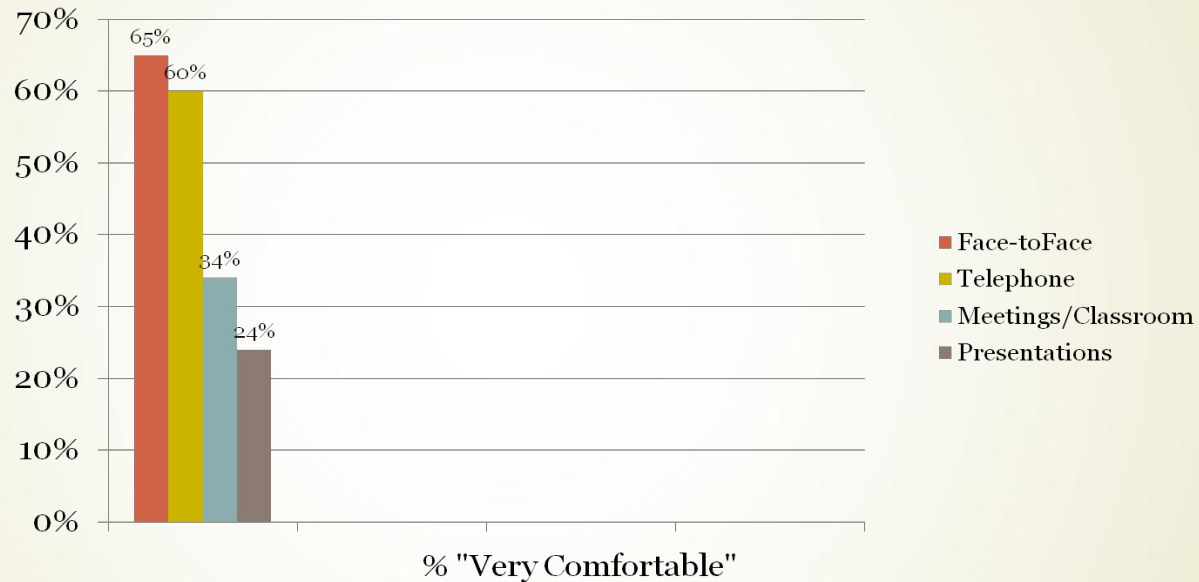




# Audience-Centered Presentations

Bianca Wolf, PhD, MPH, Associate Professor & Chair  
Department of Communication Studies

# Average Comfort Level with Speaking



Thus, many people have varying levels of anxiety when communicating:

- Face-to-Face = 35%
- Phone = 40%
- Meetings/Classrooms = 66%
- Presentations = 76%



# Communication Anxiety

- Defined: A range of unpleasant sensations that one experiences prior to or during a presentation.
- Also known as Public Speaking Anxiety (PSA)
- Common variables that are related to PSA *prior* to presentations include:
  - Lack of experience
  - Past negative experience
  - **Feeling different from the audience**
  - **Unease being the center of attention**
- Variables related to PSA *during* presentations include:
  - Importance of topic/speech
  - Perfectionism
  - **Audience misconceptions based on verbal/non-verbal feedback**



# Presentation Components

- **Audience Analysis**
- Speech Outline (not a manuscript ideally)
- Preparing Slides/Poster/Presentation Materials
- Oral Rehearsal (with Self-Evaluation)
- **Presenting while Monitoring (both presenter & audience)**
  - Audience as listeners
  - Presenters' focus on audience (preparation and in situ adaption)
- Post-Presentation Self-Evaluation



# Some Basics: Speech Genres/Formats

- The Informative Speech
  - Educating and informing audience of a topic, text, event, issue, etc.
- The Persuasive Speech
  - Move the audience toward attitude and/or behavioral change
- The Celebratory/Honorary/Ceremonial Speech
  - Offer praise and reflection, typically to mark an event or person [to an interested/involved audience]

**\*In reality, ALL presentations are persuasive!**

# (Persuasive) Speeches

- Attempting to gain fair and favorable consideration for the speaker's point of view via description, explanation, demonstration, or celebration.
- What we are really doing when we attempt to change an attitude or behavior is:

- **Create**:

- *Hydroponically grown veggies*



- **Reinforce** and/or **Resist** (Mass):

- *Church sermons*



- **Modify** (Valence):

- *Global warming*





# Audience Analysis

- The process of examining information about the expected listeners to a presentation
  
- 2 primary ways to assess the audience:
  1. **Presenter/Independent Assessment of Audience**
  2. **Audience Surveys**



# 1 – Presenter's Assessment of Audience: **Option A**

- Require presenters to complete a general audience assessment as part of their preparation for their presentations.
- Sample questions:
  - To whom am I speaking?
  - What does my audience expect from me?
  - What topic (details of my work) is most suitable for my audience? What does my audience know of this topic?
  - What is my objective?
  - What kinds of information should I share with my audience?
  - How should I present the information to them?
  - How can I gain and hold their attention?
  - What kinds of examples would work best?





# 1 – Presenter's Assessment of Audience: **Option B**

- Presenters could also try to gage audience:
  1. **Demographics** such as age, gender, cultural background, SES, literacy level, religious orientation, education, political orientation, and exposure to/experience with topic or issue, etc.
  2. **Attitudes, Beliefs, and Behaviors of topic/issue**
    - That is, what does the audience like/dislike, determine to be true/false, deem as right/wrong & what do/don't they do regarding issue?
    - Audience attitudes are influenced by the presentation context as well:
      - Captive vs. Voluntary Audiences
  3. **Environment for Presentation**
    - The physical and psychological space (see next slide)
      - Furniture, Seating Arrangement, Microphone availability, Number of people present, Room lighting & decor



# Assessing Audience Demographics, Attitudes & Experiences

- Translating for mixed literacy, low and/or mixed knowledge of topic, etc.
  - Reduce jargon, technical terms, etc.
  - Use simple language; short terms; correct words
  - Define terms/explain processes in vivid language
  - Use everyday examples

\*Recorded speech rehearsals are invaluable to help presenters learn how they come across!



# Evaluating the Environment

- Questions to ask your students:
  1. How many people are expected to attend?
  2. To what extent do I know and/or have relationships with audience members?
    - How does that influence my comfort level?
  3. How close will I be to the audience?
  4. Will I sit? Will I stand? Will I speak from lectern?
  5. Will I be expected to use a microphone?
  6. Will I be on stage or a raised platform?
  7. What is the room lighting like? Will the audience seating area be darkened beyond a lighted stage?
  8. Will I have adequate equipment for my visual aids? Do I know how to use the equipment? Do I have a back-up planned for technology problems?
  9. Will there be noise or distractions inside or outside of the room?



## 2 – Audience Surveys

- Provide students with templates or have students create audience surveys to estimate their positions on the various presentations/topical domains.
- Demographic surveys (see next)
- Attitudinal surveys (see next)

\*These could also be combined into 1 survey



## 2- Audience Demographic Survey

□ Basic Demographics may include:

1. Name
2. Age
3. Sex
4. Cultural/ethnic background
5. Education level; Major/Minor in school
6. Occupation
7. Religious orientation/affiliation
8. Political orientation/affiliation
9. Martial or Relational Status
10. Income
11. Hometown and state
12. Membership in professional or fraternal organizations

## Demographic/Audience Analysis

Instructions: Complete the following questionnaire, but don't put your name at the top. Your instructor will make several copies of everyone's responses and make them available for you to see prior to your speech.

1. **Gender** M \_\_\_\_\_ F \_\_\_\_\_
2. **Age:** 17 - 25 \_\_\_\_\_  
26 - 35 \_\_\_\_\_  
36 - 45 \_\_\_\_\_  
46 or more \_\_\_\_\_
3. **Year in School:**  
\_\_\_\_\_ Freshman  
\_\_\_\_\_ Sophomore  
\_\_\_\_\_ Junior  
\_\_\_\_\_ Senior
4. **Major (or what you think you might choose):** \_\_\_\_\_
5. **Group Memberships:** (Name specific group if you like)  
Greek Organization \_\_\_\_\_  
Religious Organization \_\_\_\_\_  
Athletic Organization \_\_\_\_\_  
Cultural Organization \_\_\_\_\_  
Academic/Honors Org. \_\_\_\_\_
6. **Political Affiliation:**  
\_\_\_\_\_ Republican \_\_\_\_\_ Democrat \_\_\_\_\_ Independent
7. **Religious Affiliation** \_\_\_\_\_
8. **Three Favorite Hobbies** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
9. **Career Goal** \_\_\_\_\_
10. **2-3 Most important issues you believe are facing the world today** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## 2- Audience Attitudinal and/or Experiential Survey

- Students adapt the following questions to their topic/domain:
  - **Open-ended questions:**
    - What are your feelings about \_\_\_\_\_?
    - What are your reactions to the current rates of \_\_\_\_\_?
    - What would you do if \_\_\_\_\_?
    - What are your past experiences with \_\_\_\_\_?
  - **Closed-ended questions** (YES/NO, Agree ---Disagree, Check one, Rank order, etc.):
    - Are you in favor of \_\_\_\_\_? YES or NO
    - [Provide statement] Circle the statement that best describes your feelings. STRONGLY AGREE .... STRONGLY DISAGREE
    - Check the statement that most closely reflects your feelings about \_\_\_\_\_.
    - Rank the following statements about \_\_\_\_\_.



## 2 – Audience Attitudinal and/or Behavioral Survey

- Additional Advice for Student Assignments:
  - Have presenters complete their own surveys and/or conduct a self-assessment of their own position.
  
  - WHAT ELSE?





# A Multi-Task Process: Presenting While Monitoring

- Presenters are ultimately speaking with their audience while simultaneously listening to their audience.
- When teaching audience-focused presentation work consider a conversational lens of communication.
  - That is, explain that presenters are still functionally having a conversation with their audience; albeit, the audience typically isn't responding verbally during the speech BUT they are responding non-verbally.
- Here, I emphasize how both presenters and audience members must sharpen their **listening skills**.



# That Darn Audience

Audience nonverbal behaviors that can stress out speakers:

- **Inattentiveness** = lack of eye contact, checking the clock, look at papers, etc.
  - Restless movements = fidgeting, leg wiggling, pencil wagging, feet shuffling
- **Side conversations/comments**
- **Hostile or purposefully ignoring nonverbal responses**
  - “I’ve heard this all before” attitude
- **Poor listening** or a focus on the speaker, not the speech
  - Defensive listening:
    - Seeking points in speech that you can refute or disagree with
  - ***As Opposed To***
  - Critical listening:
    - How facts relate to purpose and thesis of speech

# Assessments of Listening

Name: \_\_\_\_\_

## ***Listening Skills Self-Evaluation***

	<b>Almost Always</b>	<b>Usually</b>	<b>Sometimes</b>	<b>Seldom</b>	<b>Never</b>
Giving in to mental distractions.					
Giving in to physical distractions.					
Trying to recall everything a speaker says.					
Rejecting a topic as uninteresting before hearing the speaker.					
Faking paying attention					
Jumping to conclusions about speaker's meaning					
Deciding a speaker is wrong before hearing everything he or she has to say					
Judging a person on personal appearance					
Not paying attention to a speaker's evidence					
Focusing on delivery rather than on what the speaker says.					
<b>Totals:</b>					
<b>Multiply:</b>	<b>x 2</b>	<b>x 4</b>	<b>x 6</b>	<b>x 8</b>	<b>x 10</b>
<b>Results:</b>					

**Evaluation:** Add the sum of the results row to determine your score. My score is \_\_\_\_\_

Below 70: Better listening needed!

71 - 90: Good listening skills

Above 90: You listen very well!

Do you agree with the evaluation? What particular weaknesses should you address to improve your listening skills?



# Steps & Strategies for Active Listening

(from Duck & McMahan)

## □ **Receiving**

- Can your audience hear you?
- Are you watching your audience for their response(s)?

## □ **Attending**

- Face the audience/presenter
- Make eye contact
- Do not ignore the audience/presenter

## □ **Interpreting**

- Are the words being spoken understood by all?
- What nonverbal messages are conveyed by the audience?

## □ **Responding**

- Is the audience (or presenter) responsive? Verbally or Non-Verbally



# Barriers to Active & Effective Listening

(adapted from Adler et al.)

- Time
- Effort
- Message overload
- Rapid thought
- Psychological noise
- Physical noise
- Hearing problems
- Faulty assumptions
- Emphasis on talk
- Cultural differences



# Adapting to Audience Nonverbal Cues

## □ **Some ways to effectively respond to an inattentive/bored audience include:** (adapted from Beebe & Beebe)

- Eliminate some abstract facts, statistics, dry material
- Ask the audience a question or example or for a direct response via hand raising
- Ask the audience to participate through question asking, polling, etc.
- Pick up the pace of your delivery (appropriately)
- Pause for dramatic effect
- Tell a story/use an example to which the audience can relate

## □ **If audience appears confused:**

- Be more redundant
- Try paraphrasing or offer a different example
- Slow down your rate of speaking
- Repeat/clarify the major overarching point of your presentation/research
- Ask the audience for feedback

## □ **If the audience seems to be disagreeing with your message:**

- Provide data and evidence to support your point
- Remind listeners of your credibility, expertise, or experience with topic
- Less anecdotes, stories



# Some Fundamentals to Audience Attentiveness

- Research on listening during speech events has demonstrated that individuals do not retain a bulk of the body of presentation material.
- Presenters should always follow the general advice to put the “important stuff” in the beginning of their presentations and then again at the end:
  1. Tell them what you're going to tell them
  2. Tell them (\*Audiences will lose attention here or forget it!)
  3. Tell them what you told them



# After the Presentation

- Preparing for Audience Questions:
  - Anticipate & Practice answering tough questions before an audience of friends.
  - Repeat or paraphrase the question you are asked.
  - Maintain eye contact with the audience as a whole as you answer.
  - Defuse hostile questions by rewording them in unemotional language.
  - Don't be afraid to say, "I don't know."
  - Keep answers short and to the point.
  - Handle non-questions politely.
  - Bring the question-and-answer session to a close by emphasizing your message.



## Presentation Evaluation Form

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Topic: \_\_\_\_\_

Total Score: \_\_\_\_\_ /100

INTRODUCTION (12 points)			
Creatively <b>gained attention</b> and interest of audience	1	2	3
Noted/targeted <b>relevance of topic</b> to the audience	1	2	3
Noted <b>credibility</b> of speaker	1	2	3
Clearly & concisely stated <b>thesis (preview main points)</b>	1	2	3
ESTABLISHES TOPIC/POSITION (16 points)			
<b>Re-Stated/Defined position</b> clearly	1	2	3 4
Identified minimum of <b>2 - 3 key points</b> related to position being advocated	1	2	3 4
Blended <b>credible evidence</b> with main and sub-points: statistics, definitions, anecdotes, examples, expert testimony, comparisons and contrasts	1	2	3 4
Considered and <b>refuted primary objections/opponents</b>	1	2	3 4
GENERAL CONTENT & ORGANIZATION (11 points)			
<b>Verbally credited</b> authors/sources appropriately within speech	1	2	3 4
<b>Organizational pattern</b> was logical, easy to follow, persuasive	1	2	3 4
<b>Transitioned</b> smoothly between sections and points	1	2	3
CONCLUSION (6 points)			
<b>Summarized main points/reiterate</b> topic relevance/importance	1	2	3
Clinched the speech with a <b>memorable ending</b>	1	2	3
DELIVERY (18 points)			
Speech was <b>extemporaneous</b> (not memorized or read)	1	2	3
<b>Gestures</b> were controlled, natural, appropriate	1	2	3
Maintained appropriate <b>eye contact</b>	1	2	3
Avoided hesitations, <b>disfluencies</b> , and fillers (um, uh, etc.)	1	2	3
Conveyed enthusiasm and used good <b>vocal variety and tone</b>	1	2	3
Effectively responded to <b>audience questions</b>	1	2	3
FINAL OUTLINE (5 points)			
Outline formatted cleanly; includes appropriate level of content	1	2	
Developed a logical organizational pattern and persuasive strategy	1	2	3
SELF-EVALUATION (12 points)			
Offered <b>thoughtful, reflective comments</b> indicative of quality self-analysis	1	2	3 4
<b>Identified</b> speaking/presentation <b>strengths accurately</b>	1	2	3 4
<b>Identified areas for improvement</b> in rehearsal and demonstrated effort to improve in speech	1	2	3 4
QUESTIONS ASKED AS AUDIENCE MEMBER (20 pts)			
<i>Question #1 – 10 pts</i>		<i>Question #2 – 10 pts</i>	
PENALTIES TO AVOID			
<ul style="list-style-type: none"> <li>• For every 30 seconds over or under time limit [-5 points]</li> <li>• Failure to meet with course assistant (if required) for speech practice [- 10 points]</li> <li>• For unprofessional demeanor, up to [-10 point] deduction. Professional demeanor means that you treat the topic seriously (not as a joke) and that you do no attack or willfully offend members of your audience.</li> <li>• Performing as a poor listener during other's speeches [-5 points per speech]</li> </ul>			

## SELF-EVALUATION FORM

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Topic: \_\_\_\_\_

Total Score: \_\_\_\_\_/63

### INTRODUCTION (12 points)

Creatively <b>gained attention</b> and interest of audience	1	2	3
Noted/targeted <b>relevance of topic</b> to the audience	1	2	3
Noted <b>credibility</b> of speaker	1	2	3
Clearly & concisely states <b>thesis (preview main points)</b>	1	2	3

### ESTABLISHES TOPIC/POSITION (16 points)

Re- <b>Stated/Defined position</b> clearly	1	2	3	4
Identified minimum of <b>2 - 3 key points</b> related to position being advocated	1	2	3	4
Blended <b>credible evidence</b> with main and sub-points: statistics, definitions, anecdotes, examples, expert testimony, comparisons and contrasts	1	2	3	4
Considered and <b>refuted primary objections/opponents</b>	1	2	3	4

### GENERAL CONTENT & ORGANIZATION (11 points)

Verbally <b>credited</b> authors/sources appropriately within speech	1	2	3	4
<b>Organizational pattern</b> was logical, easy to follow, persuasive	1	2	3	4
<b>Transitioned</b> smoothly between sections and points	1	2	3	

### CONCLUSION (6 points)

Summarized <b>main points/reiterate</b> topic relevance/importance	1	2	3
Clinched the speech with a <b>memorable ending</b>	1	2	3

### DELIVERY (18 points)

Speech was <b>extemporaneous</b> (not memorized or read)	1	2	3
<b>Gestures</b> were controlled, natural, appropriate	1	2	3
Maintained appropriate <b>eye contact</b>	1	2	3
Avoided hesitations, <b>disfluencies</b> , and fillers (um, uh, etc.)	1	2	3
Conveyed enthusiasm and used good <b>vocal variety and tone</b>	1	2	3
Effectively responded to <b>audience questions</b>	1	2	3

1. Please offer feedback about your overall performance. How do you think you did?

2. Reflect on your strengths as a presenter (i.e., verbal, non-verbal, etc.)

3. Reflect on those areas that you observed need improvement. How will correct for those issues?

# Enhancing mother-daughter coping & breast cancer prevention behavior: Challenging topics for young-adult daughters

Bianca Wolf, Ph.D., M.P.H.

Assistant Professor, Department of Communication, University of Puget Sound, Puget Sound, WA, USA

Carla L. Fisher, Ph.D.

Assistant Professor, Center for Health & Risk Communication, George Mason University, Fairfax, VA, USA

Teri Britt Pipe, Ph.D., R.N.

(Formerly) Director of Nursing Research & Innovation, Mayo Clinic; Dean, College of Nursing, Arizona State University, Phoenix, AZ, USA

Nicole Piemonte, M.A.

Ph.D. Candidate, The University of Texas Medical Branch Graduate School of Biomedical Science, Galveston, TX, USA

## INTRODUCTION / RATIONALE

### Family Communication, Breast Cancer Coping, & Prevention

#### HEALTHY COPING

- Healthy family communication = less depression, more relational satisfaction, less anxiety, better immunological functioning
- Family Systems Genetic Illness Model, cancer patients' coping and well-being is largely connected to family interaction

#### HEALTH PROMOTION

- Family members' talk and behavior influence one another for future

### Mothers and Daughters: Shared Stress - Mirrored Outcomes

#### SOCIALLY

- Daughters provide care/support to mom, first time in bond
- Mothers worry about daughter's distress, need to be there

#### PSYCHOLOGICALLY

- Mothers with PTSD symptoms = daughters with the same symptoms
- Chronic psychological risk for daughters and mothers (worry for themselves and each other)

#### PHYSICAL

- Mothers with elevated stress hormones and/or decreased immunological functioning have daughters with the same outcomes

### Distressful Communication Between Young-Adult Daughters & Diagnosed Moms

#### MALADAPTIVE COMMUNICATION PATTERN

- Fisher's (2008, 2010) research - pattern only with this age group
- Mothers want to talk and daughter withdraw/avoid
- Daughters' extreme withdrawal competes with mothers' desire to talk to communally cope.
- Avoidance a marker of distress, poor adjustment

## PURPOSE & RESEARCH INQUIRY

### National Cancer Institute (NCI) - Patient-Centered Care

- NCI identifies "communications" (family communication) as a critical factor in changing behavior to promote health, resistance, survival.
- Rolland: families need help - no "psychosocial map" to family coping

#### Study Focus

- Identify issues to enhance mother-daughter communication thereby improving coping and health outcomes

#### RQ: What topics are most challenging for young-adult daughters to discuss with their diagnosed mothers?

- \*Challenging in that they were distressful in some manner or topics the daughter avoided

## METHODS

### Purposive Sampling & Interpretive Design

- Recruited diagnosed women and their young-adult daughters
- Semi-structured interview script to capture communication patterns associated with coping/adjustment, openness, avoidance/withdrawal, and talk about health promotion behavior.

\*part of a larger mixed-method study on mother-daughter coping

## PARTICIPANTS

- N = 27 (14 Moms aged 40-61, 13 Daughters aged 18-25)
- Most Caucasian, 2 Native American, 2 African American, 1 Asian
- Resided in Southwest region of the United States
- Stage @ diagnosis ranged from 1-3; Treatment ranged from lumpectomy only to mastectomy, radiation, and chemotherapy
- SES < \$20,000 to +\$100,000; Nearly half college degree or higher

## FINDINGS

### DISTRESSFUL TOPICS FOR DAUGHTERS

- **Mom's Emotional Disclosures (fears, death, recurrence)**

DAUGHTER: "She would talk about how serious it could be - that always made me uncomfortable because I was like - I hope she's not going to die kind of thing [She tell me ] fears that she was having. 'I'm afraid I won't be around to see my grandkids grow up,' ... It just made me upset

MOTHER: I don't want to upset her later, because she cries. Like if I'm crying, she doesn't really cry, but I know she cries later. I worry about that. She doesn't handle that stuff well. When it's happening, she's all business and she's really good, but then later on, she's sad. I know she's sad and that upsets me.

- **Mother's Looking Sick & Physical Changes (scars, hair loss) particularly in Medical Settings (chemo treatments, doctor's appointments, in the hospital)**

DAUGHTER: "I feel like when she's been in the hospital recently, that's definitely really hard for me to handle. I want to go because she's there, but it's definitely really hard for me to see her looking so sick. So I normally would totally avoid that ... I get busy"

MOTHER: "Had she been older I probably would have been frustrated about her not being willing to take me to doctor's appointments. But given that she had just learned to drive and that she has anxiety with doctors I knew it wasn't personal thing that she wasn't trying to help me. It was just not within her ability. I guess that would be the only thing."

- **Daughters' Future Disease Risk or Health Promotion (talking about risk, mammograms, genetic testing)**

DAUGHTER: "[My mom] mentioned how it might be genetic because I think some other people in our family had it before. I was like please don't talk about it right now, it's still a long ways away. I don't want to think about it."

MOTHER: "[She] doesn't want to hear it ... She frustrates me ... It doesn't bother her. I do kind of worry about that ... She's Miss Avoidance. "

- **Daughters' Emotional Concerns about Mom**

DAUGHTER: "[If she asks because] I'm crying I'll just be like 'I just feel bad that you're so sick.'" Like I'll say something like that but I'll never really go in-depth with how I feel and that's pretty much because with her, personally, I just don't want it to upset her. I don't want to make her any more upset."

## CONCLUSIONS

### Implications for Families and Practitioners

- Difficult topics that arise during mothers cancer coping are tied to daughters' unhealthy withdrawal behavior
- Mothers need to be aware of topics that are particularly distressing
- narratives can be used as behavioral modeling tools for families to increase awareness of what distresses daughters in the age group