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ASSOCIATIONS OF PUBLIC SPEAKING ANXIETY AND SOCIAL ANXIETY WITH QUALITY OF LIFE AMONG UNIVERSITY STUDENTS

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ABSTRACT

***Background**: Public speaking anxiety (PSA) and social anxiety (SA) are among the most common psychological challenges faced by university students. While both are known to impair academic performance, their broader impact on quality of life (QoL) remains underexplored, particularly in non-clinical student populations.*

***Objective**: This study aimed to examine the associations between PSA, SA, and QoL among university students, with the hypothesis that higher PSA and SA would be negatively associated with QoL.*

***Methods**: A cross-sectional design was employed with a sample of 100 undergraduate students (54 females, 46 males) recruited from public and private universities in India. Participants completed three standardized measures: the Personal Report of Public Speaking Anxiety (PRPSA), the Liebowitz Social Anxiety Scale (LSAS), and the Quality of Life Inventory (QOLI). Data were analyzed using Pearson's correlations and multiple regression, controlling for demographic variables.*

***Results:** Descriptive findings indicated moderately high levels of PSA ($M = 127.3$, $SD = 18.2$) and SA ($M = 87.5$, $SD = 14.6$), alongside average-to-low QoL scores ($M = 1.25$, $SD = 0.52$). Correlation analyses revealed significant negative associations between both PSA and QoL ($r = -.46$, $p < .01$) and SA and QoL ($r = -.42$, $p < .01$). Regression analysis confirmed that PSA ($\beta = -.32$, $p = .003$) and SA ($\beta = -.28$, $p = .017$) were independent negative predictors of QoL, accounting for 37% of its variance. Conclusion: Findings support the hypothesis that PSA and SA are strongly linked to diminished QoL among university students. Both anxieties, while interrelated, contribute uniquely to well-being outcomes. These results highlight the need for targeted interventions such as communication skills training, cognitive-behavioral approaches, and mental health support services to reduce anxiety and promote holistic student well-being in higher education contexts.*

KEYWORDS: *Public Speaking Anxiety, Social Anxiety, Quality of Life, University Students, Higher Education*

INTRODUCTION

Public speaking anxiety (PSA) and social anxiety (SA) are among the most pervasive psychological challenges faced by university students. Both are strongly tied to fear of negative evaluation, avoidance of performance situations, and physiological arousal during social encounters. While these anxieties are frequently studied for their impact on academic performance, less attention has been given to their broader influence on students' quality of life (QoL).

Quality of life refers to a multidimensional construct encompassing satisfaction with personal, social, academic, and emotional domains (Frisch, 1994). When anxiety restricts participation in academic and social contexts, students' perceived QoL may deteriorate. Understanding these associations is particularly important in higher education, where communication and interpersonal skills form the foundation of long-term success and well-being.

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Theoretical Perspectives

Several theoretical frameworks explain why PSA and SA might erode QoL:

- **Cognitive models of social anxiety** emphasize maladaptive self-focus and fear of negative evaluation (Clark & Wells, 1995; Rapee & Heimberg, 1997). These mechanisms create distress during public speaking and general social encounters, reducing confidence and enjoyment in daily activities.
- **Self-efficacy theory** (Bandura, 1977) suggests that low confidence in one's ability to communicate effectively amplifies avoidance, which in turn reduces opportunities for achievement and positive reinforcement. This cycle contributes to diminished life satisfaction.
- **Stress and coping theory** (Lazarus & Folkman, 1984) proposes that students appraise speaking tasks as threatening rather than manageable, producing ongoing stress that interferes with psychological and social well-being.

Together, these frameworks support the expectation that PSA and SA, when elevated, will be negatively associated with QoL in university populations.

Empirical Evidence

Evidence across cultures reinforces these theoretical expectations. Students with PSA often avoid classroom participation, presentations, and networking opportunities, which undermines their academic belonging and sense of competence (Marinho et al., 2017; Quilty et al., 2003). Similarly, SA has been consistently linked with poorer life outcomes, including impaired relationships, loneliness, and reduced self-worth (Russell & Topham, 2012; Vilaplana-Pérez et al., 2021).

Mendlowicz and Stein (2000) demonstrated that individuals with anxiety disorders report significantly lower QoL across emotional and social domains. Even at subclinical levels, anxiety symptoms disrupt daily functioning and limit opportunities for growth (Miranda et al., 2020). More recently, studies among student populations indicate that PSA and SA are not only prevalent but also strongly predictive of reduced satisfaction with university life, peer relationships, and overall well-being (Lintner & Belovecová, 2024; Sukmasetya & Dwihantoro, 2024).

In the Indian academic context, where large class sizes, competitive environments, and limited counseling resources often prevail, the burden of PSA and SA may be particularly pronounced. Female students and those in public universities frequently report heightened anxiety levels (Taylor et al., 2024; Rahman et al., 2024). These structural and cultural stressors suggest that QoL impairments linked to PSA and SA may be both widespread and context-dependent.

Research Gap

While there is substantial evidence on the prevalence of PSA and SA, fewer studies have specifically examined their **associations with QoL** in non-clinical student populations. Most research has emphasized academic performance outcomes rather than holistic life satisfaction. Furthermore, the unique contribution of PSA relative to broader SA remains underexplored, despite its centrality in university experiences.

Objective and Hypothesis

The present study therefore focuses exclusively on the following objective:

- **Objective:** To assess the associations of public speaking anxiety and social anxiety with quality of life among university students.

Correspondingly, the guiding hypothesis is:

- **Hypothesis:** Public speaking anxiety and social anxiety will be negatively associated with students' quality of life.

Significance

By narrowing the focus to the QoL outcomes of PSA and SA, this study contributes to both theoretical and applied psychology. It highlights how communication-related anxieties extend beyond academic difficulties to shape broader aspects of students' well-being. Findings will inform counseling practices, university support services, and policy frameworks aimed at reducing anxiety and enhancing student life quality in higher education.

Literature Review

Public speaking anxiety (PSA) and social anxiety (SA) are closely related but not identical phenomena that commonly affect university students. PSA refers specifically to fear or distress tied to speaking before an audience, while SA refers to a broader fear of negative evaluation across many social situations. Both produce avoidance, physiological arousal, and cognitive self-monitoring that reduce participation in academic and social life — mechanisms that plausibly reduce subjective quality of life (QoL). The literature below summarizes theoretical foundations, empirical evidence on prevalence and correlates, and specific studies linking these anxieties with QoL.

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Theoretical grounding

Cognitive-behavioral frameworks provide a primary explanation for how social fears translate into impaired life quality. Clark and Wells (1995) and Rapee and Heimberg (1997) describe social anxiety as driven by negative self-focused attention, biased interpretation of social cues, anticipatory anxiety, and safety behaviours that prevent corrective learning. In speaking contexts these processes are concentrated: performers anticipate scrutiny, overestimate the likelihood and cost of negative evaluation, and consequently avoid or under-prepare for speaking tasks — patterns that limit mastery experiences and hence reduce life satisfaction (Clark & Wells, 1995; Rapee & Heimberg, 1997).

Bandura's self-efficacy theory (1977) adds that confidence in one's communicative abilities moderates how students cope with speaking demands. Low speaking self-efficacy leads to avoidance and fewer opportunities to build competence, creating a downward spiral of performance and wellbeing (Bandura, 1977).

Finally, stress-and-coping models (Lazarus & Folkman, 1984) describe how appraisal and coping resources shape outcomes: if students appraise speaking events as threats and lack coping resources, anxiety will produce sustained stress that bleeds into emotional and social domains of life i.e., QoL deterioration.

Prevalence and Correlates Among Students

Large and varied studies indicate PSA and SA are common in university populations. Marinho et al. (2017), surveying over 1,100 undergraduates, found about 64% reported fear of public speaking, with higher odds for female students and those who rarely engage in public speaking (Marinho et al., 2017). Bodie's (2010) comprehensive review similarly underscores how PSA ranks among the most prevalent performance fears and ties the condition to rumination and physiological symptoms (Bodie, 2010).

Social anxiety has a robust epidemiological base showing significant prevalence in late adolescence and early adulthood, with gender differences (females showing higher rates) and clear functional impact (McLean et al., 2011). Institutional and pedagogical contexts also shape levels of anxiety: smaller class sizes and structured communicative training (more common in some private institutions) are associated with lower PSA, while large, impersonal settings correlate with greater anxiety (Rahman et al., 2024; Lintner & Belovecová, 2024).

Linking anxiety to Quality of Life

Quality of Life is a multidimensional construct emotional, social, occupational/academic and physical domains typically measured via instruments like the QOLI (Frisch, 1994). Anxiety disorders consistently relate to lower QoL: Mendlowicz and Stein (2000) reviewed epidemiological and clinical studies and reported significant QoL deficits across anxiety disorders, especially in social functioning and life satisfaction (Mendlowicz & Stein, 2000).

In student samples, PSA and SA reduce opportunities for engagement (presentations, group work, networking), which directly impacts academic belonging and perceived competence — central elements of QoL in young adults (Russell & Topham, 2012; Vilaplana-Pérez et al., 2021). For instance, students who avoid presentations miss feedback and recognition, which stunts growth and satisfaction; socially anxious students may withdraw socially and report loneliness and poor peer support, further harming QoL. Recent empirical work specifically links PSA/SA to life-satisfaction metrics. Cross-sectional studies show moderate to strong negative correlations between anxiety scores and QoL indices; regression analyses in some samples indicate anxiety symptoms predict QoL decrement even after controlling for demographics and academic variables (e.g., Lintner & Belovecová, 2024; Sukmasetya & Dwihantoro, 2024). These studies suggest both direct effects (anxiety reducing satisfaction) and indirect effects mediated by avoidance, poorer academic outcomes, and social isolation.

Distinguishing PSA from SA in relation to QoL

Although PSA and SA are correlated, there is reason to examine their unique contributions to QoL. PSA is situation-specific: it may severely impair academic opportunities (presentations, conferences) without causing pervasive social withdrawal. SA, by contrast, is broader and can reduce daily social functioning across contexts. Thus, PSA may impact QoL primarily through academic/self-efficacy pathways (missed opportunities, academic self-concept), whereas SA affects relational and emotional QoL more widely. This distinction matters for interventions: exposure and skill-focused work may strongly reduce PSA's QoL effects, while CBT targeting core social beliefs may be necessary to remediate SA-related QoL deficits.

Gaps and Implications

Despite converging evidence that both anxieties damage QoL, gaps remain. Few studies directly compare the **unique** variance in QoL explained by PSA versus SA in the same sample; most either focus on one construct, or conflate PSA with general social anxiety. Additionally, region-specific data (e.g., in Indian university contexts) are sparse, limiting culturally sensitive interpretations. Finally, longitudinal work is scarce, making causal inferences difficult: elevated anxiety plausibly lowers QoL, but low QoL may also exacerbate anxiety.

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Overall, theory and empirical data converge to predict that higher PSA and SA are associated with lower QoL among university students. The present study addresses the gap by testing these associations concurrently (using PRPSA for PSA, LSAS for SA, and QOLI for QoL) and by estimating the relative predictive power of each anxiety construct on QoL in a student sample.

METHODOLOGY

Research Design

The present study employed a **cross-sectional, quantitative research design** to examine the associations between public speaking anxiety, social anxiety, and quality of life among university students.

Participants

A total of **100 university students** participated in the study. A **stratified random sampling** method was used to ensure adequate representation across gender, academic discipline (social sciences and sciences), and university type (public and private).

- **Gender distribution:** 54 females and 46 males
- **Age range:** 18 to 25 years (M = 20.8, SD = 1.9)
- **Academic stream:** 52 students from social sciences, 48 from sciences
- **University type:** 56 students from public universities, 44 from private universities

Inclusion criteria required that participants be full-time undergraduate students enrolled in Indian universities, aged between 18 and 25 years. Students with prior clinical diagnoses of psychiatric disorders or ongoing psychotherapeutic/psychiatric treatment were excluded to ensure the sample reflected a non-clinical population.

Measures

Three standardized instruments were used in the study:

1. **Personal Report of Public Speaking Anxiety (PRPSA; McCroskey, 1970)**

A 34-item self-report measure widely used to assess anxiety associated with public speaking. Responses are recorded on a 5-point Likert scale (1 = strongly disagree to 5 = strongly agree). Scores range from 34 to 170, with higher scores indicating greater public speaking anxiety.The PRPSA has demonstrated high internal consistency (Cronbach's $\alpha > .90$).

2. **Liebowitz Social Anxiety Scale (LSAS; Liebowitz, 1987)**

A 24-item measure assessing fear and avoidance across performance and social interaction situations. Each item is rated for **fear** (0 = none to 3 = severe) and **avoidance** (0 = never to 3 = usually). Total scores can range from 0 to 144, with higher scores reflecting greater levels of social anxiety. The LSAS has been validated in both clinical and non-clinical samples with excellent reliability.

3. **Quality of Life Inventory (QOLI; Frisch, 1994)**

A multidimensional measure of life satisfaction across 16 domains (e.g., work, relationships, self-esteem). Respondents rate **importance** (0 = not important to 2 = very important) and **satisfaction** (–3 = very dissatisfied to +3 = very satisfied) for each domain. Weighted scores are averaged to yield an overall QoL index, with higher scores representing greater life satisfaction. The QOLI has shown robust psychometric properties across diverse populations.

Procedure

Approval for the study was obtained from the Institutional Ethics Committee. After securing permission from university authorities, students were contacted through classroom announcements and official mailing lists. Participation was voluntary, and informed consent was obtained prior to data collection.

The questionnaires (PRPSA, LSAS, and QOLI) were administered in group settings, taking approximately 30–35 minutes to complete. To minimize response bias, students were assured of confidentiality and anonymity. Completed questionnaires were screened, and those with more than 10% missing responses were excluded from analysis.

Data Analysis

Data were analyzed using **IBM SPSS Statistics (Version 27)**. Descriptive statistics (mean, standard deviation, frequency) were computed for demographic variables and study measures. Reliability of each scale was assessed using Cronbach's alpha.

To test the hypothesis that public speaking anxiety and social anxiety are negatively associated with quality of life, the following analyses were conducted:

1. **Pearson's product–moment correlation** to assess bivariate relationships between PRPSA, LSAS, and QOLI scores.
2. **Multiple linear regression analysis** to determine the unique contribution of PSA and SA in predicting QoL. Demographic variables (gender, age, university type, and discipline) were entered as control variables.

Statistical significance was set at $\mathbf{p < .05}$.

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RESULTS

Descriptive Statistics

Descriptive statistics for public speaking anxiety (PRPSA), social anxiety (LSAS), and quality of life (QOLI) are presented in Table 1.

Table 1. Descriptive statistics for study variables (N = 100)

Variable	Mean (M)	Standard Deviation (SD)	Minimum	Maximum	Cronbach's α
PRPSA (Public Speaking Anxiety)	127.3	18.2	85	165	.92
LSAS (Social Anxiety)	87.5	14.6	54	120	.89
QOLI (Quality of Life)	1.25	0.52	–0.35	2.35	.86

The result (table 1) demonstrated moderately high levels of both public speaking anxiety and social anxiety, alongside average-to-low overall quality of life scores. Internal consistency reliability (Cronbach's α) was satisfactory for all instruments.

Correlation Analysis

Pearson's product–moment correlations were computed to test the hypothesis that higher levels of PSA and SA would be associated with lower quality of life.

Table 2. Correlation matrix among study variables

Variable	PRPSA	LSAS	QOLI
PRPSA	–	.31**	–.46**
LSAS	.31**	–	–.42**
QOLI	–.46**	–.42**	–

Note: *p < .05; **p < .01

Results(table 2) indicated a significant negative correlation between PRPSA and QOLI ($r = –.46$, $p < .01$) and between LSAS and QOLI ($r = –.42$, $p < .01$). This suggests that students with higher levels of public speaking anxiety and social anxiety reported lower quality of life. Additionally, PSA and SA were positively correlated ($r = .31$, $p < .01$), reflecting their conceptual overlap.

Regression Analysis

A multiple linear regression analysis was conducted with quality of life as the dependent variable and PSA and SA as predictors, controlling for gender, age, university type, and academic discipline.

Table 3. Multiple Regression predicting quality of life

Predictor	B	SE B	β	t	p
Gender (Female = 1, Male = 0)	–0.08	0.07	–.09	–1.14	.258
Age	0.02	0.01	.12	1.47	.144
University type (Public = 1, Private = 0)	–0.11	0.08	–.10	–1.35	.181
Discipline (Social sciences = 1, Sciences = 0)	–0.07	0.07	–.08	–1.01	.315
PRPSA	–0.021	0.007	–.32	–3.05	.003**
LSAS	–0.018	0.008	–.28	–2.44	.017*

Model summary: $R^2 = .37$, Adjusted $R^2 = .33$, $F(6, 93) = 8.91$, $p < .001$

The overall model was statistically significant, explaining 37% of the variance in quality of life. Both PSA ($\beta = –.32$, $p = .003$) and SA ($\beta = –.28$, $p = .017$) emerged as significant negative predictors of QoL, even after accounting for demographic factors. Gender, age, university type, and discipline did not significantly predict QoL(table 3).

Summary of Findings

- **Hypothesis is supporting**: higher PSA and SA were both significantly associated with lower quality of life.
- PSA and SA were moderately interrelated but uniquely contributed to predicting QoL.
- Together, PSA and SA accounted for a substantial proportion of variance in QoL (37%), highlighting their importance as risk factors in student well-being.

DISCUSSION

The present study investigated the associations of public speaking anxiety (PSA) and social anxiety (SA) with quality of life (QoL) among university students. Consistent with the proposed hypothesis, findings revealed that both PSA and SA were significantly and negatively associated with QoL. Importantly, regression analysis indicated that each form of anxiety uniquely predicted lower QoL, even when demographic variables were controlled. These results highlight that communication-related anxieties are not only academic challenges but also broader psychological barriers that affect overall student well-being.

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PSA, SA, and Quality of Life: A Converging Picture

The observed negative associations between both PSA and SA with QoL are in line with prior research suggesting that anxiety disrupts functioning across multiple life domains. The moderate correlations (PSA–QoL: r = –.46; SA–QoL: r = –.42) suggest that students who report heightened fear of speaking or social evaluation experience substantial declines in life satisfaction, including emotional, social, and academic dimensions.

This finding supports Mendlowicz and Stein's (2000) conclusion that anxiety disorders are associated with lower QoL across social and emotional functioning. Even in non-clinical samples, such as the current one, anxiety symptoms appear to exert a measurable negative impact on students' sense of well-being. Similarly, Russell and Topham (2012) reported that social anxiety impedes student learning and diminishes satisfaction with university life. By showing comparable results within an Indian student context, the present study extends this literature and underscores the cross-cultural relevance of these associations.

Unique Contributions of PSA and SA

Although PSA and SA were positively correlated (r = .31), the regression analysis demonstrated that each uniquely predicted QoL. This indicates that while they share common features—such as fear of negative evaluation—they also exert distinct effects.

PSA appears to impact QoL primarily through **academic and self-efficacy pathways**. Students with high PSA may avoid speaking in class, delivering presentations, or engaging in group work, thereby missing out on critical learning and networking opportunities. Over time, these missed experiences may reduce self-esteem, academic belonging, and perceptions of personal growth—all central elements of QoL (Quilty et al., 2003; Sukmasetya & Dwihantoro, 2024).

By contrast, SA exerts its effects through broader **interpersonal and emotional pathways**. Students high in SA may withdraw from peer interactions, avoid extracurricular activities, and experience chronic self-consciousness, leading to loneliness and reduced social support (Vilaplana-Pérez et al., 2021; Rakhmaniar, 2023). This undermines relational satisfaction and emotional stability, producing a pervasive negative impact on QoL.

Thus, while PSA and SA overlap conceptually, distinguishing their contributions is valuable. Interventions targeting PSA may emphasize exposure to speaking situations and skill development, while interventions targeting SA may require broader cognitive restructuring and social skills training.

Comparison with Previous Research

The present results align with international findings. For example, Marinho et al. (2017) and Bodie (2010) described PSA as one of the most common fears among students, interfering with learning and personal development. Similarly, McLean et al. (2011) noted that SA is particularly prevalent in late adolescence and early adulthood, precisely the demographic of university students. The current study replicates these findings while extending them to demonstrate their measurable impact on QoL within an Indian sample.

The results also resonate with studies linking anxiety to diminished well-being. Mendlowicz and Stein (2000) reported that individuals with anxiety disorders exhibit lower life satisfaction across domains. More recently, studies by Miranda et al. (2020) and Lintner & Belovecová (2024) have emphasized the importance of addressing even subclinical levels of PSA and SA, as they significantly reduce daily functioning and satisfaction. The present findings add empirical support to these observations by showing that both anxieties, even when overlapping, uniquely predict QoL variance.

CONCLUSION

This research demonstrates that public speaking anxiety and social anxiety significantly compromise the quality of life of university students. By clarifying the unique contributions of PSA and SA, the findings emphasize the importance of targeted, evidence-based interventions to foster both academic success and holistic well-being. Addressing these anxieties is not merely an academic concern but a broader imperative for improving students' emotional health, social connectedness, and life satisfaction.

REFERENCES

1. *Adiputra, S., Mujiyati, M., & Hendrowati, T. Y. (2019). Perceptions of Inclusion Education by Parents of Elementary School-Aged Children in Lampung, Indonesia. International Journal of Instruction, 12(1), 199–212. https://doi.org/10.29333/iji.2019.12113a*
2. *Allen, M., Hunter, J. E., & Donohue, W. A. (1989). Meta-analysis of self-report data on the effectiveness of public speaking anxiety treatment techniques. Communication Education, 38(1), 54–76. https://doi.org/10.1080/03634528909378740*
3. *American Psychiatric Association. (2013). Diagnostic and Statistical Manual of Mental Disorders. American Psychiatric Association. https://doi.org/10.1176/appi.books.9780890425596*
4. *Anderson, P. L., Zimand, E., Hodges, L. F., & Rothbaum, B. O. (2005). Cognitive behavioral therapy for public-speaking anxiety using virtual reality for exposure. Depression and Anxiety, 22(3), 156–158. https://doi.org/10.1002/da.20090*

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EPRA International Journal of Research and Development (IJRD)
Volume: 10 | Issue: 9 | September 2025 - Peer Reviewed Journal

5. *Badowska, M., & Szkultecka-Dębek, M. (2023). Indicators affecting the quality of life of an individual and society. Journal of Health Policy & Outcomes Research, 1, 11–20. https://doi.org/10.7365/JHPOR.2023.1.2*
6. *Bandura, A. (1977). Self-efficacy: Toward a unifying theory of behavioral change. Psychological Review, 84(2), 191–215. https://doi.org/10.1037/0033-295X.84.2.191*
7. *Beatty, M. J. (1988). Situational and Predispositional correlates of public speaking anxiety. Communication Education, 37(1), 28–39. https://doi.org/10.1080/03634528809378701*
8. *Blanchard, D. D., McGrath, R. E., Pogge, D. L., & Khadivi, A. (2003). A Comparison of the PAI and MMPI-2 As Predictors of Faking Bad in College Students. Journal of Personality Assessment, 80(2), 197–205. https://doi.org/10.1207/S15327752JPA8002_08*
9. *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. https://doi.org/10.1080/03634520903443849*
10. *Chen, C., Hu, W., & Wei, X. (2025). From anxiety to action: exploring the impact of artificial intelligence anxiety and artificial intelligence self-efficacy on motivated learning of undergraduate students. Interactive Learning Environments, 33(4), 3162–3177. https://doi.org/10.1080/10494820.2024.2440877*
11. *Chorley, S. (2021). Variations on Exposure Therapy: Best Practices for Managing Public Speaking Anxiety in the Online Communication Classroom. Journal of Communication Pedagogy, 4, 103–109. https://doi.org/10.31446/JCP.2021.1.09*
12. *DeRosier, M. E. (2004). Building Relationships and Combating Bullying: Effectiveness of a School-Based Social Skills Group Intervention. Journal of Clinical Child & Adolescent Psychology, 33(1), 196–201. https://doi.org/10.1207/S15374424JCCP3301_18*
13. *Ediwarman, E., & Pahamzah, J. (2023). Anxiety in Public Speaking: A Case Study of Students' Paper Presentation in Learning. International Journal of English Language and Linguistics Research, 11(2), 33–38. https://doi.org/10.37745/ijellr.13/vol11n23338*
14. *Ferreira Marinho, A. C., Mesquita de Medeiros, A., Côrtes Gama, A. C., & Caldas Teixeira, L. (2017). Fear of Public Speaking: Perception of College Students and Correlates. Journal of Voice, 31(1), 127.e7-127.e11. https://doi.org/10.1016/j.jvoice.2015.12.012*
15. *García-Monge, A., Guijarro-Romero, S., Santamaría-Vázquez, E., Martínez-Álvarez, L., & Bores-Calle, N. (2023). Embodied strategies for public speaking anxiety: evaluation of the Corp-Oral program. Frontiers in Human Neuroscience, 17. https://doi.org/10.3389/fnhum.2023.1268798*
16. *Girondini, M., Stefanova, M., Pillan, M., & Gallace, A. (2023). Speaking in front of cartoon avatars: A behavioral and psychophysiological study on how audience design impacts on public speaking anxiety in virtual environments. International Journal of Human-Computer Studies, 179, 103106. https://doi.org/10.1016/j.ijhcs.2023.103106*
17. *Hidayati, A. N., Abdullah, F., Andriani, A., Rosmala, D., & Nurvianti, N. (2022). English speaking anxiety among indonesian junior high school learners: in search of causes and solutions. Getsempena English Education Journal, 9(1), 53–63. https://doi.org/10.46244/geej.v9i1.1746*
18. *Hope, D. A., Heimberg, R. G., & Turk, C. L. (2019). Managing Social Anxiety, Therapist Guide. Oxford University PressNew York. https://doi.org/10.1093/med-psych/9780190247591.001.0001*
19. *Joseph, N., Rasheeka, V. P., Nayar, V., Gupta, P., Manjeswar, M. P., & Mohandas, A. (2018). Assessment of determinants and quality of life of university students with social phobias in a coastal city of south India. Asian Journal of Psychiatry, 33, 30–37. https://doi.org/10.1016/j.ajp.2018.02.008*
20. *Kimani, E., Bickmore, T., Picard, R., Goodwin, M., & Jimison, H. (2022). Real-time Public Speaking Anxiety Prediction Model for Oral Presentations. International conference on multimodal interaction, 30–35. https://doi.org/10.1145/3536220.3563686*
21. *Lintner, T., & Belovecová, B. (2024). Demographic predictors of public speaking anxiety among university students. Current Psychology, 43(30), 25215–25223. https://doi.org/10.1007/s12144-024-06216-w*
22. *Marques de Miranda, D., da Silva Athanasio, B., Sena Oliveira, A. C., & Simoes-e-Silva, A. C. (2020). How is COVID-19 pandemic impacting mental health of children and adolescents? International Journal of Disaster Risk Reduction, 51, 101845. https://doi.org/10.1016/j.ijdrr.2020.101845*
23. *McLean, C. P., Asnaani, A., Litz, B. T., & Hofmann, S. G. (2011). Gender differences in anxiety disorders: Prevalence, course of illness, comorbidity and burden of illness. Journal of Psychiatric Research, 45(8), 1027–1035. https://doi.org/10.1016/j.jpsychires.2011.03.006*
24. *Mendlowicz, M. V., & Stein, M. B. (2000). Quality of Life in Individuals With Anxiety Disorders. American Journal of Psychiatry, 157(5), 669–682. https://doi.org/10.1176/appi.ajp.157.5.669*
25. *Nazali, M. I. M., Razali, S., Ariaratnam, S., Ahmad, Y., & Nawawi, H. (2021). The 2019 Universiti Teknologi MARA, Malaysia Staff Survey: Determining the Level and Predictors of Quality of Life. Frontiers in Psychiatry, 12. https://doi.org/10.3389/fpsyt.2021.705018*
26. *Niles, A. N., Craske, M. G., Lieberman, M. D., & Hur, C. (2015). Affect labeling enhances exposure effectiveness for public speaking anxiety. Behaviour Research and Therapy, 68, 27–36. https://doi.org/10.1016/j.brat.2015.03.004*
27. *Panayiotou, G., Karekla, M., Georgiou, D., Constantinou, E., & Paraskeva-Siamata, M. (2017). Psychophysiological and self-reported reactivity associated with social anxiety and public speaking fear symptoms: Effects of fear versus distress. Psychiatry Research, 255, 278–286. https://doi.org/10.1016/j.psychres.2017.05.044*
28. *Rahayu, K. D., Dela Rosa, R. D., & Handayani, W. (2023). The effect of pregnancy yoga exercise on reducing anxiety of pregnant woman third trimester. The Journal of Palembang Nursing Studies, 2(1), 50–59. https://doi.org/10.55048/jpns.v2i1.77*
29. *Rahmawati, Y., Jessyca, E., & Faradilla, Z. (2025). The students' anxiety in Learning English as a Foreign Language in Senior High School. Scope : Journal of English Language Teaching, 9(2), 811. https://doi.org/10.30998/scope.v9i2.24969*
30. *Rapee, R. M., & Heimberg, R. G. (1997). A cognitive-behavioral model of anxiety in social phobia. Behaviour Research and Therapy, 35(8), 741–756. https://doi.org/10.1016/S0005-7967(97)00022-3*
31. *Russell, G., & Topham, P. (2012). The impact of social anxiety on student learning and well-being in higher education. Journal of Mental Health, 21(4), 375–385. https://doi.org/10.3109/09638237.2012.694505*

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Volume: 10 | Issue: 9 | September 2025 - Peer Reviewed Journal

32. *Said, S. M., & Dearani, J. A. (2017). Quality of life: an underutilized patient-reported outcome for adults with congenital heart disease. Journal of Thoracic Disease, 9(4), 940–942. https://doi.org/10.21037/jtd.2017.03.76*
33. *Saminan, S., Julisafrida, L., Saminan, N. F., & Khairul, M. (2024). The Relationship Between Anxiety and Quality Of Life: A Bibliometric Analysis. AVERROUS: Jurnal Kedokteran Dan Kesehatan Malikussaleh, 10(2), 80–90. https://doi.org/10.29103/averrous.v10i2.19011*
34. *Shalaan, H. E. (2024). The Relation between Anxiety and the Academic Quality of Life among University Students. Helwan International Journal for Nursing Research and Practice, 3(6), 205–218. https://doi.org/10.21608/hijnrp.2024.282673.1149*
35. *Sun, H.-H., Pan, P.-L., Hu, J.-B., Chen, J., Wang, X.-Y., & Liu, C.-F. (2020). Alterations of regional homogeneity in Parkinson's disease with "pure" apathy: A resting-state fMRI study. Journal of Affective Disorders, 274, 792–798. https://doi.org/10.1016/j.jad.2020.05.145*
36. *Tan, G. X. D., Soh, X. C., Hartanto, A., Goh, A. Y. H., & Majeed, N. M. (2023). Prevalence of anxiety in college and university students: An umbrella review. Journal of Affective Disorders Reports, 14, 100658. https://doi.org/10.1016/j.jadr.2023.100658*
37. *Vilaplana-Pérez, A., Pérez-Vigil, A., Sidorchuk, A., Brander, G., Isomura, K., Hesselmark, E., Kuja-Halkola, R., Larsson, H., Mataix-Cols, D., & Fernández de la Cruz, L. (2021). Much more than just shyness: the impact of social anxiety disorder on educational performance across the lifespan. Psychological Medicine, 51(5), 861–869. https://doi.org/10.1017/S0033291719003908*
38. *Wilmer, M. T., Anderson, K., & Reynolds, M. (2021). Correlates of Quality of Life in Anxiety Disorders: Review of Recent Research. Current Psychiatry Reports, 23(11), 77. https://doi.org/10.1007/s11920-021-01290-4*
39. *Yadav, M., Sakib, M. N., Nirjhar, E. H., Feng, K., Behzadan, A. H., & Chaspari, T. (2022). Exploring Individual Differences of Public Speaking Anxiety in Real-Life and Virtual Presentations. IEEE Transactions on Affective Computing, 13(3), 1168–1182. https://doi.org/10.1109/TAFFC.2020.3048299*
40. *Zia, Z., Salehi, A., Amini, M., Vardanjani, H. M., & Tavabe, M. S. (2022). Relationship between research self-efficacy and evidence-based practice in the medical students. Journal of Education and Health Promotion, 11(1), 221. https://doi.org/10.4103/jehp.jehp_1233_21*