to kind of talk to myself. And I have to do it when

I am up there in public speaking class. I do the same thing. In public speaking, I am

really, really nervous. Obviously. Even though I am up front and getting my

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presentation done, I am still nervous. Still shaking. And that is when I tell myself, 'You

are not going to fail at this. You are going to do this. You are going to achieve at it

because you have to get up there and get that A.' That's where the perfectionist side of

me comes out. I just think, 'Get yourself together. You're here. You're going to do it.

You're doing it now. And there is no backing out. So just get through it.'

While negotiating the feelings associated with high CA during the stress of the first week

of a semester, Caroline indicated:

First day of class is always bad. I am always really nervous. The first thing that pops

into my head when I come into class on the first day is, 'Who do I want to sit around?'

Because choosing my seat seems to help. You know? But it is always bad on the first

day. So I just try to brush it off and start to kind of tell myself, 'Everybody is nervous on

their first day. It's OK to feel like this. Everybody is nervous in the first class, in the

first week.' So I think that helps me to remind myself. So I do it in class and a lot of

times when I have those feelings I just have to talk to myself and remind myself.

Marie uses self-talk to mitigate feelings of anxiety during II moments and as a mitigation

technique in real-world scenarios:

Like in class sometimes I have to talk to myself. I tell myself that I need to talk more to

the professor in a discussion or to talk louder when I do talk. I have to tell myself that. I

think that I do communicate with myself pretty often. I talk to myself…like how you

said you judge what you say…I tell myself, 'I can't believe you just said that!' I do

things like that a lot. A lot. I go back and think about stuff to the point where I get

aggravated or nervous or anxious about something I said. Sometimes I have strong

emotions about what I have done or said. I do. I think about those all the time and get

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upset. So sometimes…all the time…I have to tell myself, 'Let it go. It's over and it's

OK.' I'll continue on and talk back and forth in my head. Those feelings are really hard

to get rid of, to set aside. And like my speech that is coming up…I have visualized

myself doing it. And I have played it out in my head some. And if I start and get

nervous, I think just mentally talking myself through it helps me. I know it does.

Emily also uses self-talk before public speaking to mitigate the feelings associated with

her high levels of CA:

Before I speak, when I start to get those feelings…I just try and talk to myself. I tell

myself, 'It's going to be OK, you've done this before.' It's so stupid! [laughs] It's so

stupid! I'm like, 'You know, just like calm down. Because if you don't you're not going

to remember anything and it's going to make it worse!'   And this is constant. Like, I am

supposed to be in class taking notes or listening to the class and what all is going on

because that is part of our grade, to participate in the class discussions…but instead I am

constantly just sitting there just talking to myself. Before I get up to speak I just tell

myself, 'You can do this. You're a college student. You're almost 36-years-old. This is

ridiculous to be this scared! You can do this!'

Identification as mitigation. High CA students use identification as a means of mitigating

feelings associated with communication-bound anxiety, reminding themselves that they are not

alone in their feelings. For example, Caroline uses identification as mitigation when feeling

anxiety on the first day of the semester: "I just try and brush off how I feel, because it's the first

day and I tell myself that everybody is nervous on the first day. Everybody is nervous the first

week. And it helps me to know that."

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When asked what the institution should do to assist other high CA students, Emily responded that identifying with other high CA students is an ongoing help to her personal feelings associated with CA:

I think for me it is a help to know that I am not alone. So incoming freshmen, part of it may be a help for them to know the same…to know they are not alone. Like you said earlier, that research says maybe 25% of all of us are in the same boat. I think that helps a lot. I know it helps me. And I think it would help others. It helps just knowing that I am not alone in this and basically a lot of people feel the same way in class or the same way in any sort of speech class. For the most part nobody is excited about getting up and giving a speech and it is a comfort to know that. That no one is judging you. No one is any more excited about giving a speech than you are. They feel empathy for you because they feel the same way. I think a lot of the times you do feel like you are having a lot of anxiety you do feel like you are alone in it. I'm sure like me a lot of people that have the high anxiety…you don't actually see it on the outside. So they're giving their speech and everything appears to be great, like it's a walk in the park for them. And no one knows that on the inside they are dying just like you are when you speak. So yeah, I think knowing that you are not alone is such a help.

Layla also feels a measure of relief with her own apprehension to know that other students in her introductory communication course have similar feelings to her own:

Yeah, it is good to know that I am not the only one. That I am not alone. And I think for anyone dealing with this stuff that it would be comforting to know everybody in the room is going through the same thing you are going through. They are thinking and worried about their own project. Just as worried as you are. So yeah, it does make me feel better

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to realize that others feel the same way…and I have to remind myself about this sometimes before I speak. That others are just as nervous as I am. Maybe not everyone. But lots of people.

Katherine stays mindful of others' feelings, and uses identification as an ongoing mitigation strategy:

I think even though I struggle every day, overall it gets a lot easier from high school to college as far as the anxiety goes, at least for me. Like this conversation we are having today, in high school would have been completely different. I thought I was totally alone. But now I know that everyone is new at one point, everyone has to give a speech, everyone has to do things that are uncomfortable. So I think it helps me to know that…to know that it is OK to feel nervous our anxious. Because everyone has been in your shoes, and it feels pretty good to know that. And I remind myself sometimes that I am not the only one.

During her public presentations in her introductory communication course, Marie is mindful of what other students are also enduring, which assists her with her own feelings associated with high levels of CA:

Like when I am up there speaking, I still feel very anxious and my heart rate is still up. I have to say that the second time I spoke when I was in a class with everyone else speaking, it kind of lessened a little bit. It helped to know that everyone was doing a similar speech. So it helped me to feel a little better when I went up to the podium. I still couldn't feel like I could smile because my lips were totally quivering [laughs]. I was like shaking. But once I get up there…when other people went before me you could tell they were also nervous. It helps that everybody is having to do it. So I remind myself all

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the time that we are in this together…that we are all doing these same speeches and we are all nervous. It helps. It does. It's not quite as bad.

Alternate persona as mitigation. When encountering an anxiety-inducing scenario for extended periods, high CA students may adopt a false or alternate persona. Students pretend to be confident, "faking it" during communicative exchanges which offers the students a lessened sense of apprehension. The researcher noted that the alternate personas have characteristics which the high CA students perceive as similar to low CA or confident individuals. Alternate personas allow high CA students a measure of self-protection, shield them from others being able to see or perceive verbal or nonverbal markers of anxiety, and allow the high CA student to function in difficult interpersonal situations.

At age 19, Layla works full-time as a manager at a local fast-service restaurant. Layla uses a work-specific persona to manage her feelings associated with CA:

Like I said earlier, I just don't like being around crowds of people. I avoid big social situations. Like I have friends…good friends…but big groups of people make me nervous, and work is just one big group of people all in one room. Like, I wish I could change this, but I can't. So I just got good at faking it. I don't let my anxiety show. For all people know, I have a bubbly and outgoing personality. And I don't. It's just not me…it's how I act. It's the same way at school. I act like this everywhere. And they don't know that inside I am dying. Deep inside I don't want to talk to them and I don't want to be there. On the inside when I have to deal with a lot of people, I am cringing. I'm dying. It's like this on campus. Super difficult to meet new people. I don't like talking to new people at all and I get nervous. When I first started at work I did not want to do the window with the money. But they make you. They make you talk to those

people and I don't know them! I have no idea who they are! And it was just awful. So I

got a face. My work face. I fake it and don't let my anxiety show. Like, I enjoy work

for the most part and I like my friends there, but sometimes dealing with people is just

too much for me and I have to fake it. And I guess I do this with everyone. I like people.

But sometimes if I have to be in class with someone I don't like a little bit, I still can

pretend to like them and use my work face. And I don't think I am the only one. I think

a lot of people are nervous, too, and having to fake it to get through their day.

Rather than behaving in a manner dictated by her high levels of CA, Katherine has a

created persona she adopts in "most social situations" including when on campus. This persona

helps Katherine negotiate her day-to-day life and protects her from allowing others to see the

depth of her CA:

Sometimes I feel like I just have to fake it 'til I make it. It's one of those things that I feel

like I have to act a certain way on on campus and in a lot of places during my day.

Which I guess also gives me anxiety because I wonder if people can tell I am being fake?

But I still do it. I fake it all the time. I just smile and go through my day and no one

knows what is going on. I feel like I have to say the right thing and do the right thing,

and not let anyone see what is going on inside. There is a difference to the me-side of me

and school-side of me. I'm nervous in class all the time. I mean I am happy with all of

my classes. I enjoy going to class. I enjoy learning. I feel happy in class. But I always

have anxiety in class, especially about speaking with other students. I'm always afraid I

am going to say the wrong thing. Or to give off a vibe that I don't want others to get. So

I plan out who I am going to talk to. I talk to one other person in each class and it's how

I act on campus. I talk to one person in prob-and-stats. One person in comp. I'm just

really nervous. I don't know. I don't want to seem disrespectful, but acting like this just

helps me. Fake it til you make it is my go-to phrase.

Marie, a mother of four, has adopted a parent-specific persona which pushes her

pervasive CA aside, allowing her to function as a mother despite how she feels on the inside.

So this semester on campus has been really a big deal for me. My speech class I have put

off and put off. I said last time that have already dropped speech twice, and I would have

dropped it this semester if it hadn't of been my last semester here. It's kind of crazy to

even imagine I even acted that way. It's embarrassing to admit. It is! I'm a mom. I

have four kids. I'm very responsible. I do everything I am supposed to do for them,

regardless of my apprehension. I don't shrug anything I am supposed to do…I try to be

there for everything I am supposed to do. I take my responsibilities seriously. I kind of

am a different person when I am dealing with my kids or doing mom stuff with them or at

their school. I do. My apprehension…it's different when I am with my kids. You have

to be different. You have to become Mom. So, I'm Mom first. And my apprehension

comes second. Like, I go to their school and am active and am around all the other moms

and the teachers. And even though I am terrified on the inside…when I am being Mom,

it doesn't show.

In addition to being a full-time student, Caroline is currently working as a portrait

photographer at a mall department store. She primarily photographs children, but also engages

in customer interactions and sales. Caroline cannot eat a meal in public without difficulty, has

trouble in all aspects of interpersonal interactions, and generally cannot go into public alone.

While Caroline has ongoing high levels of CA in most scenarios, she has adopted an at-work

persona which allows her to function on the job and minimize the feelings associated with CA:

I work at the portrait studio at the mall. So after school I go there and the reason I am dressed like a hobo today is I worked seven days straight and I have to wear dress clothes. Yeah. Maybe I should have dressed nice today, but I'm just not going to because this is easier [laughs]. The thing I really don't understand is if I am such a high anxiety person, then how is it so easy for me to work at a photo place? How is it so easy for me to communicate with complete strangers every 15 minutes? That's what our sittings are…every 15 minutes. I think I'm OK with my nerves there because it's work. Who I am at work. That's what I think. I have fun. I love photography. My mom is a photographer. So I grew up with photography. It is something I absolutely love to do and I'm good at it. I think I look silly when I do it, but I love it. We have to wear black pants and a black dress shirt. I don't like to wear black on black. You have to have black dress shoes, too. So that's what we wear. So when I go there I am totally different than anywhere else. Maybe it is because that is the only place where I am kind of in charge. At first I was kind of iffy about all of that…all of the people stuff…talking to all those people. Because I have to do pull-ins of customers. We go through the main part of the store and have to talk to complete strangers and tell them…make up something like we are having a contest to see how many pull-ins we can get in today…would you want to? And if they say no, you keep on, you go to the next person. I go just all over the place, all over the store. I don't like it. It makes me nervous. So nervous. So I kind of have to build myself up to it and do what I do at work. I plan out…what am I exactly going to say? How am I going to act? That is what is important, knowing how I am going to act. And so once I get that down, make a decision how to act, then I am OK. But even now, sometimes if they just throw me out there to do pull-ins, I get out there on the floor and

I'm like walking around. I still have to build myself up to it. But whenever I'm in the

studio it's like…I feel different. It's like a comfort zone. I know how I am supposed to

act. And I feel like I can talk to anybody. And another thing you have to do especially

babies, you have to make silly noises. And all the noises should embarrass me, but it

doesn't. Not at work. Not really, because I don't really think about it. But whenever I

first started doing it. I was like what on Earth am I doing? But once you've kind of got

into it, and you were just taking pictures and you didn't think about it. Even though there

is a glass wall around where I work and strangers can look in and see me. I think it

would be terrifying in other places…but not at work. I just like it. I like my job. I love

my job.

<div align="center">Summary of Analysis of Data</div>

Although there is no rigid methodology in the analysis of data for phenomenological

inquiry, the purpose of data analysis is to bring "meaning, structure, and order to data" (Anfara et

al., 2002, p. 31). The researcher sought to bring meaning to the data. Analysis of the data began

when the Phase III interviews commenced. The investigator documented the audio of each

interview, made detailed impressions throughout each interview, and noted initial themes. Each

interview was transcribed accurately and fastidiously. Following the transcription of the Phase

III recorded interviews, member checks were conducted to ensure accuracy of content and tone

of the data. Interview transcriptions, personal diaries, and the master list of participant

pseudonyms were stored in a secure location.

Data analysis methodology for the investigation was systematic, disciplined, and logical

(Punch, 2006). The first stage of the data analysis included three steps. First, an initial inventory

of the data was taken (Miles et al., 2014; Patton, 2015). Second, a pre-phase of the analytic

process was conducted which included two complete readings of the transcription, participant personal diaries, and field notes for pre-coding and documentation of initial impressions of the data (Creswell, 2013). Finally, pre-coding was followed with first iteration coding which included the initial assignment and categorization of logical codes applied to the data set (Saldaña, 2009). First iteration coding included initial themes, data grouping, and overall impressions recorded by the researcher.

The second phase of the analytic process included a logical, systematic, and disciplined marking and highlighting of the entire data set. The investigator focused on understanding the meaning and theme of each passage, and logical groupings emerged. Second iteration coding was conducted using constant comparative analysis and involved code reduction and formation of connections between the groupings.

The third phase of the data analysis included a third iteration of code reduction and application to the set of data. Emergent themes were noted by the researcher and codes were again reduced (Miles et al., 2014). The investigator used personal judgement and artistry to draw meaning from the data (Patton, 2015). The researcher reflected upon how the final codes related to the study's five research questions and the literature detailed in chapter two. Following the three phases of data analysis, a final theme emerged and the investigation yielded a rich, thick description of the central phenomenon. The three iterations of data analysis are presented in Table 1:

Table 1
Code Mapping: Three Iterations of Analysis (to be read from the bottom up)

CODE MAPPING FOR COMMUNICATION APPREHENSION
(Research Questions 1, 2, 3, 4, and 5)

RQ1: How do community college students describe the physical and emotional experience of communication apprehension?	RQ2: How do community college students describe communication apprehension in real interactions?	RQ3: How do community college students describe communication apprehension in imagined interactions?	RQ4: How has communication apprehension affected individual decision-making in curricular and co-curricular community college activities?	RQ5: During curricular and co-curricular community college activities, what techniques have high CA students used to mitigate the effects of communication apprehension?

(THIRD ITERATION: APPLICATION TO DATA SET)

Communication Apprehension:
High CA students describe a lived experience of pervasive and debilitative anxiety which is not limited to public speaking. Students experience CA across all aspects of curricular and co-curricular activities, experience emotional, relational, and academic consequences of CA and use only self-learned mitigation techniques.

(SECOND ITERATION: PATTERN VARIABLES)

1A. Pervasive and debilitating CA 1B. CA across interpersonal scenarios 1C. CA Across intrapersonal scenarios	2A. Anxiety across variety of real scenarios 2B. CA connected to past real scenarios	3A. Ongoing fear from imagined judgement 3B. Imagined standards	4A. Ongoing difficulty with co-curricular 4B. Avoidance 4C. CC Requires what students seek to avoid 4D. CA Connected with Grades	5A. Daily Routine 5A. Repetitive Behavior 5B. Emotional resilience 5C. Self-Talk 5D. Identification 5E. Alternate Persona

Table 1 (continued)
        (FIRST ITERATION: INITIAL CODES/SURFACE CONTENT ANALYSIS)

1A. Inability to function	2A. CA in academic settings	3A. Fear of judgment during speeches	4A. Difficulty choosing schedule	5A. Aggressive scheduling
1A. CA persistent throughout all of day	2A. CA in authority interactions	3A. Fear of judgement from instructors	4A. Difficulty eating	5A. Doing same thing each day
	2A. CA in presentations	3A. Fear of judgement from peers	4A. Difficulty with institutional staff	5A. Doing same thing in high CA scenarios
1B. CA experienced in social interactions	2A. CA in social settings			
1B. CA in introductory communication course	2B. CA connected to home life scenarios	3B. Self-imposed standards	4B. Avoiding courses	5B. Faking it
1B. CA experienced internally	2B. CA connected to past school experiences	3B. Perceived standards from authority	4B. Avoiding friends	5B. Sucking it up
		3B. Perceived standards of academics	4B. Avoiding professors	5B. Just doing it
			4B. Avoiding interactions	5B. Pushing through
			4C. Crowds	5C. Self-encouragement
			4C. Eyes	5C. Talking self through interaction
			4C. Judgement	5C. Talking self through presentation
			4C. Graded activities	
			4C. Group projects	5D. Pretending
			4C. Oral-intensive courses	5D. Work Face
			4C. Interaction with strangers	5D. School self
				5D. Faking low CA

CHAPTER 5

SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

Summary

Chapters 1, 2, and 3 presented an introduction to the central phenomenon, a review of literature, the qualitative approach to understanding the lived experience of high CA community college student during the introductory communication course, a presentation of how the data were obtained, and the study's phenomenological methodology. Chapter 4 provided interview and personal diary results, emerging themes, and a presentation and analysis of the data. The study's findings, implications, conclusions, and recommendations for practice and research are presented in Chapter 5.

All individuals experience some level of CA, although for the high CA individual the introductory communication course may serve to exacerbate the feelings, emotions, and experiences associated with living with high CA. The purpose of this investigation was to understand the lived experience of five high CA community college students enrolled in the introductory communication course. The findings and conclusions of this study are informed by the rich, thick descriptions of the five study participants and the study findings provide a basis for understanding the lived experience of the high CA community college student.

Conclusions

Current understanding of the high CA phenomenon places emphasis on feelings experienced in the public speaking scenario and research of the phenomena tends to focus primarily on public speaking and feelings experienced during oral presentations. Current introductory communication course curricula offer limited mitigation techniques to the high CA student and what assistance is offered is specific to the oral presentational scenario. While high

CA students do experience elevated levels of anxiety, and at times genuine terror during a public speech, the lived experience of CA is pervasive and feelings of apprehension may be experienced during all aspects of day-to-day life. Thus, communication-bound anxiety is not limited to the public speaking situation. Rather, high CA individuals may experience moments of fear or debilitative anxiety when alone, in small groups, large groups, in new settings or in familiar places. The high CA student may have waves of fear, dread, or anxiety in the classroom, institutional hallways, the campus cafeteria, or privately in the parking lot. Interactions with faculty, staff, and other students can be difficult and at times debilitating. Truly, for the high CA student, moments of anxiety are experienced throughout the individual's day and the high CA individual takes ongoing action to avoid or dampen the feelings associated with high CA. These actions include ongoing avoidance of communicative scenarios which trigger high levels of CA. Because of elevated CA, individuals may choose parking spots, classroom seats, eating locations, class schedules, college locations, and even careers in order to lessen or avoid experienced anxiety. Thus, the lived experience of the high CA student is one of ongoing, pervasive anxiety experienced throughout public and private life and has ongoing consequences and implications for the individual.

The five research questions guided the study throughout the qualitative investigation. The review and analysis of the interview transcriptions, PAR personal diaries, and researcher field journal provided a rich, thick description of the central phenomenon and a framework for understanding the essence of the lived experience emerged from the investigation. In several instances, the conclusions for each research question are overlapping and congruent. The following sections provide conclusions for each of the research questions:

Research Question 1: How do community college students describe the physical and emotional experience of communication apprehension?

Communication-bound anxiety is not shyness, interpersonal or social awkwardness, or communication reticence. High CA students may be outgoing, friendly, and genuinely enjoy communicating with others, but may have moments of fear or dread before or during interactions, even if the individual desires to be a part of the communicative scenario. Each of the five participants were overtly pleased to be a part of the study, yet each experienced considerable difficulty during moments of the investigation. In their own unique way, each student described complex feelings of nervousness felt while anticipating the first interview. During all 10 interview sessions, the high CA students communicated verbally and nonverbally intense messages of discomfort, fear, loathing, disunity of thoughts, and disquieting emotions. Students also displayed persistent physical markers of CA such as fidgeting, trembling, stuttering, and sweating. Yet through these series of emotions and physical experiences, each participant communicated openly and willingly. High CA students describe anxiety that is real and debilitative, and yet voluntarily participated in two interviews which caused considerable discomfort to each student. The investigator noted dozens of moments of mixed messages. Students smiled while sharing anecdotes, yet at the same time trembled and displayed neck welts and face splotches from anxiety-induced hives. Each student verbally indicated thankfulness to participate in the study, despite feelings of terror. Truly, the lived experience of high CA is complex.

Additionally, the lived experience of communication-bound anxiety may be broader than current research indicates. Compared with the described experiences of the high CA student, the current understanding of CA places an over-emphasis on the public speaking situation. To view

CA as specific to public address is incomplete. All five participants describe ongoing, lifelong difficulty with feelings of apprehension which permeate most interpersonal and intrapersonal communication, and is much broader than the public presentational scenario. During interpersonal communication scenarios, study participants describe physical feelings of nausea, shaking, sweating, unclear thinking, stuttering, and disfluency of speech. High CA is associated with emotional experiences of distress, nervousness, unease, and hypervigilance.

Despite the lifelong implications of living with high CA, the high CA student manages to function on campus similar to any other community college student, albeit at times with considerable physical or emotional difficulty. The high CA student puts considerable effort into routine tasks which the low or average CA individual may take for granted. High CA students plan out their days to avoid anxiety-inducing scenarios, have difficulty managing the feelings of distress during interactions both in and out of the classroom, and following difficult interactions may experience ongoing feelings of unease or anxiety during IIs as interactions are replayed and relived.

Research Question 2: How do community college students describe communication apprehension in real interactions?

Real world interactions are at times tremendously difficult for the high CA student. The types of scenarios which trigger heightened feelings of apprehension may vary between individuals. Some may experience difficulty in one-one-one interactions while others remain calm. Conversely, some high CA students may enjoy groups while other have difficulty functioning in medium or large group interactions. Although the type of interpersonal communicative scenarios that trigger anxiety may vary between individuals, the feelings

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experienced during high CA interactions are similar. Truly, high CA students struggle

throughout their days, both on and off campus, across a variety of interactive scenarios.

While the physical manifestations of nervousness such as shaking hands, trembling voice,

and fidgeting are certainly a part of the high CA experience, the physical and emotional

experience of the phenomenon is broader and more complex than simply experiencing butterflies

while speaking as some current literature infers (Bronson & Alford, 2004; Motley, 1997). In any

given real world communicative scenario, the high CA student may appear nonverbally calm on

the outside, yet inside may be frightened, nauseated, or experiencing flight urges. The same high

CA individual may at times display overt signs of emotional and physical distress, yet on the

inside be somewhat calm and experiencing feelings of confidence and pleasure in the given

interaction. Furthermore, there exists a wide variety of real scenarios which present significant

difficulty for the high CA student. Participants describe difficulty driving to campus, walking in

the campus hallways, conversing with institutional staff and faculty, and all manners of

interaction with other students in the classroom. Thus, the high CA experience is not limited to

feeling nervous while presenting a public speech.

While the current research focuses heavily on the public speaking situation, the oral

scenario does not appear to be the primary cause of apprehension for the high CA student.

Although public speeches certainly create a high level of anxiety for the introductory

communication course high CA student, participants overwhelmingly describe the primary

causes of communication-bound distress as situations other than classroom presentations. When

describing the lived experience of high CA, students tend to focus much more on interpersonal

and group scenarios than pubic speaking. It appears that public speaking fear is only a small part

of the overall high apprehension lived experience, even for high CA students currently enrolled

in the introductory communication course. Thus, it is unfortunate for the high CA student that the entire focus of anxiety mitigation in the current introductory communication course curriculum is exclusively centered on public speaking anxiety.

Research Question 3: How do community college students describe communication apprehension in imagined interactions?

The high CA student describes ongoing and pervasive imaginations which cause disunity of thoughts, feelings of unease, and dread. These experiences of II-bound apprehension are especially intense in three areas. First, the high CA student describes ongoing feelings of anxiety from imagined or perceived judgement from others. The high CA student experiences complex and at times debilitating feelings surrounding imaginations of what the student believes others think about them. Second, the high CA student experiences difficulty from new or unfamiliar situations. The high CA student may have IIs surrounding an anticipated event with both emotional and physical consequences hours or days prior to the new or unfamiliar interaction. The high CA student has particular anxiety if the individual does not know what to expect prior to entering a communicative scenario. This lack of expectations causes invasive apprehension and the high CA individual appears to create a series of IIs in place of the unknown information. If unsure about an upcoming interaction, the high CA student fills the gaps in knowledge with imaginations of unraveling interpersonal interactions. Third, the high CA student experiences intense feelings of emotional disharmony following interpersonal interactions which the student perceives or remembers as having unfolded in an unintended or awkward manner. Following these events, the student may replay a specific event via an II and be able to repeatedly re-experience anxiety from the interaction. Via the II, the student may also experience complex new emotions surrounding the remembered event. For example, following a public presentation,

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the high CA student may replay the event and develop increasing feelings of dread or disharmony. The student may have felt at ease about the presentation immediately following the speech, but after some hours or days of II replay, may become convinced that the presentation did not go positively or as intended. The more the high CA student replays an interaction, the more nervous they feel about it. Thus, II-based apprehension appears to have an influence on the way memories are stored and replayed, and may affect long-term self-perceptions of performance.

The described experience of II-based anxiety is not limited to feelings of disharmony and emotional anxiety. Rather, during moments of II-based apprehension, high CA students may experience physical feelings because of the anxiety. Waves of fear, dread, and horror may be experienced while replaying past events. Participants describe persistent, nagging feelings surrounding imaginations of what others may think about the student. These feelings are experienced in real time, in the real world. Thus, for the high CA individual, II-based communicative anxiety is experienced in the real world as a real world scenario. The lived experience of the high CA individual does not delineate between the real world and IIs.

Research Question 4: How has communication apprehension affected individual decision-making in curricular and co-curricular community college activities?

For the high CA student, co-curricular activities require ongoing and considerable emotional and mental effort. Attending community college requires students to perform tasks and interact in ways that are discomforting to the high CA student. The high CA student experiences difficulty engaging in unfamiliar situations alone or without emotional support and the first week of each semester is particularly difficult for those with high communication-bound anxiety. The high CA student experiences duress walking into class on the first day, choosing a

seat, and interacting with unfamiliar classmates. Even after the student becomes acclimated to

the particular course, anxiety remains. High CA students have ongoing difficulty during each

class period. This unease includes persistent fear of being called upon by the instructor, ongoing

apprehension due to IIs, and anxiety surrounding the initiating, developing, and maintaining

interpersonal relationships.

The curricular and co-curricular implications for the high CA student is ongoing.

Students describe having to plan out interactions with professors, institutional staff, and other

students. The high CA student experiences emotional duress before, during, and following the

submission of assignments to instructors. This apprehension appears to be focused in two areas.

First, students experience anxiety surrounding instructor feedback and grades. As presented in

Chapter 4, the high CA student has significant levels of anxiety surrounding grades. This

anxiety creates ongoing emotional distress and complex IIs are experienced in connection with

graded assignments. More simply, high CA students worry about grades and have ongoing

imaginations about failing assignments, however unfounded the IIs may be. Second, the high

CA student experiences persistent difficulty with IIs in relation to others' perceptions of the

student. The high CA student worries about how others perceive them personally and

academically. This causes ongoing anxiety due to the surrounding IIs. The high CA student has

wandering imaginations throughout each day, worrying how their classmates, instructors, and

institutional staff perceive them. These difficulties influence the high CA student throughout on-

campus day-to-day activities.

Because of this persistent anxiety the high CA student makes ongoing decisions to avoid

or mitigate the feelings surrounding communication-bound apprehension. Throughout each

school day, students plan out conversations and interactions in advance. Interpersonal

interactions are especially difficult for the high CA student, who may go to considerable lengths to avoid uncomfortable scenarios. The high CA student may choose to not attend class sessions where they may have to discuss or present material, and may choose to accept incomplete or lowered grades on assignments to avoid a difficult interaction. Perhaps more significant than a single class session or single graded assignment, the high CA student makes major decisions because of anxiety. The high CA student may avoid or put off attending a large university to avoid large classes and large crowds. Anxiety also has an influence on choice of program of study and overall career direction. The high CA student is overtly mindful of the levels of interpersonal interaction that will be required throughout a chosen career and may make program decisions to avoid certain long-terms scenarios. Finally, as documented in Chapter 4, the high CA student may at times choose to create an on-campus persona to mitigate or avoid the feelings associated with communication-bound anxiety. The created persona is chosen to mask apprehension and allow the student to pretend to function as an individual with moderate levels of CA.

Research Question 5: During curricular and co-curricular community college activities, what techniques have high CA students used to mitigate the effects of communication apprehension?

High CA students are unequipped to mitigate their experienced feelings during difficult situations and the community college introductory communication course curricula offer the students limited help or intervention for their anxiety. Moreover, students have limited mitigation techniques and often face difficult interactions with nothing more than "I have to suck it up and do this." High CA students are especially terrified during public presentations, and current curricula have not equipped students to self-mitigate their feelings. The introductory communication course has provided little or no methods for CA intervention and there appears to

be no difference in the lack of mitigation techniques between current introductory

communication course students and those which have completed the course.

Participants overwhelming strive to live normal lives and put considerable effort into

both continuing with life even when experiencing difficulty with anxiety and avoiding high CA

situations altogether. If a given communicative situation is optional, the high CA student will

likely take action to avoid the scenario to prevent experiencing the feelings associated with

communication-bound anxiety.   However, if the interaction is unavoidable, it appears that at

least three self-learned mitigation techniques are consistently used by the high CA student. First,

high CA students tend to "just get up there and do it" when confronted with unavoidable

scenarios. Rather than attempting to dampen the anxiety of the stressful situation, students

choose to meet the challenge head-on with no mitigation. As presented in Chapter, this

emotional resilience strategy appears to be a mitigation technique in itself. Second, high CA

students use self-talk as mitigation. This may be viewed as students offering themselves a pep-

talk before, during, or following an anxiety-inducing communicative interaction. Third, high CA

students use identification as mitigation, reminding themselves that they are not alone in their

feelings and that other students experience CA as well. This self-calming technique appears to

be particularly effective as mitigation before a public presentation. Finally, an alternate persona

as mitigation may be created by the high CA student. This persona allows the individual to

pretend to others to have lower levels of CA, and allows the individual to experience moderately

decreased levels of communication-bound apprehension.

Implication for Policy and Practice

Data collected from the interviews, PAR personal diaries, researcher field journal, and

observation offer suggestions for higher educational administrators and community college

faculty. The following five recommendations are offered to increase student engagement, promote the retention of high CA students, and increase the effective mitigation of communication-bound anxiety for the high CA student:

First, community college institutions should identify, assist, and train high CA students in effective CA mitigation techniques. In many ways, current high CA students are alone in their struggle and have limited support specific to their high levels of apprehension. High CA students, which may encompass some 35% of the current student population, are suffering quietly. Methodology should be developed to identify, support, and effectivity equip the high CA student. High CA students should be identified early in their academic careers. The PRPSA, which has for decades been proven an effective instrument for identifying communication-bound anxiety, should be actively utilized.

Second, an introductory communication course should be developed specifically for the high CA student. High CA students indicate a measure of ongoing success in the intervention of CA by identification with other high CA students. The high CA-specific introductory course should have smaller class sizes than typical communication courses, and should emphasize the instruction of effective mitigation techniques. High CA students indicate that having a welcoming in-classroom atmosphere and an instructor who is sensitive to the needs of the high CA student are both helpful. Instructors for the high CA-specific course should be selected for an understanding of the needs of the high CA student, an ability to effectively train students to self-mitigate, and for the ability to create a welcoming and comforting atmosphere especially during class sessions where students are delivering oral presentations.

Third, effective mitigation techniques both for public speaking anxiety as well as CA associated with day-to-day interactions should be developed and implemented. Current

mitigation techniques are either not provided to high CA students or what measures are provided are ineffective. The high CA student currently has limited ability to self-mitigate and current curricula are ineffective in providing students needed methodology and skills to successfully navigate the introductory communication course. Moreover, because the introductory communication course is the only communication course most community college students will have during most programs of study, the onus for communication administrators and faculty is significant.

Fourth, high CA students experience persistent anxiety during situations where they may face something unknown. High CA individuals have an ongoing need to manage their emotions about the unknown. These individuals find particular comfort in being informed of what to expect before a given communicative scenario. For example, the high CA student describes experiencing less apprehension before a public presentation when provided a brief description of how the room will be arrayed, what the audience will do during the presentation, and where in the speaking order they will present. During the Phase III interviews of the current study, each participant indicated significantly less anxiety experienced before and during the second interview session. This was due to the individual having an understanding of what to expect during the second interaction. Community college leaders may serve the needs of the high CA student by providing reasonable expectations of some situations when feasible. For example, when scheduling advisement sessions, faculty may provide a brief email allowing students to understand what they should prepare for and an overview of what to expect during advisement. In any situation, high CA students prefer to know what to expect and additional policy development may be necessary.

Finally, high CA students find particular comfort and assistance from positive relationships with institutional faculty and staff. High CA students tend to locate 1-2 faculty or staff allies on campus whom they may utilize for curricular and co-curricular advice and assistance. Institutions should actively develop and foster these types of relationships specifically for assisting the high CA student. Identification and development of the high CA student-mentor relationship should be implemented early during the student's program of the study. Because high CA students have difficulty with professor-student communicative interactions, the student-mentor relationship may be effective in a focus group scenario rather than one-on-one.

Additionally, the following practices are recommended specific to introductory communication course pedagogy:

- During class sessions where students are delivering public speeches, high CA students should be permitted to choose where in the class speaking order they deliver their respective oral presentation. High CA students indicate a level of comfort in being permitted to choose individual speaking order.

- During the introductory communication course curriculum section on interpersonal communication, faculty should offer assistance and training on techniques for successful face-to-face communication with authority figures. High CA students have particular difficulty interacting with professors in part due to the power imbalance inherent in the relationship. High CA students have a considerable need to develop these skills, which have implications for communication within a power imbalance scenario across the lifetime of the individual.

- High CA students find particular help in being challenged to engage in interactions or activities which trigger their respective levels of anxiety. Without prompting, participants in the current study created difficult interactions for themselves and experienced personal growth because of the exercise. For example, one student who has considerable difficulty shopping alone challenged herself multiple times to go to a store alone and described feelings of satisfaction and growth afterwards. Another participant volunteered to deliver an unscheduled and unassigned oral presentation to her introductory communication class and had a positive outcome from the experience. Communication course faculty may consider challenging high CA students to willingly and voluntarily choose to engage in challenging activities for the purpose of personal growth for the high CA student, an activity which would be supported by current communication studies mitigation research on systematic desensitization (Hunter et al., 2014).

<div align="center">Recommendations for Further Research</div>

The focus of this study included the lived experiences of five high CA community college students. The investigator recognizes the limits of the data analysis and the limitations of the purposefully sampled population of the current study. Given these limitations, and based upon the study findings and the current review of literature, the researcher offers the following seven recommendations for future research:

First, the current understanding of the experience of the high CA student is incomplete and additional research is needed from the qualitative perspective. The current description of the lived experience for the high CA student is almost exhaustively from a quantitative perspective and full definition and description of the phenomenon remains incomplete.

Second, bifurcation between real interactions and IIs may be unfounded. As documented in Chapter 4 and above in Chapter 5, high CA students experience complex IIs during real scenarios, and experience real feelings and emotions during IIs. To the high CA student, there may exist no delineation between real interactions and IIs. Further research is necessary to provide definition to the central phenomenon, and a greater understanding of CA is necessary especially from the qualitative tradition.

Third, research may be conducted for the development of methodology for interviewing high CA individuals without obtrusive recording devices or visible documentation by the investigator. All five participants appeared aware of the recording device and each gave nonverbal indication and reaction whenever the investigator wrote in the field journal. Although all necessary measures were taken to prevent the influence of the recording device on the study, and the device was purposefully selected for the study and all recommendations for data collection were followed, the investigator holds that the recording device did have a measure of influence on the study. The level of influence that the device had on the study cannot be known. Additional research should be conducted on creating techniques for a more unobtrusive data collection methodology, particularly for individuals with a high degree of communication-bound anxiety. These individuals may already be experiencing difficulty in an interview situation before the device is introduced, and the recorder may create additional disquiet for the study participant. Thus, data collection methodology should be refined.

Fourth, although current communication research guidelines stipulate that individuals should not be purposefully introduced to high CA triggering scenarios, and all necessary precautions were taken to ensure the emotional well-being of the current study's participants, the investigation did cause each student to experience high levels of apprehension. The interviews,

especially the first Phase III sessions, were stressful to participants. Each study participant communicated verbal and nonverbal messages of ongoing and significant levels of apprehension throughout the sessions. Additional research methodology should be developed to assist the qualitative investigator and aid in future studies specifically for the purpose of gathering qualitative data from high CA individuals while causing a smaller distress footprint for the study participant.

Fifth, while current communication literature offers a modicum of insight to CA causality, the etiology of communication-bound apprehension remains incomplete. The current study provides a description of the high CA student believing that real-world apprehension is at least partly caused by previous real-world difficult experiences. However, an understanding of CA causality remains unclear and additional research is called for.

Sixth, the current study included a purposeful sample with an emergent theme of five high-achieving, female, university parallel community college students. No males participated in the study. No technical, certificate, or associates-only students of either gender participated in the study. Additional research is necessary to offer a more diverse voice. Future research may be conducted to include the low or average-achieving student, male student, or certificate-seeking community college student. The entire rich, thick description of the central phenomenon remains incomplete.

Finally, there appears to be a meta-level to the high CA experience. High CA students have ongoing anxiety about their anxiety. For example, during IIs high CA students experience apprehension while anticipating upcoming apprehension and have emotions about these emotions. More simply, before interpersonal interactions, students get nervous that they are going to be nervous when the event unfolds. Similarly, during high-anxiety real scenarios,

students experience anxiety about having anxiety. This anxiety is experienced in addition to the initial anxiety. High CA students have particularly high anxiety about the physical displays of apprehension. When the student feels their face become flush or hears their voice quivering from nerves, an additional, compounding anxiety is experienced. Truly, high CA individuals feel nervous about being nervous. This meta-level apprehension has not been documented in current literature and additional research is recommended.

REFERENCES

Adams, C., & van Manen, M. (2008). *Phenomenology: The Sage encyclopedia of qualitative research methods,* (2nd ed.). Thousand Oaks, CA: SAGE Publications.

Ahern, K. (1999). Ten tips for reflexive bracketing. *Qualitative health research, 9*(3), 407–411.

Alkin, M. (2013). *Evaluation roots: A wider perspective of theorists' views and influences* (2nd ed.). Thousand Oaks, CA: SAGE Publications.

American Association of Community Colleges. (2017). *2016 Community college fact sheet*. Retrieved from http://www.aacc.nche.edu/AboutCC/Pages/fastfactsfactsheet.aspx

American Association for Higher Education et al., (1998). *Powerful partnerships: A shared responsibility for learning*. Retrieved from http://www.myacpa.org/sites/default/files/taskforce_powerful_partnerships_a_shared_responsibility_for_learning.pdf

American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). Washington, DC: APA Press.

American Psychological Association. (2010). *Ethical principles of psychologists and code of conduct.* Retrieved from http://www.apa.org/ethics/code/.

Anfara, V. A., Brown, K. M., & Mangione, T. L. (2002). Qualitative analysis on stage: Making the research process more public. *Educational researcher*, *31*(7), 28–38.

Aud, S., Hussar, W., Kena, G., Bianco, K., Frohlich, L., Kemp, J., & Tahan, K. (2011). The condition of education 2011 (NCES 2011-033). US Department of Education. *National Center of Education Statistics.* Washington, DC: US Government Printing Office.

Ayers, J. (1986). Perceptions of speaking ability: An explanation for stage fright. *Communication Education*, *35*, 275–287.

Ayres, J., & Hopf, T. S. (1985). Visualization: A means of reducing speech anxiety. *Communication Education, 34*, 318–323.

Ayres, J., & Hopf, T. S. (1993). *Coping with speech anxiety*. Norwood, NJ: Ablex Publishing.

Ayres, J., Heuett, B., & Sonandre, D. A. (1998). Testing a refinement in an intervention for communication apprehension. *Communication Reports, 11*, 73–84.

Ayres, J., Hopf, T., & Peterson, E. (2000). A test of communication-orientation motivation (COM) therapy. *Communication Reports, 13*, 35–44.

Banta, T.W., & Associates. (2002). *Building a scholarship of assessment*. San Francisco, CA: Jossey-Bass.

Barraclough, R. A., Christophel, D. M., & McCroskey, J. C. (1988). Willingness to communicate: A cross-cultural investigation. *Communication Research Reports, (5)*2, 187-192.

Bazeley, P. (2013). *Qualitative data analysis: Practical strategies*. Thousand Oaks, CA: Sage Publications.

Beatty, M. J. (1987). Communication apprehension as a determinant of avoidance, withdrawal, and performance anxiety. *Communication Quarterly*, *35*(2), 202–217.

Beatty, M. J., & McCroskey, J. C. (2000). Theory, scientific evidence, and the communibiological paradigm: Reflections of misguided criticism. *Communication Education, 49*, 36–44.

Beatty, M. J. & McCroskey, J. C. (2009). A communibiological perspective on communication apprehension. In J. A. Daly, J. C. McCroskey, J. Ayres, T. Hopf, D. M. Ayres Sonandre', & T. K. Wongprasert. *Avoiding communication: Shyness, reticence, and communication apprehension*. (3rd ed., pp. 53–66). Cresskill, NJ: Hampton Press.

Beatty, M. J., Kruger, M. W., & Springhorn, R. G. (1976). Towards the development of cognitively experienced speech anxiety scales. *Central States Speech Journal, 27*, 181–186.

Beatty, M. J., McCroskey, J. C., & Heisel A. D. (1998). Communication apprehension as temperamental expression: a communibiological paradigm. *Communication Monographs, 65*, 197-219.

Beatty, M. J., McCroskey, J. C., & Valencic, K. M. (2001). *The biology of communication: A communibiological paradigm*. Cresskill, NJ: Hampton Press.

Bernard, H. R. (2011). *Research methods in anthropology: Qualitative and quantitative approaches* (5th ed.). Walnut Creek, CA: AltaMira Press.

Blume, B. D., Baldwin, T. T., & Ryan, K. C. (2013). Communication apprehension: A barrier to students' leadership, adaptability, and multicultural appreciation. *Academy of Management Learning & Education, 12*(2), 158–172.

Blume, B. D., Dreher, G., & Baldwin, T. T. (2010). Examining the effects of communication apprehension within assessment centres. *Journal of Occupational and Organizational Psychology, 83*, 663–671.

Bodie, G. D. (2010). A racing heart, rattling knees, and ruminative thoughts: Defining, explaining, and treating public speaking anxiety. *Communication Education*, *59*(1), 70–105.

Bodie, G. D., Honeycutt, J. M., & Vickery. A. J. (2013). An analysis of the correspondence between imagined interaction attributes and functions. *Human Communication Research, 39*, 157–183.

Booth-Butterfield, M., & Gould, M. (1986). The communication anxiety inventory: Validation of state- and context-communication apprehension. *Communication Quarterly, 34*, 194–205.

Bragg, D. D. (2001). Community college access, mission, and outcomes: Considering intriguing intersections and challenges. *Peabody Journal of Education, 76*(1), 93–116.

Bresciani, M. J. (2003). Expert driven assessment: Making it meaningful to decision makers. *ECAR Research Bulletin, October,* 21. Boulder, CO: EDUCAUSE.

Bresciani, M. J. (2006). *Outcomes-based academic and co-curricular program review: A compilation of institutional good practices*. Sterling, VA: Stylus.

Bresciani, M. J. (2011). Challenges in the implementation of outcomes-based assessment program review in a California community college district. *Community College Journal of Research and Practice, 35*(11), 855–876

Bresciani, M. J. (2012). Recommendations for implementing an effective, efficient, and enduring outcomes-based assessment program. *Community College Journal of Research and Practice, 36*(6), 411–421.

Bresciani, M. J., Zelna, C. L., & Anderson, J. A. (2004). *Assessing student learning and development: A handbook for practitioners*. Washington, DC: NASPA.

Bronson, M., & Alford, D. (2004). Harnessing the butterflies. *ReVision, 26*(4), 37–42.

Brown, J. N., & Burke, K. P. (2007). New rules for business in a flat world: A trustee call to action. *Community College Journal of Research and Practice, 31*(6), 441–448.

Butler, J., Pryor, B., & Marti, S. (2004). Communication apprehension and honor students. *North American Journal of Psychology, 6*(2), 293–296.

Byrne, M., Flood, B., & Shanahan, D. (2012). A qualitative exploration of oral communication apprehension. *Accounting Education, 21*(6), 556–581.

Chenail, R. J. (2009). Interviewing the investigator: Strategies for addressing instrumentation and researcher bias concerns in qualitative research. *The Weekly Qualitative Report, 2*(3), 14–21.

Chevalier, J. M., & Buckles, D. J. (2013). *Participatory action research: Theory and methods for engaged inquiry.* New York, NY: Routledge

Choi, C. W., Honeycutt, J. M., & Bodie, G. D. (2015). Effects of imagined interactions and rehearsal on speaking performance, *Communication Education, 64*(1), 25–44.

Chrystal, L. L., Gansemer-Topf, A., & Laanan, F. S. (2013). Assessing students' transition from community college to a four-year institution. (2013). *Journal of Assessment and Institutional Effectiveness, 3*(1), 1-18.

Cissna, K. (2010). Qualitative research in communication. *Southern Communication Journal, 75*(4), 299-305.

Clandinin, D. J. & Connelly, F. M. (2000). *Narrative inquiry*. San Francisco, CA: Jossey-Bass.

Clark, D. A., & Beck, A. T. (2010). *Cognitive therapy of anxiety disorders: Science and practice*. New York: The Guilford Press.

Cohen, A. M., & Brawer, F. B. (1987). *The collegiate function of community colleges: Fostering higher learning through curriculum and student transfer*. San Francisco, CA: Jossey Bass.

Cohen, A. M., Brawer, F. B., & Kisker, C. B. (2014). *The American community college*, (4th ed.). San Francisco, CA: Jossey Bass.

Creswell, J. W. (2005). *Educational research: Planning, conducting, and evaluating quantitative and qualitative research.* Upper Saddle River, NJ: Pearson Education.

Creswell, J. W. (2013). *Qualitative inquiry and research design, 5th edition*. Thousand Oaks, CA: Sage Publications.

Creswell, J. W. (2014). *Research design: Qualitative, quantitative, and mixed methods approaches*. Thousand Oaks, CA: Sage Publications.

Creswell, J. W., & Miller, D. (2000). Determining validity in qualitative inquiry. *Theory Into Practice. 39*(3), 124–130.

Crotty, M. (1998). *The foundation of social research*. NSW Australia: Allen and Unwin.

Cunningham, W. V., & Villaseñor, P. (2016). Employer voices, employer demands, and implications for public skills development policy connecting the labor and education sectors. *The World Bank Research Observer, 31*(1), 102–134.

Dallinger, J. (2007a). Communication anxiety inventory. In S.P. Morreale & P.M. Backlund (Eds.), *Large scale assessment in oral communication K-12 and higher education* (pp. 67–68). Washington, DC: National Communication Association Non-Serial Publications Program.

Dallinger, J. (2007b). Personal Report of Communication Apprehension (PRCA-24). In S. P. Morreale & P. M. Backlund (Eds.), *Large scale assessment in oral communication K-12 and higher education* (pp. 97–98). Washington, DC: National Communication Association NonSerial Publications Program.

Daly, J. A., Vangelisti, A. L., & Weber, D. J. (1995). Speech anxiety affects how people prepare speeches: A protocol analysis of the preparation processes of speakers. *Communication Monographs, 62*, 383–397.

De La Mare, D. M. (2014) Using critical communication pedagogy to teach public speaking, *Communication Teacher*, *28*(3), 196–202.

Dougherty, K. (1994). *The contradictory college: The conflicting origins, impacts, and futures of the community college* (SUNY series, frontiers in education). Albany, NY: State University of New York Press.

Duggan, M. H., & Williams, M. R. (2010). Community college student success courses: The student perspective, *Community College Journal of Research and Practice*, *35*(1–2), 121–134.

Dwyer, K. K., & Davidson, M. M. (2012). Is public speaking really more feared than death? *Communication Research Reports*, *29*(2), 99–107.

Edwards, S. L., Rapee, R. M., & Franklin, J. (2003). Postevent rumination and recall bias for a social performance event in high and low socially anxious individuals. *Cognitive Therapy and Research, 27*, 603–617.

Elbaz, F. (1990). Knowledge and discourse: The evolution of research on teacher thinking. In C. Day, M. Pope, P. Denicolo (Eds*.), Insights in teachers' thinking and practice*, (pp. 15–42). London, UK: Falmer Press.

Emanuel, R. (2005). The case for fundamentals of oral communication. *Community College Journal of Research and Practice, 29,* 153–162.

Ewell, P. T. (1997a). From the states: Putting it all on the line—South Carolina's performance funding initiative. *Assessment Update, 9*(1), 9–11.

Ewell, P. T. (1997b). *Identifying indicators of curricular quality*. In G. J. Gaff, L. J. Ratcliff, & Associates (Eds.), *Handbook of the undergraduate curriculum: A comprehensive guide to purposes, structures, practices, and change*. San Francisco, CA: Jossey-Bass.

Ewell, P. T. (2002). *An emerging scholarship: A brief history of assessment*. In T. W. Banta & Associates (Eds.), *Building a scholarship of assessmen*t. San Francisco, CA: Jossey Bass.

Ewell, P. T., & Jones, D. P. (1996). *Indicators of good practice in undergraduate education. A handbook for development and implementation*. Boulder, CO: NCHEMS.

Eysenck, H.J. & Eysenck, M. W. (1985). *Personality and individual differences: A natural science approach*. New York, NY: Plenum Press.

Fielding, N. (2012). Triangulation and mixed methods designs: Data integration with new research technologies. *Journal of Mixed Methods Research, 6*(2), 124–136.

Finn, A., Sawyer, C., & Schrodt, P. (2009). Examining the effect of exposure therapy on public speaking state anxiety. *Communication Education, 58*(1), 92–109.

Flynn, W. (1999). Rethinking teaching and learning. *Community College Journal, 4*, 8–13.

Francis, T. A., & Miller, M. T. (2008). Communication apprehension: Levels of first-generation college students at 2-year institutions. *Community College Journal of Research & Practice, 32*(1), 38–55.

Freeman, T., Sawyer, C., Behnke, R. (1997). Behavioral inhibition and the attribution of public speaking state anxiety. *Communication Education*, *46*, 175–187.

Frymier, A. B., Wanzer, M. B., & Wojtaszczyk, A. M. (2008). Assessing students' perceptions of inappropriate and appropriate instructor humor. *Communication Education, 57*, 266–288.

Gallagher, James J. (2012). A Distinction between emic research and etic research. *Gifted and Talented International, 27*(1), 71–72.

Gibbs, G. (2011). *Analyzing qualitative data.* Thousand Oaks, CA: Sage Publications.

Giorgi, A. (2009). *The descriptive phenomenological method in psychology: A modified Husserlian approach*. Pittsburgh, PA: Duquesne University Press.

Grbich, C. (2012). *Qualitative data analysis*. Thousand Oaks, CA: Sage Publications.

Guba, E. G., & Lincoln, Y. S. (1989). *Fourth generation inquiry.* Newbury Park, CA: Sage Publications.

Hammersley, M., & Atkinson, P. (2007). *Ethnography: Principles in practice* (3rd ed.).   New York, NY: Routledge.

Hauser, G. (2002). *Introduction to rhetorical theory*. Prospect Heights, IL: Waveland Press.

Hays, D. G., & Singh, A. A. (2011). *Qualitative inquiry in clinical and educational settings*. New York, NY: Guilford Press.

Hazel, M., Keaten, J., & Kelly, L. (2014). The relationship between personality temperament, communication reticence, and fear of negative evaluation. *Communication Research Reports, 31*(4), 339-347.

Hepworth, M., Grunewald, P., & Walton, G. (2014). Research and practice: A critical reflection on approaches that underpin research into people's information behaviour. *Journal of Documentation, 70*(6), 1039-1053.

Hickson, M., & Stacks, D. W. (2010). Biological views of communication. *Review of Communication, 10*(4), 263–275.

Holbrook, H. T., & ERIC Clearinghouse on Reading and Communication Skills, U. L. (1987). *Communication apprehension: The quiet student in your classroom.* ERIC Digest.

Honeycutt, J. M. (2003). Imagined interactions: Daydreaming about communication. Cresskill, NJ: Hampton Press.

Honeycutt, J. M. (2010). Introduction to imagined interactions. In J. M. Honeycutt (Ed.), *Imagine that: Studies in imagined interactions* (pp. 1-14). Cresskill, NJ: Hampton.

Honeycutt, J. M., Choi, C. W., & DeBerry, R. D. (2009). Communication apprehension and imagined interactions. *Communication Research Reports, 26*, 228–236.

Honeycutt, J. M., Vickery, A. J., & Hatcher, L. C. (2015). The daily use of imagined interaction features. *Communication Monographs*, *82*(2), 201–223.

Horwitz, B. (2002). *Communication apprehension: Origins and management.* Albany, NY: Singular/Thomson Learning.

Hunter, K. M., Westwick, J. N., & Haleta, L. L. (2014). Assessing success: The impacts of a fundamentals of speech course on decreasing public speaking anxiety, *Communication Education, 63*(2), 124–135.

Kelly, L., & Keaten, J. (2000). Treating communication anxiety: Implications of the communibiological paradigm. *Communication Education*, *49*(1), 45–57.

Kemmis, S., & McTaggart, R. (2000). Participatory action research. In Denzin, N. & Lincoln, Y. (Eds.) *Handbook of qualitative research*.

Koro-Ljungberg, M. A., Mazzei, L., & Ceglowski, D. (2013). Diverse ways to fore-ground methodological insights about qualitative research. *International Journal of Research and Method in Education, 36*(2), 131–144.

Kvale, S. (2007). Doing interviews. In U. Flick (Ed.), *The Sage qualitative research kit.* Thousand Oaks, CA: Sage Publications.

Laanan, F. (2000). Community college students' career and educational goals. *New Directions for Community Colleges, 2000 (112),* 19–33.

Laanan, F. S., Jackson, D. L., & Stebleton, M. J. (2013) Learning community and nonlearning community students in a Midwestern community college. *Community College Journal of Research and Practice*, *37*(4), 247–261.

Laanan, F. S., Starobin, S. S., & Eggleston, L. E. (2011). Adjustment of community college students at a four-year university: Role and relevance of transfer student capital for student retention. *Journal of College Student Retention: Research, Theory & Practice, 12*(2), 175–209.

Lauckner, H., Paterson, M., & Krupa, T. (2012). Using constructivist case study methodology to understand community development processes: Proposed methodological questions to guide the research process. *The Qualitative Report*, *17*(25), 1–22.

Levin, J. S., & Kater, S. T. (2013). *Understanding community colleges*. New York, NY: Routledge.

Levine, T. R., & McCroskey, J. C. (1990). Measuring trait communication apprehension: A test of rival measurement models of the PRCA-24. *Communication Monographs, 57*, 62–72.

Lincoln, Y. (2001). Varieties of validity: Quality in qualitative research. In J. Smart& W. Tierney (Eds.), Higher education: Handbook of theory and research (25-72). New York, NY: Agathon Press.

Lincoln, Y., & Guba, E. G. (1985). *Naturalistic inquiry.* Beverly Hills, CA: Sage Publications.

Lincoln, Y. S., & Guba, E. G. (1990). Judging the quality of case study reports. *International Journal of Qualitative Studies in Education*, *3*(1), 53-59.

Linde, C. (1993). *Life stories: The creation of coherence*. New York, NY: Oxford University Press.

Lindlof, T. & Taylor, B. C. (2011). *Qualitative communication research methods* (3rd ed.) Thousand Oaks, CA: Sage Publications.

Lippert, L. R., Titsworth, S. B., & Hunt, S. K. (2005). The ecology of academic risk: Relationships between communication apprehension, verbal aggression, supportive communication, and students' academic risk status. *Communication Studies, 56*(1), 1–21.

Makagon, D., & Neumann, M. (2009). *Recording culture: Audio documentary and the ethnographic experience*. Los Angeles, CA: Sage Publications.

Maki, P. (2010). *Assessing for student learning: Building a sustainable commitment across the institution* (2nd ed.). Sterling, VA: Stylus.

Makki, B. I., Salleh, R., Memon, M. A., & Harun, H. (2015). The Relationship between work readiness skills, career self-efficacy and career exploration among engineering graduates: A proposed framework. *Research Journal of Applied Sciences, Engineering and Technology, 10*(9), 1007–1011.

Marshall, C., & Rossman G. B. (2016). *Designing qualitative research* (6th ed.). Thousand Oaks, CA: Sage Publications.

Maxwell, J. A. (2013). *Qualitative research design: An interactive approach*. Thousand Oaks, CA: Sage Publications.

Mazer, J. P., & Graham, E. E., (2015) Measurement in instructional communication research: A decade in review, *Communication Education, 64*(2), 208-240.

McCroskey, J. C. (1970). Measures of communication-bound anxiety. *Speech Monographs*, *37*, 269–277.

McCroskey, J. C. (1976). The problems of communication apprehension in the classroom. *The Florida Speech Communication Journal*, *4*, 1–12.

McCroskey, J. C. (1977). Oral communication apprehension: A summary of recent theory and research. *Human Communication Research, 4*, 78-96.

McCroskey, J. C. (1982). Communication competence and performance: A research and pedagogical perspective. *Communication Education, 31*(1), 1–7.

McCroskey, J. C. (1984a). *An introduction to rhetorical communication* (4th ed.). Englewood Cliffs, NJ: Prentice Hall.

McCroskey, J. C. (1984b). Self-report measurement. In J. A. Daly & J. C. McCroskey (Eds.), *Avoiding communication: Shyness, reticence, and communication apprehension* (pp. 81-94). Beverly Hills, CA: Sage Publications.

McCroskey, J. C. (1997). Willingness to communicate, communication apprehension, and self-perceived communication competence: Conceptualizations and perspectives. In Daly et al. *Avoiding communication: Shyness, reticence, & communication apprehension*, (pp. 75-108). Cresskill, NJ: Hampton Press.

McCroskey, J. C. (2007a). Communication apprehension: What have we learned in the last four decades. *Human Communication*, *12*(2), 179–187.

McCroskey, J. C. (2007b). Raising the question #8 assessment: Is it just measurement? *Communication Education, 56*, 509–514.

McCroskey, J. C. (2009). Communication apprehension: What have we learned in the last four decades. *Human Communication 12*(2), 157–171.

McCroskey, J. C. (2011). Oral communication apprehension: A reconceptualization. In M. Burgoon (Ed.), *Communication Yearbook 6.* New York: Routledge.

McCroskey, J. C. (2017). Personal Report of Public Speaking Apprehension (PRPSA) retrieved from http://www.jamescmccroskey.com/measures/prpsa.htm.

McCroskey, J., & Beatty, M. (1998). Communication apprehension. In McCroskey, J., Daly, J., Martin, M., & Beatty, M. (Eds.). *Communication and personality: Trait perspective* (pp. 215–231). Cresskill, NJ: Hampton Press.

McCroskey, J. C., & Richmond, V. P. (1982). Communication apprehension and shyness: Conceptual and operational distinctions. *The Central States Speech Journal, 33*, 458–468.

McCroskey, J., Booth-Butterfield, S., Payne, S. (1989). The impact of communication apprehension on college student retention and success. *Communication Quarterly*, *37*(2), 100–107.

McCroskey, J., Heisel, A., & Richmond, V. (2001). Eysenck's BIG THREE and communication traits: Three correlational studies. *Communication Monographs*, *68*(4), 360-366.

McCroskey, J. C., Richmond, V. P., & McCroskey, L. L. (2009). Willingness to communicate, communication apprehension, self-perceived communication competence, and compulsive communication: Conceptualizations and perspectives. In J. Ayres, T. Hopf, J. C. McCroskey, J. A. Daly, D. M. Sonandre & T. K. Wongprasert (Eds.), *Avoiding communication: Shyness, reticence, and communication apprehension 3rd ed.* (pp. 97–129). Cresskill, NJ: Hampton.

McCroskey, L., Richmond, V., McCroskey, J. (2002). The scholarship of teaching and learning: Contributions from the discipline of communication. *Communication Education*, *5*(4), 383–391.

McCroskey, J. C, Beatty, M. J., Kearney, P., & Plax, T. G. (1985). The content validity of the PRCA-24 as a measure of communication apprehension across communication contexts. *Communication Quarterly, 33*(3), 165–173.

McCroskey, L. L., Teven, J. J., Minielli, M. C., & Richmond McCroskey, V. P. (2014). James C. McCroskey's instructional communication legacy: Collaborations, mentorships, teachers, and students, *Communication Education*, *63*(4), 283–307.

Meichenbaum, D. (1977). *Cognitive behavior modification.* New York: Plenum.

Merriam, S., & Tisdell, E. J. (2016). *Qualitative research: A guide to design and implementation* (4th ed.). San Francisco, CA: Jossey-Bass.

Miles, D. W., Huberman, A. M., & Saldaña, J. (2014). *Qualitative data analysis: A methods sourcebook.* (3rd ed.). Thousand Oaks, CA: Sage Publications.

Mills, J., Bonner, A., & Francis, K. (2006). Adopting a constructivist approach to grounded theory: Implications for research design. *International Journal of Nursing Practice*, *12*(1), 8-13.

Morreale, S., Backlund, P., Hay, E., & Moore, M. (2011). Assessment of oral communication: A major review of the historical development and trends in the movement from 1975 to 2009. *Communication Education, 60*, 255–278.

Morreale, S. P., Worley, D. W., & Hugenberg, H. (2010). The basic communication course at two and four-year U.S. colleges and universities: Study VIII—The 40th anniversary. *Communication Education, 59*, 405–430.

Motley, M. T. (1997). *Overcoming your fear of public speaking*. Boston, MA: Houghton Mifflin.

Motley, M. T., & Molloy, J. L. (1994). An efficacy test of a new therapy (''Communication-Orientation Motivation'') for public speaking anxiety. *Journal of Applied Communication Research*, *22*, 48–58.

Nagel, J. (1994). Constructing ethnicity: Creating and recreating ethnic identity and culture. *Social Problems, 41*, 152–176.

Nelson, C. (2004). The brave new world of research surveillance. *Qualitative Inquiry*, *10*(2), 207–218.

North, M. M., Hill, J., Aikhuele, A. S., & North, S. M. (2008). Virtual reality training in aid of communication apprehension in classroom environments. *International Journal of Emerging Technologies in Learning, 3*(2), 34–37.

Palomba, C. A., & Banta, T. W. (1999). *Assessment essentials: Planning, implementing, and improving assessment in higher education*. San Francisco, CA: Jossey-Bass.

Patton, M. Q. (2015). *Qualitative research & evaluation methods* (4th ed.). Thousand Oaks, CA: Sage.

Paul, G. (1966). *Insight versus desensitization in psychotherapy: An experiment in anxiety reduction*. Palo Alto, CA: Stanford University Press.

Payton, K. E., & Scott, J. A. (2013). Communication apprehension among homeschooled college freshmen. *Focus on Colleges, Universities, and Schools*, *7*(1).

Phillips, D., & Burbules, N. C. (2000). Postpositivism and educational research: Philosophy, theory, and *educational research*. Lanham, Md.: Rowman & Littlefield.

Plummer, K. (1983). *Documents of life: An introduction to the problems and literature of a humanistic method*. NSW, Australia: Allen & Unwin.

Punch, K. (2006). *Introduction to social research: Quantitative & qualitative approaches.* London, England: Sage.

Rattine-Flaherty, E. (2014). Participatory sketching as a tool to address student's public speaking anxiety, *Communication Teacher, 28*(1), 26–31.

Richards, A., & Sillars, A. (2014). Imagined Interactions as Predictors of Secret Revelation and Health. *Communication Research, 41*(2), 236–256.

Richmond, V. P., Wrench, J. S., & McCroskey, J. C. (2013). *Communication apprehension, avoidance, and effectiveness*. Upper Saddle River, NJ: Pearson Education, Inc.

Rolfe, G. (2006). Validity, trustworthiness and rigour: Quality and the idea of qualitative research. *Journal of Advanced Nursing, 53*(3), 304–310.

Rosenblatt, P. C., & Meyer, C. (1986). Imagined interactions and the family. *Family Relations*, 319-324.

Russ, T. L., (2013) The influence of communication apprehension on superiors' propensity for and practice of participative decision making, *Communication Quarterly, 61*(3), 335–348.

Saldaña, J. (2009). *The coding manual for qualitative researchers.* Los Angeles, CA: Sage Publications.

Sarantakos, S. (2005). *Social Research*, (3rd ed). Hampshire: Palgrave Macmillan.

Sawyer, C. R., & Behnke, R. R. (2009). *Communication state anxiety.* In Daly, J. A., McCroskey, J. C., Ayres, J., Hopf, T., Ayres-Sonandre, D. M., & Wongprasert, T. K., (Eds.). *Avoiding communication: Shyness, reticence, and communication apprehension.* (3rd ed., 85–96). Cresskill, NJ: Hampton Press.

Seidman, I. (2013). *Interviewing as qualitative research: A guide for researchers in education and the social sciences*. New York, NY: Teachers College Press.

Shahar, B., Carlin, E. R., Engle, D. E., Hegde, J., Szepsenwol, O., & Arkowitz, H. (2012). A pilot investigation of emotion-focused two-chair dialogue intervention for self-criticism. *Clinical Psychology and Psychotherapy, 6*, 496–507.

Shepherd, R-M., & Edelmann, R. J. (2007). Social phobia and the self-medication hypothesis: A case study approach. *Counseling Psychology Quarterly, 20*, 295–307.

Shi, X., Brinthaupt, T. M., & McCree, M., (2015). The relationship of self-talk frequency to communication apprehension and public speaking anxiety. *Personality and Individuals Differences, 75*, 125–129.

Sieber, J. E. & Tolich, M. (2013). *Planning ethically responsible research.* Thousand Oaks, CA: Sage Publications.

Smith, J. A. (2004). Reflecting on the development of interpretative phenomenological analysis and its contribution to qualitative research in psychology. *Qualitative Research in Psychology, 1*, 39–54.

Spielberger, C. D., Gorsuch, R. L., Lushene, R., Vagg, P. R., & Jacobs, G. A. (1983). *State-trait anxiety inventory*. Redwood City, CA: Mindgarden.

Stanley, M., & Nayar, S. (2014). Methodological rigour: Ensuring quality in occupational therapy qualitative research. *New Zealand Journal of Occupational Therapy, 61*(1), 6-12.

Strauss, L. C., & Volkwein, J. F. (2004). Predictors of student commitment at two-year and four-year institutions. *The Journal of Higher Education, 75*(2), 203–227.

Suskie, L. (2004). *Assessing student learning: A common sense guide*. Bolton, MA: Anker.

Taylor, S., Bogdan, R., & DeVault, M. L. (2016). *Introduction to qualitative research methods: A guidebook and resource* (4th ed.). Hoboken, NJ: Wiley.

Turner, D. W., III (2010). Qualitative interview design: A practical guide for novice investigators. *The Qualitative Report, 15*(3), 754–760.

Tennessee Board of Regents. (2017). *Academic Programs*. Retrieved from https://www.tbr.edu/academics/programs.

Valenzano, J. M., III, Wallace, S. P., & Morreale, S. P. (2014). Consistency and change: The (r)evolution of the basic communication course, *Communication Education, 63*(4), 355–365.

Verderber, R. F., Verderber, K. S., & Sellnow, D. D. (2016). *COMM4*. Boston, MA: Cengage Learning.

Waldeck, J. H., Kearney, P., & Plax, T. G. (2001). Instructional and developmental communication theory and research in the 1990s: Extending the agenda for the 21st century. In W. B. Gudykunst (Ed.), *Communication Yearbook*, (24), 207–229, Thousand Oaks,CA: Sage Publications.

Webster, L., & Mertova, P. (2007). *Using narrative inquiry as a research method: An introduction to using critical event narrative analysis in research on learning and teaching*. New York, NY: Routledge.

Wehlburg, C. M. (2010). Integrated general education: A brief look back. *New Directions for Teaching and Learning*, *(121)*, 3–11.

Wiersma, W. (2000). *Research methods in education: An introduction.* Boston, MA: Allyn and Bacon.

Wolcott, H. T. (2009). *Writing up qualitative research.* Thousand Oaks, CA: Sage Publications.

Wrench, J., Brogan, S., McCroskey, J., & Jowi, D. (2008). Social communication apprehension: The intersection of communication apprehension and social phobia. *Human Communication*, *11*(4), 409–430.

Zhang, Y., & Widemuth, B. M. (2009). *Applications of social research methods to questions in information and library.* Westport, Connecticut: Libraries Unlimited.

APPENDICES

APPENDIX A

Informed Consent

Title of Research Study: THE PHENOMENON OF COMMUNICATION APPREHENSION AMONG TENNESSEE COMMUNITY COLLEGE STUDENTS
Principal Investigator: JOHNNY BRAGG

Principal Investigator's Contact Information: 423.557.5854 | johnnybragg@gmail.com
Organization of Principal Investigator: East Tennessee State University

PRPSA INFORMED CONSENT

This Informed Consent will explain about being a participant in a research study. It is important that you read this material carefully and then decide if you wish to voluntarily participate.

Are you 18 years of age or older? [   ] YES   [   ] NO

If you are under age 18, you may not participate in the study. However, you may still take the questionnaire, although your data will not be included in the study.

A. **Purpose**: The purpose of this research study is to explore the feelings of anxiety individuals feel when speaking in public and the similar feelings of fear or anxiety students feel in a community college classroom. The first phase involves the PERSONAL REPORT OF PUBLIC SPEAKING ANXIETY (PRPSA), which includes 34 questions about how you feel about speaking in public.

B. **Duration**: The PRPSA requires less than 10 minutes of participation.

C. **Procedures**: The procedures, which as a participant in this research will involve you, include answering a 34-question questionnaire about feelings associated with speaking in public. The PRPSA will determine your personal level of communication apprehension, and if you score higher than a 131 you may be contacted by the researcher for an additional phase of research.

D. **Alternative Procedures/Treatments**: There are no alternative procedures available to you if you elect <u>not</u> to participate in this research study.

E. **Possible Risks/Discomforts**: There are no known possible risks and/or discomforts from your participation in the PRPSA questionnaire.

F. **Possible Benefits**: The possible benefits of your participation in this research study are furthering the understanding of public speaking fear for community college students, and participating in researcher which adds to educational research knowledge. There are no personal benefits to you for participating other than learning your personal score on the PRPSA

G. **Compensation in the Form of Payments to Participant**: Participation is voluntary and participants will receive no compensation.

H. **Voluntary Participation**: Your participation in this research experiment is voluntary. ***You may choose <u>not</u> to participate***. If you decide to participate in this research study you can change your mind and quit at any time. If you choose not to participate, or change your mind and quit, the benefits or treatment to which you are otherwise entitled will not be affected. Your grade in this course will not be affected. If you chose not to take the questionnaire you may chose an alternate activity to do

Ver. 05/16/16   Page 1 of 3   Participant Initials _____

Title of Research Study: THE PHENOMENON OF COMMUNICATION APPREHENSION AMONG TENNESSEE COMMUNITY COLLEGE STUDENTS
Principal Investigator: JOHNNY BRAGG

at your desk for the 10 minute time period. If you do not wish to draw attention to yourself for not participating, you may turn in a blank form when the questionnaires are collected.

I. **Contact for Questions**: If you have any questions, problems or research-related medical problems at any time, you may call JOHNNY BRAGG, whose phone number is 423.557.5854 or 423.354.5163, or BETHANY FLORA, whose phone number is 423.439.4430. You may also call the Chairperson of the ETSU Institutional Review Board at 423.439.6054 for any questions you may have about your rights as a research participant. If you have any questions or concerns about the research and want to talk to someone independent of the research team or you can't reach the study staff, you may call an IRB Coordinator at 423.439.6055 or 423.439.6002.

J. **Confidentiality**: Every attempt will be made to see that your study results are kept confidential. A copy of the records from this study will be stored in JOHNNY BRAGG'S PRIVATE GOOGLE DRIVE ACCOUNT for at least 6 years after the end of this research. The results of this study may be published and/or presented at meetings without naming you as a participant. Although your rights and privacy will be maintained, the ETSU IRB, and JOHNNY BRAGG and his research team have access to the study records.

By participating in the PRPSA questionnaire, I confirm that I have read and understand this Informed Consent Document and that I had the opportunity to have them explained to me verbally. I confirm that I have had the opportunity to ask questions and that all my questions have been answered. By participating in the PRPSA, I confirm that I freely and voluntarily choose to take part in this research study.

_____   _____
Name of Participant   Date

_____
Primary Email of Participant

_____
Primary Phone of Participant

If you score above a 131 on the PRPSA you may be contacted by the researcher via email. Your phone number above serves only as a backup contact in the event that the researcher needs to verify your email address.

Title of Research Study: THE PHENOMENON OF COMMUNICATION APPREHENSION AMONG TENNESSEE COMMUNITY COLLEGE STUDENTS
Principal Investigator: JOHNNY BRAGG

Personal Report of Public Speaking Anxiety (PRPSA)

McCroskey, J. C. (1970) . Measures of communication-bound anxiety. *Speech Monographs, 37,* 269-277.

Directions: Below are 34 statements that people sometimes make about themselves. Please indicate whether or not you believe each statement applies to you by marking whether you:

Strongly Disagree = 1; Disagree = 2; Neutral = 3; Agree = 4; Strongly Agree = 5.

_____1. While preparing for giving a speech, I feel tense and nervous.
_____2. I feel tense when I see the words "speech" and "public speech" on a course outline when studying.
_____3. My thoughts become confused and jumbled when I am giving a speech.
_____4. Right after giving a speech I feel that I have had a pleasant experience.
_____5. I get anxious when I think about a speech coming up.
_____6. I have no fear of giving a speech.
_____7. Although I am nervous just before starting a speech, I soon settle down after starting and feel calm and comfortable.
_____8. I look forward to giving a speech.
_____9. When the instructor announces a speaking assignment in class, I can feel myself getting tense.
_____10. My hands tremble when I am giving a speech.
_____11. I feel relaxed while giving a speech.
_____12. I enjoy preparing for a speech.
_____13. I am in constant fear of forgetting what I prepared to say.
_____14. I get anxious if someone asks me something about my topic that I don't know.
_____15. I face the prospect of giving a speech with confidence.
_____16. I feel that I am in complete possession of myself while giving a speech.
_____17. My mind is clear when giving a speech.
_____18. I do not dread giving a speech.
_____19. I perspire just before starting a speech.
_____20. My heart beats very fast just as I start a speech.
_____21. I experience considerable anxiety while sitting in the room just before my speech starts.
_____22. Certain parts of my body feel very tense and rigid while giving a speech.
_____23. Realizing that only a little time remains in a speech makes me very tense and anxious.
_____24. While giving a speech, I know I can control my feelings of tension and stress.
_____25. I breathe faster just before starting a speech.
_____26. I feel comfortable and relaxed in the hour or so just before giving a speech.
_____27. I do poorer on speeches because I am anxious.
_____28. I feel anxious when the teacher announces the date of a speaking assignment.
_____29. When I make a mistake while giving a speech, I find it hard to concentrate on the parts that follow.
_____30. During an important speech I experience a feeling of helplessness building up inside me.
_____31. I have trouble falling asleep the night before a speech.
_____32.My heart beats very fast while I present a speech.
_____33. I feel anxious while waiting to give my speech.
_____34. While giving a speech, I get so nervous I forget facts I really know.

Scoring: To determine your score on the PRPSA, complete the following steps:
Step 1. Add scores for items 1, 2, 3, 5, 9, 10, 13, 14, 19, 20, 21, 22, 23, 25, 27, 28, 29, 30, 31, 32, 33, and 34
Step 2. Add the scores for items 4, 6, 7, 8, 11, 12, 15, 16, 17, 18, 24, and 26
Step 3. Complete the following formula:
PRPSA = 72 - Total from Step 2 + Total from Step 1

Your score should be between 34 and 170. If your score is below 34 or above 170, you have made a mistake in computing the score. **High** = > 131 | **Low** = < 98 | **Moderate** = 98-131 | **Mean** = 114.6; **SD** = 17.2

APPENDIX B

Institutional Review Board Approval Letter

EAST TENNESSEE STATE
U N I V E R S I T Y

Office for the Protection of Human Research Subjects • Box 70565 • Johnson City, Tennessee 37614-1707
Phone: (423) 439-6053 Fax: (423) 439-6060

IRB APPROVAL – Initial Expedited Review

July 22, 2016

John Bragg

Re: The Phenomenon of Communication Apprehension Among Tennessee Community College Students
IRB#: c0516.18d
ORSPA #:

The following items were reviewed and approved by an expedited process:
- New protocol submission xForm, References, PI CV, Informed consent, Email script, PRPSA informed consent, Interview protocol

The following revisions were received and approved as part of the requested changes:
- Requested changes xForm, Northeast State Community College IRB letter, sample size change

On **July 12, 2016**, a final approval was granted for a period not to exceed 12 months and will expire on **July 11, 2017**. The expedited approval of the study *and* requested changes will be reported to the convened board on the next agenda.

The following **enclosed stamped, approved Informed Consent Documents** have been stamped with the approval and expiration date and these documents must be copied and provided to each participant prior to participant enrollment:
- Informed Consent Document (Informed consent (version 5/16/16 stamped approved 7/12/16)
- PRPSA consent (version 5/16/16 stamped approved 7/12/16)
- Email script (version 5/16/16 stamped approved 7/12/16)

The ETSU IRB Chair granted a waiver of the requirement for written documentation under category 45 CFR 46.117 (C)(2). The IRB Chair determined that the research does not involve more than minimal risk to the participants as study involves a survey with benign questions. The research does not involve any procedures for which written consent is normally required outside of the research context as written consent is not normally required to complete a survey.

Accredited Since December 2005

Projects involving Mountain States Health Alliance must also be approved by MSHA following IRB approval prior to initiating the study.

Unanticipated Problems Involving Risks to Subjects or Others must be reported to the IRB (and VA R&D if applicable) within 10 working days.

Proposed changes in approved research cannot be initiated without IRB review and approval. The only exception to this rule is that a change can be made prior to IRB approval when necessary to eliminate apparent immediate hazards to the research subjects [21 CFR 56.108 (a)(4)]. In such a case, the IRB must be promptly informed of the change following its implementation (within 10 working days) on Form 109 (www.etsu.edu/irb). The IRB will review the change to determine that it is consistent with ensuring the subject's continued welfare.

Sincerely,
Stacey Williams, Chair
ETSU Campus IRB

cc: Bethany H Flora, Ph.D.

Personal Report of Public Speaking Apprehension (PRPSA) by McCroskey (2017)

Personal Report of Public Speaking Anxiety (PRPSA)

Directions: Below are 34 statements that people sometimes make about themselves. Please indicate whether or not you believe each statement applies to you by marking whether you:

Strongly Disagree = 1   Disagree = 2   Neutral = 3   Agree = 4   Strongly Agree = 5

_____ 1. While preparing for giving a speech, I feel tense and nervous.

_____ 2. I feel tense when I see the words "speech" and "public speech" on a course outline when studying.

_____ 3. My thoughts become confused and jumbled when I am giving a speech.

_____ 4. Right after giving a speech I feel that I have had a pleasant experience.

_____ 5. I get anxious when I think about a speech coming up.

_____ 6. I have no fear of giving a speech.

_____ 7. Although I am nervous just before starting a speech, I soon settle down after starting and feel calm and comfortable.

_____ 8. I look forward to giving a speech.

_____ 9. When the instructor announces a speaking assignment in class, I can feel myself getting tense.

_____ 10. My hands tremble when I am giving a speech.

_____ 11. I feel relaxed while giving a speech.

_____ 12. I enjoy preparing for a speech.

_____ 13. I am in constant fear of forgetting what I prepared to say.

_____ 14. I get anxious if someone asks me something about my topic that I don't know.

_____ 15. I face the prospect of giving a speech with confidence.

_____ 16. I feel that I am in complete possession of myself while giving a speech.

_____ 17. My mind is clear when giving a speech.

_____ 18. I do not dread giving a speech.

_____ 19. I perspire just before starting a speech.

_____ 20. My heart beats very fast just as I start a speech.

_____ 21. I experience considerable anxiety while sitting in the room just before my speech starts.

_____ 22. Certain parts of my body feel very tense and rigid while giving a speech.

_____ 23. Realizing that only a little time remains in a speech makes me very tense and anxious.

_____ 24. While giving a speech, I know I can control my feelings of tension and stress.

_____ 25. I breathe faster just before starting a speech.

_____ 26. I feel comfortable and relaxed in the hour or so just before giving a speech.

_____ 27. I do poorer on speeches because I am anxious.

_____ 28. I feel anxious when the teacher announces the date of a speaking assignment.

_____ 29. When I make a mistake while giving a speech, I find it hard to concentrate on the parts that follow.

_____ 30. During an important speech I experience a feeling of helplessness building up inside me.

_____ 31. I have trouble falling asleep the night before a speech.

_____ 32. My heart beats very fast while I present a speech.

_____ 33. I feel anxious while waiting to give my speech.

_____ 34. While giving a speech, I get so nervous I forget facts I really know.

APPENDIX D

Email Script for Phase II

Title of Research Study: THE PHENOMENON OF COMMUNICATION APPREHENSION AMONG
COMMUNITY COLLEGE STUDENTS
Principal Investigator: JOHNNY BRAGG

Principal Investigator's Contact Information: 423.557.5854 | johnnybragg@gmail.com
Organization of Principal Investigator: East Tennessee State University

<u>EMAIL SCRIPT</u>

Dear (Participant Name),

Recently, you completed the PRPSA questionnaire in your communication course. You scored (X) on the
questionnaire, indicating that you have a high level of anxiety about speaking in public. This is normal, and
as many as 25% of college students have similar levels of anxiety.

Would you be willing to participate further in the study?

This will include 2-3 interview sessions where we will discuss your experience with feelings associated with
public speaking. Interviews will be conversational, and will be audio recorded. You will also be asked to
keep a journal between interview one and two. Interviews will be conducted in the same classroom as your
communication course, during non-class hours, and during regular school business hours.

Participation is voluntary, and there is no consequence to not participating. You may quit at any time
without consequence. This is not a graded assignment, and there is no personal benefit to you as a
participant.

Participation is confidential. You will be assigned a pseudonym and your name will not be included with any
of the study findings. Your communication instructor will not be informed of your participation.

If you are willing to participate, the next step is a brief meeting to discuss the study, inform you of the study
process, and answer any questions you may have. A full informed consent form will be presented to you at
this meeting. This consent information follows in this email.

Following the initial meeting, you will have several days to consider participating. Again, there is no
pressure and no consequence to you if you choose not to participated.

Thank you for considering participating in this research study.

Johnny Bragg
Doctoral Student, East Tennessee State University
Below is a copy of the informed consent which you will be given in the introductory meeting

A. **Purpose:** The purpose of this research study is to explore the feelings of anxiety individuals feel when speaking in public and the similar feelings of fear or anxiety students feel in a community college classroom.

B. **Duration:** This study will involve approximately one month of participation. During this month, participants will meet with the researchers 2-3 times for approximately 45 minutes per interview session. Participants will also be asked to journal their thoughts on the topics discussed in the interviews. Additional participation will be limited to a nominal number of phone calls and/or emails. These contacts will be limited to clarification on interview responses and assisting the researcher with understanding the theme or tone of journal entries. Following the interview transcription process, participants will be given a copy of their personal transcriptions as a level of verification in transcription accuracy.

C. **Procedures:** The procedures, which as a participant in this research will involve you, include sharing your feelings verbally and in writing about speaking in public. During interview sessions and in the written journal, you will be asked to explore the experience of participating in a public speaking course. Interviews will be loosely structured and conversational, and you will share your story about how it feels to communicate with others. Interviews will be audio recorded and transcribed. The interview transcriptions and journals will be analyzed for common themes and compared with the responses from other study participants for commonalities.

D. **Alternative Procedures/Treatments:** There are no alternative procedures available to you if you elect not to participate in this research study.

E. **Possible Risks/Discomforts:** There are no known possible discomforts from your participation in this research study. Although you will be assigned a pseudonym to protect your identity, there is a risk of loss of confidentiality in the event that individuals not associated with the study gain access to the master list of names and pseudonyms.

F. **Possible Benefits:** The possible benefits of your participation in this research study are furthering the understanding of public speaking fear for community college students, and participating in researcher which adds to educational research knowledge. There are no personal benefits to you as a study participant.

G. **Compensation in the Form of Payments to Participant:** Participation is voluntary and participants will receive no compensation.

H. **Voluntary Participation:** Your participation in this research experiment is voluntary. ***You may choose not to participate.*** If you decide to participate in this research study you can change your mind and quit at any time. If you choose not to participate, or change your mind and quit, the benefits or treatment to which you are otherwise entitled will not be affected. If you choose to quite the study, your grade in your communication course will not be affected. You may quit by calling JOHNNY BRAGG, whose phone number is 423.557.5854 or 423.354.5163. You will be told immediately if any of the results of the study should reasonably be expected to make you change your mind about continuing to participate.

I. **Contact for Questions:** If you have any questions, problems or research-related medical problems at any time, you may call JOHNNY BRAGG, whose phone number is 423.557.5854 or 423.354.5163, or BETHANY FLORA, whose phone number is 423.439.4430. You may also call the Chairperson of the ETSU Institutional Review Board at 423.439.6054 for any questions you may have about your rights as a research participant. If you have any questions or concerns about the research and want to talk to someone independent of the research team or you can't reach the study staff, you may call an IRB Coordinator at 423.439.6055 or 423.439.6002.

J. **Confidentiality:** Every attempt will be made to see that your study results are kept confidential. A copy of the records from this study will be stored in JOHNNY BRAGG'S PRIVATE GOOGLE DRIVE ACCOUNT for at least 5 years after the end of this research. Following transcription, all audio recordings will be deleted. The results of this study may be published and/or presented at meetings without naming you as a participant. Although your rights and privacy will be maintained, the ETSU IRB, and JOHNNY BRAGG and his research team have access to the study records.

APPENDIX E

Interview Protocol

Research Questions
1. How do community college students describe the physical and emotional experience of communication apprehension? RQ1
2. How do community college students describe communication apprehension in real interactions? RQ2
3. How do community college students describe communication apprehension in imagined interactions? RQ3
4. How has communication apprehension affected individual decision-making in curricular and co-curricular community college activities? RQ4
5. During curricular and co-curricular community college activities, what techniques have individuals used to mitigate the effects of communication apprehension? RQ5

Question Types: PQ   Personal & background questions
                    EQ   Experience & behavior questions
                    OQ   Opinion questions
                    SQ   Sensory questions
                    BQ   Belief questions
                    (Patton, 2015)

Setting: Will be a classroom familiar to the student, free of distraction, will have exterior windows, and a windows on the door to the public hallway (Chenail, 2009; Turner, 2010).

Pre-interview Section
1. Welcome and thank participant.
2. Explain purpose of the interview.
3. Collect informed consent form from Phase II and address confidentiality and consequences for stopping at any time.
4. Explain the format of the interview.
5. Indicate the time commitment and how long interview will last.
6. Explain how to contact me.
7. Ask if participant has any questions or concerns.
(Creswell, 2014; Patton, 2015; Turner, 2010)

Phase III interview begins & recording device is implemented.

Background Section
1. Tell me about yourself.
2. Where did you grow up?
3. How long have you been at this community college?
4. Did anyone else in your family go to college?
5. What is your major?

6. What are your career goals?
7. How has your experience been so far at the community college?

Sensitizing Section
1. Explain CA and give examples.
2. Explain my experience with CA as an individual and as a communication professor.
3. Re-highlight the PRPSA and that the student is high CA (this was covered initially in Phase II).

Interview
1. A few moments ago, when I was talking about CA, did you have any immediate thoughts on your experience with CA? BQ, RQ1
2. *(Give brief overview of real scenarios).* What types of real situations do you believe give you moments of high CA? BQ, EQ, RQ1, RQ2
3. In these real situations, if you are feeling your high CA, what do you do to help or assist yourself? EQ, RQ5
4. *(Give brief overview of imagined interactions).* Can you describe your experience with CA in imagined interactions? SQ, BQ, RQ1, RQ3
5. In these imagined situations, if you are feeling CA, what do you do to help or assist yourself? EQ, RQ5
6. Why did you choose community college? Did your CA have any influence on your decision? PQ, EQ, RQ1, RQ4
7. So far at this institution, how has your interaction with other students been? Does your CA have any effect on your interaction with other students? EQ, RQ2, RQ4
8. How do you feel when you are meeting or interacting new students…classmates that may be new to you…or as you make friends on campus? EQ, RQ1, RQ2
9. In other areas on campus, outside the classroom...such as interacting with Admissions, the Financial Aid office, Subway, or any of the campus staff, are you nervous? In other words, do you believe your CA affects your daily college activities? BQ, RQ 2, RQ4
10. If you feel anxiety in a social interaction, what have you done to feel better? EQ, RQ5
11. Let's talk about the classroom. Can you describe your experience with CA in day-to-day classroom situations such as lecture or classroom discussion? BQ, RQ2, RQ4
12. When you began to think about your career choice and choosing a major, do you believe your CA affected this choice? PQ, RQ4
13. In thinking about your day-to-day life at this college, do you believe your CA has affected your choices in choosing your courses? EQ, RQ4
14. Do you feel that CA has affected your choices in which professors you chose for your classes? EQ, RQ4
15. Do you ever experience anxiety in the classroom? What makes you feel CA, and what do you do when you feel it? EQ, RQ2, RQ5
16. Have you interacted with your professors outside the classroom? Is your CA experience different when you interact with professors outside the classroom? EQ, RQ2, RQ4
17. *(Use illustrative example).* How do you believe your CA affects you in the classroom during day-to-day activities like lecture and classroom discussion? BQ, RQ4
18. *(Transition to talking about participant's introductory communication course).* How did you become involved in this introductory communication course? PQ, RQ4

19. Have you given any public speeches before this course? PQ, RQ1
20. What previous experience have you had with public speaking or class presentations? PQ, RQ1, RQ2
21. If I followed you when you prepare for a speech…the night before or morning of, whenever you are preparing…what would I see? EQ, RQ1
22. On the day before a speech, can you describe the physical experience of high CA? SQ, RQ3
23. On the day before a speech, can you describe the emotional experience of high CA? SQ, RQ3
24. On the day before a speech, what do you do if you feel anxiety…to help yourself feel better? EQ, RQ5
25. On the day of your speech, in the hours leading up to your speech, can you describe your CA? SQ, RQ1
26. When you are in the classroom, and speeches begin…can you describe the physical experience? SQ, RQ2
27. In these same moments, before it is your turn to speak…can you describe the emotional experience? SQ, RQ2
28. What do you do in the moments before you speak? Do you do anything to help yourself feel better? EQ, RQ5
29. OK, let's talk about your speeches during this semester's course. Can you describe the experience of CA while you are actually speaking? SQ, RQ1, RQ2
30. During your speech(es), what do you do to help yourself feel better if you are feeling anxiety? EQ, RQ 2, RQ5
31. One aspect of public speaking is that when you are giving a speech, but you are also receiving feedback from your audience. During your speech, how do you describe your perception of audience feedback? *(Use illustrative extremes example.)* BQ, RQ3
32. In the moments or hours following a speech, can you describe what goes on in your mind when you think back through your speech experience? BQ, RQ3
33. What do you believe would be good advice for a high CA freshman beginning their community college experience? OQ, RQ4
34. Is there enough support for high CA students at this institution? OQ, RQ4
35. What would you like to see happen at this institution to assist high CA students? OQ, RQ4

Post-Interview
1. Encourage participant on their responses.
2. Ask if participant has any questions.
3. Present personal diary instructions.
4. Discuss next interview.
5. Thank participant.

APPENDIX F

Directions for Participatory Action Research (PAR) Personal Diary

Title of Research Study: THE PHENOMENON OF COMMUNICATION APPREHENSION AMONG
COMMUNITY COLLEGE STUDENTS
Principal Investigator: JOHNNY BRAGG

Principal Investigator's Contact Information: 423.557.5854 | johnnybragg@gmail.com
Organization of Principal Investigator: East Tennessee State University

DIRECTIONS FOR PERSONAL DIARY

Over the coming week, and before our next interview, I want to ask you to reflect on our conversation about your experience with communication apprehension (CA).

Our conversation may bring things to mind about your CA experience. The diary is an opportunity for you document any feelings or experiences which our interview may have brought to mind. As you go through the coming days, you may consider documenting how you feel in specific situations, and write down your day-to-day experiences with CA. Your direction is completely up to you. You may want to write about your on-campus or off-campus life.

There is no one right way to create a personal diary. How you proceed is your decision. Please do not worry about formatting or appearance, I am only interested in hearing your story. You may choose to hand-write the diary, or you may type, however you feel most comfortable.

Please bring your diary to our next interview. Your diary will be completely confidential, and no one will read your words connected to your name. As we discussed, you will be assigned a pseudonym, and in my final paper your words will be connected only with your assigned pseudonym.

If you have any questions or concerns, please feel free to email or call.

VITA

JOHNNY BRAGG

Education	Ed.D. Educational Leadership East Tennessee State University, Johnson City, TN 2017
	MA Professional Communication 2006 East Tennessee State University, Johnson City, TN 2006
	BA Speech Communication East Tennessee State University, Johnson City, TN 1998
Professional Experience	Assistant Professor of Communication Northeast State Community College 2009-current
Presentations	International Congress of Qualitative Inquiry 2017
	Northeast State Phi Theta Kappa Honors Conference 2015
	Hiwassee Innovations Educational Conference 2014
Honors	Graduate Assistantship 2004-2005
	ETSU Outstanding Student Research 1998
	ETSU Speech Communication Association President 1997