



The Efficacy of Guided Imagery-Assisted Systematic Desensitization Group Counseling in Reducing Pre-service Teachers' Public Speaking Anxiety

Ely Roy Madoni^{1*}, Abidatul Mardiyah², Yurike Kinanthi Karamoy³

¹Guidance and Counseling Program, Universitas Darul Ulum, Indonesia

²Faculty of Education and Teacher Training, Universitas Terbuka, Indonesia

³Guidance and Counseling Program, Universitas Islam Jember, Indonesia

*Correspondence author: roy.bk@undar.ac.id

Article History

Received : 2026-05-10

Revised : 2026-05-31

Published : 2026-06-01

Keywords

Group counseling
Guided imagery
Pre-service teachers
Public speaking anxiety
Systematic desensitization

Abstract

Pre-service teachers experience public speaking anxiety as a significant psychological and academic barrier when exposed to teaching practicums. The present study aimed to investigate the effectiveness of Systematic Desensitization Group Counseling with Guided Imagery support in reducing pre-service teachers' public speaking anxiety. The study was a true experimental study with pretest-posttest control group design. Thirty students who had high levels of anxiety were randomly assigned to an experimental group (n=6) and a control group (n=6). Data were collected by using the adapted Indonesian version of the Personal Report of Public Speaking Anxiety (PRPSA) instrument. Data analysis was performed using the Independent Sample T-Test and Effect Size calculation. The results of the analysis revealed a very significant difference between the experimental and control groups in decreasing the anxiety score ($p < 0.001$). Calculation of effect size using Cohen's d resulted in a value of 0.991, which is very large. In summary, the modified guided imagery group counseling intervention of systematic desensitization was highly effective and had a massive impact on suppressing students' physiological and cognitive anxiety responses. The findings of these studies indicate that the Guidance and Counseling units of universities employ this intervention as a standard mental preparation programme for students before they proceed for teaching practicum.

Introduction

In today's 21st-century education, the teaching and learning process will require much greater changes than we have seen before. In this new and developing educational environment, the teacher's role is no longer simply as a passive instructor who delivers content from their own knowledge base, but instead the role has evolved into that of an active facilitator, innovator and communication partner with students and other stakeholders. As such, one of the most important skills for educators to develop is the ability to effectively communicate their thoughts, feelings and opinions in a clear, persuasive and compassionate manner (Darwin, 2025; Punongbayan et al., 2025), which are essential to create a rich and engaging educational experience for all involved. Unfortunately, research-based data clearly show that many pre-service teachers still experience some form of psychological or behavioral obstacles associated with public speaking and speech-related anxiety when asked to engage in demonstrating their teaching abilities (Guvey Aktay, 2021). The fear of communicating verbally not only results in verbal apprehension; it can also negatively impact an educator's self-efficacy in pedagogy and thus reduce the quality of teacher-student interaction and the structure of classroom delivery if left unaddressed by some type of psychological treatment.

Higher education institutes; especially the teacher education institute (LPTK); have an institutional obligation to prepare their students for the ideal profile of the educator. This can be achieved by implementing a series of academically based practicum phases for pre-service teachers where they will develop both pedagogic understanding

and professional teaching skills (Crisnawati et al., 2022). The competence of public speaking ability within this practicum-based curriculum environment is continuously assessed utilizing multiple forms of educational simulation learning experiences including micro-teaching (Afandi et al., 2026).

In order to meet the requirements for creating an ideal educator profile, Higher Education Institutions; including those known as Teacher Education Institutions (LPTK), have a structural responsibility to prepare the mental readiness and competencies of their students. In terms of operationalizing these goals for Pre-Service Teachers, they must be engaged in a variety of formalized academic and practicum stages. These stages will allow them to experience the integration of Pedagogic Knowledge and Professional Teaching Practices (Crisnawati et al., 2022). As part of the Practicum Curriculum Ecosystem, Public Speaking Proficiency is viewed as one of the Core Competency Pillars within the Practicum, which continues to be assessed using a variety of Educational Simulation Learning Methods, including Microteaching (Afandi et al., 2026). However, in reality, this teaching simulation phase, which is full of academic performance demands, strict observation by supervising lecturers and peer evaluation, is often the main triggering factor for increased psychological distress in the form of speaking anxiety in students (Sofian Hadi et al., 2020). Such a paradoxical situation illustrates that the traditional pedagogical training cannot stand alone but needs the integration of specific guidance and counseling interventions to reduce such simulation-induced anxiety before the pre-service teachers are actually deployed to the educational field.

In order to satisfy the necessity of such specific interventions, counselors need to take a comprehensive view of the anatomy of speaking anxiety to make sure the administered psychological treatment is accurately targeted. From a conceptual level, public speaking anxiety is not a typical form of situational nervousness; it is a complex psychological condition rooted in a strong fear of negative judgment and evaluation by the audience (Bartholomay & Houlihan, 2016). In the performance-based situations such as teaching simulations experienced by pre-service teachers, psychological distress arises spontaneously and is translated into debilitating physiological dimensions such as tachycardia, extremity tremors and hyperhidrosis (Putri et al., 2020). Beck et al. (2005) presented a grand theory of anxiety disorders that, from a cognitive point of view, offers a solid theoretical foundation for a comprehensive understanding of this phenomenon. Beck (1976) argues that anxiety is based on erroneous cognitive schemas where people tend to overestimate the possible threat (here, criticism from the audience) and underestimate their ability to cope with it. This specific conceptualization of anxiety was clearly defined by McCroskey (1970) in the communicative context through the construct of Communication Apprehension. According to McCroskey, public speaking anxiety is a syndrome with both trait (inherent) and state (situational) dimensions, both of which are highly dependent on the environment. McCroskey developed the Personal Report of Public Speaking Anxiety (PRPSA) instrument to measure the severity of this anxiety, and it is still the world's gold standard for measurement today.

The global empirical evidence has shown that public speaking anxiety is highly prevalent among university students. Marinho et al. (2017) conducted a cross-national investigation and found that over 63% of higher education students reported that they felt debilitating fear when asked to speak in public. As a result, this makes anxiety of public speaking one of the most common social phobias in academic settings. Other international research related to this study also supports that this anxiety significantly hinders the competencies of pre-service teachers. According to Arifin et al. (2023) and Dewi (2022) students who have high anxiety tend to avoid in speaking. These behaviors adversely affect their overall quality of instructional delivery (e.g., unwillingness to engage in discussions or limiting eye contact during presentations). Similar phenomena in the Indonesian context have been well documented in a range of scientific publications. Speaking anxiety among Indonesian university students is a common occurrence. Nurhasanah (2021) highlights this, and Fitri et al. (2018) support this by attributing this to a culture of shame, low self-efficacy, and the fear of being judged by peers and lecturers.

The long-term effects of this ignored anxiety are extremely detrimental to the career trajectory of pre-service teachers (Savitri & Swandi, 2023). If left unchecked, speaking anxiety gradually erodes the students' academic self-concept and reduces their learning motivation (Astuti, 2019), resulting in a cycle of academic failure in which the students think of themselves as unworthy to become the next educator (Kusumastuti, 2020). Guidance and Counseling services in institutions of higher learning are needed to address the urgency of this predicament. University counselors are expected to develop and implement evidence-based psychological interventions to help students reduce their anxiety in speaking and regain their self-confidence in a measurable way (Dobson & Dobson, 2017; Izzah & Indrijati, 2024; Savitri & Swandi, 2023). In the past, a variety of interventions have been tried, ranging from isolated training in communication skills to general relaxation techniques. However, the gap analysis of the existing literature (Rahmawati et al., 2023) suggests that these traditional cognitive or generalized relaxation approaches often prove to be time-consuming and do not sufficiently address the procedural fears encountered by pre-service teachers in handling complex classroom dynamics. A highly promising framework for a definitive solution to these limitations is

the behavioral modification approach using the Systematic Desensitization technique. The basic grand theory of this technique is that anxiety is a learned response and, therefore, can be 'unlearned' through a process of reconditioning (Wolpe, 1968). The principle of reciprocal inhibition is the primary mechanism of Systematic Desensitization. Wolpe (1968) explains that a person cannot be relaxed and anxious at the same time. The individual is exposed to anxiety-provoking stimuli in a state of deep physical relaxation, and the anxiety response is gradually replaced by a relaxation response (Davison, 1968).

The theoretical basis of classical Systematic Desensitization is very strong, but its use for university students is often seen as inefficient and not context-specific (Vitasari et al., 2010). To address this gap, the present study integrates the Guided Imagery relaxation technique as an important component to replace the traditional muscle relaxation in the desensitization process (Strauss et al., 2009). Guided imagery is a cognitive behavior intervention technique that guides individuals to focus their thoughts on positive mental imagery by utilizing all five senses (Antara et al., 2022). Guided imagery has been shown to be effective in more quickly reducing the overactivity of the sympathetic nervous system and creating a cognitive bridge to help in the reconstruction of threat perceptions (Nguyen & Brymer, 2018). What sets this study apart is that the Guided Imagery scripts were tailored for the classroom setting. Subjects are led in a state of deep mental control and relaxation to visualize real situations they face as pre-service teachers, such as creating lesson plans, being in front of a classroom, and dealing with the gaze of a supervisor, instead of imagining generic natural scenery.

Moreover, the intervention is carried out in a Group Counseling format to maximize service delivery and coverage. Group dynamics provide therapeutic elements that are not present in individual therapy, such as universality (the realization that one is not alone in anxiety) and group cohesiveness (which facilitates the desensitization process through peer support) (Yalom & Leszcz, 2020, p. 4). Based on the prior discussed arguments, the found gaps of literature and theoretical underpinnings, the current study seeks to assess the efficacy of modified Guided Imagery-assisted Systematic Desensitization Group Counseling on alleviating public speaking anxiety of pre-service teachers. The results of this experiment are expected to contribute a solid theoretical contribution to the field of guidance and counseling and to offer a validated practical module for practitioners at higher education institutions.

Methods

Design

This research uses a quantitative approach with a quasi-experimental design, the design used is the Pretest-Posttest Control Group Design. This design was chosen because it allows the researcher to compare the effects of the intervention between the experimental and control groups, while controlling for threats to internal validity by using pre- and post-treatment assessment (Creswell & Creswell, 2017). The experimental group will be given Systematic Desensitization Group Counseling intervention assisted by Guided Imagery and the control group will be given conventional counseling services (standard relaxation without a structured schema).

Participants

The population of this study is undergraduate pre-service teachers who are preparing for their Field Experience Program (PPL) or microteaching. The sampling was carried out using purposive sampling technique based on the results of the initial assessment. The inclusion criteria for the participants were: (1) being an active student in an education study program, and (2) having scores of "High" or "Very High" in public speaking anxiety based on the pretest results. Then the total participants were randomly allocated in two groups (experimental and control) to ensure the baseline equivalence between groups.

Data Collection

The Personal Report of Public Speaking Anxiety (PRPSA) instrument developed by McCroskey (1970) was used to measure public speaking anxiety. It consists of 34 Likert-scale items that assess cognitive, affective and physiological reactions to public speaking contexts. To confirm construct validity in the Indonesian culture, the instrument was submitted to a cross-cultural adaptation process according to the guideline of Epstein et al. (2015) which includes forward translation, backward translation and expert committee review. Prior to the primary data collection, the PRPSA instrument was empirically field-tested in the Indonesian version with a group of pre-service teachers who were outside the research sample. The items' validity was assessed by Product-Moment correlation and the internal consistency of the instrument was evaluated by Cronbach's Alpha.

The intervention procedure in this study was designed based on the principles of group psychotherapy proposed by Yalom & Leszcz (2020), particularly the use of group dynamics to facilitate therapeutic factors such as cohesiveness and universality. The intervention was implemented through a series of structured sessions for the experimental group. In the first phase, the formation and rationalization phase, the facilitator established rapport with each participant and provided psychoeducational information about how anxiety operates based on the principle of reciprocal inhibition (Wolpe, 1958). This phase aimed to create a safe therapeutic atmosphere and help participants understand the rationale of the intervention. In the second phase, the hierarchy construction phase, participants were guided to develop individualized hierarchies of anxiety-inducing stimuli (Field, 2024). These stimuli ranged from developing lesson plans and conducting peer microteaching simulations to experiencing direct supervision by the field supervisor.

In the third phase, guided imagery training was introduced as the main relaxation-based technique. Instead of using traditional progressive muscle relaxation, participants used expert-validated guided imagery scripts designed to replicate visual and auditory stimulation associated with real-world classroom environments. This phase was intended to help participants enter a state of deep relaxation while mentally engaging with realistic teaching situations. In the fourth phase, the desensitization phase, participants were directed to visualize their individualized hierarchy of anxiety-inducing stimuli sequentially while maintaining a deep relaxation state. This procedure was conducted using guided imagery techniques and was informed by imagery-based desensitization in anxiety intervention (Nguyen & Mujtaba, 2023). When participants experienced anxiety during visualization, the process was immediately stopped, and they were guided back into a deep relaxation state.

Data Analysis

The quantitative data from the pre-test and post-test were analyzed with assistance of inferential statistics via the most recent edition of SPSS. To assess preliminary assumptions prior to conducting statistical analyses, a Shapiro-Wilk test assessed the level of normality within each group. Additionally, a Levene's Test evaluated the homogeneity of variances among groups. The independent sample t-test was used as an appropriate method to compare mean anxiety scores of the experimental group versus the control group. Finally, to meet standard publication criteria and measure the applicability of this intervention, this study determined effect size using Cohen's *d* (Cohen, 1988) and interpreted the resulting *d*-value to evaluate if there was a small, moderate or large effect on reducing anxiety.

Results

Data Description and Baseline Equivalence

The random assignment process used at the beginning of this experiment assigned 16 individuals who met the criteria of being high anxiety to either the experimental group ($n=8$) or the control group ($n=8$). The statistical analyses to show that randomization effectively created two comparable groups included descriptive statistical analysis and an independent sample t-test of the Personal Report of Public Speaking Anxiety (PRPSA), in order to determine if there were any pre-intervention differences between the groups.

Table 1. Descriptive statistics of public speaking anxiety scores.

Group	Measurement	N	Min	Max	Mean	Standard Deviation (SD)
Experimental	Pretest	8	139	148	143.88	2.850
	Posttest	8	103	113	108.00	3.464
Control	Pretest	8	136	151	145.50	4.690
	Posttest	8	95	108	100.88	4.324

As shown in Table 1, the average score for each group on their pretest was almost the same; 143.88 for the experimental group and 145.50 for the control group. Therefore, as indicated by the *p*-value associated with the results of the independent sample t-test comparing the two groups' pretest scores ($t = 0.843$, $p = 0.374$) there was statistically significant difference between the two groups before they received treatment. In addition, the standard deviation values indicate that the distribution of scores within each group was relatively homogeneous at the pretest stage. The experimental group showed a pretest standard deviation of 2.850, while the control group showed a slightly higher standard deviation of 4.690. This suggests that although individual variations existed, the anxiety levels of participants

in both groups were still within a comparable range before the intervention. The posttest results also show a decrease in mean scores in both groups, but the pattern of reduction appears to differ between the experimental and control groups. These descriptive findings provide an initial indication that changes in public speaking anxiety occurred after the intervention phase. However, further inferential analysis is required to determine whether the observed score changes reflect a statistically meaningful treatment effect.

Preliminary Assumption Tests

Prior to analyzing data from a parametric statistical analysis approach, it is essential that all of the gain scores (posttest minus pretest) be tested for normality as well as homogeneity. The results of these initial tests are presented in Table 2 below.

Table 2. Summary of normality (shapiro-wilk) and homogeneity (levene's test) results.

Test Assumptions	Group	Test Statistics	df	p-value	Decision
Normality	Experimental	0.835	8	0.067	Normally Distributed
	Control	0.912	8	0.366	Normally Distributed
Homogeneity	Combined	0.843	14	0.374	Homogeneous Variance

Based on the normality test results shown in Table 2, the gain scores in both the experimental and control groups met the assumption of normal distribution. The Shapiro-Wilk test for the experimental group produced a p-value of 0.067, which is greater than the significance level of 0.05. Similarly, the control group obtained a p-value of 0.366, also exceeding the 0.05 threshold. These findings indicate that the distribution of gain scores in both groups did not significantly deviate from normality. Therefore, the data were considered appropriate for further analysis using parametric statistical procedures. This result strengthens the methodological basis for comparing the mean differences between the experimental and control groups.

In addition to normality, the homogeneity of variance assumption was also examined using Levene's test. The result showed a p-value of 0.374, which is greater than 0.05, indicating that the variance between the two groups was homogeneous. This means that the spread of gain scores in the experimental and control groups can be considered statistically equivalent. The fulfillment of both normality and homogeneity assumptions supports the use of an independent sample t-test for hypothesis testing. These preliminary findings suggest that the subsequent analysis can be interpreted with greater statistical confidence. Accordingly, the next stage of analysis focused on testing the intervention effect and estimating its practical significance through effect size calculation.

Hypothesis Testing and Practical Significance (Effect Size)

The effect size of the Systematic Desensitization Group Counseling Guided Imagery-assisted treatment modality can be measured by comparing the mean post-test score for participants who received the treatment to those that did not. This comparison is presented in Table 3.

Table 3. Independent sample t-test results and effect size.

Measurement	t-value	df	p-value (2-tailed)	Mean Difference	Cohen's d	Effect Category
Posttest Experimental vs Control	29.864	14	< 0.000	14.25	0.991	Large

Table 3 Analysis t-value df Significance 29.864 t (14) p < .001 Since the p-value is very small and less than the alpha of 0.05, the null hypothesis is rejected. The reduction of anxiety is very significant between the treatment group and the control group. Additionally, the Cohen's d value of 0.991 (> 0.80) suggests that this intervention has a very large practical impact (large effect size). These findings indicate that the intervention contributed meaningfully to reducing participants' public speaking anxiety. The experimental group, which received systematic desensitization group counseling assisted by guided imagery, demonstrated a stronger reduction in anxiety compared to the control group. This suggests that combining gradual exposure with relaxation-based imagery may help participants manage anxiety-

provoking speaking situations more effectively. The group counseling setting may also have provided additional psychological support through shared experiences, emotional validation, and mutual encouragement among participants. As a result, participants were not only exposed to anxiety-related stimuli in a controlled manner but also supported within a therapeutic group atmosphere. This combination may explain why the intervention produced both statistically significant and practically meaningful outcomes.

The large effect size further strengthens the interpretation that the observed difference was not merely a statistical artifact. In intervention research, statistical significance alone does not always indicate that a treatment has meaningful practical value. Therefore, the inclusion of Cohen's *d* provides additional evidence regarding the magnitude of the treatment effect. A Cohen's *d* value of 0.991 suggests that the intervention had a strong impact on the reduction of public speaking anxiety. This means that the difference between the treated and untreated groups was substantial enough to be considered important in practical counseling settings. Thus, the intervention can be viewed as a promising strategy for helping individuals with high levels of public speaking anxiety.

From a counseling perspective, these results support the use of structured, relaxation-based interventions in group settings. Guided imagery may help participants mentally rehearse public speaking situations while remaining in a calm and controlled emotional state. At the same time, systematic desensitization allows participants to gradually confront feared situations without being overwhelmed by anxiety. This process can strengthen emotional regulation, increase perceived control, and reduce avoidance behavior related to public speaking. The findings also imply that counselors can adapt this intervention for educational or training contexts where speaking anxiety commonly interferes with performance. Overall, the results provide empirical support for the effectiveness of systematic desensitization group counseling assisted by guided imagery in reducing public speaking anxiety.

Discussion

This research provides empirical evidence for the effectiveness of the Guided Imagery-assisted Systematic Desensitization Group Counseling intervention in significantly decreasing public speaking anxiety among pre-service teachers. A large effect size combined with statistically valid decreases in scores from high to low-to-moderate levels demonstrates that this treatment produces statistically valid outcomes which represent actual psychological transformations rather than pseudo-statistically based changes. This supports the foundational hypothesis of reciprocal inhibition as proposed by [Wolpe \(1968\)](#) where conditioned relaxation responses can suppress physiological anxiety responses. The findings indicate that anxiety can be reduced when participants are repeatedly exposed to feared situations while maintaining a relaxed psychological state. This process helps weaken the association between public speaking situations and automatic anxiety responses. For pre-service teachers, such transformation is important because public speaking is closely related to teaching performance, classroom communication, and professional confidence. Therefore, the intervention may be viewed not only as an anxiety-reduction strategy but also as a preparation process for professional teaching readiness.

Although the results were dramatic in nature, it was not merely the result of the classic mechanisms of reciprocal inhibition. This was due to an integration of Guided Imagery that has been specifically developed for use with subjects experiencing test anxiety. As opposed to progressive muscle relaxation, where all focus is placed upon releasing physical tension, the primary function of guided imagery is to modify one's thought processes and subsequently create new cognitive schema. [Beck et al. \(2005\)](#) have proposed that test anxiety is generated through the cognitive process known as "imaginative distortion." Imaginative distortion occurs when individuals perceive themselves catastrophically failing or being rejected by an audience. By using specific imagery scripts related to common classroom experiences (e.g., presenting to a field supervisor or hearing excessive noise from students), subjects are encouraged to confront their deep-seated anxieties within their unconscious mind at a time when they are completely relaxed. This mental rehearsal allows participants to reinterpret stressful teaching scenarios in a safer and more controlled way. Through repeated exposure to imagined classroom situations, participants may begin to develop more adaptive beliefs about their ability to perform in front of others. Guided imagery also enables participants to replace catastrophic expectations with more constructive mental images of successful performance. In this sense, the intervention works at both emotional and cognitive levels, making it more comprehensive than relaxation training alone.

These results support other recent research on treating anxiety. Recent studies such as those conducted by [Nguyen & Brymer \(2018\)](#), and [Maghaminejad et al. \(2020\)](#) have demonstrated that specifically designed image based therapy can reduce sympathetic nervous activity better than a generalized relaxation method. For pre-service teachers,

an image-based treatment is also a solution to bridge the technology gap created with virtual reality (VR) treatments which [Colella et al. \(2026\)](#) indicate are successful, but because of high costs and limited availability for most students at their higher educational institution, they cannot be used. In specific, Guided Imagery has been demonstrated to be able to reproduce a “sense of presence” similar to VR, but via a much more efficient and applicable cognitive technique. This makes guided imagery particularly relevant for educational institutions with limited technological resources. The technique does not require expensive devices, specialized laboratories, or complex digital infrastructure. Counselors and lecturers can implement it through structured scripts, guided narration, and carefully designed anxiety hierarchies. Consequently, Guided Imagery-assisted Systematic Desensitization offers a practical, low-cost, and psychologically meaningful intervention for reducing public speaking anxiety.

In addition to the strength of these particular methods, the Group Counseling format itself is a very important healing catalyst. The therapeutic factor of universality, according to the great theory of group psychotherapy by [Yalom & Leszcz \(2020\)](#), greatly supported the reduction of anxiety of the experimental group. As the pre-service teachers shared their hierarchies of anxieties within the group, it became clear that “I am not alone in this fear.” The finding is in line with the findings of research in the national Guidance and Counseling literature ([Abood et al., 2025](#); [Kifli et al., 2019](#)), stating that in a group setting, cohesiveness and peer support can significantly reduce the clients’ affective filters and their resistance to the desensitization process. The group context also provides opportunities for participants to observe how others experience, express, and regulate similar forms of anxiety. Such shared experiences may normalize anxiety and reduce feelings of shame or personal inadequacy. When participants receive acceptance and encouragement from peers, they may become more willing to engage in the desensitization process. Thus, the group format strengthens the intervention by combining therapeutic exposure with interpersonal support.

Also, the group members in this experiment serve as an indirect safe “simulated audience.” According to [Corey \(2012\)](#) a counseling group is a microcosm of the real world. Essentially, subjects who can remain relaxed in the presence of other members of a group and who practice Guided Imagery are demonstrating behavioral generalization. The fear of social criticism, which [Fitri et al. \(2018\)](#) found to be a major source of anxiety among Indonesian students, is mitigated when the group environment is empathetic rather than judgmental. This condition allows participants to experience audience presence without the same level of threat found in real public speaking situations. As participants gradually become more comfortable in the group, they may transfer this sense of safety to actual classroom or presentation contexts. The group also functions as a transitional space between private relaxation practice and real-life performance demands. Therefore, behavioral generalization becomes more likely because participants practice emotional regulation within a socially meaningful environment.

This study has very significant implications for teacher-training institutions in practical terms. This Guided Imagery-assisted Systematic Desensitization module may be used by University Guidance and Counseling Service Units as a pre-service teaching or pre-microteaching intervention program in the long term. The results of the present study are very promising, but one limitation of the present study is the lack of longitudinal measurements. Thus, it is recommended to do additional research with follow-up assessments at the 3- or 6-month mark when students are actively involved in the field to test the persistence (durability) of the reduction of anxiety achieved. Future studies should also involve larger samples from different teacher-training institutions to strengthen the generalizability of the findings. In addition, researchers may compare this intervention with other approaches, such as cognitive behavioral counseling, mindfulness-based intervention, or virtual reality exposure. Further investigation is also needed to examine whether the intervention improves not only anxiety scores but also actual teaching performance during microteaching or field practice. Despite these limitations, the present study provides a useful foundation for developing preventive and remedial counseling programs for pre-service teachers who struggle with public speaking anxiety.

Conclusions

In summary based upon a complete examination of the data and a general discussion, it has been found that the results of this research study demonstrate that the (Guided Imagery-Assisted) S.D. Group Counseling Intervention was extremely successful in decreasing Public Speaking Anxiety amongst Pre-Service Teachers. By specifically incorporating Cognitive Imagery Techniques into Classical Desensitization Procedures, Students are able to effectively alter dysfunctional cognitions and thus disrupt their Physiological Anxiety Response Chain during Evaluative Classroom Situations. This group counseling intervention is of major practical significance for the future educator; i.e., this intervention does not only decrease student anxiety statistically, but also restore significantly their Academic Self-Efficacy.

Theoretically, these results support the idea that there are reciprocal inhibitions (postulate) and that groups can help people with social phobias. In practice, this research has produced a very valuable, evidenced based, and easily replicable intervention model/program. A structure and process to implement in University Guidance & Counseling Services that could also serve as a required program to prepare students before they participate in Microteaching and Field Experience Programs (PPL) by building student's mental preparedness.

Although, the results from this empirical study were reliable, based upon the use of a randomized control group and experimental treatment design, there are some limitations to the present study. Specifically, the measures used to assess outcome of the intervention were limited to a single point in time the end of the treatment program (post-test)—with no follow-up measures taken over an extended period of time. Therefore, it would be useful for researchers to pursue additional studies using a longitudinal measurement design (i.e., follow-up study), at three months and/or six months after completion of the intervention program, to investigate whether reductions in anxiety generalize across the student's experiences while actually implementing teaching practices.

Acknowledgement

The authors would like to express their sincere gratitude to all authors for their valuable contributions throughout the completion of this study. Each author contributed meaningfully to the development of the research ideas, data collection and analysis, manuscript preparation, and critical revision of the article. The authors also appreciate the collaborative effort, commitment, and academic support that made this research and publication possible.

Author Contributions

Ely Roy Madoni: Conceptualization, Methodology, Writing – original draft; **Abidatul Mardiyah:** Investigation, Data curation, Formal analysis; **Yurike Kinanthy Karamoy:** Supervision, Validation, Writing – review & editing.

Funding

This research was conducted without financial support from any funding institution.

Conflicts of Interest

No potential conflict of interest was reported by the authors.

Ethical Approval

No ethical approval was obtained for the conduct of this study.

References

- Abood, M. H., Mhaidat, F. A., Alharbi, B. H., Ghbari, T. A., & Alzyoud, N. F. (2025). A Group Counseling Program Based on Cognitive-Behavioral Theory: Enhancing Self-Efficacy and Reducing Pessimism in Academically Challenged High School Students. *Open Education Studies*, 7(1). <https://doi.org/10.1515/edu-2025-zz>.
- Afandi, A., Damayanti, A. M., Farizi, A., & Hapsari, R. A. T. (2026). Pengaruh Pembelajaran Micro Teaching Terhadap Keterampilan Mengajar Mahasiswa Program Studi Pendidikan Pancasila & Kewarganegaraan Di Universitas PGRI Wiranegara. *Jurnal Manajemen Pendidikan*, 11(1), 289–299. <https://doi.org/10.34125/jmp.v11i1.1544>.
- Antara, I. G., Yanti, N. P., & Susiladewi, I. A. (2022). Mengurangi Stres Perawat Di Ruang Isolasi Covid-19 Menggunakan Guided Imagery. *Jurnal Keperawatan*, 14.

- Arifin, S., Nurkamto, J., Rochsantiningsih, D., & Gunarhadi. (2023). Degree of English-Speaking Anxiety Experienced by EFL Pre-service Teachers in Madiun East Java. *AIP Conference Proceedings*, 2805(1). <https://doi.org/10.1063/5.0149282>.
- Astuti, Y. (2019). The Influence of Achievement Motivation and Academic Self-efficacy on Speaking Proficiency. *Magister Scientiae*, (45).
- Bartholomay, E. M., & Houlihan, D. D. (2016). Public Speaking Anxiety Scale: Preliminary psychometric data and scale validation. *Personality and Individual Differences*, 94, 211–215. <https://doi.org/10.1016/j.paid.2016.01.026>.
- Beck, A. T., Emery, G., & Greenberg, R. L. (2005). *Anxiety disorders and phobias: A cognitive perspective*. USA: Basic Books/Hachette Book Group.
- Cohen, J. (1988). *Statistical power analysis for the behavioral sciences (2nd ed.)*. USA: Lawrence Erlbaum Associates.
- Colella, G. M., Silvestro, E., Cosentino, V., Capparelli, V., Gravina, A., Barbieri, L., Costabile, A., Bruno, F., & Craig, F. (2026). Immersive virtual reality for reducing public speaking anxiety in students accessing a university psychological counseling service: protocol for a randomized controlled trial. *BMC Psychology*. <https://doi.org/10.1186/s40359-026-04418-4>.
- Corey, G. (2012). *Theory and Practice of Group Counseling, Eighth Edition*. USA: Brooks/Cole, Cengage Learning.
- Creswell, J. W., & Creswell, J. D. (2017). *Research Design: Qualitative, Quantitative, and Mixed Methods Approaches*. USA: SAGE Publications.
- Crisnawati, E., Hermansyah, A. K., & Purwanti, R. (2022). Kemampuan Kompetensi Pedagogik Guru Sekolah Dasar dalam Proses Pembelajaran. *Jurnal Bidang Pendidikan Dasar*, 6(1). <https://doi.org/10.21067/jbpd.v6i1.6201>.
- Darwin, D. (2025). Collaboration in Teaching: The Role of Teachers, Students, and Technology in Effective Learning. *Majority Science Journal (MSJ)*, 3(3). <https://doi.org/10.61942/msj.v3i3.442>.
- Davison, G. C. (1968). Systematic desensitization as a counterconditioning process. *Journal of Abnormal Psychology*, 73(2), 91. <https://doi.org/10.1037/h0025501>.
- Dewi, E. K. (2022). Kecemasan Mahasiswa Dalam Praktik Public Speaking (Studi Kasus Mahasiswa Manajemen Pemasaran Industri Elektronika Angkatan 2021). *Nus Hasana Journal*, 2(4).
- Dobson, D., & Dobson, K. S. (2017). *Evidence-based practice of cognitive-behavioral therapy, 2nd ed.* USA: Guilford Press.
- Epstein, J., Santo, R. M., & Guillemin, F. (2015). A review of guidelines for cross-cultural adaptation of questionnaires could not bring out a consensus. *Journal of Clinical Epidemiology*, 68(4). <https://doi.org/10.1016/j.jclinepi.2014.11.021>.
- Field, A. (2024). *Discovering Statistics Using IBM SPSS Statistics*. USA: Sage publications limited.
- Fitri, E., Zola, N., & Irdil, I. (2018). Profil Kepercayaan Diri Remaja serta Faktor-Faktor yang Mempengaruhi. *JPPPI (Jurnal Penelitian Pendidikan Indonesia)*, 4(1). <https://doi.org/10.29210/02017182>.
- Guvey Aktay, E. (2021). Impromptu Speaking Skills of Pre-Service Teachers. *International Journal of Educational Methodology*, 7(2). <https://doi.org/10.12973/ijem.7.2.261>.
- Izzah, I. N., & Indrijati, H. (2024). The Impact of Behavioral Cognitive Counseling (CBT) on Academic Anxiety in College Students. *Psikostudia : Jurnal Psikologi*, 13(1). <https://doi.org/10.30872/psikostudia.v13i1.12580>.
- Kifli, I., Sunawan, S., & Jafar, M. (2019). Cognitive behavior group counseling to reduce academic anxiety. *Jurnal Bimbingan Konseling*, 8(2), 119–124.
- Kusumastuti, D. (2020). Kecemasan dan Prestasi Akademik pada Mahasiswa. *Analitika*, 12(1). <https://doi.org/10.31289/analitika.v12i1.3110>.
- Maghaminejad, F., Adib-Hajbaghery, M., Nematian, F., & Armaki, M. (2020). The effects of guided imagery on test anxiety among the 1st-year nursing students: A randomized clinical trial. *Nursing and Midwifery Studies*, 9(3). https://doi.org/10.4103/nms.nms_65_18.
- Marinho, A. C. F., de Medeiros, A. M., Gama, A. C. C., & Teixeira, L. C. (2017). Fear of public speaking: Perception of college students and correlates. *Journal of Voice*, 31(1). <https://doi.org/10.1016/j.jvoice.2015.12.012>.
- McCroskey, J. C. (1970). Measures of communication-bound anxiety. *Speech Monographs*, 37(4). <https://doi.org/10.1080/03637757009375677>.
- Nguyen, J., & Brymer, E. (2018). Nature-based guided imagery as an intervention for state anxiety. *Frontiers in Psychology*, 9(OCT). <https://doi.org/10.3389/fpsyg.2018.01858>.
- Nurhasanah, N. (2021). Self-Efficacy and Positive Thinking with Public Speaking Anxiety in College Students. *Jurnal Ilmiah Kesehatan*, 10(2). <https://doi.org/10.52657/jik.v10i2.1477>.

- Punongbayan, E. J., Andino, R. A., Atienza, H. S. I., & Baral, V. R. (2025). Enhancing Pre-Service Teachers' Communication Competence: An Input to a Communication Skills Development Module. *International Journal of Research and Innovation in Social Science*, 9(10). <https://doi.org/10.47772/ijriss.2025.910000564>.
- Putri, A. R., Zulida, E., Rahmiati, R., Asra, S., & Fadlia, F. (2020). A Study Of Students' anxiety In Speaking. *Journal of Education, Linguistics, Literature and Language Teaching*, 3(01), 35–47. <https://doi.org/10.33059/ellite.v3i01.2177>.
- Rahmawati, E. M., Ramdhani, R. N., Agus Taufiq, & S. A. Lily Nurillah. (2023). A Systematic Literature Review: Virtual Reality Untuk Mengatasi Public Speaking Anxiety pada Mahasiswa. *G-Couns: Jurnal Bimbingan Dan Konseling*, 7(03). <https://doi.org/10.31316/gcouns.v7i03.4614>.
- Savitri, P. A. C., & Swandi, N. L. I. D. (2023). Intervensi kecemasan pada mahasiswa: Literature review. *Psikobuletin: Buletin Ilmiah Psikologi*, 4(1), 43–55.
- Sofian Hadi, M., Izzah, L., & Masae, M. (2020). Factors Affecting Speaking Anxiety of Thai Students During Oral Presentation: Faculty of Education in TSAI. *English Language in Focus (ELIF)*, 3(1). <https://doi.org/10.24853/elif.3.1.79-88>.
- Strauss, J. L., Calhoun, P. S., & Marx, C. E. (2009). Guided imagery as a therapeutic tool in post-traumatic stress disorder. In *Post-Traumatic Stress Disorder: Basic Science and Clinical Practice*. https://doi.org/10.1007/978-1-60327-329-9_17.
- Vitasari, P., Wahab, M. N. A., Othman, A., & Awang, M. G. (2010). The use of study anxiety intervention in reducing anxiety to improve academic performance among university students. *International Journal of Psychological Studies*, 2(1), <https://doi.org/89.10.5539/ijps.v2n1p89>.
- Wolpe, J. (1968). Psychotherapy by reciprocal inhibition. *Conditional Reflex : A Pavlovian Journal of Research & Therapy, Conditional Reflex*, 3(4). <https://doi.org/10.1007/BF03000093>.
- Yalom, I. D., & Leszcz, M. (2020). *The Theory and Practice of Group Psychotherapy*. UK: Hachette.