



Speaking Anxiety Symptoms Among Tenth-Grade Students in English Language Classes

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ABSTRACT

This study investigates the prevalence and nature of speaking anxiety among tenth-grade students at SMAN 15 Medan, with a particular focus on physical, mental, and emotional symptoms. Employing a descriptive qualitative design, the research utilized observations and interviews to capture a comprehensive picture of the students' anxiety experiences. Analysis of the data revealed that physical symptoms were the most frequently reported, with a total of 83 instances documented. These included rapid heartbeat, difficulty speaking, trembling, and difficulty breathing, among others. Emotional symptoms were also prominent, with students frequently expressing feelings of nervousness, fear, and embarrassment. Mental symptoms, while less common, included issues such as memory lapses and cognitive disruptions. The findings indicate that speaking anxiety manifests predominantly through physical and emotional symptoms, with mental symptoms being less frequent but still impactful. Additionally, many students exhibited multiple types of symptoms simultaneously, underscoring the multifaceted nature of speaking anxiety. This research highlights the need for a holistic approach to addressing speaking anxiety, suggesting that future interventions should focus on reducing physical symptoms, enhancing emotional support, and improving cognitive strategies to help students manage their speaking anxiety effectively.

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1. Introduction

1.1 Background of the Problem

Language is an essential component of human life, present in every aspect of our activities and interactions. It is a fundamental human trait that serves the primary purpose of facilitating communication. Effective communication is crucial for achieving mutual understanding between speakers and listeners or between writers and readers. Therefore, the study of foreign languages, including English, is a key part of the educational curriculum in Indonesia.

According to the Indonesian curriculum, learning English as a foreign language aims to develop Indonesians who can communicate with people from various countries around the world. English language education provides the opportunity to achieve the Pancasila Student Profile through written, visual, and oral text materials, as well as through activities incorporated into the teaching and learning process (Kurikulum

Merdeka, 2022). In high school, learning English as a foreign language necessitates students attaining communicative competence across language skills like reading, listening, writing, and speaking. According to the independent curriculum, the objectives of English learning also encompass developing communicative competence in English through diverse multimodal texts, including oral, written, visual, and audiovisual forms.

Speaking, one of the productive language skills alongside writing, is considered more challenging to acquire compared to the other three language skills (Brown, 1991). It is a fundamental means of communication in social contexts, involving the construction and exchange of meaning through verbal and non-verbal symbols in various settings (Chaney, 1998). In the Indonesian curriculum, speaking is defined as the ability to express ideas, thoughts, and feelings verbally during social interactions.

Despite its importance in language learning, students often find it challenging to achieve fluency in English. Effective communication is the primary goal of language learning, particularly when it comes to speaking in English. However, speaking is assumed to be the most stressful among the four language skills (Sidik, 2021). Many students in Indonesia express difficulties and sometimes even acknowledge their failure in learning to speak English. According to Nunan (1995), speaking is an integral part of human life, yet it often presents challenges, one of which is anxiety in situations requiring communication. Al-Saraj (2011) corroborates that this phenomenon can be attributed to various factors, with anxiety being one of the most significant.

Horwitz et al. (1986) observed that while students may excel in other language skills, they often experience a 'mental block' when asked to speak English. Psychological conditions vary among students; some can speak confidently, while others feel nervous and shy, hindering their ability to speak English. Feelings of shame, fear of making mistakes, and anxiety are common reasons for this difficulty. Price (1991), as cited in Öztürk & Gürbüz (2014), found that classroom speaking activities induce anxiety because students fear making mistakes, being laughed at, or being judged by their peers.

Rogers (2004) identifies three common categories of symptoms reported by individuals who experience difficulty speaking. The first category encompasses physical symptoms, which can manifest even before the actual presentation and include a range of reactions such as a racing heart, shaking knees that make it challenging to stand or walk, and a trembling voice often accompanied by a tight throat or lump in the throat. Other physical symptoms may include heat waves or feelings of faintness, stomach cramps with potential nausea, hyperventilation causing breathing difficulties, and watery eyes or a runny nose. The second category pertains to mental processes that typically occur during the speaking performance. These symptoms include repeating words or sentences, leading to a broken radio effect, general confusion, memory loss where the speaker struggles to recall important facts or details, and mental blocks that hinder the speaker's ability to know what to say next. Lastly, these physical and mental symptoms are frequently accompanied or preceded by emotional symptoms. These can manifest as fear occurring even before the presentation, feelings of inadequacy, a sense of losing control, feelings of helplessness, shame, panic, and embarrassment upon completion of the presentation.

To align with the common issues that frequently occur in the process of learning to speak, the researcher conducted preliminary observations to identify the specific challenges faced by the students in question. Preliminary data collection involved interviews and observations with both teachers and students. These methods aimed to gather information on the speaking anxiety experienced by students, as well as the anxiety observed by teachers. Interviews with teachers revealed that students often seemed to experience difficulties and indicated resistance when asked to speak English. The researchers asked the students about how they felt when they were being asked to speak English in front of the class.

Interviewee : “*Takut sih, Miss. Karena saya tuh suka lupa mau ngomong apa kalo di depan, Miss, jadinya kalo mau ngomong kedepan harus bawa catatan, Miss. Kalo misalnya ga ada catatan, ya gitu, Miss, suka lupa apa yang mau diomongin.*” (I'm afraid, Miss. Because **I often forget what I want to say** in front (in front of the class), Miss, so if I want to speak in front (in front of the class) I have to bring notes, Miss. If, for example, there are no notes, that's it, Miss, I like to forget what I wanted to say”

Based on the preliminary data above, it was found that students experienced memory loss when asked to speak English in front of the class. The student stated that he had to bring notes to help him avoid forgetting the information that would be presented. According to Roger (2004), memory loss falls into the second category that is related to mental symptoms of anxiety. Observations from other students also showed that students displayed symptoms of speaking anxiety, such as nervousness, sweaty palms, rapid heartbeats, and forgetfulness during presentations in front of the class.

Therefore, this study is important that aims to explore and elucidate the symptoms of speaking anxiety experienced by tenth-grade students at SMAN 15 Medan when speaking English as a foreign language. By

understanding these symptoms and their underlying causes, the study seeks to provide insights that can help educators develop strategies to alleviate anxiety and foster a more supportive learning environment.

1.2 Problem Formulation

According to the introduction that have been elaborated before, there are three research questions that can be formulated in this study:

- 1) What physical symptoms of speaking anxiety are experienced by tenth-grade students?
- 2) What mental symptoms of speaking anxiety are experienced by tenth-grade students?
- 3) What emotional symptoms of speaking anxiety are experienced by tenth-grade students?

1.3 Relevant Research

Relevant studies have explored various aspects of speaking anxiety and its impact on language learners, providing valuable insights that relate to the current research topic on students' speaking anxiety symptoms. Macquidato (2021) examined speaking anxiety and coping strategies among second language learners of English in the Philippines through transcendental phenomenology. The study, involving 55 students, highlighted that emotional tension, physiological symptoms, and cognitive challenges are prevalent when speaking English. The anxiety experienced by students was primarily due to fears of losing face or receiving negative feedback. To cope with this anxiety, students employed strategies such as reading books, consulting dictionaries, writing down their thoughts, overcoming shyness, and being receptive to teacher feedback. Similarly, Maulana and Untong (2021) investigated anxiety and performance in English learning among Grade 12 senior high school students in the Maguindanao Division, Philippines, using the Foreign Language Classroom Anxiety Scale (FLCAS). Their findings indicated that high levels of anxiety adversely affected students' performance, particularly in inter-language phonology, grammar, and semantic understanding. The research concluded that anxiety related to inter-language factors significantly influenced students' English learning outcomes. Both studies underscore the multifaceted nature of speaking anxiety, encompassing emotional, physiological, and cognitive symptoms, which aligns with the symptoms explored in the current research. These findings highlight the importance of addressing speaking anxiety holistically to improve students' confidence and proficiency in English. By understanding the specific symptoms and underlying causes of speaking anxiety, educators can develop targeted interventions to mitigate these issues and enhance students' overall language learning experience.

2. Method

3.1 Research Approach

The study employs a descriptive qualitative research design, as outlined by Donald Ary (2010), focusing on understanding groups or phenomena in their natural settings. Sugiono (2010) further elaborates that in qualitative research, the researcher is the primary instrument, and data collection is conducted through combining and analyzing data inductively.

3.2 Data Source

The required data were collected through observations and interviews with students about their anxiety symptoms when speaking English. Data sources consisted of two tenth-grade classes from SMAN 15 Medan, selected based on student availability and recommendations from the English teacher, who noted a higher incidence of speaking anxiety in these classes.

3.3 Research Instrument

Various instruments were used to gather comprehensive data, including audio and video recorders, field notes, and interview guideline sheets. These instruments were employed to capture conversations during interviews, observe and analyze non-verbal and verbal cues, document nuanced contextual data, and guide interviews to understand students' speaking anxiety symptoms. Data collection was performed through direct classroom observations during English class hours on Fridays and Saturdays to identify symptoms of speaking anxiety. Interviews were conducted in Indonesian, the students' first language, to facilitate ease of communication and elicit uninhibited responses. An audio recorder was used to capture interview data, and interview guides ensured comprehensive coverage of research questions, focusing on students' feelings when required to speak English.

3.4 Data Analysis

Data analysis followed the model developed by Miles, Huberman, and Saldana (2014), involving three steps: data reduction, data display, and conclusion drawing.

3. Findings

The analysis of students' speaking anxiety shows it is a complex issue with physical, mental, and emotional symptoms. These symptoms are both observable, like trembling or sweating, and non-observable, such as internal mental distress or emotional discomfort. To fully capture the variety of anxiety symptoms, the researchers used a dual-method approach, incorporating both observations and interviews. This combination allows for a comprehensive understanding of both the visible signs and the internal experiences of speaking anxiety among students.

No.	Symptoms	Example of Phrase	Frequency	Percentage (%)
1	Physical	Then, my heart was pounding . - Maybe I was a bit shaky because I was nervous. - ...and maybe my voice was a bit shaky at first, but it usually gets normal by the middle. - ...usually, my hands get cold when I'm nervous. - Nervous, and then I feel dizzy . - I feel cold sweat , too, you know. - My hands are shaking and my voice is trembling. - And also, my movements seem a bit stiff . - ...shaking, my hands were wet , I forgot - What I felt was that my stomach felt like it was tense...	83	56.5
2	Mental	- ...then if there are a lot of people, I immediately go blank ... Then I forget what I wanted to say.	14	9.5
3	Emotional	- Nervous , and then I feel dizzy. - My knees tremble, and I feel embarrassed , panicked—everything. - Perhaps fear before performing . - What Keke felt was panic at first...	50	34
Total			147	100

Table 1. Students' Speaking Anxiety Symptoms

The study identified a wide array of speaking anxiety symptoms among tenth-grade students at SMAN 15 Medan. Analyzing the symptoms among 60 students revealed a notable prevalence of physical manifestations, with 83 reported instances. These symptoms, including trembling, sweating, rapid heartbeat, and difficulty breathing, were the most common indicators of speaking anxiety. Emotional symptoms were also significant, with 50 instances recorded, encompassing nervousness, fear, and embarrassment, which greatly affect a student's willingness and ability to speak in public. Although less frequent, mental symptoms were still noteworthy, with 14 instances indicating issues such as negative thoughts, concentration difficulties, and memory lapses. Overall, the data indicates that speaking anxiety in students is primarily manifested through physical and emotional symptoms, with mental symptoms being less common but still important. Recognizing these patterns can help educators and support staff develop more effective strategies to address and reduce speaking anxiety in students.

4.1 Physical Symptoms

Physical symptoms of speaking anxiety are the most apparent and can significantly impact a student's ability to perform in speaking tasks. The example of physical symptoms felt by the students:

Data 1.

Dan jantungnya juga berdegup kencang.

'And the **heart was also beating fast**.' (MRA)

The most commonly reported symptoms were physical, with a total of 83 instances documented. These physical symptoms encompassed a range of distressing signs, including a rapid heartbeat, trouble articulating words, trembling, and difficulty breathing. Additionally, students reported experiencing a shaky voice, cold hands, dizziness, and unsteady knees. Other notable physical manifestations included cold sweats, a rigid body, excessive sweating, persistent fidgeting, and stomach discomfort. These various physical symptoms of anxiety can severely impact a student's performance during speaking activities, potentially undermining their ability to effectively engage in and complete speaking tasks. The presence of these physical symptoms highlights the significant challenge they pose, as they can disrupt the normal speaking process and impede overall communication abilities.

4.2 Mental Symptoms

Mental symptoms of speaking anxiety affect a student's cognitive processes and can interfere with their ability to articulate thoughts clearly. The example of mental symptoms felt by the students:

Data 1.

...langsung gemeter gitu, jadi langsung kayak lupa-lupa gitu.

‘(I) immediately **trembled**, so I immediately seemed to forget it’ (ZKA)

Only two types of mental symptoms were observed: experiencing blank moments and forgetting what was intended to be said. While these symptoms were less common, they are notably disruptive in speaking situations. When students blank out or fail to recall their prepared material, it interrupts their speech flow and can exacerbate feelings of anxiety and self-doubt.

4.3 Emotional Symptoms

Emotional symptoms are related to how students feel emotionally and their overall mood. The example of emotional symptoms felt by the students:

Data 1.

Panik, karena belum hafal teksnya.

‘**Panic**, because I haven't memorized the text.’

Emotional symptoms, such as nervousness, embarrassment, and panic, were notably prevalent, with 50 instances documented. These emotions can significantly undermine a student's self-confidence and their willingness to engage in speaking activities. Nervousness can result in hesitation and a reduction in fluency, whereas feelings of embarrassment and panic can drive students to steer clear of speaking opportunities entirely. These emotional symptoms frequently intersect with physical and mental symptoms, forming a complex and all-encompassing anxiety experience that can be particularly difficult to handle.

4. Conclusion

The analysis of speaking anxiety among students revealed a variety of symptoms, categorized into physical, mental, and emotional dimensions as outlined by Roger (2004). Physical symptoms, which are directly observable and include signs like palpitations, cold sweats, and tremors, were the most frequently reported. Emotional symptoms, such as feelings of nervousness and fear, were also common, while mental symptoms, including negative thoughts and concentration difficulties, were less frequently observed. Notably, many students experienced overlapping symptoms, indicating that speaking anxiety is a multifaceted issue that cannot be understood or addressed by examining each symptom in isolation. This highlights the need for holistic strategies that consider the interconnectedness of physical, emotional, and mental symptoms to effectively support students in managing their speaking anxiety. The data collected from 60 students reveals that physical symptoms are the most prevalent indicators of speaking anxiety, with 83 instances reported. Emotional symptoms are also significant, with 50 occurrences, highlighting the emotional toll speaking anxiety takes on students. Mental symptoms are less common but still present, with 14 instances reported. This distribution underscores the multifaceted nature of speaking anxiety, affecting students physically, emotionally, and mentally. Addressing all these aspects is crucial for developing comprehensive strategies to

help students manage their anxiety and improve their speaking performance in foreign languages. It is suggested that future research should concentrate on pinpointing specific interventions to alleviate speaking anxiety and boost student performance. Potential strategies include recording practice sessions to help students become accustomed to being recorded and offering positive speaking experiences to reduce anxiety and enhance language proficiency

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