Volume 10, Number 2

An Investigation Of GEPT Test Anxiety For Medical University Students In Taiwan

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ABSTRACT

This study examines whether or not different medical university students experience different levels of anxiety in taking the General English Proficiency Test (GEPT), and whether or not there are differences in GEPT test anxiety levels among medical university students with different genders and from different departments. This study uses a GEPT test anxiety scale (GEPT-TAS) to explore the GEPT test anxiety levels of the students. The final questionnaire included 36 questions, covering the cognitive, emotional, and affective dimensions of test anxiety. Several conclusions can be made from the findings of this study. First, medical university students experience certain levels of GEPT test anxiety. Second, females experience more emotional anxiety than males. Third, nursing students experience more cognitive anxiety than students from other departments.

Keywords: General English Proficiency Test (GEPT); Test anxiety; Cognitive Anxiety; Emotional Anxiety; Affective Anxiety

INTRODUCTION

n recent years, the GEPT test has become an important instrument for examining students' English proficiency. It has also been used by schools and enterprises as an admission, placement, or graduation criterion (LTTC, 2009). With the viewpoint that "people are never too old to learn," the Taiwanese government expects people to adopt a perspective of lifelong learning. Approximately 2.2 million people have taken the GEPT test since 2000. Recognized as a criterion for promotion and graduation, the intensive GEPT test has been extensively promoted in Taiwan. Colleges and universities in Taiwan have requested their students pass this test. However, the graduation threshold of English proficiency causes some pressure for university students. Most Taiwanese university students worry about not passing the GEPT test, hence experiencing GEPT test anxiety.

LITERATURE REVIEW

In order to encourage Taiwanese people to learn English, the Ministry of Education assigned the Language Training & Testing Center (LTTC) to promote and administer the GEPT test. To meet the purpose of English education and life situation, the GEPT test is divided into five levels from very easy to the most difficult: Elementary, Intermediate, High-Intermediate, Advanced, and Superior (LTTC, 2009). Examinees who pass the elementary level of the GEPT test are regarded as having a basic English capability, which is equal to the level of a junior high graduate. At this level, someone understands simple conversations and everyday reading. Examinees who pass the intermediate level are regarded as having a general English capability, which is equal to the level of a senior high graduate, and are capable of reading short stories and engaging in a general conversation. Examinees who pass the high-intermediate level are regarded as having the English proficiency of non-native English major university students. The advanced level is equal to the level of a student who major in English or obtain a university or graduate school diploma in an English-speaking country (LTTC, 2009).

The GEPT certificate is admitted by government departments, business organizations, and institutes as a dependable and objective English proficiency criterion to be used for staff hiring, promotions, and even scholarship

applications. In 2008, the *International Journal of Language Testing* gave the GEPT test a positive evaluation, including test quality, reliability and validity, and influence of English learning in Taiwan, etc. (Roever & Pan, 2008).

Test anxiety can be interpreted as the inability to proceed with thoughts and memories in that examinees fail to read the test content smoothly or grasp the meaning of test questions (Suinn, 1968). People who have too much anxiety under test conditions are said to have test anxiety. For these people, it is natural to experience anxiety while taking, or even preparing for, a test. An appropriate amount of test anxiety can motivate students to prepare for the test early, enhancing their learning performance. However, too much anxiety may distract students and even cause them to fail the test. Moreover, with too much anxiety, it is difficult for students to concentrate on answering questions during the test, as their comprehension is interfered with and obstructed. Consequently, the test results are usually unsatisfactory. Unfortunately, even though people with test anxiety realize that they experience a lot of pressure and anxiety when taking a test, they do not know how to deal with the problem.

Research has shown that there are two kinds of anxiety, trait anxiety and state anxiety, and that there are differences between them (Eysenck, 1979 ; Spielberger, 1966). Trait anxiety refers to a permanent personality and characteristic, while state anxiety refers to a temporary emotional situation (Spielberger, *et al.*, 1978). People with trait anxiety experience anxiety more often than others in various situations (Spielberger, Gorsuch & Lushene, 1970). On the other hand, those with state anxiety experience anxiety only in certain situations, such as test taking, speaking, etc. Trait anxiety is a universal feeling influenced by fundamental predispositions, while state anxiety is an instant feeling caused by contextual pressure as well as individual traits (Eysenck & Eysenck, 1985). Test anxiety is a kind of state anxiety, and it refers to the feeling of anxiety before, during, and after a test.

Research also shows that too much test anxiety, which leads to poor test performance, consists of two components (Libert & Morris, 1967; Stober & Perkrun, 2004). One is a cognitive component—worry. The other is an emotional-based component—emotionality. The cognitive component of test anxiety distracts examinees from the test context (Wine, 1971). In this case, examinees cannot focus on the test because they are preoccupied with their test performance. Alternately, personal internal factors, such as self-focus, self-evaluation, and concern about consequences, interfere with their cognition (Sarason, 1984; Schwarzer & Jerusalem, 1992). The emotional component of test anxiety refers to not only the interference of external factors, but also to physical and affective interference, such as any affective and physiological reactions of panic, trepidation, perspiration, and accelerated heart rate (Deffenbacher, 1980; Hembree, 1988; Morris, Davis, & Hutchings, 1981; Wine, 1971). Even though emotionality is connected with learning performance, it is not the primary factor influencing test performance. Research shows that the cognitive component has the greatest effect on test performance and is thus primarily responsible for poor performance and failure (Hembree, 1988; Wine, 1971). In other words, cognitive anxiety can negatively affect learning and performance (Hembree, 1988; Sapp, Durand, & Farrell, 1995; Zeidner, 1998).

Ackerman and Heggestad's research (1997) shows that there is a negative correlation coefficient of r = -0.33 between test anxiety and test performance. Likewise, Hembree's research (1988) demonstrates that the worry component of test anxiety interferes more with aptitude/achievement test performance than the emotionality component. Wine's interference model of anxiety (1971) regards test anxiety as a situation of worry.

When taking a test, people with text anxiety tend to focus on how to control interrupting notions such as fear; they rarely pay attention to correctly answering questions or choosing the right answers (Sarason, 1972). Consequently, examinees with test anxiety tend to get a lower grade than those without test anxiety (Everson, Millsap, & Rodriguez, 1991). Examinees with higher test anxiety often feel tense and experience apprehension when taking a test (Gierl & Rogers, 1996). With too much test anxiety, they can neither take advantage of the positives results of anxiety nor achieve a positive test outcome (Hancock, 2001; Hembree, 1988). As a result, students with the same English competency but with different test anxiety levels will achieve very different test results while answering the same test items. Since universities and institutions in Taiwan added GEPT qualification as a graduation criterion of English proficiency, somehow students have experienced pressure in the GEPT test-preparing and test-taking process.

This study investigates whether or not medical university students experience a certain GEPT test anxiety level, and whether or not there are differences in GEPT test anxiety levels among students with different genders and from different departments. To achieve these goals, this study tests the following hypotheses.

- H1: Medical university students experience a certain level of GEPT test anxiety.
- Medical university students with different genders experience different levels of GEPT test anxiety. H2:
- Medical university students from different departments experience different levels of GEPT test anxiety. H3:

RESEARCH METHODOLOGY

Participants

To achieve the goals of the study, the researchers distributed 450 questionnaires to medical university students to investigate their levels of GEPT test anxiety. Students came from four different departments of medical universities: 118 students were from the department of medical sociology and social work, 88 students were from the department of health services administration, 152 students were from the Nursing Department, and 74 students were from the department of applied information sciences. A total of 432 questionnaires were retrieved for data analysis.

Instrumentation

A GEPT test anxiety scale (GEPT-TAS) was developed by the researchers to obtain a comprehensive understanding of students' GEPT test anxiety levels. To ensure that the items on the questionnaire can be understood, the initial questionnaire was first read by fifty-five university students, and eight questions were deleted because they were unclear or ambiguous. Later it was reviewed by three experienced English teachers. Based on this expert feedback, some modifications were made to make the questions clearer. The questionnaire was finalized into 36 questions, covering the cognitive, emotional, and affective dimensions of test anxiety.

To measure students' GEPT anxiety levels, answers were scored using a five-point Likert scale, ranging from 5 (strongly agree) to 1 (strongly disagree). The scores of the GEPT-TAS ranged from 36 to 180. Some items on the questionnaire were negative statements and hence scored in reverse. Later, a pilot study was conducted with the same fifty-five students to test the internal consistency reliability (Cronbach's Alpha) of each category of the questionnaire. The overall Cronbach's Alpha reliability of the GEPT-TAS is 0.95, and the Cronbach's Alpha values of the cognitive anxiety, emotional anxiety, and affective anxiety are 0.89, 0.90, and 0.90, respectively (see Table 1). So far the questionnaire has passed the examination for validity; therefore, they can be used formally.

Pearson Correlation Coefficient between any two categories in the GEPT-TAS was also calculated, and the results are displayed in Table 2. The correlation coefficients in the pilot study are between 0.561 and 0.724. The *p*-value is less than 0.01, which indicates that there is a significant correlation between any two categories in the GEPT-TAS questionnaire.

| Table 1. Reliability coefficients for the categories on the GEPT-TAS | | |
|--|----------------|--|
| Category | Cronbach Alpha | |
| Cognitive Anxiety | 0.89 | |
| Emotional Anxiety | 0.90 | |
| Affective Anxiety | 0.90 | |

| Table 1. Reliabili | v coefficients for the categories on the GEPT-TAS | |
|--------------------|---|--|
|--------------------|---|--|

| | Cognitive Anxiety | Emotional Anxiety | Affective Anxiety |
|-------------------|-------------------|-------------------|-------------------|
| Cognitive Anxiety | 1 | 0.609 | 0.724 |
| Emotional Anxiety | 0.000** | 1 | 0.561 |
| Affective Anxiety | 0.000** | 0.000** | 1 |

The value above the "1" is the correlation coefficient; the value below the "1" is the *p*-value: *p < 0.01

I believe that I can do well in the GEPT test.

Data Analysis

The collected data was analyzed quantitatively using SPSS (Statistical Packages for the Social Science). The descriptive statistics included means, percentages, and standard deviations. Moreover, the t test, one-way ANOVA (analysis of variance), and post hoc multiple comparison LSD (least significant difference) methods were used to explore the differences in GEPT test anxiety levels among medical university students with different genders and from different departments.

RESULTS

9.^

This study investigates whether or not medical university students experience a certain level of GEPT test anxiety, and whether or not there are differences in GEPT test anxiety levels among students with different genders and from different departments. The results of hypothesis testing are described as follows:

Hypothesis 1: Medical university students experience a certain level of GEPT test anxiety

To test Hypothesis 1, this study used descriptive statistical analyses of the GEPT-TAS scale to investigate the GEPT test anxiety levels of medical university students-including cognitive anxiety, emotional anxiety, and affective anxiety. Table 3-5 list the responses to the GEPT-TAS scale, including means, subscale rank order, and overall anxiety rank order. The subscale rank order and overall anxiety rank order are ranked based on the item means.

In the cognitive anxiety subscale, the first three situations making students most anxious about the GEPT test are the following items (see Table 3)—Item 7: "I never worry about the GEPT test (mean=M=4.19)"; Item 4: "I am always thinking that my English ability is not good (M=4.12)"; "Item 9: "I believe that I can do well in the GEPT test (M=4.10)".

and overall rank order of the three highest scores in the cognitive anxiety subscale Subscale Rank **Overall Rank** Item Description Μ Cognitive Anxiety Subscale I never worry about the GEPT test. 7.^ 4.19 1 2 I am always thinking that my English ability is not good. 4.12 4. 2 4

4.10

3

8

Table 3. The means, subscale rank order,

In the emotional anxiety subscale, the first three situations making students most anxious about the GEPT test are the following items (see Table 4)-Item 20: "I would feel confident and relaxed for taking the GEPT test (M=4.15)"; Item 24: "While taking the GEPT test, my emotional feelings do not interfere with my performance (M=3.90)"; "Item 21: "Even though I'm well prepared for the GEPT test, I still feel very anxious about it (M=3.79)".

In the affective anxiety subscale, the first three situations making students most anxious about the GEPT test are the following items (see Table 5)—Item 26: "While taking the GEPT test, I am anxious about the English speaking section (M=4.25)"; Item 27: "While taking the GEPT test, I am anxious about the English writing section (M=4.13)"; "Item 30: "While taking the GEPT test, I can't answer the question in time (M=4.12)".

| | and overall rank order of the three highest scores in | the emotional a | nxiety subscale | |
|-----------|---|-----------------|-----------------|---------------------|
| Item | Description | М | Subscale Rank | Overall Rank |
| Emotional | Anxiety Subscale | | | |
| 20^ | I would feel confident and relaxed for taking the GEPT test. | 4.15 | 1 | 3 |
| 24^ | While taking the GEPT test, my emotional feelings do not | 3.90 | 2 | 13 |
| | interfere with my performance. | | | |
| 21, | Even though I'm well prepared for the GEPT test, I still feel | 3.79 | 3 | 19 |
| | very anxious about it. | | | |

Table 4. The means, subscale rank order,

| | and overall rank order of the three highest scores in | the affective an | xiety subscale | |
|-----------|---|------------------|----------------|---------------------|
| Item | Description | Μ | Subscale Rank | Overall Rank |
| Emotional | Anxiety Subscale | | | |
| 26 | While taking the GEPT test, I am anxious about the English | 4.25 | 1 | 1 |
| | speaking section. | | | |
| 27 | While taking the GEPT test, I am anxious about the English | 4.13 | 2 | 4 |
| | writing section. | | | |
| 30 | While taking the GEPT test, I can't answer the questions in | 4.12 | 3 | 5 |
| | time. | | | |

Table 5. The means, subscale rank order,

Hypothesis 2: Medical university students with different genders experience different levels of GEPT test anxiety.

This study divides participants into male and female groups: there were 113 male students and 319 female students. The independent sample t test was used to identify statistically significant differences in the means between male and female students in terms cognitive, emotional, and affective anxiety subscales. The statistical results in Table 6 reveal no significant differences in the cognitive anxiety scores (t=-1.197, p>0.05) and the affective anxiety (t=-0.382, p>0.05). However, there is a significant difference between males and females in emotional anxiety (t=-1.998, p<0.05). Females have a higher emotional anxiety score (M=41.26) than males (M=39.21). In other words, females experience more emotional anxiety than males before and during the GEPT test.

| Table 6. Independent t-test results of students with different genders | | | | | |
|--|--------|-------|-------|--------|---------|
| Factors | Gender | Μ | Sd | t | p-value |
| Cognitive Anxiety | Male | 44.56 | 10.10 | -1.197 | 0.232 |
| | Female | 45.69 | 8.03 | | |
| Emotional Anxiety | Male | 39.21 | 9.75 | -1.998 | 0.047* |
| - | Female | 41.26 | 8.18 | | |
| Affective Anxiety | Male | 47.45 | 9.65 | -0.382 | 0.702 |
| - | Female | 47.81 | 7.89 | | |

Table 6. Independent t-test results of students with different genders

Male: 113; Female: 319; M: mean; Sd: Standard deviation; *p<0.05

Hypothesis 3: Medical university students from different departments experience different levels of GEPT test anxiety.

To test the hypothesis, this study uses one way ANOVA and post hoc multiple comparison LSD to determine if there are any significant differences in GEPT test anxiety among students from different departments. The one-way ANOVA results (see Table 7) show that there are no significant differences among students from different departments in emotional anxiety and affective anxiety. However, there is a significant difference in cognitive anxiety among these students at a significance level of p < 0.01.

Because there is a significant difference among students from different departments in cognitive anxiety, post hoc multiple comparison LSD was applied to determine which pairs of means differ significantly. The LSD post-hoc multiple comparison test reveals that students majoring in nursing have much significantly higher cognitive anxiety (M=46.18; Sd=7.58) than those majoring in medical sociology and social work (M=43.47; Sd=9.80; p=0.000<0.01). Also, nursing students have much significantly higher cognitive anxiety (M=46.18; Sd =7.58) than students majoring in applied information sciences (M=43.39; Sd=8.79; p=0.000<0.01) or health services administration (M=44.84; Sd =8.55; p=0.009<0.01). In other words, nursing students experience much more cognitive anxiety than students from other departments.

| Factor | Factor Source of Sum of Degree of Mean Square F Significance | | | | | Significance |
|-----------|--|----------|---------|--------------|------|--------------|
| Factor | Variance | Squares | Freedom | Wiean Square | r | Significance |
| Cognitive | Between | 1464.51 | 3 | 488.17 | 6.83 | 0.000** |
| Anxiety | Groups | 30574.47 | 428 | 71.44 | | |
| | Within Groups | 32038.98 | 431 | | | |
| | Total | | | | | |
| Emotional | Between | 484.26 | 3 | 161.42 | 2.17 | 0.090 |
| Anxiety | Groups | 31774.72 | 428 | 74.24 | | |
| - | Within Groups | 32258.98 | 431 | | | |
| | Total | | | | | |
| Affective | Between | 164.03 | 3 | 54.68 | 0.78 | 0.506 |
| Anxiety | Groups | 29908.59 | 426 | 70.21 | | |
| | Within Groups | 30072.62 | 429 | | | |
| | Total | | | | | |

 Table 7. ANOVA results of the students from different departments

Medical Sociology and Social Work: 118; Applied Information Sciences: 74; Health Services Administration: 88; Nursing: 152; *p < 0.05; **p < 0.01

DISCUSSION

This study examines whether or not different medical university students experience different levels of anxiety in taking the GEPT, and whether or not there are differences in GEPT test anxiety levels among medical university students with different genders and from different departments. The results of this study show that medical university students experience different levels of GEPT test anxiety. Students with different genders experience different levels of GEPT test anxiety. Students with different genders experience different levels of emotional anxiety at a significance level of p<0.05. Also, students from different departments exhibit different levels of cognitive anxiety at a significance level of p<0.01. The findings of the data analysis are discussed as follows.

First, medical university students experience a certain level of GEPT test anxiety. Table 8 lists the means and standard deviations of cognitive anxiety subscale, emotional anxiety subscale, affective anxiety subscale, and overall GEPT anxiety scale. The mean score of the 36 items is 3.72 with a standard deviation of 1.0057. Students with an overall GEPT mean score higher than 3.72 experience more GEPT test anxiety than average.

| Factor | Μ | SD |
|----------------------|------|--------|
| Cognitive Anxiety | 3.78 | 1.0549 |
| Emotional Anxiety | 3.40 | 1.0316 |
| Affective Anxiety | 3.98 | 1.0161 |
| Overall GEPT Anxiety | 3.72 | 1.0057 |

| Table 8. Means and Standard Deviations of | Cognitive, emotional, and affective subsc | ales and GEPT test anxiety scale |
|---|---|----------------------------------|
| | | |

Participants: 432; M: mean; Sd: Standard deviation

The mean score of items 1-12 (cognitive anxiety scale) is 3.78 with a standard deviation of 1.0549. If a student's mean score is higher than 3.78 in the cognitive anxiety scale, that student has more cognitive anxiety than average. Among the items in the cognitive anxiety subscale, a negative statement, Item 7, "I never worry about the GEPT test," has the highest mean score in the cognitive anxiety. Item 4, "I am always thinking that my English ability is not good," gets the second highest mean score. These results imply that because of a lack of confidence in facing the test, medical university students worry about the GEPT test a lot.

The mean score of the items 13-24 (emotional anxiety) is 3.40 with a standard deviation 1.0316. If a student's mean score is higher than 3.40 in the emotional anxiety scale, that student has more emotional anxiety than average. Among the items in the emotional anxiety subscale, Item 20, a negative statement, has the highest mean score: "I would feel confident and relaxed for taking the GEPT test." Item 24, a negative statement has the second highest score: "While taking the GEPT test, my emotional feelings do not interfere with my performance." These results imply that without confidence, participants cannot regard the GEPT as an easy test. Hence, the emotional anxiety interferes with their performance.

The mean score of the items 25-36 (affective anxiety) is 3.98 with a standard deviation of 1.0161. If a student's mean score is higher than 3.98, that student has more affective anxiety than average. Among all the items in the affective anxiety, item 26 is regarded as the most difficult part: "While taking the GEPT test, I am anxious about the English speaking section." Item 27, "While taking the GEPT test, I am anxious about the English wiring section," is regarded as the second most difficult part. In other words, knowing that English is a foreign language but having no opportunity to use English practically, students feel that it is tough for them to speak and write English. As a result, they are overly anxious about their performance in the speaking and writing sections. Hence, it is no wonder that Item 26 has the highest score among all the 36 items.

Second, medical university students with different genders experience different levels of GEPT test anxiety. Research results show that there are no significant differences in the cognitive anxiety and affective anxiety between male and female students. However, there is a significant difference between males and females in terms of emotional anxiety. Quarter and Laxer's research (1969) reveals that female students experience more emotional anxiety than male students in that females exhibit more emotional variability than males. Compared to males, when perceiving uncertainties, females usually experience more extreme worries and anxieties, which would hence result in more variability in performance (Leary & Buckley, 2000; Moore & Gee, 2003). In addition, females tend to possess a more ruminative and contemplative attitude, thus burdened with more responsibility and psychological stress (Sethi & Nolen-Hoeksema, 1997).

Third, medical university students from different departments experience different levels of GEPT test anxiety. The results of this study show that there are no significant differences among students from different departments in terms of emotional anxiety and affective anxiety. However, students from different departments exhibit a significant difference in cognitive anxiety. LSD post-hoc multiple comparison test results reveal that

- Nursing > Medical Sociology and Social Work
- Nursing > Applied Information Sciences
- Nursing > Health Services Administration

These statements imply that nursing students have higher cognitive anxiety than students in other departments. This may be because nursing departments have a higher proportion of female students. As mentioned above, females usually experience extreme worries and anxieties when they perceive some uncertainty (Leary & Buckley, 2000; Moore & Gee, 2003). These extreme worries and anxieties also cause more variability in performance (Quarter & Laxer, 1969; Tapasak, Roodin, & Vaught, 1978). The research results agree with the results of Brewer's research (2002) on test-taking anxiety among nursing and general college students. Brewer showed that nursing students have statistically higher levels of anxiety about their test-taking performance than the general university population. Moreover, nursing students, as would-be nurses, have been trained to encounter critical clinical problems. Hence, they pay much more attention to their surroundings and interact with patients suffering illness and pain. As a result, they may be more anxious about the health and safety of their patients, which in turn may lead to higher levels of cognitive anxiety (Moscaritolo, 2009).

However, students majoring in medical sociology and social work are more concerned with social problems and issues, helping people deal with these issues in daily life. Attempting to improve people's life, these students have been trained to take care of poor people, giving them positive thoughts and guiding them to a bright future (Bureau of Labor Statistics, 2009; Pratt, 1985). Therefore, these students are equipped with positive thinking and confidence, giving them much less anxiety than nursing students.

CONCLUSION, IMPLICATIONS, AND LIMITATIONS

This study investigates whether or not medical university students experience a certain level of GEPT test anxiety, and whether or not there are differences in GEPT test anxiety level among medical university students with different genders and from different departments. Many universities have added GEPT qualification as a graduation criterion. However, when a school administration sets up a threshold for GEPT qualification, students with different backgrounds may experience greater levels of GEPT test anxiety.

Several conclusions can be made from the findings of this study. First, medical university students experience a certain level of GEPT test anxiety. Second, females experience more emotional anxiety than males. Third, nursing students experience more cognitive anxiety than students in medical sociology and social work, applied information sciences, and health services administration. This may be because there is a higher proportion of females in nursing departments, and they are trained to recognize critical clinical problems.

The study has some limitations. First, not all participants had taken the GEPT test, so they may not have given an accurate answer when filling out the survey questionnaire. Second, the participants are medical university students of Taiwan, majoring in nursing, medical sociology and social work, applied information sciences, and health services administration. Therefore, the results and interpretations of this study may only apply to similar situations in Taiwanese universities. If researchers would like to use the results and findings of the study, they should carefully examine the background of the study and the similarity of the participants. Future research might investigate the GEPT test anxiety levels of non-medical university students, senior high students, continuing education students, or students in urban and rural areas.

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Journal of College Teaching & Learning – Second Quarter 2013 Volume 10, Number 2

APPENDIX A

The questionnaire items in the GEPT-TAS scale

| Item | Description | Μ |
|----------|---|------|
| Cognitiv | e Anxiety Subscale | |
| 1. | I am so worried about that whether I can pass the GEPT test. | 4.00 |
| 2. | I don't believe that I can pass the GEPT test. | 3.40 |
| 3. | I think others (teachers, parents, etc.) would be disappointed at my GEPT test results. | 3.57 |
| 4. | I am always thinking that my English ability is not good. | 4.12 |
| 5. | I feel pressure for the necessity of passing the GEPT test before graduation. | 3.88 |
| 6. | My mind goes blank during the GEPT test. | 3.70 |
| 7.^ | I never worry about the GEPT test. | 4.19 |
| 8 | While taking the GEPT test, I make mistakes on easy questions or put answers in the wrong places. | 3.65 |
| 9.^ | I believe that I can do well in the GEPT test. | 4.10 |
| 10. | While taking the GEPT test, I have difficulty choosing answers. | 3.73 |
| 11. | Once I get out of the testing situation, I remember the information that I blanked out. | 3.70 |
| 12. | While taking the GEPT test, I find myself always thinking of the consequences of failing. | 3.38 |
| Emotio | nal Anxiety Subscale | |
| 13 | I feel nauseated before the GEPT test. | 2.80 |
| 14 | I have trouble sleeping the night before the GEPT. | 3.02 |
| 15 | The closer the GEPT test comes, the harder it is for me to concentrate on the material. | 3.06 |
| 16 | I feel uneasy and upset before the GEPT test. | 3.21 |
| 17 | I feel my heart beating fast while taking the GEPT test. | 3.66 |
| 18 | I have visible signs of nervousness such as sweaty palms, shaky hands, etc. right before the GEPT | 3.38 |
| | test. | |
| 19 | I have butterflies in my stomach before/during the GEPT test. | 3.02 |
| 20^ | I would feel confident and relaxed for taking the GEPT test. | 4.15 |
| 21 | Even though I'm well prepared for the GEPT test, I still feel very anxious about it. | 3.79 |
| 22 | While taking the GEPT test, I am so nervous that I may forget the material I really know. | 3.60 |
| 23 | Before taking the GEPT test, I cannot enjoy eating. | 3.14 |
| 24^ | While taking the GEPT test, my emotional feelings do not interfere with my performance. | 3.90 |
| Affectiv | re Anxiety Subscale | |
| 25 | While taking the GEPT test, I am anxious about the English listening section. | 3.88 |
| 26 | While taking the GEPT test, I am anxious about the English speaking section. | 4.25 |
| 27 | While taking the GEPT test, I am anxious about the English writing section. | 4.13 |
| 28 | While taking the GEPT test, I am anxious about the English reading section. | 3.71 |
| 29 | While taking the GEPT test, I can't understand the context. | 3.84 |
| 30 | While taking the GEPT test, I can't answer the questions in time. | 4.12 |
| 31 | While taking the GEPT test, I always fail to write the composition in the time limit. | 3.91 |
| 32 | While taking the GEPT reading test, I find I cannot understand every word. | 4.09 |
| 33^ | It is easy to understand the listening section of the GEPT test. | 3.84 |
| 34^ | It is easy to write a composition for the GEPT writing test. | 3.99 |
| 35^ | It is easy to understand the reading section of the GEPT test. | 3.88 |
| 36^ | It is easy to answer the speaking section of the GEPT test | 4.11 |

M: mean; $\$ ^: negative statements, hence being scored in reverse