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Speech Disturbances and Gaze Behavior During Public Speaking in Subtypes of Social Phobia

STEFAN G. HOFMANN, PH.D., ALEXANDER L. GERLACH, DIPL.-PSYCH.,
AMY WENDER, B.A., AND WALTON T. ROTH, M.D.

Stanford University School of Medicine and VA Palo Alto Health Care System

Abstract — Twenty-four social phobics with public speaking anxiety and 25 nonphobic individuals (controls) gave a speech in front of two people. Subjective anxiety, gaze behavior, and speech disturbances were assessed. Based on subjects' fear ratings of social situations, phobics and controls were divided into the generalized and nongeneralized subtype. Results showed that generalized phobics reported the most, and nongeneralized controls the least anxiety during public speaking. All subjects had longer and more frequent eye contact when delivering a speech than when talking with an experimenter or sitting in front of an audience. Phobics showed more filled pauses, had longer silent pauses, paused more frequently, and spent more time pausing than controls when giving a speech. Generalized phobics spent more time pausing during their speech than the other subgroups (nongeneralized controls, generalized controls, and nongeneralized phobics). These results suggest that generalized phobics tended to shift attentional resources from speech production to other cognitive tasks. © 1997 Elsevier Science Ltd

Since the publication of the third edition of the *Diagnostic and Statistical Manual of Mental Disorders (DSM-III-R, American Psychological Association, 1987; DSM-IV American Psychological Association, 1994)* the clinician can specify a generalized subtype of social phobia if the social fears are present in most social situations. The residual subtype consisting of individuals who do not fear most social situations is often labeled as "nongeneralized" (see

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Requests for reprints should be sent to Stefan G. Hofmann, Ph.D., Center for Anxiety and Related Disorders at Boston University, 648 Beacon Street, 6th Floor, Boston, MA 02215-2002; E-mail: shofmann@bu.edu.

Heimberg, Holt, Schneier, Spitzer, & Liebowitz, 1993, for a more detailed discussion on the diagnosis of social phobia subtypes).

There is a growing body of evidence pertaining to the diagnostic validity of social phobia subtypes. Differences between subtypes have been found in self-report measures (Herbert, Hope, & Bellack, 1992; Hofmann & Roth, 1996; Holt, Heimberg, & Hope, 1992; Turner, Beidel, & Townsley, 1992), age and mode of onset (Mannuzza et al., 1995; Stemberger, Turner, Beidel, & Calhoun, 1995), psychophysiological response during exposure (Heimberg, Hope, Dodge, & Becker, 1990; Hofmann, Newman, Ehlers, & Roth, 1995; Levin et al., 1995), and degree of cognitive interference during a modified Stroop color-naming test (McNeil, Ries, Taylor, et al., 1995). In summary, the data suggest that the generalized subtype diagnosis applies to the more severe cases of social phobia.

The present study is the first to examine social phobia subtype differences in speech disturbances and gaze behavior during public speaking. Speech disturbances and eye fixation in social situations are quasi-automatic or involuntary and thus may reveal feelings that are denied or incompletely expressed by subjective report. Gaze aversion is commonly recognized as a sign of social fear. Speech disturbances indicate that the train of thought of a speaker has been blocked or interrupted. They can manifest themselves as silent pauses, filled pauses (utterances like "ah," "hum," etc.), known as "ah-disturbances," and "non-ah" disturbances, which include sentence change, repetitions, stutter, omission, sentence incompleteness, tongue slips, and intruding incoherent sounds (Kasl & Mahl, 1965; Mahl, 1956, 1987). It has been hypothesized that speech disturbances reflect state rather than trait anxiety of a speaker (Mahl, 1987). Specifically the non-ah ratio ("non-ah" disturbances divided by the total number of words) is considered to directly reflect the level of anxiety of a speaker (Kasl & Mahl, 1965). Another form of speech disturbances are silent pauses. Very little is known about the relevance of silent pauses as an indicator for social anxiety. Stopa and Clark (1993) hypothesized that social phobics speak quickly and avoid (silent) pauses in their speech because they believe other people will think that they are boring or anxious if they pause.

Both speech fluency and eye contact are important aspects of speaking skills (Daley, 1978), and social phobic individuals with the fear of public speaking are especially concerned about their performance because one important aspect of the quality of a speech is the fluency in which it is presented (Starcevic, Ljubomir, Kelin, & Markovic-Zigic, 1994). For this reason, speech disturbances and eye contact are often the target of public-speaking instructors.

Although speech disturbances and gaze behavior can be reliably assessed (Siegman, 1987; Siegman & Feldstein, 1987), very few studies have investigated whether these behaviors reflect anxiety in speech situations.

Previous studies reported that speech anxious individuals paused more often and for a longer duration (Lewin, McNeil, & Lipson, 1996), and that they looked at the audience less frequently (Eves & Marks, 1991) than nonanxious subjects during public speaking. Furthermore, studies found gaze to be positively related to state

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