

THE IMPACT OF "LEADERSHIP FOR YOUTH" TRAINING IN REDUCING STUDENTS GLOSSOPHOBIA

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Abstrak

Kecemasan berbicara di depan umum (*glossophobia*) merupakan salah satu hambatan psikologis yang sering dialami siswa, ditandai dengan gejala fisik dan emosional seperti gugup, jantung berdebar, gemetar, lupa kata-kata, hingga menghindari situasi berbicara di depan umum. Penelitian ini bertujuan mengevaluasi efektivitas pelatihan "*Leadership for Youth*" dalam mengurangi kecemasan berbicara di depan umum pada siswa. Metode penelitian yang digunakan adalah eksperimen semu dengan desain *pretest-posttest* satu kelompok. Data dikumpulkan melalui skala PRPSA (*Personal Report of Public Speaking Anxiety*), wawancara, dan observasi. Data dianalisis menggunakan uji t sampel berpasangan (*paired sampel t-tes*). Hasil penelitian menunjukkan terdapat perbedaan signifikan antara skor kecemasan sebelum dan sesudah mengikuti pelatihan. Hal ini mengindikasikan bahwa keberhasilan pelatihan dalam menurunkan tingkat kecemasan berbicara di depan umum. Selain itu program ini juga meningkatkan rasa kepercayaan diri, keterampilan komunikasi, dan kemampuan berorganisasi. Hasil penelitian ini dapat menjadi rujukan dalam pengembangan program intervensi serupa di berbagai pendidikan dan pelatihan.

Kata Kunci: *Leadership For Youth Training, Glossophobia, Siswa.*

Abstract

Anxiety about public speaking (*glossophobia*) is one of the psychological obstacles that students often experience, characterized by physical and emotional symptoms such as nervousness, heart palpitations, trembling, forgetting words, and avoiding public speaking situations. This study aims to evaluate the effectiveness of "*Leadership for Youth*" training in reducing public speaking anxiety in students. The research method used is a pseudo-experiment with a one-group pretest-posttest design. Data was collected through the PRPSA (*Personal Report of Public Speaking Anxiety*) scale, interviews, and observations. Data analyzed using paired sample t-tests. The results of the research indicate there was a significant difference between the anxiety score before and after participating in the training. This indicates that the success of the training in lowering the level of anxiety about speaking in front of the general public. In addition, this program also increases confidence, communication skills, and organizational skills. The results of this study can be used as a reference in the development of similar intervention programs in various education and training.

Keywords: *Leadership For Youth Training, Glossophobia, Students*

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INTRODUCTION

Public speaking is a skill that people of all ages and backgrounds need to have. It is closely related to communication skills. Speaking in front of an audience is not a skill that can be acquired quickly. Grogginess, palpitations, lost for words, forgotten speech, cold hands and feet, and fear of making mistakes make these university students hesitant to give public speeches. However, having effective public speaking is essential. Students will be required to participate in various activities which of course require communication skills. Students frequently communicate by having discussions with professors, friends, groups, and in front of large crowds. Therefore, the skill of public speaking is indispensable. said that public speaking is an oral presentation where the speaker explains something to the listener or audience. In order for their ideas or opinions to be easily understood by others, students need to be able to effectively communicate or defend their papers. Students who actively participate in organizational activities also must be able to do so. Public speaking abilities are necessary for a variety of roles within the organization, including sharing thoughts and opinions, talking about work projects or the group's objectives, emceeding (MC), serving as trainers in classrooms, giving speeches at village or community gatherings, etc. Therefore, public speaking is a must-have (Mukhran dkk, 2021).

Public speaking is not easy, especially for university students. Speaking in front of an

audience is a must for university students, particularly those involved in organizations. However, there are many students who experience anxiety or fear when they are asked to speak in public.

Fear of public speaking, also known as Glossophobia, is classified by the Diagnostic and Statistical Manual of Mental Disorder (DSM-5) as a social anxiety disorder. This is a common disorder experienced by students, especially those studying in non-primary languages. Students with glossophobia have difficulty to verbally articulate their thoughts and ideas consequently (American Psychiatric Association, 2013), (Association Psikiatri America, 2013) (Dincer dkk, 2022).

There were still students who were afraid of public speaking, according to the studies previously mentioned as well as the researcher's own observations and interviews with students involved in organizations in September 2022. Some students avoided speaking up when asked to during class discussions and instead chose to remain silent. They had palpitations, grogginess, difficulty speaking because they are out of words, shivering body, muffled voice, motionless silence, stiffness even to the extent of being brought to the medical facility. Their speech was abruptly forgotten. They feared that they would be incorrect. They avoided situations requiring them to speak in front of large groups of people, felt their hands and feet shake cold, experienced

sudden stomach pain, sweated, and urinated back and forth.

Furthermore, interviews with organizational coaches said that there was high demand as coaches or speakers from schools. But these students declined because they were hesitant and worried to speak in public. When they were pretending to be the congregation's leader, they remained silent and did not even dare to say the opening greeting. Similar to this, other members were afraid to voice their opinions, dare not to give speeches or just opening remarks, or even chose to sit in the back to avoid drawing attention to themselves. The ones who presented or who spoke up were always the same people.

Glossophobia refers to a strong fear of public speaking. It is a specific type of phobia, an anxiety disorder characterized by a persistent and excessive fear of an object or situation. Individuals who suffer from Glossophobia typically experience fear and anxiety when speaking in front of a group of people and, as a result, may avoid speaking in public to avoid embarrassment or rejection by others (Sahara & Nurcholis, 2022).

Glossophobia also known as "speaking anxiety" is the feeling of fear while speaking in front of public, often characterized as fear of speaking publicly or nervousness in communication. It is a feeling of panic related with different physiological changes like elevated heart and breathing rates, over-rapid reactions, trembling of muscles and shoulder and area

stiffness among other (Sahara & Nurcholis, 2022) (Fagsao & Grace Mi- Ing , 2021).

Characteristics Glossophobia such the eyes look anxious, the eye's student may look restless frowning or showing an expression of fear, excessive of fear, excessive sweating, anxiety can cause excessive sweating so that students can sweat on their hands or face or armpits. Student skin may appear pale or discolored blood flow focusing on the organs vital. Students experience tremors in their hands or other parts of their body due to tension that is felt. Anxiety can affect breathing patterns making students take a breath quickly or breathlessly. The students voice may sound shaky or falter when speaking, the muscles in the face and body may become tense, making the student tense looks stiff when talking, Anxiety can also interfere with a ability's student to concentrate, so they may have difficulty remembering information or speaking smoothly. Confidence, which may be threatened by doubt regarding outward appearance and abilities. Personal well-being, which is often felt by individuals namely regarding uncertainty about the future, namely regarding doubt in making decision and concerns about material matters. Conflict welfare namely what threaten individuals from the existence of a conflict so that this matter could not be resolved because he has too many conflicts escalating (Damanik dkk, 2023).

Students who experience public speaking anxiety will physically display a faster heart rate, shortness of breath, trembling voices,

legs shaking and hands, too much sweating, cold hands, pale face, trembling body, fear of audience, dizzy head, body limp and stiffness. This physical reaction experienced by students affects their achievement and activeness on campus. This anxiety causes the students unconfident to express their opinions, to appear in various training activities or simulated activities that demand to perform.

The psychological reaction displayed by students in these situations is not confident in conveying ideas in front of others because they have anxiety, negative thoughts that they are going to make mistakes, fear of ridicule so they choose to stay silent. As a result, their potential and interests are underutilized. In addition, students who experience anxiety display psychological aspects including feeling insecure, tensed, anxious, frustrated, difficult or unable to concentrate, unable to develop self-quality, running away from reality or avoiding appearing in public.

This means that the continuous psychological, physical condition must be intervened immediately. Because according to tolemas and rigid. The physical reactions experienced by these students affect their achievements and activeness on campus. This anxiety causes students not to have the confidence to express their opinions, to appear in various training activities or simulation activities that demand to be done.

The psychological reaction shown by students in this situation is not confident in presenting ideas in front of others because they

have anxiety, negative thoughts that they will make mistakes, fear of being ridiculed so they choose to remain silent. As a result, their potential and interests are underutilized. In addition, students who experience anxiety show psychological aspects such as feeling insecure, tense, anxious, frustrated, having difficulty or not being able to concentrate, unable to develop self-quality, escaping reality or avoiding appearing in public.

This means that ongoing psychological and physical conditions must be intervened immediately. Because according to him, public speaking anxiety can be one of the factors that inhibit learning because it can interfere with cognitive function (Amali & Laili Etika Rahmawati, 2020). Students who have public speaking anxiety are less involved in lectures and discussions, less involved in organizational activities and reluctant to participate in activities that require appearing in front of a crowd.

Similarly, with students who are active in organizations, many activities are hampered as a result of public speaking anxiety. Some activities do not even take place because they are evasive or non-existent. Only a few students are willing to speak in front of the audience and are always the same students, while the rest of the members remain silent.

The organization's activities serve as a forum for students to learn how to improve their soft skills. Organizational activities can help students improve their soft skills and learning outcomes (Fitriyahdkk, 2023) (Laelah & Aliyyah, 2024). Soft skills that can be taught

within the organization are group cooperation, responsible leadership, attitude, self efficacy, organizational skill, communication skill, talent and interest development, time management, problem solving, public speaking, self confidence, critical thinking (Laelah & Aliyyah, 2024).

Unfortunately, public speaking anxiety experienced by students causes them to hesitate to be involved in organizations so that various activities are not carried out properly. It also hampers the development of their talents and interests. Public speaking anxiety has a significant impact on one's academic performance. Anxiety is regarded as one of the barriers to learning that can interfere with cognitive function: for example, in concentrating, remembering, conceptualizing, and problem solving. In his opinion, people with anxiety, tend to shy away when asked to speak in public. This commonly happens among college students. They tend to avoid situations that require them to speak in public (Kusuma dkk, 2022).

This means that public speaking anxiety can interfere with the learning process, affecting academics and inhibiting the development of one's talent and interest. It also hinders the executions of various learning and extracurricular activities or student organizations so that it affects the development of soft skills, and ultimately will affect the performance of the students after they graduate and start to work. Various studies related to Glossophobia intervention, according to Kelly (Wibawanti et al., 2018), the intervention given to individuals

who experience public speaking anxiety must be seen from the causative factors. While Dwyer stated that the cause of glossophobia is a limited knowledge of effective communication, what needs to be provided is effective public speaking training. If the cause of anxiety is relaxation therapy, but if the cause is negative thoughts about public speaking, then the intervention given is cognitive therapy. Research by Utami and Prawitasari explains that glossophobia is not caused by individual abilities but is often burdened by irrational negative thoughts (Wibawanti et al., 2018)

Meanwhile, in students who are the subjects of this study that cause glossophobia, namely negative thoughts about public speaking and negative thoughts of self-assessment so that they become less confident, limited knowledge about effective communication, and organizational activities so as to avoid activities and anxiety caused by body members. Organizational material is included because students who actively participate in organizations have a level of organizational activity that has an influence on anxiety, where students who have a high level of organizational activity are higher (Zaifullah, 2017).

Another research conducted was the application of assertive technique training aimed at reducing the anxiety of grade X students in interpersonal communication at SMA Negeri 12 Banjarmasin by using an individual counseling approach. The distribution of questionnaires to 30 class X students based on the results of unstructured observations obtaining the data

that 1 student was in a very high category. As a result, an individual counseling approach was required. The training was conducted for 4 meetings. The findings revealed that student was successful in reducing their social anxiety based on unstructured observations made by the BK teacher or counsellor at SMA Negeri 12 Banjarmasin (Rachmayanie Ririanti & Sulistiyana, 2020).

However, there has been no research related to interventions to reduce glossophobia in students. In addition, very few studies have taken students who experience glossophobia as research subjects even though the problem of glossophobia is almost experienced by students. The problem of glossophobia affects the learning process in higher education. Therefore, researchers are interested in researching to provide leadership training interventions for youth to reduce Glossophobia for students. The difference with the previous research is that the researcher provides material that is tailored to the needs of students based on the results of the initial research assessment by conducting observations and interviews with students.

Based on the results of the assessment and supported by several studies related to glossophobia intervention, students have factors that cause glossophobia are limitations in effective communication, the emergence of negative thoughts related to public speaking, students experience anxiety so they use relaxation as an intervention, and the emergence of negative thoughts, while the organizational activity material provided is due to

students' ignorance in organizational activities. The materials provided include the first session material including self-introduction, potential, relaxation, effective communication materials, speech practice materials, presentations, program development or innovative work activities, documenting organizational activities, games, and all activities carried out with practice or simulation.

Effective communication material by providing public speaking material in the form of speech practice, presentation, where public speaking is a way of speaking in front of the general public that is very demanding on fluency in speaking, emotional control, word choice and tone of speech, one form of public speaking is speech. A good speech is to give a positive impression and is expected to provide information in the speech so that it can be accepted by the person who complains, but in fact, not all the information in the speech can be conveyed properly to the audience (Nisaa & Agus, 2018).

The study used a mock experiment to compare students' anxiety levels before and after attending "leadership for youth" training. The purpose of this study is to reduce public speaking anxiety in students. This is the first study to provide "leadership for youth" training to students to reduce anxiety

METHOD

This study employed the Quasi Experiment method with a research design of one group pretest-posttest, i.e. a single group

design with pre-test and post-test. This study was conducted by giving a treatment to one group without using a comparison group (Fitriany & Syarifah, 2022) (Shaughnessy dkk, 2012)(Verawati Dewi dkk., 2024).

This research design aimed to determine the effect of a treatment whose results are obtained by measuring the state of a group before and after treatment (pre-test and post-test). The conditions before and after treatment would then be compared. The pre-test used the PRPSA (Personal Report of Public Speaking Anxiety) anxiety scale to determine the subject's initial condition. Post-test was given directly by using the PRPSA (Personal Report of Public Speaking Anxiety) anxiety scale to obtain any changes in PRPSA (Personal Report of Public Speaking Anxiety) in students. This study did not use random sampling because of the limited number of research subjects, in this case it was difficult to obtain a control group.

Design of Experiment:

O1 X O2

Description:

O1 = PRPSA (Personal Report of Public Speaking Anxiety) level before the training

O1 = PRPSA (Public Speaking Anxiety Personal Report) level before training

O2 = PRPSA (Public Speaking Anxiety Personal Report) level after training

X = Intervention ("Leadership for Youth" training)

The subjects of this study were 30 students between the ages of 18 and 22 years old, had high and moderate glossophobia

categories, active students, men and women and were willing to take part in the training. The data collection methods used in this study are scale, interviews and observation. To measure public speaking anxiety, the PRPSA (Personal Report of Public Speaking Anxiety) scale created by McCroskey was used to measure the level of public speaking anxiety in students in Michigan University. This scale is the result of Friedrich and McCroskey research, which resulted in a new measuring tool called PRPSA (Personal Report of Public Speaking Anxiety). This scale is in the form of a questionnaire that contains a series of questions or written statements to the research subject or respondent in order to obtain responses based on the respondent's condition (McCroskey, 2015)(Balakrishnan dkk, 2022).

The PRPSA (Personal Report of Public Speaking Anxiety) assessment scale contains 34 statements about the condition that are part of two aspect of anxiety developed by McCroskey based on his research finding. This assessment tool employs responses with five alternative answers: strongly agree, agree, neutral, disagree, and strongly disagree, with scores ranging from 5 to 1. The aspect of glossophobia, according to McCroskey, consists of two, namely the internal aspect and the external aspect. Public speaking anxiety includes a cognitive point of view because basically public speaking anxiety is experienced by the individual's internals, the effect of public speaking anxiety itself is the feeling of discomfort experienced by the individual, then

not being able to predict the behavior or judgment of the audience is an external aspect that causes public speaking anxiety to increase. Then not being able to predict the behavior or judgment of the audience is an aspect from the outside that makes public speaking anxiety increase (Fitriani, 2024)

The results of the validity and reliability test of PRPSA (Personal Report of Public Speaking Anxiety), including:

1. Test Instrument

a. Validity Test

A valid instrument is one effective measure data according to the research objectives. To determine whether the instrument is valid or not, a comparison of the value of r Calculate with r Table is carried out, which is as

follows: (Verawati Dewi et al., 2024; Zakiah et al., 2020)

1). If $r_{\text{Count}} > r_{\text{Table}} = \text{Valid}$

2). If $r_{\text{Count}} < r_{\text{Table}} = \text{Invalid}$

The results of the validity test of the *glossophobia* question are attached by comparing the critical value of r calculated obtained from spss 29 and the critical value of r seen in the Pearson product moment table are significant ($r > .361$, $p < .05$), so it can be said that 34 question are valid.

b. Reliability Test

A reliable instrument means a scale that, if used several times to measure the same object, will produce the same data. Based on the reliability test result, it was found that the value data highly reliable ($\alpha = .878$).

Table 1
Details Of The Statement Are As Follows

Aspects	Favorable	Unfavorable	Total
Internal	16	8	24
External	6	4	10

Furthermore, to determine the analysis used to test and analyze the hypothesis above, it is necessary to carry out a pre-prerequisite test, namely the normality test. The normality test is a test about the normality of the data distribution. The use of normality tests is because in parametric statistical analysis, the assumption that the data must have is that the data must be distributed normally.

Based on the results of the normality test using Shapiro-Wilk, it was obtained that the *P-value* value on each scale item, both for favorable and *unfavorable* statements, from

external and internal aspects, both in the pretest and posttest, was greater than .05. This indicates that the data comes from a normal distribution. In addition, the Shapiro-Wilk statistical value on each item is greater than .95, close to the number 1, which indicates that the data distribution pattern is very close to the normal distribution. Thus, it can be concluded that the assumption of normality for all items has been met, so that overall the data can be used for advanced statistical analysis in testing hypothesis using t-test.

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Table 2
Details of Intervention Activities

Session	Activity	Purpose
1	Participant Registration	Participants fill in attendance
2	Opening contracts, introductions and training	So that participants know the purpose of the training, get to know each other, and agree on a training contract to actively participate in the training session
3	Hopes and Concerns	To ensure that coaches are aware of their expectations and concerns
4	Introduction to Training	Providing an understanding of the importance of this training
5	Glossophobia	Deliver material related to Glosophobia
6	Discover your potential and experience relaxation	Provide materials that support your potential
7	Leadership	Increase organizational knowledge
8	Effective communication	Provide public speaking materials in the form of interesting communication materials, speech practice, and presentations
9	Administration	- Material: organizational administration to improve knowledge and practice - Practice making proposals and letters - Practice using Google Forms to store organizational documents
10	Prepare a work program	Improve the ability to think innovatively and critically in creating innovative work programs. Practice creating unique organizational work program ideas
11	Activity documentation	Material: documentation of events and successes of organizational activities
12	Closing	Practice of creating documentation designs for organizational activities The trainer closed the training and thanked you for your participation and cooperation in participating in the training

RESULTS

Table 3
Hypothesis Testing (Favourable Internal Aspects in Measuring Public Speaking Anxiety Scale)

	Paired Samples scale <i>favorable</i> internal					t	df	p
	Paired Differences							
	Mean	SD	SE	95% CI				
			LL	UL				
-Pretest favorable Internal – post tes favorable internal	5.34483	11.33350	2.10458	1.03379	9.65586	4.540	29	.017

Based on the results of the statistical calculation of paired sample t-test on pretest and posttest scores for the level of public speaking anxiety using the PRPSA questionnaire on the internal favorable aspect, the following results were obtained:

1. Mean Difference: The average value of the difference between the pretest and posttest scores is 5.34483. This shows an increase in the average score in the posttest compared to the pretest.
2. Standard Deviation (Std. Deviation): A standard deviation value of 11.33350 indicates a variation in the difference in scores between the pretest and posttest in the tested sample.
3. Standard Error Mean (Std. Error Mean): A value of 2.10458 indicates the average error rate in the estimated score difference between the pretest and posttest.
4. Confidence Interval (95% Confidence Interval): The confidence interval of the score difference is in the range of 1.03379 to 9.65586. This means that with a 95% confidence level, the average difference between the pretest and posttest is estimated to be between those values.
5. T count and t table t: The t count value of 4.540 is greater than the t of the table (2.045)

at degrees of freedom (df) 29. This shows that the difference between pretest and posttest scores is statistically significant.

6. Sig. (2-tailed) value: A significance value (p-value) of 0.017 is less than 0.05, indicating that the result is significant at a significance level of 5%.

Based on these results, it can be concluded that there is a significant difference between pretest and posttest scores at the level of public speaking anxiety using the PRPSA questionnaire on the internal favorable aspect. Thus, the null hypothesis (H_0), which states there is no significant difference between pre test and post test scores, is rejected. In contrast, the alternative hypothesis (H_1), which states that there is a significant difference between pretest and posttest scores, is accepted. These results indicate that the intervention or treatment given during the study succeeded in lowering the level of public speaking anxiety in the measured aspects.

Table 4
Hypothesis Testing (Favorable External Aspects in Measuring Public Speaking Anxiety Scale)

		Paired Samples Scalefavorable Eksternal					t	df	p
		Paired Differences							
		Mean	SD	SE	95% CI				
					LL	UL			
-Pre test	favorable Internal	6.34483	12.33350	3.10458	1.03379	9.65586	5.510	29	.027
- postes	favorable internal								

Based on the results of the statistical calculation of paired sample t-test on pretest and posttest scores for the level of public speaking

anxiety using the PRPSA questionnaire on the external favorable aspect, the following results were obtained:

1. Mean Difference: The average value of the difference between the pretest and posttest scores is 6.34483. This shows an increase in the average score in the posttest compared to the pretest.
2. Standard Deviation (Std. Deviation): A standard deviation value of 12.33350 indicates a variation in the difference in scores between the pretest and posttest in the tested sample.
3. Standard Error (Std. Error Mean): A value of 3.10458 indicates the average error rate in the estimated score difference between the pretest and posttest.
4. Confidence Interval (95% Confidence Interval): The confidence interval of the score difference is in the range of 1.03379 to 9.65586. This means that with a 95% confidence level, the average difference between the pretest and posttest is estimated to be between those values.
5. T count and t-table t-value: The t-value of 5.510 is greater than the t-table (2.045) at 29 degrees of freedom (df). This shows that the

difference between pretest and posttest scores is statistically significant

6. Sig. (2-tailed) value: A significance value (p-value) of 0.027 is less than 0.05, indicating that the result is significant at a significance level of 5%.

Based on these results, it can be concluded that there is a significant difference between pretest and posttest scores at the level of public speaking anxiety using the PRPSA questionnaire on the favorable aspect of the external aspect. Thus, the null hypothesis (H_0), which states there is no significant difference between pretest and posttest scores, is rejected. In contrast, the alternative hypothesis (H_1), which states that there is a significant difference between pretest and posttest scores, is accepted.

These results indicate that the intervention or treatment given during the study succeeded in reducing the level of public speaking anxiety on external aspects.

Table 5
Hypothesis Testing (Unfavorable Internal Aspects in Measuring Public Speaking Anxiety Scale)

	Paired Samples Scale Unfavorable Internal						t	df	p
	Paired Differences								
	Mean	SD	SE	95% CI					
			LL	UL					
-Pre test favorable Internal – post test favorable internal	5.34483	10.33350	2.10458	1.03379	9.65586	-6.54	29	.021	

From the table above the value, it is found that the t count value of (|-6.540|) is greater in absolute terms than the t-value of the table of 2.045 (|t count| > t table), with a degree

of freedom (df) of 29. The significance value (p-value) is 0.021, smaller than $\alpha = 0.05$. So that the existing data supports rejecting the null hypothesis (H_0). Thus, the alternative

hypothesis (H_1) is accepted. Therefore, it can be concluded that there is a significant difference in the level of public speaking anxiety as measured by the PRPSA questionnaire on the internal unfavorable aspect between the pretest and

posttest interventions. This means that the intervention provided has a real effect on lowering the level of public speaking anxiety in this aspect.

Table 6
Hypothesis Testing (Unfavorable External Aspects in Measuring Public Speaking Anxiety Scale)

Paired Samples Test <i>Unfavorable</i> eksternal										
Paired Differences										
			Mean	SD	SE	95% CI		t	df	p
						LL	UL			
-Pre test Eksternal	favorable	5.34483	10.33350	1.10458	1.03379	9.65586	4.411	29	.011	
- post test Eksternal	favorable									

From the table above, it is found that the t count value of (4.411) is greater in absolute terms than the t-value of the table of 2.045 ($|t \text{ count}| > t \text{ table}$), with a degree of freedom (df) of 29 and a significance value (p-value) of 0.011, smaller than $\alpha = 0.05$. So that the existing data supports rejecting the null hypothesis (H_0). Thus, the alternative hypothesis (H_1) is accepted. Therefore, it can be concluded that there is a significant difference in the level of public speaking anxiety as measured through the PRPSA questionnaire on *external unfavorable* aspects between the pretest and *posttest* interventions. This means that the intervention provided has a real effect on lowering the level of public speaking anxiety in this aspect.

Based on the results of the t-test conducted using SPSS, the calculated t-value for each scale item, both favorable and

unfavorable, in external and internal aspects, both in the *pretest* and *posttest*, are all greater than the t-table (2.04) and the overall p-value is less than 0.05. This shows that the data obtained supports the alternative hypothesis (H_1) and rejects the null hypothesis (H_0). In other words, there was a significant difference between *pretest* and *posttest* scores, which means that the interventions carried out during the study were successful in reducing the level of public speaking anxiety in all aspects measured. These findings indicate the success of the intervention in significantly lowering public speaking anxiety.

This study conducted an intervention to reduce public speaking anxiety. The results obtained were that students' public speaking anxiety decreased after being given "leadership for youth" training. The "leadership for youth" training provided aimed to reduce public

speaking anxiety in students. Based on the analysis of data before and after the training using the paired sample t-test, it is known that there is a difference between the pre-test and post-test data on the PRPSA (Personal Report of Public Speaking Anxiety) scale. It describes the change in outcomes in public speaking anxiety levels before training and after. training.

DISCUSSION

Based on the results of the t-test conducted using SPSS, the calculated t-value for each statement item, both favorable and *unfavorable*, in external and internal aspects, both in the *pretest* and *posttest*, are all greater than the t-table (2.04) and the overall p-value is smaller than 0.05. This shows that the data obtained supports the alternative hypothesis (H_1) and rejects the null hypothesis (H_0). In other words, there was a significant difference between *pretest* and *posttest* scores, which means that the interventions carried out during the study were successful in reducing the level of public speaking anxiety in all aspects measured. These findings indicate that the intervention has been successful in significantly reducing public speaking anxiety. This also illustrates that there has been no previous research that uses leadership of youth training to reduce glossophobia in students.

The following is an overview of each training session, the session begins with participants being asked to fill out a pretest sheet, then participants are asked to write down their concerns and hopes that are thought or felt

by the participants, then participants are given knowledge material related to glossophobia, the causes of the emergence or occurrence of glossophobia. and the factors that cause glossophobia to occur so that they also understand the stages in the training session that will be followed. This is in accordance with Kelly (Wibawanti et al., 2018)'s opinion that the intervention given to individuals who experience public speaking anxiety can be seen from the causative factors. Meanwhile, Dwyer stated that the cause of glossophobia is a limited knowledge of effective communication, so it is necessary to provide effective public speaking training. If the cause of anxiety is relaxation therapy, but if the cause is negative thoughts about public speaking, then the intervention given is cognitive therapy. Research by Utami and Prawitasari explains that glossophobia is not caused by individual abilities but is often burdened by irrational negative thoughts. .

Therefore, the material provided is according to the needs of the participants. The next session is self-introduction material is delivered, and students are given an assignment sheet to be filled out or written. As a result, individuals who are able to recognize themselves are aware of and understand their own strengths and weaknesses. They understand how other people's judgments and responses to themselves individually can be used as feedback to help them improve and become more positive. Self-awareness increased because self-assessment encouraged participants to change their view of themselves

so that it became positive. They can use their positive view of themselves as feedback to improve and this greatly influences behavior.

Therefore, it is important to focus on positive self-affirmation so that participants can follow the anxiety they have when performing in front of many people. This is in line with Reed & Aspinwall's opinion. By doing positive affirmations, participants can convince themselves of their strengths so that they can focus on delivering the material presented in front of many other people. (Wibawanti et al., 2018).

Then the next session, relaxation and exercise materials were given. The trainees were given relaxation material by starting with the material and then doing relaxation practices. This is also supported by saying that relaxation is one of the techniques used to relieve anxiety according to Smith, Hancock, Blake-Mortimer, & Eckert (Wibawanti et al., 2018). The relaxation used in this training is the breath relaxation technique. According to Kemper Chiang, Ma, Huang, Tseng & Hsueh, in clinical practice one of the popular psychological interventions is relaxation techniques. One of the most popular psychological interventions is the deep breath relaxation technique, which utilizes the mind-body connection to control anxiety symptoms. Reed & Aspinwall, 1998 The last technique given to the participants was positive affirmations. This technique is given on the basis that negative information about from will affect self-regulation, increase negative effects such

as anxiety, and lower self-esteem (Wibawanti et al., 2018).

Next is effective communication material, and organizational material, before practicing speech and presence, relaxation is carried out. Relaxation is used before participants practice communicating in public. (Mukhran dkk., 2021). This is supported by the results of research that public speaking communication training. Where public speaking is a way of speaking in front of the general public that is very demanding for fluency in speaking, emotional control, word selection and tone of speech, one form of public speaking is speech. A good speech is to give a positive impression and is expected to provide information in the speech so that it can be accepted by the listener, but in reality not all information in the speech can be conveyed well to the audience (Nisaa & Agus, 2018)

Through practical activities, the hands-on application of various materials provides these students with more practice, experience, helps them grow confidence, improves their speaking skills, and helps them better prepare themselves so that their anxiety gradually decreases. In line with Verderber who stated that a person can be a good public speaker because they practice often. The more often a person practices public speaking, the better they will be at conveying information to the audience in public (Rahmawati dkk., 2023). Organizational material is included because students who actively participate in organizations have a high level of organizational activity has an influence

on anxiety, where students who have a high level of organizational activity, the higher the level of anxiety. Therefore, the participants in the study consisted of active students of the organization, so the material was adjusted to the needs of the organization which was carried out using role play, direct practice. This is supported by the opinion that role playing can overcome anxiety in students in language (Zaifullah, 2017)(Yulianeta, 2024).

Furthermore, given organizational materials that are carried out repeatedly, practice being the leader of the deliberation session, making innovative work program ideas, designing activity documentation, etc. All students are asked to be involved in the simulation directly. Then the discussion and feeding back continued. (Attali & Sky der Kleij, 2017)(Hattie & Timperley, 2007; Simonsmeier et al., 2020) Discussion techniques in groups can overcome anxiety, which before participating in the training participants have anxiety by discussing with other members in the group in front of other members, participants become less anxious. This is in line with research that group discussions can reduce career anxiety in final semester students at Attanwir Bojonegoro institution (Faizin, 2021).

Repetitive practice experienced by research subjects in each training session is expected to reduce public speaking anxiety strategy to improve academic achievement. However, little evidence is available about the effects of peer feedback on academic outcomes other than achievement such academic self-

concept (Simonsmeier dkk., 2020). The advantage of this study is that it uses several combinations of intervention models, while previous studies only used one intervention. Meanwhile, the limitations in this study are that this research is only limited to students who participate in organizations, and the effective communication materials are only speeches and presentations, and for organizational materials only some of them.

CONCLUSIONS AND IMPLICATIONS

Leadership for Youth Training is an intervention given to students who experience anxiety about public speaking by providing material to students consisting of several sessions: the first session is self-introduction, the second session is the introduction of self-potential, followed by relaxation sessions, effective communication materials in the form of Speeches, presentations, conference materials, making innovative programs or work activities, organizational documentation, games and all activities carried out with practice or simulation. Based on the analysis of the data and discussions, it is possible to conclude that "*leadership for youth*" training can reduce students' anxiety (Glossophobia) of public speaking. The following conclusions were reached after analyzing the data obtained in this study: The "*leadership for youth*" training design provided can help students overcome their fear of public speaking.

As for suggestions for further research, it is recommended to be able to conduct further

training and development such as designing training that improves students' communication skills in doing lecture assignments that require appearing in front of many people. For the material, researchers who are interested in providing interventions related to public speaking anxiety must consider the factors that trigger the appearance of anxiety.

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