Mental Health Workers’ Perceptions of Southern Accented Counselors

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Mental Health Workers’ Perceptions of Southern Accented Counselors

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Abstract

This study sought to determine whether there was an implicit bias within the field of counseling towards counselors with Southern U.S. accents. Specifically, this study examined whether counselors with Southern accents would be rated differently, in regards to competence for both general and multicultural competence, compared to counselors with non-Southern accents when in a mock interview situation. Results revealed no significant difference in perceived competence between counselors presenting with a Southern accent and counselors with a non-Southern accent. Significant results were found related to participant region among participants who rated the Southern accent counselor. Specifically, individuals who identified as being from the Midwest rated the Southern accented counselor significantly lower on multicultural competence than individuals who identified as being from the Northeast. Additionally, it was found that the Southern accented vignette character was rated significantly higher on the CRF-S subscale of attractiveness that includes characteristics of being “friendly,” “likable,” “social,” and “warm,” compared to the non-Southern accent vignette character. Potential explanations for the significant findings, as well as alternative explanations for the non-significant results, were explored.
CHAPTER I

Introduction

Judging is something all people do on a daily basis. Although it is often taught that judging others is not nice, judgments and the stereotypes individuals may utilize to make quick judgments of others are useful ways to make sense of the world by helping to create categories to place things or people into quickly (Bodenhausen, 2005; Hugenberg, Bodenhausen, & McLain, 2006; Macrae & Bodenhausen, 2000). There are many aspects of individuals we may notice and make judgments about when first meeting them, including some aspects that are non-visual. One characteristic that can be quickly identified among groups of people who are conversing is language accent. Previous research has shown that accent is a characteristic that can create negative judgments within introductory situations, including situations like job interviewers (e.g., Carlson & McHenry, 2006; Frumkin, 2007; Fuertes, Gottdiener, Martin, Gilbert, & Giles, 2012).

The effect of accent stereotypes is a growing area of research within counseling psychology, but still contains many gaps. The effect of language accent on others’ perceptions of the accented individual is a topic that has received minimal attention within psychological literature (e.g., Carlson & McHenry, 2006; Frumkin, 2007; Fuertes, Gottdiener, Martin, Gilbert, & Giles, 2012). The majority of this research has focused on how foreign accents (i.e., accents of non-native speakers in the United States) affect the perception that individuals native to the United States (U.S.) have of the accented individuals. Some research has investigated the impact of Southern U.S. regional accents (e.g., Atkins, 1993; Heaton & Nygaard, 2011; Luhman, 1990), and other research has evaluated the impact of accent on client perceptions of counselors (e.g., Acosta &
Sheehan, 1976; Fuertes, 1999; Fuertes & Gelso, 2000). However, no research to date has investigated how accents affect a professional counselor’s perception of the professional competence of other counselors with Southern accents.

The current investigation seeks to fill this gap within the literature by evaluating potential biases that mental health professionals may have toward other counseling professionals with Southern accents. In particular, this research aims to investigate whether mental health professionals rate a counselor with a Southern accent as differently competent, both clinically and multiculturally, when compared to other counselors who do not possess a Southern accent. Findings of this research can have important career implications for counselors with Southern accents.

**Southern Accents in the United States**

Linguists have very intricate ways of defining what constitutes a Southern accent, the process of which is too complicated for this paper. What can be said about Southern accents is that “it is not a thing with clearly defined boundaries, but is instead a generalized pattern of a large number of personal abstract mental systems and associated behavior that are ill defined and ever changing” (Alego, 2003, p. 8). Although it may be difficult for individuals without linguistic backgrounds to define what comprises a Southern accent, there is some consensus on what regions are known for this type of accent. States that are indicated to have Southern accents include Alabama, Arkansas, Florida, Georgia, Kentucky, Louisiana, Mississippi, Missouri, North Carolina, South Carolina, Tennessee, Texas, and Virginia (Labov, Ash, & Boberg, 2006; Alego, 2003).

**Accent stigma.** According to Gluszek and Dovidio (2010b), accents that are non-native to a region create a specific type of stigma for the individual with the accent.
Gluszek and Dovidio’s model of stigma of non-native accents in communication (SNAC) utilizes both the speaker and listener in determining the effects of the accent. The authors posit that the speaker’s perceptions related to his or her own accent play some part in the effect that an accent has on others’ perceptions of the individual. Within the SNAC model, multiple factors are hypothesized to moderate the relationship between the listener’s and speaker’s responses to the accent, including social (e.g., belief that accent can be changed or overcome), communicative (e.g., accent strength and communicability through the accent), and contextual factors (e.g., relationship between the speaker and listener and attitudes towards immigrants) (Gluszek & Dovidio, 2010b). Although Gluszek and Dovidio’s model focuses on non-native speakers with accents, they also state that the model can be useful in situations with regional accents, such as with Southern U.S. accents.

The differences that individuals perceive between themselves and someone with an accent other than their own can have detrimental impacts. For instance, perceived professionalism can be negatively influenced by a non-native accent (Frumkin, 2007). Frumkin (2007) found that native U.S. undergraduate participants rated accented individuals from Germany, Mexico, and Lebanon lower than non-accented individuals on credibility, accuracy, prestige, and more likely to use deception than non-accented individuals when testifying of their innocence to a supposed crime. The negative judgments of these accented individuals could mean that they are found guilty simply because their accent created negative perceptions in the minds of the jurors. This research shows that accents can negatively affect perceptions of others, including traits such as trustworthiness.
Prejudice associated with Southern accents. Although research has yet to explore counselor perceptions of mental health professionals with Southern accents, other investigations have examined perceptions of individuals with Southern accents more generally (e.g., Atkins, 1993; Heaton & Nygaard, 2011; Luhman, 1990). In particular, U.S. college students, mostly from Kentucky, rated individuals with Southern accents lower in status variables including education, intelligence, wealth, success, and ambition, as compared to individuals with Standard English accents (Luhman, 1990). This pattern of findings shows that even individuals who self-identify as possessing a Southern accent can rate other Southern accented individuals negatively in regards to status variables, which also relate to professionalism. However, it should be noted that individuals in this study, with self-identified Southern accents, rated male individuals with Southern accents higher in solidarity variables, such as trustworthy, good, sympathetic, friendly, honest, and dependable (Luhman, 1990).

Southern accented individuals have also been rated as less intelligent, less educated, and less smart than individuals with non-accented English (Heaton & Nygaard, 2011). However, Southern individuals were also rated as more amusing, friendlier, more polite, nicer, and also less arrogant than non-accented individuals in the same study (Heaton & Nygaard, 2011). Interestingly Heaton and Nygaard (2011) also found that passages that were associated with Southern type activities (hunting topic and cooking topic) were also rated negatively in relation to intelligence, education, importance, and wealth compared to passages that were more neutral (medical topic and investment topic). Employment recruiters from the U.S. have also been found to rate Southern accented individuals as being unorganized, not creative, unemployable, incompetent,
lazy, unintelligent, inferior, naïve, and unprofessional, among other negative descriptors (Atkins, 1993). Similar to other research, the recruiters did rate Southern accented individuals as trustworthy, sociable, approachable, interesting, and agreeable (Atkins, 1993). Thus, despite the positive attributes (e.g., trustworthy, agreeable, friendly) that are associated with Southern accented individuals, these individuals may still be perceived as less intelligent and less educated.

Implications of the negative attributes associated with a Southern accent cannot only affect how others view the individual, it can also impact how a southerner perceives him or her self. A study utilizing priming methodology has found a relationship between poor performance and Southern stereotypes (Clark, Eno, & Guadagno, 2011). Southern individuals who were primed with negative stereotypes of Southerners performed significantly lower on intellectual tasks compared to those who were not primed with a negative stereotype (Clark, Eno, & Guadagno, 2011). These results show that the stereotypes of Southern accented individuals can be harmful, and provides evidence that stereotypes that others have of Southern counselors might influence the Southern accented individual’s performance with clients. Therefore, it is important to determine if others within the field hold negative beliefs of counselors with Southern attributes, such as accent.

Effect of Accent Prejudice within Counseling

The mental health field is not immune to the negative impact that accent stereotypes can have on individuals. Biases elicited by accents can be detrimental to the relationship between a client and counselor (Fuertes, Potere, & Ramirez, 2002). Early psychology research found that potential clients rated “Anglo American” counselors as
more skilled, liked, and trustworthy compared to counselors who were portrayed as “Mexican American” (Acosta & Sheehan, 1976). These results were found for participants who identified as “Anglo American” and “Mexican American,” revealing that even those who may have a similar accent to the “Mexican American” counselor rated that counselor more negatively (Acosta & Sheehan, 1976). Other studies have replicated this finding with Hispanic counselors with accents, finding that non-Hispanic clients (who were low in openness to diverse orientations) were less likely to want to seek long-term treatment from Hispanic counselors with accents (Fuertes & Gelso, 2000). In addition, individuals, who were low in openness to diverse orientations, rated non-accented counselors as more trustworthy, attractive, and expert than their Hispanic-accented counterparts (Fuertes, 1999; Fuertes & Gelso, 2000).

The accent that a counselor presents with is important clinically, as other research has shown that individuals prefer counselors that reflect their own cultural background, including individuals who are Caucasian, African American (Sladen, 1982), and Asian American (Fuertes & Gelso, 1998). As Luhman’s (1990) research points out, Southern individuals may feel more comfortable with individuals who exhibit Southern cultural qualities as well, such as a Southern accent, as Southern individuals rated Southern accented individuals (in particular Southern accented males) more trustworthy, good, friendly, and dependable among other attributes. According to research by Hendryx (2008), a majority of rural counties of all states within the Appalachian region of the U.S., including Tennessee, Alabama, Mississippi, and Kentucky, have a shortage of mental health professionals. With the shortage of counselors within Southern areas of the U.S., it is important to determine if hidden prejudice with mental health services toward
Southern accented counselors may be occurring due to their accent and preventing some Southern accented individuals from progressing further in the field.

**Study Purpose and Hypothesis**

Based upon the literature reviewed, the focus of this study is to ascertain the extent to which counselors with Southern U.S. accents are rated as less competent compared to counselors with non-Southern U.S. accents by other counselors. In addition, this study will seek to determine whether counselors with Southern accents are rated as less multiculturally competent by other counselors. This study will utilize vignettes, which will represent a female counselor with a Southern accent and non-Southern accent. It is hypothesized that:

H₁: Counselors who have a Southern accent will be rated significantly different with regard to general counseling competence and multicultural competence compared to those without a Southern accent.
CHAPTER II

Literature Review

Within the field of psychology, multiculturalism is promoted among new trainees and it is advocated for experienced counselors to aspire to embody multiculturalism (American Psychological Association, 2003). A part of this multiculturalism within the field of counseling includes the idea that counselors should be inclusive of all individuals. According to the American Psychological Association guidelines (APA, 2003), inclusion of all individuals includes both clients and colleagues. Although it is expected that counselors demonstrate multicultural competence with clients, little attention and research has been paid to multicultural acceptance of colleagues. For this reason, this study seeks to determine whether there may be a lack of multicultural awareness among mental health professionals regarding attitudes toward their colleagues. In particular, this dissertation will focus on attitudes towards individuals with Southern U.S. accents.

**Negative Attitudes Towards Accent**

Within the field of counseling psychology, the effect of accent stereotypes has been addressed by mainly focusing on foreign accent stereotypes (e.g., Carlson & McHenry, 2006; Frumkin, 2007; Fuertes, Gottdiener, Martin, Gilbert, & Giles, 2012). Other research within the field has focused on the impact foreign accents have on client perceptions of counselors (e.g., Acosta & Sheehan, 1976; Fuertes, 1999; Fuertes & Gelso, 2000). Research in relation to U.S. regional accents though has been sparse within counseling literature. Some researchers have investigated effects that Southern U.S. accents can have on others, finding results indicative of negative stereotypes such as unintelligence (e.g., Atkins, 1993; Heaton & Nygaard, 2011; Luhman, 1990). No study
to date has investigated whether the accent of a practicing counselor may actually lead other professional counselors to question the accented individual’s abilities as a counselor due to assumptions based upon his or her accent. This dissertation seeks to fill this gap in the literature by researching whether there are disadvantages for those who have Southern accents within the mental health field.

**Defining accents.** Before beginning to dissect the literature regarding the effects of accent stereotypes, it is important to understand what an accent actually is. Accents are mostly associated with individuals speaking in a language other than their native language, better known as a foreign accent (Gluszek & Dovidio, 2010b). Accents can also exist within regions that all speak the same language, or regional accents (Lippi-Green, 1994). Specifically, accents, whether foreign or regional, are the way that individuals pronounce words different than others speaking the same language (Giles, 1970; Lippi-Green, 1994). The meaning, grammar, and other characteristics of the original language stay the same, but the pronunciations change for the speaker, giving them a distinct, different accent than other native speakers (Giles, 1970; Gluszek & Dovidio, 2010b).

Although many individuals associate accents with individuals who are learning a second language (where their native language construes speaking the second language), accents can also be found regionally within areas that speak the same language and serve as a way to help individuals distinguish each other (Lippi-Green, 1994). However, issues can arise when these distinctions between groups become negative. Lippie-Green (1994) posits that two elements are the main avenues to discrimination and prejudice associated with accents. One of these elements is the “communicative competence” of the accented
speaker and the other is the “goodwill” of the listener. Lippi-Green states that individuals must be able to communicate effectively to not be seen negatively; yet, even if accented individuals are able to be understood readily, if the listener does not have the ability to see the speaker in a positive light, or have goodwill toward the speaker, the accented individual can do little to improve upon the negative attitude that their accent might produce. This can lead to discrimination and prejudice.

**Theories of accent stigma.** As mentioned previously, past research done within the field of psychology has examined negative perceptions of accent. The majority of this research has focused on foreign accents to determine the impact that the accent might have on the listener (Gluszek & Dovidio, 2010b). Overall, the research points to discrimination and prejudice occurring against individuals with accents. Gluszek and Dovidio (2010a) found that individuals with non-native accents self-report experiencing two types of stigma: one form related to the ideas others held about them based upon their accent and the other form related to a lack of literal understanding from the listener. Additionally, Gluszek and Dovidio (2010a) found that individuals with nonnative accents experienced less of a feeling of belonging, which was mediated by the lack of understanding due to accent. Although Gluszek and Dovidio’s (2010a) work pertains to nonnative accents, it provides evidence that individuals with accents are perceived as “others,” outside of the social norm. This relates to the stigma that accent can carry, and will be discussed further below.

In explaining the stigma that is associated with accents, Gluszek and Dovidio (2010b) theorize that accent stigma is similar to other types of stigma in that it can lead to stereotypes, prejudice, and discrimination for the individual with the accent. As with
other types of stigma, accent stigma is associated with how individuals suffer negative consequences related to certain attributes (Crocker, Major, & Steele, 1998; Gluszek & Dovidio, 2010b; Goffman, 1963). In the case with language, individuals with a foreign or different accent may be viewed as “lesser” than those who speak with the native accent (Gluszek & Dovidio, 2010b).

**Psychology research on accent discrimination and stigma.** Stereotypes associated with accents seem to begin when individuals are young, as research has shown stereotypes related to language are present even among 10 to 12 year old children (Nesdale & Rooney, 1996). Evidence of the negative effects that occur with accent discrimination and prejudice can be found in multiple research studies. In particular, Fuertes and colleagues (2012) conducted a meta-analysis of research studies of English-related accents on social evaluations. Fuertes et al. (2012) utilized 20 studies that investigated English language accents within databases associated with the fields of business, communication, education, health, psychology, sociology and social work. Studies were included in the meta-analysis if they investigated English accents and the study included enough statistical information to compute an effect size of the data (Fuertes et al., 2012). The meta-analysis revealed that nonnative accents were rated significantly less positively, less educated, less intelligent, and less successful, and accented individuals were significantly lower on variables related to dynamism \((d = 0.86, n = 18, p < 0.001, 95\% \text{ CI} = 0.57-1.16; \text{Fuertes et al., 2012})\). Additionally, individuals with accents were rated moderately less in relation to solidarity \((d = 0.52, n = 48, p < 0.001, 95\% \text{ CI} = 0.33-0.70)\). Results of this meta-analysis also found that these effects were strongest in situations related to employment or sales. Fuertes et al. (2012)
emphasized the social implications that these negative stigmas of accented individuals can have, including limited upward mobility.

As was found in the meta-analysis described above (Fuertes et al., 2012), multiple studies have found links between accent stereotypes and employment opportunities. Hosoda and Stone-Romero (2010) found that job duties played a role into how individuals were assessed related to accent. In particular, Hosoda and Stone-Romero (2010) found that with jobs that required higher communication skills (i.e., manager and customer service representative), English speakers with French and Japanese accents were rated as less suitable for the position and less likely to be hired than standard American accented individuals by undergraduate students from California and Kansas. Of note within the population of participants in this study by Hosoda and Stone-Romero is the demographic make-up of the California sample, which was 38% Asian American, 34% Non-Hispanic White, 9% Latino/a, 9% African American, and 6% mixed race. This is notable because a large portion of the sample is Asian American and potentially may identify culturally with accented individuals. The Kansas sample was majority White (Hosoda & Stone-Romero, 2010).

In another study, Deprez-Sims and Morris (2010) found that another group of U.S. college-aged individuals favored Midwestern U.S. accents over individuals with French accents in relation to job hiring. However, Deprez-Sims and Morris (2010) also found that individuals with Colombian accents were not rated significantly different from either the Midwestern or French accents. Deprez-Sims and Morris (2010) found that this lack of significant difference for the Colombian accent was related to the fact that raters felt more similar to these individuals than the French accented individuals. This adds
evidence to the fact that accent is a source of prejudice as it is being used as a basis for distinguishing others.

Carlson and McHenry (2006) found that individuals with accents were significantly less likely to be rated as employable. Specifically, Carlson and McHenry utilized a sample of individuals who identified as Hispanic, Asian, and African American. Within these groups, they utilized individuals who displayed strong accents associated with their ethnicity and individuals who did not display an accent. They found that U.S. human resource workers, when listening to recording of the individuals, did not make a distinction between the ethnicities when individuals did not display an accent. They did, however, find a significant effect for the accented individuals, with African American vernacular accented individuals being least likely to be employed and Spanish accented individuals being most likely to be employed; however overall, all accented individuals were less likely to be employed than the non-accented individuals (Carlson & McHenry, 2006).

Not only does accent influence whether an individual will be hired, it can also influence work performance as well. Wated and Sanchez (2006) utilized a sample of Spanish accented Americans, 98% of whom had been born outside of the U.S. They found that perceived discrimination associated with accents correlated negatively with job satisfaction and correlated positively with perceived work tension as well. As this research points out, both employment opportunities as well as employment satisfaction can be influenced by the accent of an individual.

Additional evidence for accent prejudice can be found in a study by Frumkin (2007), who found foreign accents have a significant influence within the legal system.
Frumkin (2007) utilized a sample of U.S. citizen undergraduate students to judge the creditability, accuracy, deceptiveness, guilt and prestige of supposed witness’ testimonies in legal proceedings. Frumkin (2007) utilized individuals who were able to speak both accented and non-accented English, which participants then rated based upon their role as witnesses to a potential crime. The legal witnesses had a German accent, Mexican accent, Lebanese accent, or no accent. Overall, accented testimony was rated significantly less favorably than non-accented speech. In particular, the Lebanese accented individual was rated the least favorable, meaning participants doubted their witness testimony. No significant difference was found between the German and Mexican accents (Frumkin, 2007). However, results of this study should be interpreted carefully as participants also viewed the speaking individual as well. Therefore, it cannot be determined whether impressions about the individual were solely based upon accent (Frumkin, 2007).

Interestingly, sometimes accent and stereotypes associated with them can play to ones advantage as one study showed that individuals with Asian accents were not discriminated against during job interviews by a sample of undergraduate students (Cargile, 2000). In this study, individuals with Mandarin-Chinese accents were not rated significantly different than non-accented English speakers when attempting to apply for four different job types, including both low status/low prestige and high status/high prestige positions. The study author speculated that this was due to other stereotypes associated with Asian Americans, which led individuals to consider them good workers (Cargile, 2000). These results though lend evidence to the fact that accents and the stereotypes that are associated with them can have implications for hiring or employment.
The Southern U.S.

Although much of the research discussed above has focused on foreign accents, there are also different accents that occur continentally within the U.S. The following section explores one area of the U.S. in relation to accent regions: the Southern U.S. The southern region of the U.S. has multiple aspects that distinguish it from other areas of the U.S., including both cultural differences and an accent specific to the Southern U.S.

A specific region. The U.S. maintains some cultural similarity across all states, but there is mounting evidence that there are distinct regions within the U.S. As support for the differences between regions of the U.S., some research has investigated personality differences among regions. Specifically, some of this research has begun to investigate how environment can shape the personalities of individuals within certain environments (Rentfrow, Gosling, & Potter, 2008; Rentfrow, 2014). Rentfrow et al. (2008) theorized five pathways for how regions may develop their own personality styles.

The first path is simply that people with similar personality styles end up living near each other in one area, such as families migrating to the U.S. and living close to one another. The second pathway is, due to the many similar personalities, institutions that are developed within the area are centered on common personality traits. The third path is that social norms will get established that are based upon common personality factors. The fourth pathway relates to the previous pathways in that once an area is established, individuals will be limited to what the region has to offer (e.g., educational institutions, jobs) which are all related to the common personality traits. Continuing on, the last path theorizes that once a common personality trait has been established, social norms will then perpetuate these personality traits within the region (Rentfrow et al., 2008).
all together this pathway then leads to distinct personality areas, where individuals think
and potentially behave different than other areas with groups of people of different
personality styles and traits (Rentfrow et al., 2008).

As support for this theory, differences have been found within regions of the U.S.
in relation to personality traits. Rentfrow et al. (2008) studied five personality traits,
including extraversion, agreeableness, openness, conscientiousness, and neuroticism,
across all states within the U.S. They found that personality traits did indeed tend to be
clustered into different regions of the U.S., showing that individuals within regions
tended to be similar to one another. In particular, extroversion was highest in the Great
Plains, Midwest and Southeastern areas of the U.S. Agreeableness was highest among
Midwest, South Central, and Southeastern states. Conscientiousness was highest among
the Southwest, Midwest, and Southeast. Neuroticism was highest among Northeast and
Southeast states. Openness was found to be highest in the Northeast, Mid-Atlantic, and
West Coast areas.

**Stereotypes of U.S. regions.** The regional differences within the U.S. lend
themselves to creating stereotypes out of the supposed commonalities among the regions
members. One study in particular provides support to the idea of regional U.S.
differences producing stereotypes within the U.S. This study found that individuals were
able to label regions based on their assumed personality characteristics of openness and
neuroticism in a manner that matched the actual results found by Rentfrow et al. (2008)
(Rogers & Wood, 2010). Rentfrow et al. (2013) also utilized further state samples related
to personality traits and discovered three distinct personality regions within the U.S. The
“middle states,” ranging from Minnesota and down to Florida, were found to be friendly
and conventional, the west coast and western states found to be relaxed and creative, and
the northeast and mid-Atlantic coast found to be temperamental and uninhibited
(Rentfrow et al., 2013).

There is also evidence that differences on perceived personality traits can also
influence attitudes that individuals have about outside groups. In Switzerland, natives of
Switzerland judged foreigners differently based upon what characteristics they were
believed to espouse (Binggeli, Krings, & Sczesny, 2014). For example, immigrants into
Switzerland from Spain, Portugal, and Italy were rated as warmer and moderately more
competent than immigrants from Germany and France, who were viewed as cold and
highly competent. Due to this, the individuals from Spain, Portugal, and Italy were more
likely to be allowed into the “in-group” of native individuals from Switzerland because
they are friendly (warm) and less likely to use their knowledge (competence) against the
native Swiss individual compared to the perceived characteristics of the French or
German immigrants (Binggeli, Krings, & Sczesny, 2014). It could be surmised that the
factors that distinguish different regions of the U.S. may also play a role similar to how
the factors play out in Switzerland. Individuals can be singled out due to not fitting in
with in-group norms of the region, which can lead to negative attitudes towards specific
regions like the South.

The differences found between regions of the U.S. are important to this study as
they lend evidence to the idea that southerners could be viewed as outsiders. This could
lead to an explanation of why the Southern U.S. is seen as different from other regions of
the U.S. Research has shown that individuals tend to describe members of their own
group in more positive ways compared to outside members (Maass, Ceccarelli, & Rudin,
Southerners being seen as distinct in their own region could mean that others might view them in a more negative light. It could even lead to individuals refusing to partake in services offered by southerners (Shimp Dunn, & Klein, 2004). In fact there is empirical evidence for a stereotype of southern individuals. This stereotype is negative and could have implications for individuals who are from this region.

In order to create a Southern stereotype, the U.S. culture in the broader context has to make it okay for individuals to believe in stereotypes about Southern individuals (Yzerbyt, Schadron, Leyens, & Rocher, 1994). Essentially, the stereotypes rely on whether individuals feel it is okay to judge someone a particular way. If individuals believe that it is okay to judge Southerners in a certain way, then there is little to stop a Southern stereotype from being enforced. Below, Southern stereotypes are explored further and their possible origins are discussed as well.

**Stereotypes of southerners.** Although many factors may have contributed to the development of a Southern U.S. culture, specific attributes of the region have developed into stereotypes that are placed upon individuals who are associated with the south. U.S. media has feasted upon the stereotype that is associated with Southerners, creating multiple television shows and movies with regularity dating back to the 1950s (Cooke-Jackson & Hansen, 2008). These media caricatures captured Southerners as “hillbilly’s” who were uneducated and unkempt (Cooke-Jackson & Hansen, 2008). The exposure that the media has given to these stereotypes only further perpetuates these ideas in the broader public.
One theory in regard to the origin of Southern stereotypes hypothesizes that the traits and values of the South have been twisted to create negative stereotypes (Cooke-Jackson & Hansen, 2008). For example, individuals who are self-reliant may be hesitant to agree to allow medical doctors to give vaccinations to them. This can then be construed into the assumption that the individuals are ignorant of medical advances, and the stereotype of this individual who is rejecting medical help as being “dumb” is perpetuated. This idea relates back to the idea of in-groups and out-groups, where Southern individuals are viewed as “dumb” for rejecting what others may think is necessary and helpful, like a vaccine. Alternately, if someone of a different region outside of the South rejects a vaccine, they might be viewed as enacting independence for rejecting vaccines, instead of being viewed as dumb (Maass, Ceccarelli, & Rudin, 1996; Maass, Milesi, Zabbini, & Stahlberg, 1995; Maass, Salvi, Arcuri, & Semin, 1989).

Although typical stereotypes do play upon some forms of reality, the truth about southern individuals is that they display many more positive characteristics that are often overlooked (Cooke-Jackson & Hansen, 2008). For example, Jones (1975) highlights some of the characteristics that truly embody a region of the south known as Appalachia. In particular, Jones has found that Southern Appalachian individuals value self-reliance, religion, neighborliness, family, respect for others, love of place, modesty, sense of humor and patriotism (Jones, 1975). These common characteristics provide support for the idea that the South can be viewed as different from other parts of the U.S.

More evidence for the specific culture within the South can be seen in research done by Gore and Wilburn (2010). They investigated the collectivistic culture of the region compared to the individualistic culture found in non-Appalachian areas of
Kentucky. They found that while both Appalachian and non-Appalachian students had lower academic performance when they identified with individualistic values in school, Appalachian students outperformed non-Appalachian students when they identified with collectivistic values in school. Gore and Wilburn (2010) associated this with the students identifying with their larger Appalachian culture, which embodies collectivistic values.

**Implications of southern stereotypes.** The negative implications of southern stereotypes were revealed in a study by Towers (2005), who investigated what stereotypes Southerners’ experienced and how it impacted them personally. Towers utilized a sample of 689 high school students from West Virginia. Participants were asked to denote where they would like to reside within the U.S. and over half of the respondents (52%) answered that they would like to move outside of West Virginia upon completing their education (Towers, 2005). Additionally, even if students chose to stay within the state of West Virginia, students were likely to stay away from areas within the state that they themselves stereotyped as “hillbilly” and “redneck.” Towers found through qualitative research that the reasoning behind the avoidance of living in both West Virginia in general and in certain regions of West Virginia hinged on stereotypes of southern individuals (Towers, 2005).

Negative effects of southern stereotypes have also been found to have an impact on intellectual performance of those who identify as a Southerner (Clark, Eno, & Guadango, 2011). Clark et al. (2011) utilized four separate studies to examine the impact that Southern stereotypes have on southern individuals’ intellectual performance. In the first study’s experimental condition, participants, who all identified as Southern, were given an intellectual task and told that Southerners performed poorer on the task than
Northern individuals. The control group was not provided with any information about differences between Northern and Southern individuals. In the second study, the setup was the same as the first study, except that individuals in the experimental condition were not informed that Northern individuals performed better, but that there were “differences” between the two groups on scores, not noting any direction of the difference. In both of these studies, Clark et al. (2011) found that participants who had been in the experimental group and exposed to some stereotype of Southerners (i.e., that there are differences in how Southerners perform compared to Northerners) performed significantly worse than participants who were in the control group and received no stereotype information.

Since their first and second experiments showed that eliciting southern stereotypes can significantly impact performance, Clark et al.’s (2011) utilized a third study where participants were simply shown an image associated with Southern stereotypes to see if images could also produce a similar effect. For this study, the participants in the experimental condition were shown a Confederate Flag as a stereotypical image associated with the South. Results of this study showed that participants who had been exposed to the image performed significantly lower than the control condition participants.

In the fourth study, Clark et al. (2011) sought to investigate whether stronger associations with a southern identity influenced performance. In this study, the experimental group was exposed to southern stereotypes and was asked to evaluate their level of identity as a Southerner. They once again found that exposure to stereotypes negatively influence performance and also found that individuals who more strongly identified as southern did significantly worse than others who exhibited less identification.
with southern identity (Clark et al., 2011). As can be surmised from this expansive study, southern stereotypes and association with southern identity can negatively impact performance on intellectual tasks compared to Southerners who are not primed with southern stereotypes or identify less with a southern identity.

Additionally, previous research has led to the idea that the South is racially “backwards” when compared to other areas of the U.S (Carter, Corra, Carter, & McCrosky, 2014). For example, Kuklinski, Cobb and Gilens (1997) found that southern, White males held significantly greater negative attitudes towards African Americans than Non-Southerners or females. Recently, other research has begun to chip away at the notion that the South is significantly more racist in nature than other regions of the U.S (Carter et al., 2014). A recent study by Carter et al. (2014) found that the South itself is no longer a determining factor for racial prejudice. Instead, they found that level of conservatism and self-interest were greater predictors of racial attitudes than is U.S. region. Other studies have also supported the idea that the South is no more racist than other areas. For instance, Pendergrass (2013) focused on overt and covert, as well as micro and macro, levels of racism between the North and South. Pendergrass utilized a sample of African American individuals who had migrated from the North to the South and found that the individuals believed the South is simply more “overt,” or macro in nature, in regards to racism than Northern areas, meaning that the Northern states also exhibited racism as well.

**Southern accents.** Among the factors that distinguish the Southern region of the U.S. from other regions is the accent that the area is known for. This accent is another way that individuals can identify individuals from the South and employ stereotypes
mentioned above. The Southern accent is associated with a particular region of the U.S., typically composed of the States of Alabama, Arkansas, Florida, Georgia, Kentucky, Louisiana, Mississippi, Missouri, North Carolina, South Carolina, Tennessee, Texas, and Virginia (Labov, Ash, & Boberg, 2006; Alego, 2003). As with any accent, there are specific attributes to the English language associated with a Southern U.S. accent that makes it distinct from other accents of English within the U.S. According to Alego (2003), a Southern accent is a conglomeration of different accents, including Scots-Irish and African, once these individuals arrived to the U.S. and settled in the southern states. While the language spoken is English, Southern individuals have created their own meanings in some words and found ways to pronounce words differently that help distinguish Southern English from other parts of the U.S. (Alego, 2003; Schneider, 2003).

**Attitudes towards Southern accents.** As with foreign accent research, considerable studies have found a negative link between Southern accents and employability. Research dated over two decades revealed biases in relation to accent and hiring (Atkins, 1993). In particular, phrases that were characteristic of U.S. Appalachian (a region mostly comprised of Southern states) accented English and “Black accented English” negatively impacted the individual’s employability by employment recruiters from the U.S. (Atkins, 1993). Additionally, both the Appalachian and Black accented individuals were described as unorganized, disreputable, unemployable, incompetent, naïve, unintelligent, inferior and unprofessional.

Other research has attempted to flesh out how much content of speech might influence listeners’ attitudes in addition to accent of the speaker as well. Heaton and Nygaard (2011) conducted a study to find that content does influence listener attitudes.
They utilized two accents, one Standard American accent (individuals from the Midwest) and a Southern accent (individuals from South Carolina). Participants, who were undergraduate students from all over the U.S., were asked to listen to passages that were spoken by either Standard American accented individuals or Southern accented individuals. The speakers were reciting one of two passages with one passage pertaining to more historically Southern U.S. topics (i.e., loading a gun and cooking) and the other passage was rated as more neutral in topic (i.e., how to perform an appendectomy and investment short-selling). Heaton and Nygaard (2011) found that regarding accent, the speakers with Standard American accents were rated significantly more educated, intelligent, and smart, but also more arrogant. Southern accented speakers, although rated as significantly more amusing, friendly, and nice, were viewed as less intelligent and less educated. Similar patterns emerged for the passage type as well, where the non-Southern passages were rated as more intelligent, important, and educated. Interestingly, non-Standard accent individuals were rated as more sociable, likable, and cheerful when reading Southern topical passages. No significant interaction was found, meaning that individual attitudes did not change, based upon the passage type when a Southern accented individual was reading either passage.

Luhman (1990) also found that individuals with Kentucky accents were rated lower on multiple characteristics, including intelligence, ambition, success, and education by university students who were mostly from Kentucky as well. Interestingly the negative results of the Kentucky accent were still found even when participants were informed the accented individual held a college degree. In addition, individuals who identified as being from more urban areas of Kentucky attributed more positive
characteristics to Standard American accents than accents of individuals within their own state (Luhman, 1990). This shows how individuals who themselves are Southern can have preferential attitudes towards accents that are non-Southern sounding.

Although much of the research associated with Southern accents points to a negative stereotype, it should be noted that there are also some positive characteristics that have been associated with Southern individuals. According to the study by Atkins (1993) individuals with Southern accents were rated as sociable, interesting and trustworthy. In another study, Southern individuals were also rated as more amusing, friendlier, more polite, nicer, and also less arrogant compared to other individuals without Southern accents (Heaton & Nygaard, 2011). These findings, although positive, also point to the “childlike” stereotype that Southern individuals face, where they are sociable, friendly, and non-threatening, but not intelligent, successful, or high in status.

**Implications of Accents in the Mental Health Field**

Research shows that negative attitudes toward accents do exist within the field of counseling psychology between clients and counselors (Fuertes, Potere, & Ramirez, 2002). For example, Acosta and Sheehan (1976) utilized individuals with Spanish accents and individuals with standard American accents and labeled them as either professional counselors or nonprofessionals. They then utilized participants comprised of Mexican Americans and “Anglo Americans” and found that both Mexican Americans and “Anglo Americans” attributed more positive attitudes towards standard accented professionals (Acosta & Sheehan, 1976). However, it should be noted that all counselors were ranked positively, both professional and non-professional and accented and non-accented; however, the non-accented professional was rated significantly more positively
than the others (Acosta & Sheehan, 1976). More recent research has also found preference given to psychologists who displayed no accent when compared to accented professionals by European Americans (Fuertes & Gelso, 2000).

The importance of this topic within the field should not be underestimated, as there are real world consequences associated with accent discrimination, in particular with potential professional counselors who may display a Southern accent. As the research above on Southern accents has pointed out, there are definite implications on employment and social perceptions related to negative judgments associated with accents. In particular, Southern U.S. accents have been linked to characteristics of being uneducated, unintelligent, and lazy (Atkins, 1993; Luhman 1990). At the same time, Southern Accented individuals have also been stereotyped as friendly, amusing and polite (Atkins, 1993; Heaton & Nygaard, 2011). Given that research has shown that individuals tend to rate counselors of similar backgrounds higher (e.g., Fuertes & Gelso, 1998; Sladen, 1982), it is important to consider that being able to provide professional counselors with Southern accents to individuals from the south may create stronger bonds between client and counselors.

Based upon research, which shows that part of the positive outcome in therapeutic counseling can be related back to the relationship counselors have with their clients (Frank & Frank, 1993; Laska, Gurman, & Wampold, 2013; Wampold, 2001), it could be surmised that Southern accented individuals would work well with clients due to their perceived friendliness and sociability (Atkins, 1993; Heaton & Nygaard, 2011). However, it remains to be seen whether the negative stereotypes that go along with Southern accents might prevent counselors with Southern accents from being hired. No
research study to date has investigated a possible link within the mental health field between accent and hiring. However, evidence for the possibility that even professionals with Southern accents might be subject to prejudice based on accent can be found in research mentioned previously conducted by Luhman (1990) who found that it did not matter if individuals were informed that a Southern accented individual was a college graduate. The Southern accented individual was rated as lower status compared to standard English speakers no matter their actual education attainment (Luhman, 1990).

**Study Rationale.** The purpose of this study is to determine whether mental health professionals with Southern accents are rated as differently competent compared to other counselors who do not have Southern accents. The perception that counselors have toward other counselors with Southern accents is important to consider to ensure that certain individuals or areas of the U.S. are not being discriminated against. As stated previously, research has pointed out that counseling clients tend to want individuals who match them culturally (e.g., Fuertes & Gelso, 1998; Sladen, 1982). This, along with the fact that mental health professionals are lacking in many Southern accented areas of the U.S. (Hendryx, 2008), points to a need to ensure that Southern accented individuals are not being deterred or prevented from entering the field based upon a bias within the counseling field toward Southern accents. Additionally, this research becomes even more important when we realize that previous research has shown that individuals who live in an area for as little as two years can acquire characteristics of that area’s manner of speech (Munro, Derwing, & Flege, 1999). Based upon this, any graduate student who chooses to study in a Southern region who is not originally from there and wishes to start a career outside of the South could experience some issues when attempting to find a job.
within the field. The findings of this study can also help to ensure that multicultural guidelines of the APA (2003) are upheld, where clinicians are not discriminated against based upon their cultural identity.
CHAPTER III

Method

Participants

A total of 163 participants were included in this study. Participants were recruited using listings of APA accredited clinical and counseling psychology graduate programs. The program directors were contacted and asked to distribute the request for participants within their programs. Participants were required to be at least 18 years old, reside in the U.S., and be associated with the mental health field to be able to assess current attitudes in the mental health field towards individuals with Southern accents who practice counseling. A sample of 155 individuals was sought to ensure enough full responses to allow adequate power for the proposed analysis and therefore the 163 respondents were deemed adequate for the proposed analyses for this study ($f^2 = .05$, $R^2 = .10$, and $\alpha = .05$; Faul, Erdfelder, Lang, & Buchner, 2007).

Participants ranged in age from 21 to 47 years old ($M = 26.1$, $SD = 4.15$). The sample was predominantly female (82%), with 17% of participants identifying as male, and 1% identifying as other (i.e., “Woman” and “AFAB genderqueer”). The majority of the sample identified as White or Caucasian (74%), 8% identified as Asian American or Pacific Islander, 5% identified as Hispanic or Latino(a), 5% as Multiracial, 4% as Black of African American, 1% identified as American Indian or Alaskan Native, and 0.6% identified as Middle Eastern. Another 3% of the participants identified as Other, and self described themselves as “Asian (Chinese),” “Asian,” and “Asian Indian.” As these demographic results reveal, the sample for this study was young and predominately White or Caucasian and female.
Participants were also asked to identify the region of the U.S. they most identify with and results revealed that 31% identified with the Northeast U.S., 25% identified with the Midwest, 22% identified with the South/Southeast, 10% identified with the Southwest, 10% identified with the Northwest, and 3% identified that they were not from the U.S. In regards to the area that participants identified with, 58% were described as suburban, 23% as urban, and 17% as rural.

Regarding training program, 26% of participants reported they were enrolled in a Counseling Psychology Ph.D. program, 25% in a Masters of Counseling program, 24% in a Clinical Psychology Ph.D. program, 13% in a Clinical or Counseling Psychology Psy.D. program, 6% in a Masters in Clinical Psychology, and 7% answered Other (i.e., “Psy.D. School Psychology,” “Master's Psychological Science,” “Ed.S. School Psychology,” “Ph.D. combined Counseling, Clinical, and School Psychology,” “Rehabilitation Counseling,” “Ph.D. School Psychology,” and “Master's School Psychology”). A total of 86% of participants either “strongly agreed” or “agreed” that their program had a focus on multiculturalism. Additionally, the majority of participants indicated they had at least one multicultural course within their graduate program (68%) and the majority also indicated they had attended at least one multicultural training event (61%).

**Voice Recordings**

In order to obtain perceptions of individuals with Southern accents, voice recordings were utilized to make the vignettes that study participants would listen to and rate. The recordings of Southern and non-Southern accented counselors were completed by six different individuals. Only females were utilized in this study to eliminate the
effect that gender might have on participant perceptions across accent conditions. Three females with Southern accents and three females with non-Southern accents were utilized to ensure that any particular attributes of the speaker did not unduly influence the results (e.g., speaker’s voice is irritating and influences responses negatively overall). All of the Southern accent speakers were from Eastern Tennessee and all had lived in Tennessee since birth. The three non-Southern accented individuals were all from the Northeastern U.S., with two individuals being from New Jersey and one being from Pennsylvania. All of the non-Southern accented speakers had spent the majority of the lives in the Northeast. The recordings were subjected to pilot tests, wherein each recording was heard by 17 individuals who reported the region of the U.S. they believed the speakers were from (i.e., West, Midwest, Northeast, South, Southwest). Speakers in the vignette dialogues were kept to similar backgrounds including race (Caucasian/White), socioeconomic background (Middle class), age ($M = 36$, $SD = 5$), and education (all completed at least a college degree) to help offer some controls to the recordings.

**Pilot Study.** For the pilot tests of the voice recordings, individuals were recruited from graduate classes within a Counseling Psychology Masters and Doctoral program from a mid-sized private institution in the Northeast. Students within the classes varied by age, race, and gender and also included some international students. However, no specific demographic data were obtained for pilot study participants to reduce ability to identify participants and promote more honest assessments of the vignette characters. Pilot study participants were not informed of the true purpose of the study to help prevent any potential biases when judging the voice recordings.
Each vignette condition was listened to by 17 individuals (for a total sample size of 34 participant in the pilot study), and each participant listened to three recordings out of the six (Southern accent vignette 1, 2 and 3 and non-Southern accent vignette 1, 2 and 3). The recordings were split up into two groups, with the same order given to each pilot study participant that listened to that grouping of the recordings. The first grouping including Southern accent vignette 1, non-Southern accent vignette 1, and Southern accent vignette 2. The second grouping included non-Southern accent vignette 2, Southern accent vignette 3, and non-Southern accent vignette 3. The pilot study participants were asked to guess the age, gender, region of the U.S., and what degree program they thought the vignette character may be associated with (see Appendix A).

The aim of the pilot study of the voice recordings was to ensure that the voices represented regions of the U.S. desired. In particular, three voice recordings were meant to represent the Southern U.S. accent and the other three voice recordings were to be representative of any other area of the U.S. instead of the Southern U.S. The results of the pilot study revealed that the voice recordings from the non-Southerners were all judged to be from outside of the Southern U.S. region. The majority of the pilot study respondents indicated all the non-Southern accented voices sounded as if they were from one of three areas, including the Midwest, Northeast, and Northwest (100% for two voice recordings and 88% for the other). Other options chosen for the non-Southern accent included one participant thinking they sounded as if they were not from the U.S. and one participant thinking they were from the Southwest. Regarding the Southern accent condition, two of the voice recordings were judged 76% to be from the South/Southwest and the other was judged 88% to be from the South/Southwest. Southwest was included
as some individuals consider states such as Texas to be in the Southwest as opposed to the South. As noted previously, Texas is a state that is included among states that tend to exhibit Southern accent characteristics (Labov, Ash, & Boberg, 2006; Alego, 2003). Other potential areas the Southern accents were judged to be from included three Northeast, five Midwest, one Northwest, and one not from the U.S. Given the majority of participants considering the Southern accents to be from the South and the non-Southern to be from outside the Southern region of the U.S., it was deemed appropriate to utilize the voice recordings for the purpose of this study.

**Measures**

**Marlowe-Crowne Social Desirability Scale** (MCSDS; Crowne & Marlowe, 1960). The Marlowe-Crowne Social Desirability Scale (MCSDS) was utilized in this study to ensure that participants are not being biased in their response (Crowne & Marlowe, 1960). The MCSDS is comprised of 33 items, which assess whether an individual is seeking to answer questions in a socially desirable manner. Individuals are asked to answer whether each item is true or false of them. An example item is “I am sometimes irritated by people who ask favors of me” (Crowne & Marlowe, 1960; see Appendix B). Previous initial internal reliability reports were adequate at .88 with a sample of mixed gender undergraduate students in psychology (Crowne & Marlowe, 1960). With the same sample, test-retest reliability with a month time interval was also found to be adequate at .89. Scores of the MCSDS range from 0-33, with higher scores relating to a higher degree of social desirability answering. Cronbach’s alpha for the MCSDS for the current study sample was .94.
Cross-Cultural Counseling Inventory—Revised (CCCI-R; LaFromboise, Coleman, & Hernandez, 1991). This measure was utilized to assess the perceived multicultural competence of the vignette characters. This measure was used as it can reveal how participants view the vignette characters in relation to their ability to be multiculturally competent counselors. Multicultural competency is viewed as an integral part of competent counselor training according to the APA (APA, 2003). Because multicultural training has become a pinnacle in graduate education of counselors and mental health workers, it is deemed appropriate to assess how participants rate the multicultural competency of the vignette character. The CCCI-R is comprised of 20 items and is answered in a 6 point Likert-type format (from 1 = strongly disagree to 6 = strongly agree) (see Appendix C). An example item is “The therapist values and respects cultural differences” (LaFromboise et al., 1991). With a sample of university students who had taken at least one counseling course, LaFromboise et al. (1991) found appropriate reliability, \( \alpha = .95 \). Cronbach’s alpha for the current study was found to be .85.

Counselor Rating Form - Short (CRF-S; Corrigan & Schmidt, 1983). The CRF-S was utilized to determine how competent the vignette characters were rated in general competency characteristics, including expertness, attractiveness, and trustworthiness (Corrigan & Schmidt, 1983). Participants are asked to rank the counselor on twelve one-word characteristics on a 7 point Likert scale from 1 = not very to 7 = very (see Appendix D). Previous research has found adequate Cronbach’s alpha levels for each of the three subscales (expertness = .82, trustworthiness = .98, attractiveness = .91; Atkinson & Wampold, 1982) with a sample of undergraduate students enrolled in a
psychology course. Cronbach’s alpha for the CRF-S of this study’s sample was .92.

Regarding the three domains, Cronbach’s alpha was also adequate for all three domains in the current study (expertness = .85, trustworthiness = .87, and attractiveness = .87).

**The Miville-Gusman University-Diversity Scale-Short** (M-GUD – S; Miville et al., 1999; Fuertes, Miville, Mohr, Sedlacek, & Gretchen, 2000). The M-GUD – S is a 15-item questionnaire, taken from the original 45-item M-GUD (Miville et al., 1999). It is utilized to assess cultural awareness. Factor analyses of the M-GUD – S revealed three factors labeled diversity of contact, relative appreciation, and comfort with difference (Fuertes et al., 2000). Participants were asked to respond to questions on a 6 point Likert scale from 1 = *strongly disagree* to 6 = *strongly agree*. An example item is “I would like to join an organization that emphasizes getting to know people from different countries” (see Appendix E; Miville et al., 1999; Fuertes et al., 2000). Adequate alpha levels have been found in previous research with the M-GUD – S with an undergraduate student population (α = .77) and additionally, the short version has shown high correlation with the original M-GUD – S (r = .77, p < .001; Fuertes et al., 2000). With a graduate student population of masters and doctoral students in counseling and counseling psychology programs Cronbach’s alpha was also adequate at α = .79 (Fuertes & Brobst, 2002).

Scores of the total M-GUD – S range from 15-90, with the higher the score relating to higher cultural awareness. Scores of the subscales range from 5-30, again with higher scores indicating higher cultural awareness within the subscale content. Cronbach’s alpha for the current study was found to be .75.

**Listening and attention questions.** Participants were also asked questions regarding the vignette character they listened to in order to gain an understanding of how
the participant conceptualized the interviewee. Instructions asked participants to “Please answer the following questions to the best of your ability, based upon the audio selection that you just heard. Some of the questions may ask specifics regarding what the interviewee said and other questions may ask what you were thinking when the interviewee was speaking.” Participants were asked to answer questions to aid in both assessing validity (that participants heard the audio) and also to ensure participants were not able to determine the actual investigative purpose of the research and therefore skew results. Participants were asked questions such as: “How old do you imagine the individuals you heard to be?” “Were you able to hear the audio?” “How long has the interviewee been living in the area?” (see Appendix F)

**Procedure**

After approval from the University’s Institutional Review Board, participants were recruited through email requests that were sent to APA accredited Clinical and Counseling Psychology graduate programs (e.g., Counseling Psychology, Clinical Psychology, health and human services) throughout the U.S. Additionally, an American Psychological Association (Division 17) listserv was utilized to collect additional participants. Some “snowball” sampling may have occurred as participants were invited to share the link for the survey with any individuals who qualified. Participants were all current masters or doctoral students within the mental health field. After reviewing the informed consent, participants were directed to the online survey. Upon completion of the survey, participants were directed to a written debriefing of the study. See Appendix G and Appendix H for the sample recruitment letters to program directors and students.
Participants accessed the online survey using Qualtrics (2015) and were shown an informed consent document describing the study (see Appendix I). Participants were informed that the study was seeking to investigate mental health workers’ focus and attention during interview situations. The specifics of the study investigating Southern and non-Southern accents was not introduced on the informed consent to ensure that participants were not able to surmise the proposed hypothesis and potentially sway results.

Once participants consented to participate, they were then asked demographic questions (see Appendix J). Then the survey progressed with the participant listening to the audio file. Directions at the top of the page informed participants “For this study, we are asking you to imagine you are a part of the hiring process to find a new counselor or therapist for the mental health facility where you work. Please listen to the audio clip below, which includes brief segments from an interview with a job candidate.” Qualtrics (2015) software presented the 6 different accent conditions in a random order to participants as they accessed the survey online. Participants were given a random recording of either a Southern accent or non-Southern accent and only listened to one recording for the survey. The first Southern accent vignette was accessed by 34 participants, the second Southern accent vignette was accessed by 21 participants, and the third Southern accent vignette was accessed by 23 participants, resulting in a total of 78 participants listening to the Southern accent condition. The first non-Southern accent vignette was accessed by 30 participants, the second non-Southern accent vignette was accessed by 27 participants, and the third non-Southern accent vignette was accessed by
28 participants, resulting in a total of 85 participants listening to the Non-Southern accent condition.

The vignette script was the same across accent condition (see Appendix K) and represented potential answers that an individual may have for common interview questions (i.e., “Tell us about your work history and why you are choosing to interview with us.” “What do you think is important for all counselors to embody in their work with clients?” and “What do you like to do for fun and how do you keep a work/life balance?”). After hearing the recording, participants were required to answer the question “Were you able to hear the interviewee’s answers to the interview questions?” as a validity check. All participants utilized in data analysis responded that they could hear the recording. After listening to the audio file, participants were asked to answer questions regarding the vignette they heard, answering competency questions about the vignette character (CCCI-R and CRFS), and then answering questions about themselves (M-GUD – S and MCSDS).

In the current study, a total of 288 participants accessed the survey. Individuals who did not complete any questions on the survey, or who were missing 20% or more of the data on any of the measures, were removed (Parent, 2012), resulting in the removal of 125 participants. One potential reason for participants not completing the survey include not being able to hear audio on the computer they had accessed the survey with, as audio was required to complete the survey. Other factors regarding non-completion are unknown as the survey was anonymous.

Regarding missing data with the remaining 163 respondents, 99% of the respondents were missing no responses on the CRFS, 98% of the respondents were
missing no responses on the CCCIR, 99% of the respondents were missing no data on the M-GUD – S, and 93% were missing no responses on the MCSDS. Further analysis of the missing data revealed that missing items were random on all measures (CRFS: item 6 was skipped once; CCCIR: items 5, 9, 10, and 11 were all skipped once by different participants; M-GUD – S: item 5 was skipped once; MCSDS: items 3, 5, 14, 16, 19, 20, 21, 23, 24, 29, and 31 were all skipped once by different participants).

**Proposed Analysis**

This study was a between-groups design. The main independent variable was accent condition of the vignette character. The dependent variables were the level of competence that the vignette character is rated, in both counseling competence and multicultural competence. The proposed analysis for the main hypothesis was a one-way multivariate analysis of variance (MANOVA). Main effects were investigated regarding whether Southern accented counselors were viewed differently on the two competency measures (CRF-S and CCCI-R) compared with non-Southern accented counselors. In addition to the one-way MANOVA, separate MANOVA’s were run to assess potential interaction effects on the CRF-s and the CCCI-R regarding participant region, gender, regional living environment (urban, suburban, rural), participant training program, participant multicultural trainings and multicultural courses. For the proposed analyses, a minimum sample size of 155 total was deemed necessary to obtain a medium effect size for the largest possible analysis, which was a 2 x 5 MANOVA investigating moderation of participant region ($f^2 = .05, R^2 = .10, and \alpha = .05$; Faul et al., 2007). To achieve adequate power for the main hypothesis one-way MANOVA, the minimum sample size needed was 92 ($f^2 = .11, R^2 = .10, and \alpha = .05$; Faul et al., 2007).
CHAPTER V

Results

Preliminary Analyses

For the analyses of this study, MANOVAs were conducted, with the CRF-S and CCCI-R as the dependent variables. See Table 1 for complete results of correlations between all measures, as well as, means and standard deviations. With the sample of this study, the M-GUD – S, multicultural awareness, was significantly correlated with the MCSDS, social desirability ($r = .244$, $p = .002$) and the CRF-S, general competency, was significantly correlated with the CCCI-R, multicultural competence ($r = .625$, $p < .001$). See Table 2 for complete descriptive statistics for all measures.

Exemplar Effects. To assess whether effects of the vignette character’s voices may have impacted scores of the CCCI-R or CRF-S, two separate ANOVA’s comparing mean scores of the CCCI-R and CRF-S of the six different vignette conditions were conducted. There were no significant differences in scores found between the six vignette conditions on either the CCCI-R ($F(5, 157) = .771$, $p = .616$) or the CRF-S ($F(5, 157) = 1.80$, $p = .116$).

Cultural Awareness (M-GUD – S) and Social Desirability (MCSDS)

For the sample of this study, the M-GUD – S revealed cultural awareness scores similar to other research samples that have utilized the M-GUD – S with counselors (highest possible score = 90; $M = 72.37$, $SD = 7.31$). For the subscales of the M-GUD – S, the sample also revealed levels of cultural awareness similar to other samples of counselors regarding Diversity of Contact ($M = 22.85$, $SD = 3.91$), Relativistic Appreciation ($M = 24.83$, $SD = 2.81$), and Comfort with Differences ($M = 24.70$, $SD = $...
3.43) with the highest possible score being 30 for each subscale. The results of the M-GUD – S of this study mirror results of other studies that utilized counselors working with schools (Constantine et. al., 2001; Full scale $M = 70.09$, $SD = 8.16$; Diversity of Contact $M = 21.52$, $SD = 4.30$; Relativistic Appreciation $M = 24.09$, $SD = 3.03$; and Comfort with Differences $M = 24.48$, $SD = 3.69$).

With the MCSDS, results revealed that the sample overall was typically not responding in a socially desirable way ($M = 13.79$, $SD = 6.01$). The mean of this sample’s MCSDS correlates with other samples from studies utilizing college-aged individuals (Crowne & Marlowe, 1960, $M = 13.72$, $SD = 5.78$) and graduate level students (Constantine, 2001, $M = 15.21$, $SD = 7.34$). The results of the MCSDS and the M-GUD – S taken together lend credence to the main analysis of the study as the sample was not seeking to answer in a pleasing manner and were also culturally aware.

**Main Analysis MANOVA**

The main analysis of the study was a one-way MANOVA, utilized to assess whether the Southern accent counselors were deemed different in relation to general competence and multicultural competence as a counselor. The main independent variables were the two accent conditions and the dependent variables were the two measures of competence (CRF-S and CCCI-R). The data was reviewed to ensure appropriate use for MANOVA analysis. Independent observations were assumed and multivariate normality was tested regarding skewness and kurtosis. Data of the CRF-S were all within acceptable ranges for skewness and kurtosis, between -2 and 2 (Lomax, 2001). For the CCCI-R, skewness was in the appropriate range between -2 and 2 but kurtosis was slightly elevated at 2.10. Analysis conducted within this study utilized
untransformed data as transformation of the CCCI-R data did not change outcomes of statistical analyses conducted. Therefore, untransformed CCCI-R data were utilized to maintain the integrity of the data. Probability plots indicated normality and scatter plots revealed no abnormalities in the data (Stevens, 2002), all of which satisfied bivariate normality. In addition, Box’s test also indicated homogeneity of covariance between groups as well ($p = .220$).

For the hypothesis of this study, to determine if there was significant difference in the competency ratings of the two different accent conditions, results of the MANOVA revealed no significant difference in competency ratings on the CCCI-R and CRF-S between the Southern and non-Southern accented vignette character (Wilks’ $\lambda = .984$, $F(2, 160) = 1.275$, $p = .282$).

**Interaction Effects.** Additional two way MANOVAs were run with participant region, gender, regional living environment (urban, suburban, rural), training program type, number of multicultural training experience, and number of multicultural courses to determine if these factors played a role in potential ratings of competence. In order to run the analysis with gender, participants who identified as “Other” were removed from the data for this analysis due to only having two participants within the group. With the two participants deleted scatter plots and probability plots revealed no abnormalities and Box’s test was also non-significant ($p = .653$) indicating homogeneity of covariance. No

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1 The sine of the CCCI-R was taken in order to create kurtosis levels in the appropriate range. The sine of the CCCI-R resulted in a kurtosis of -1.55 and skewness of -0.029. The main analysis of the MANOVA was conducted with this transformed data, yet results were still not significant (Wilks’ $\lambda = .984$, $F(2, 160) = 1.547$, $p = .216$). In order to maintain the integrity of the data, the CCCI-R was not transformed for the purpose of this study.
interaction effect was found for gender (Wilks’ $\lambda = .976$, $F(2, 156) = 1.92$, $p = .150$). Additionally, no significant effect was found for living environment (Wilks’ $\lambda = .94$, $F(10, 304) = .87$, $p = .566$), training program (Wilks’ $\lambda = .877$, $F(22, 300) = .927$, $p = .559$), participant multicultural courses (Wilks’ $\lambda = .887$, $F(18, 304) = 1.04$, $p = .414$), or participant multicultural training (Wilks’ $\lambda = .863$, $F(18, 304) = 1.29$, $p = .190$).

In order to run the MANOVA analysis with participant region identification, individuals from outside the U.S. were excluded as only four individuals identified in this category and therefore did not have a sample number larger than the number of region groups (5 groups total) in the MANOVA. See Table 3 for group region participant numbers within each grouping. The resulting sample size after deleting the four individuals who identified with regions outside of the U.S. was 159. Once again, normality was tested and scatter plots and probability plots revealed no abnormalities. Box’s test was also non-significant ($p = .105$) indicating homogeneity of covariance. A significant interaction effect was found for participant region and vignette condition (Wilks’ $\lambda = .825$, $F(18, 296) = 1.66$, $p = .046$). Follow up analysis of variances (ANOVA) revealed that there was a significant interaction effect with region and vignette type on scores of multicultural competence of the CCCI-R ($F(9, 149) = 2.10$, $p = .033$), but not for the CRF-S measuring general competency ($F(9, 149) = .79$, $p = .627$). However, initial post hoc tests revealed no significant difference between the regions on the CCCI-R.

Due to the non-significant post hoc tests of the follow-up ANOVA, the data were split into the two accent conditions and ANOVA’s were re-run. Significant differences were found with the CCCI-R within the Southern accent condition ($F(4, 76) = 3.216$, $p = .046$).
Tukey post hoc tests revealed a significant difference between the Northeast and Midwest ($p = .045$), with the Midwest rating the Southern accent condition significantly lower than the Northeast. No other differences between regions were found to be significant for the Southern accent condition (see Table 4). No significant results were found for the ANOVA run with the non-Southern accent condition ($F(4, 81) = 1.183, p = .325$).

Means of the CCCI-R among the regions revealed that participants from the Northeast rated the Southern accented vignette counselor higher than all other regions ($M = 95.35, N = 20$), second highest was the South/Southeast ($M = 87.95, N = 20$), then the Midwest ($M = 83.71, N = 24$), then the Northwest ($M = 79.83, N = 6$) and finally the Southwest ($M = 79.57, N = 7$). Note that none of these differences between means were significant, except when the data were split based upon accent condition, as noted above. Overall means revealed that the Southern vignette character was rated higher, but not significantly, than the non-Southern vignette character for the CCCI-R ($Southern M = 87.16, N = 77; non-Southern M = 85.92, N = 82$). Regarding the CRF-S, the Midwest rated the Southern accented vignette counselor highest among the regions ($M = 66.13, N = 24$), second highest was the Northeast ($M = 65.85, N = 20$), then the South/Southeast ($M = 63.35, N = 20$), then the Northwest ($M = 60.50, N = 6$), and finally the Southwest ($M = 58.29, N = 7$), but again no regional means were significantly different from the other regions. Overall, as with the CCCI-R, the Southern accented counselor was rated higher on the CRF-S compared to the non-Southern accented counselor, but not significantly ($Southern M = 64.18, N = 77; non-Southern M = 62.22, N = 82$). Table 5 presents the means, standard deviation, and sample size of both the CCCI-R and CRF-S.
based on participant region. Figure 1 and 2 are graphical representations of CCCI-R and CRF-S means based upon participant region identity.

**Moderation with Participant Cultural Awareness (M-GUD – S)**

Linear regressions were utilized to assess whether the M-GUD – S moderated the effect of vignette condition on the CRF-S or CCCI-R. The two linear regression models contained data of the M-GUD – S, vignette condition, and their interaction. The change in $R^2$ when adding the interaction term to the model was not significant for the CRF-S ($R^2 = .021, F (3, 159) = .70, p = .340$) and was also not significant for the CCCI-R ($R^2 = .019, F (3, 159) = .84, p = .383$), revealing no moderation effects of the M-GUD – S on scores of the CRF-S or the CCCI-R.

**Trustworthiness, Attractiveness, and Expertness of Vignette Counselors**

In order to assess for any further differences between the Southern and Non-Southern accent conditions, ANOVAs were run for each of the three subscales of the CRF-S to determine if there were differences regarding the perceived trustworthiness, attractiveness, and expertness of the vignette characters. No significant difference was found between the Southern and Non-Southern vignette conditions regarding trustworthiness ($F (1, 163) = 1.33, p = .251$) or expertness ($F (1, 163) = .068, p = .79$). A significant difference was found regarding attractiveness ($F (1, 163) = 10.21, p = .002$). Comparing the means of the groups, the Southern vignette counselor was rated higher ($M = 22.45$) compared to the Non-Southern accent counselor ($M = 20.55$) on the attractiveness subscale.

To examine this further, a linear regression analysis was conducted to determine if participant region moderated the effect of vignette condition on the CRF-S
attractiveness subscale. As noted above, the initial model was significant \( R^2 = .055, F(2, 156) = 4.51, p = .013 \). However, when the interaction term of vignette condition and participant region was added to the model, results were not significant \( R^2 = .003, F(1, 155) = .57, p = .452 \), revealing that participant region did not impact the results of the CRF-S attractiveness subscale scores.

**Hiring of the Vignette Character**

Participants were asked in the survey whether they would hire the vignette character and an independent sample \( t \)-test was utilized to determine whether there was a significant difference in the potential hiring between Southern accented and non-Southern accented vignettes. Within the Southern accent condition 68 participants (87%) reported they would hire the vignette counselor. Within the non-Southern accent condition, 75 participants (88%) indicated they would hire the vignette counselor. There was no significant difference in hiring between Southern accented and non-Southern accented vignette characters \( t(161) = .204, p = .839, \eta^2 = .000 \)
CHAPTER V

Discussion

This study sought to determine whether counselors within the field might hold a bias toward other counselors with a Southern accent. Previous research in relation to Southern accents had found that individuals with Southern accents were judged negatively (e.g., Atkins, 1993; Heaton & Nygaard, 2011; Luhman, 1990). Among this research there were implications for job hiring based upon the negative characteristics that were associated with Southern accents (Atkins, 1993). Due to the negative characteristics attributed to Southern accented individuals, it seemed plausible that within the field of counseling, there may also be a bias against counselors with Southern accents to perceive them as incompetent in relation to counseling.

This study did not find any significant results related to the main hypothesis that there would be differences found between Southern accented counselors and non-Southern accented counselors in relation to overall competency and multicultural competency. Results did support differences between the Southern and non-Southern accented counselors related to characteristics of “attractiveness,” specifically that Southern accented counselors were rated more friendly, warm, likable and sociable. Additionally, there were also differences found between regions related to the perceived multicultural competency of the Southern accented counselor.

Counselor’s Perceptions of Southern Accented Counselors Competency

The main hypothesis for this study was that counselors with Southern accents would be rated differently on measures of general and multicultural competence compared to counselors with non-Southern accents. Results of the current study revealed
no significant difference in the way that the Southern accented vignette counselors and non-Southern accented vignette counselors were rated based on general counselor competency and counseling multicultural competency.

There may be multiple reasons that no differences were found among the sample in this study related to the main hypothesis. First, it may be that the results of this study suggest heightened multicultural awareness within the field of counseling. There has been a significant effort within the field of counseling to produce clinicians who are multiculturally aware and unbiased toward others (APA; 2003). It may be that the main results of this study reflect this initiative within the field to create more aware clinicians who are knowledgeable of how biases can impact others and may therefore reduce their own potential judgments of others, including the vignette character.

Additionally, the results of the main analysis of this study may reflect the changing population of the U.S. In particular, in recent years, the Southern U.S. is one of the fastest growing regions in terms of individuals migrating to the area, with over 2.4 million individuals moving to the South based upon the 2010 U.S. census data (Ihrke & Faber, 2012). At the same time, the South also had the highest number of individuals moving outside of the region, with over 3.4 million individuals moving outside of the Southern U.S. in the 2010 census data (Ihrke & Faber, 2012). This migration may also help explain the results of this study as it may reflect an exchange of culture and exposure to Southern individuals, with Southerners mixing into other areas of the U.S. and individuals from outside the South moving to the South. This would mean more individuals are exposed to Southern accents and Southern individuals and, therefore, may have less of a bias toward these individuals. Research related to foreign language has
shown that accent related bias can be reduced when individuals are made to experience the challenges of speaking a foreign language (Hansen, Rakic, & Steffens, 2014). It may be that a similar exposure type experience is happening to non-Southern accented individuals by either having Southerners move into their area or the non-Southerner moving to the South. This may aid in reducing bias toward Southern accented individuals.

**Interaction Effects.** Two-way MANOVA’s were conducted to determine whether there were any interaction effects from participant region, gender, number of multicultural training experience, regional living environment (urban, suburban, rural), training program type, and number of multicultural courses. Only region was found to have a significant interaction effect and follow up tests revealed this was related only to the CCCI-R. All of the other variables were not found to be significant.

Gender may have been non-significant due to the majority of the sample identifying as female. Sample sizes that were more equal among gender identification groups would have been more ideal to detect any potential interaction that participant gender may have had on the data. Regional living environment may also have been impacted due to the differences in sample group sizes as over half of the respondents indicated that they identified with suburban living areas. The non-significant results of the multicultural training and course interaction are in line with the non-significant results of the main analysis, as multicultural training and courses could potentially impact how the vignette counselors had been rated in relation to multicultural competency (CCCI-R). It may be that individuals are more knowledgeable about multiculturalism and therefore are less likely to engage in prejudicial judgments of the vignette character. As such, the
results in the study found no significant difference in multicultural competency between the vignette conditions, which is in line with a sample that is multiculturally aware, as the results of the M-GUD – S revealed this sample to be. Similarly, the non-significant results of training program type may reflect more consistent multicultural training across program types within the mental health field.

The significant results of the participant region interaction analysis revealed that region identification and vignette type played a role in how the vignette character was rated on multicultural competence. Due to these results, the data file was split by accent condition, revealing that there was a significant difference on the CCCI-R among the Southern accent condition. In particular, individuals who identified as being from the Northeast rated the Southern accented counselor as significantly higher in multicultural competency than individuals who identified as being from the Midwest. No other significant differences were found between regions on the CCCI-R. Additionally, no significant differences were found among individuals in the non-Southern accent condition with the CCCI-R.

From these results, it can be surmised that participant region and the vignette condition were a factor in how the Southern vignette character was rated in regards to multicultural competency. The Midwest individuals rated the Southern accented counselor as significantly lower than the Northeast participants. However, no significant results were found within the non-Southern accent condition. These results lend themselves to support the main hypothesis of this study as they show that the Southern accent condition did include some significant differences in opinion among individuals rating their multicultural competency. However, it is difficult to extrapolate further from
these results as it is unclear what may have created the differences in the rating of the Southern accented counselor between the Midwest and the Northeast. More research needs to be conducted to fully assess what differences may be occurring between individuals who identify with the Midwest and those that identify with the Northeast that led to significantly different ratings of the Southern accented vignette character’s multicultural competency.

**Participant Cultural Awareness**

To assess for any other potential influences on the ratings of the vignette characters based upon participant cultural awareness, a linear regression was utilized to determine if the M-GUD – S, which measured cultural awareness, may moderate any effects of the vignette condition on the CRF-S and the CCCI-R. These results were non-significant, revealing that the level of cultural awareness of the participants did not influence how they rated the vignette character regarding general competency and multicultural competency. This result supports inferences made earlier regarding the multicultural awareness of the participants. It may simply be that the participants in this study were multiculturaly aware and did not express potential biases toward either accent condition vignette counselor.

**Positive Characteristics of the Southern Accented Counselor**

The three subscales of the CRF-S were utilized to assess for any perceived differences between the Southern and non-Southern accent conditions related to the counselor competency areas of attractiveness, expertness, and trustworthiness. Results showed that the Southern vignette counselor was rated significantly higher on attractiveness, which included the characteristics of “friendly,” “likable,” “social,” and
“warm.” These results align with other research cited previously which found that Southern accented individuals were rated more friendly, amusing, and polite (Atkins, 1993; Heaton & Nygaard, 2011). The other non-significant results of the subscales of expertness and trustworthiness may relate to the fact that the main hypothesis was not supported, revealing that the Southern counselor was not rated as less competent overall. Expertness, which includes “experienced,” “expert,” “prepared,” and “skillful,” and trustworthiness, which includes “honest,” “reliable,” “sincere,” and “trustworthy,” may relate to characteristics beyond general personality traits that attractiveness is associated with. Results did not show significant differences between Southern and non-Southern accented counselors on competence overall; therefore, the non-significant results related to differences on expertness and trustworthiness between the accent conditions are not surprising.

**Limitations**

This study had several limitations. First, the sample was comprised of current graduate students within the mental health field. While this provides information about attitudes within the counseling field, it cannot be assumed that graduate students represent all opinions within the field. Individuals who have worked within the field for multiple years were excluded from this sample and they may hold differing opinions and stereotypes. The emphasis that the APA (APA; 2003) has placed upon multicultural education within counseling programs could have made an impact on current students, but individuals who have already graduated from graduate school and have been working in the field for multiple years may not have been as impacted by the current multicultural
push in the field. Therefore, it cannot be ruled out that differences may have been found if the study sample had included more advanced practitioners within the field.

An additional limitation to the sample is the lack of diversity regarding demographics. In particular, the sample was predominately White and female. This also led to some smaller group cell sizes in some of the analyses; therefore sample size and survey measures are another limitation that should be taken into consideration. Although the overall sample size was adequate for the proposed measures, there still were differences related to the number of individuals within each group, both within vignettes and within regions. It may be possible that with more individuals from each region of the U.S. that further differences could have been found between regions, pointing to regional biases. Additionally, a larger sample may have provided more diverse demographics, which could impact some of the interaction analysis utilized in this study (i.e., gender, region, living environment).

Limitations to this study also include utilizing an online sample. Although this recruitment method allows for a broader sample, it limits the sample population to those who received the invitation to participate via email. In addition, use of audio technology may limit the sample as well, as some individuals may not have had adequate technology to hear the recording or may be hearing impaired. This could lead to a threat of external validity. In addition internal validity may have been comprised if participants were able to surmise that this study was seeking to assess for potential biases. This could lead to individuals answering questions in a more socially desirable manner and therefore influence results. Efforts were made within the study to limit this possibility, such as disguising the true nature of the study until the debriefing at the end and utilizing a social
desirability measure; however, it cannot be ruled out that some individuals may have assumed the nature of the study.

Related to the measures utilized, this study is at risk for mono-operation bias (Heppner, Wampold, & Kivlighan, 2008). Even though two measures were utilized to assess counselor competency, only counselor competence was used as a way to determine potential biases toward Southern accented counselors. There may be other ways to measure the potential value of a counselor besides counseling competency, such as assessing personality characteristics that reflect common factors of effective counseling (Norcross & Wampold, 2011; Grencavage & Norcross, 1990).

An additional limitation to the study is the actual vignette that was utilized. Although pilot testing was done to ensure that the voices and accents of the speakers represented individuals from the South and individuals from outside the South, the actual recordings themselves may not have been enough to get a full picture of how participants would rate an individual’s competence. Perhaps providing participants with a longer, more involved interview recording, or utilizing a mock therapy sessions would have enabled participants to gain a fuller perspective of the vignette counselor. Additionally, although attempts to control potential negative effects due to the specific voice in the audio (e.g., tone, pitch, etc.) were done by utilizing three different speakers within each accent condition, it is possible that aspects of the voice recordings, other than accent alone, may have influenced the outcomes.

**Future Directions**

Future studies that investigate potential biases within the field of counseling may want to utilize other types of region identifiers other than accent. For example, studies
may want to investigate adding in certain phrases or slang specific to a region, or it may be possible to consider including a document such as a resume that includes experiences from areas all within the South. This may create a more explicit image of a Southern individual, which may then elicit a potential bias. As Heaton and Nygaard (2011) found, stereotypical Southern aspects led to more negative intelligence-related attributes of Southern accented individuals. Additionally, future research may want to utilize accents of both male and females as previous research has found some difference between the favorability ratings of males versus females with Southern accents, with males being rated more favorably (Luhman, 1990). Being able to obtain a more diverse sample regarding gender, race, and region identity would also be beneficial for future studies to potentially detect any significant differences in rating the competency of Southern accented counselors and non-Southern accented counselors.

Literature reviews conducted for this study found no studies that had investigated any kind of accent discrimination or prejudice related to hiring within the field of counseling. Although this current study found potentially no effects related to the Southern U.S. regional accent, there might be some prejudices within the field toward other types of accents. In particular, foreign accents may be a signifier that does elicit negative perceptions by counselors. Minimal research has been done on foreign accents within the field of counseling, and what little research has been done is related to perceptions between clients and counselors, not between counselors (e.g., Acosta & Sheehan, 1976; Fuertes, 1999; Fuertes & Gelso, 2000). This may be an area of bias that is yet unknown within the counseling field and therefore would be beneficial to potentially explore further in the future.
Implications

The non-significant results of the main hypothesis in this study show that individuals with Southern accents may not be discriminated against within the field of counseling regarding hiring, despite previous literature indicating Southern accents can impact hiring. The non-significant difference in perceived competence of the Southern accented and non-Southern accented vignette character lends credence to the field of counseling within the U.S. as being non-judgmental related to potential accent situations. This may support that multicultural focus that counseling promotes, as individuals are more aware of potential biases and are able to reduce the impact that prejudice and discrimination can have.

The significant results of this study do support the idea that there are differences between regions of the U.S. (Rentfrow et al., 2008; Rentfrow et al., 2013). Future research should investigate potential differences between the regions regarding what may have created these different judgments among the Southern accented counselor vignette condition between the Midwest and Northeast. Additionally, the significant results related to the Southern counselor being rated as more attractive does support previous research findings (Atkins, 1993; Heaton & Nygaard, 2011) and potentially shows that the positive attributes of the Southern accent may be more salient than any negative attributes. Overall, results of this study reveal that Southern accented counselors are not at a high risk for potential bias within the counseling field based solely upon their accent when compared to non-Southern accented counselors.
References


Psychology: Research and Practice, 22(5), 380-388. doi:10.1037/0735-7028.22.5.380


Appendix A

Pilot Study Questions

Thank you for taking time to help me with my dissertation. The aim of this short survey is to ensure the validity of the audio recordings I hope to use within my dissertation. You will be asked to listen to three short audio clips (each less than 1:40) and answer four short questions about the individual based upon their recording. Please choose the option that stands out to you most. There are no right or wrong answers.

Please note that you will need to be able to hear audio on your computer in order to complete this. If the computer you are currently using does not allow you to hear audio, please close this survey and access it from another computer that does have sound capabilities.

Should you have any questions regarding this research, please contact Melanie Bass, mef210@lehigh.edu.

Please listen to the audio clip that will appear below and refer to it for the following questions on this page.

What is the speaker’s likely gender?
Male
Female
Can’t tell from this audio

How old do you imagine this speaker to be (in years)?

What region of the U.S. do you think this individual is from?
Northeast
South/Southeast
Midwest
Northwest
Southwest
This individual is likely not from the U.S.

What field/degree program do you think this individual is associated with?
Clinical Psychology
Counseling Psychology
Social Work
Other
Appendix B

Marlowe-Crowne Social Desirability Scale
(MCSDS; Crowne & Marlowe, 1960)

Listed below are a number of statements concerning personal attitudes and traits. Read each item and decide whether the statement is true or false as it pertains to you personally.

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Appendix C

Cross Cultural Counseling Inventory—Revised
(CCCI–R; LaFromboise, Coleman, & Hernandez, 1991)

The purpose of this inventory is to measure your perceptions about the counselor’s cross cultural counseling competence.

In recording your response, please keep the following points in mind:

a. Please choose the appropriate rating under each statement.
b. Please choose only one response for each statement.
c. Be sure you check every scale even though you may feel that you have insufficient data on which to make a judgment—please do not omit any.

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Appendix D

The Counselor Rating Form-Short
(CRF-S; Corrigan & Schmidt, 1983)

We would like for you to rate several characteristics of the therapist. For each characteristic listed below, there is a seven-point scale that ranges from “not very” to “very.” Please fill in the bubble at the point on the scale that best represents how you view the therapist.

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Appendix E

The Miville-Gusman University-Diversity Scale-Short
(M-GUD – S; Fuertes et al., 2000)

The following items are made up of statements using several terms which are defined below for you. Please refer to them throughout the rest of the questionnaire.

**Culture** refers to the beliefs, values, traditions, ways of behaving, language of any social group. A social group may be racial, ethnic, religious, etc.

**Race or racial background** refers to a sub-group of people possessing common physical or genetic characteristics. Examples include White, Black, American Indian.

**Ethnicity or ethnic group** refers to specific social group sharing a unique cultural heritage (i.e., customs, beliefs, language, etc.). Two people can be of the same race (e.g., White), but be from different ethnic groups (e.g., Irish-American, Italian American).

**Country** refers to groups that have been politically defined; people from these groups belong to the same government (e.g., France, Ethiopia, United States). People of different races (White, Black, Asian) or ethnicities (Italian, Japanese) can be from the same country (United States).

**Instructions:** Please indicate how descriptive each statement is of you by filling in the number corresponding to your response. This is not a test, so there are no right or wrong, good or bad answers. All responses are anonymous and confidential.
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Appendix F

Participant Questionnaire

Please answer the following questions to the best of your ability, based upon the audio selection that you just heard. Some of the questions may ask specifics regarding what the interviewee said and other questions may ask what you were thinking when the interviewee was speaking.

1. Where you able to hear the audio of the interviewee?

2. How long has the interviewee been living in the area?

3. How long has the interviewee been working in the field?

4. What did he/she say was an important component of his/her counseling?

5. What hobbies did the interviewee describe that he/she enjoyed?

6. How old do you imagine the individual you heard to be?

7. Where do you think the interviewee is from within the U.S.?

8. What race/ethnicity do you think the interviewee is?

9. Assuming that the rest of the interview went well and the candidate met all requirements, would you hire this individual based upon what you just heard? Please give a quick explanation as to why or why not.
Appendix G

Recruitment Letter for Training Directors

Dear Training Director,

My name is Melanie Bass and I am a doctoral student at Lehigh University investigating mental health workers’ focus and attention during interview situations. I am writing to ask if you could be willing to send the recruitment letter below to the graduate students in your program (both doctoral and master’s level students are able to participate).

Thank you very much for your time and consideration. If you have any questions, please feel welcome to contact me, Melanie Bass at mef210@lehigh.edu. Alternately, you may also contact my advisor, Dr. Arnold Spokane at ars1@lehigh.edu or the Lehigh University Office of Research and Sponsored Programs at (610) 758-3021 or inors@lehigh.edu. This research has been approved by the Lehigh University Institutional Review Board (639851-2).

Sincerely,

Melanie Fann Bass, M.S.
Doctoral Student
Counseling Psychology
Lehigh University
Appendix H

Recruitment Letter for Participants

Dear Graduate Student,

I am conducting a study investigating focus and attention during interview situations. I am seeking any graduate student in a mental health related program, such as counseling psychology, clinical psychology, and counselor education programs.

Your participation is completely voluntary and you may withdraw your participation at any time by exiting the survey. No identifying information will be collected or utilized in reporting results. All responses will be kept confidential and stored anonymously with all other responses. Potential risks associated with this study are minimal.

If you would like to participate, please click on the link below (or paste it into your browsers address bar). Please note that the ability to hear the audio of the interview is necessary to complete this survey. If you are using a computer that you are not able to hear sound with, please wait to access this survey when you can utilize the sound.

The link to the survey is: https://lehigh.co1.qualtrics.com/SE/?SID=SV_3rciDOmFo441awR.

The survey will take approximately 10-15 minutes to complete.

Please feel welcome to forward this announcement to others in your field who may be willing to participate.

If you have any questions or concerns, please feel welcome to contact me, Melanie Bass, at mef210@lehigh.edu. You may also contact my research advisor, Dr. Arnold Spokane at ars1@lehigh.edu or the Lehigh University Office of Research and Sponsored Programs at (610) 758-3021 or inors@lehigh.edu. This research has been approved by the Lehigh University Institutional Review Board (639851-2).

Thank you very much for your time and consideration.

Melanie Fann Bass, M.S.
Doctoral Student
Counseling Psychology
Lehigh University
Appendix I

Informed Consent

Thank you for participating in this research to investigate mental health workers’ attention and focus during interview situations.

Risk and Benefits: Estimated potential risks for participating are minimal. You may experience mild discomfort when evaluating the candidate you heard in the mock interview. Your participation will help increase knowledge that may benefit others in the future through increased awareness of issues that are important to consider in interview situations.

Procedure: Should you choose to participate in this study, you will be asked to listen to a short audio recording of an individual’s responses to select interview questions. You will then be asked questions pertaining to your perception of the individual and your assumptions based upon the individual’s answers.

Eligibility:
1. You must be 18 years of age or older
2. You must be a graduate student, master’s or doctoral, of a mental health related program (e.g., clinical psychology, counseling psychology, counselor education, marriage and family)

Duration: 10-15 minutes

Confidentiality and Voluntary Nature of the Study: This study is anonymous and no individual data will be represented in any reports or publications. Additionally, research records will be secured and password protected. Your decision to participate in this study is completely voluntary and you may withdraw from the study at anytime.

Contact Information: Should you have questions about this study, please contact Melanie Bass at mef210@lehigh.edu. You may also contact Dr. Arnold Spokane, research advisor to Melanie Bass, at ars1@lehigh.edu. Additionally, you can contact the Lehigh University Office of Research and Sponsored Programs at (610) 758-3021 or inors@lehigh.edu.

Thank you in advance for your time and participation.
Appendix J

Demographic Questionnaire

Please answer the following questions with the answer that best describes you. This information will remain confidential along with the rest of your survey responses and will only be used to describe the sample as a group.

Your Current Age: _______

Gender
Male
Female
Other (e.g., Transwoman, Transman, Androgynous, Genderqueer) _______

Race/Ethnicity
American Indian or Alaskan Native
Asian American or Pacific Islander
Black or African American
White or Caucasian
Hispanic or Latino/a
Multiracial
Middle Eastern
Other _______

What region of the country do most strongly identify with? This could be based upon where you grew up, where you live now, or based upon something else such as family history.
Northeast
South/Southeast
Midwest
Northwest
Southwest

Using a percentage from 0-100, how strongly do you identify with this area of the county chosen above? For example, if you identify strongly with the area, you might put 100. If you do not identify strongly with the area at all, you would put 0.

How would you describe the area that you most strongly identify with?
Rural
Suburban
Urban

What best describes your training program?
Master’s level Counseling
Ph.D. Counseling Psychology
Master’s level Clinical Psychology  
Ph.D. Clinical Psychology  
Master’s level Marriage and Family Therapy  
Ph.D. Marriage and Family Therapy  
Master’s level Counselor Education  
Ph.D. Counselor Education  
Psy.D. Clinical/Counseling Psychology  
Other ______  

Please indicate the degree to which you agree with the following statement: My training program places a great deal of emphasis on multiculturalism in clinical training.  
- Strongly Agree  
- Agree  
- Agree and Disagree Equally  
- Disagree  
- Strongly Disagree  

How many multicultural courses have you taken in your training program?  
- 1  
- 2  
- 3  
- 4 or more  

How many multicultural trainings have you attended?  
- 1  
- 2  
- 3  
- 4 or more  

What best describes your theoretical orientation?  
- Psychodynamic  
- Cognitive  
- Behavioral  
- CBT  
- REBT  
- Interpersonal Process  
- Gestalt/Existential  
- Humanistic  
- Feminist  
- Systems  
- Integrative  
- Eclectic  
- Other ______
Appendix K

Vignette Dialogue

“I am excited about the opportunity to work with you. I have been working in the field for twelve years now, but just recently moved into the area three weeks ago. I really enjoy my work and am attracted to this site as I believe it will challenge me and allow me to keep expanding my skills. I enjoy the experience of working with diverse clientele and feel that your site will enable me to progress my career.”

“I believe that forming a good therapeutic alliance is an important part of working with any client. The ability to really listen and understand the perspective of the client is important as well. I also believe that it is important to stay abreast of current research and literature within the field to be a well-informed professional and provide the best care.”

“I have multiple hobbies that I enjoy. I like to take walks to clear my mind and I also dabble with painting in my spare time. I think it is important to have ways to relax and take care of myself emotionally and mentally, especially working in the mental health field.”
Table 1

Correlation Matrix for Study Measures

<table>
<thead>
<tr>
<th></th>
<th>1. MCSDS</th>
<th>2. M-GUD – S</th>
<th>3. CCCI-R</th>
<th>4. CRFS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>.24*</td>
<td>.03</td>
<td></td>
<td>.13</td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td>.09</td>
<td>.03</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>.03</td>
<td>.09</td>
<td>.63*</td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>.13</td>
<td>.03</td>
<td>.63*</td>
<td></td>
</tr>
</tbody>
</table>

*M* 13.79  72.37  86.29  63.07
*SD* 6.01  7.31  13.36  9.77
Skewness  -.19  -4.47  -.60  -.26
Kurtosis  -.80  .06  2.10  -.31

*Note: N = 163. MCSDS = The Marlowe-Crowne Social Desirability Scale; CCCI-R = Cross-Cultural Counseling Inventory—Revised; CRF-S = Counselor Rating Form – Short; M-GUD – S = The Miville-Gusman University-Diversity Scale-Short
*Correlation is significant at 0.01 level (2-tailed)
Table 2

**Descriptive Statistics by Vignette Condition and for Total Sample**

<table>
<thead>
<tr>
<th>Condition</th>
<th>CCCI-R</th>
<th>CRF-S</th>
<th>M-GUD – S</th>
<th>MCSDS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Southern Vignette (N = 78)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>M</td>
<td>87.33</td>
<td>64.34</td>
<td>72.46</td>
<td>13.88</td>
</tr>
<tr>
<td>SD</td>
<td>14.32</td>
<td>9.76</td>
<td>7.03</td>
<td>6.83</td>
</tr>
<tr>
<td><strong>Northern Vignette (N = 85)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>M</td>
<td>85.34</td>
<td>61.91</td>
<td>72.29</td>
<td>13.71</td>
</tr>
<tr>
<td>SD</td>
<td>12.43</td>
<td>9.69</td>
<td>7.60</td>
<td>5.19</td>
</tr>
<tr>
<td><strong>Total Sample (N = 163)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>M</td>
<td>86.29</td>
<td>63.07</td>
<td>72.37</td>
<td>13.79</td>
</tr>
<tr>
<td>SD</td>
<td>13.36</td>
<td>9.77</td>
<td>7.31</td>
<td>6.01</td>
</tr>
</tbody>
</table>

*Note:* N = Sample Size, M = Mean, SD = Standard Deviation, MCSDS = The Marlowe-Crowne Social Desirability Scale; CCCI-R = Cross-Cultural Counseling Inventory—Revised; CRF-S = Counselor Rating Form – Short; M-GUD – S = The Miville-Gusman University-Diversity Scale-Short
Table 3

*Group Sample Sizes by Region*

<table>
<thead>
<tr>
<th>Region</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Northeast</td>
<td>51</td>
</tr>
<tr>
<td>South/Southeast</td>
<td>35</td>
</tr>
<tr>
<td>Midwest</td>
<td>40</td>
</tr>
<tr>
<td>Northwest</td>
<td>16</td>
</tr>
<tr>
<td>Southwest</td>
<td>17</td>
</tr>
<tr>
<td>Total</td>
<td>159</td>
</tr>
</tbody>
</table>
Table 4

Tukey Post-Hoc results CCCI-R p-Values and Mean Differences of Southern accent condition by region

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>p-Values</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.</td>
<td>.43</td>
<td>.05*</td>
<td>.11</td>
<td>.07</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>.43</td>
<td>.84</td>
<td>.70</td>
<td>.63</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>.05*</td>
<td>.84</td>
<td>.97</td>
<td>.95</td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>.11</td>
<td>.70</td>
<td>.97</td>
<td>1.00</td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>.07</td>
<td>.63</td>
<td>.95</td>
<td>1.00</td>
<td></td>
</tr>
</tbody>
</table>

| **Mean Differences** |          |                    |            |              |              |
|----------------------|----------|--------------------|------------|--------------|
| 1.                   | 7.40     | 11.64*             | 15.52      | 15.78        |
| 2.                   | 7.40     | 4.24               | 8.12       | 8.38         |
| 3.                   | 11.64*   | 4.24               | 3.88       | 4.14         |
| 4.                   | 15.52    | 8.12               | 3.88       | 0.26         |
| 5.                   | 15.78    | 8.38               | 4.14       | 0.26         |

*Note: Total N = 159

* Mean difference significant at 0.05 level
Table 5

Means and Standard Deviation of CCCI-R and CRF-S by Participant Region and Vignette Condition

<table>
<thead>
<tr>
<th>Variable</th>
<th>Region</th>
<th>Southern Vignette</th>
<th>Non-Southern Vignette</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>M</td>
<td>SD</td>
</tr>
<tr>
<td>CCCI-R</td>
<td>Northeast</td>
<td>95.35</td>
<td>10.06</td>
</tr>
<tr>
<td></td>
<td>South/Southeast</td>
<td>87.95</td>
<td>11.09</td>
</tr>
<tr>
<td></td>
<td>Midwest</td>
<td>83.71</td>
<td>13.05</td>
</tr>
<tr>
<td></td>
<td>Northwest</td>
<td>79.83</td>
<td>27.47</td>
</tr>
<tr>
<td></td>
<td>Southwest</td>
<td>79.57</td>
<td>14.65</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>87.16</td>
<td>14.33</td>
</tr>
<tr>
<td>CRF-S</td>
<td>Northeast</td>
<td>65.85</td>
<td>8.42</td>
</tr>
<tr>
<td></td>
<td>South/Southeast</td>
<td>63.35</td>
<td>10.87</td>
</tr>
<tr>
<td></td>
<td>Midwest</td>
<td>66.13</td>
<td>9.61</td>
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<tr>
<td></td>
<td>Northwest</td>
<td>60.50</td>
<td>9.71</td>
</tr>
<tr>
<td></td>
<td>Southwest</td>
<td>58.29</td>
<td>9.18</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>64.18</td>
<td>9.71</td>
</tr>
</tbody>
</table>

Note: M = Mean, SD = Standard Deviation, N = Sample Size
Figure 1. Means of the CCCI-R by Participant Region and Vignette Condition.
Figure 2. Means of the CRF-S by Participant Region and Vignette Condition.
Melanie F. Bass

Education

Lehigh University, Bethlehem, PA
Ph.D. – Expected August 2016
Counseling Psychology (APA Accredited)
Dissertation: Mental Health Workers’ Perceptions of Southern Accented Counselors

Indiana University, Bloomington, IN
M.S. – May 2010
Counseling Psychology (CACREP Accredited)

Maryville College, Maryville, TN
B.A. – May 2006
Major: Psychology; Minor: Sociology
Magna Cum Laude

Clinical Experience

Rutgers, The State University of New Jersey, New Brunswick, NJ
Pre-doctoral Internship (APA Accredited)
August 2015-Present
• Provide goal focused individual therapy, providing brief, evidenced based treatment, including CBT, IPT, and DBT interventions
• Co-facilitate DBT groups and undergraduate process groups
• Conduct intake and initial screenings as well as provide dedicated on-call crisis hours each week
• Utilize PHQ-9 assessment each session to track client progress
• Administer, score and interpret neuropsychological assessment for enhancing treatment options for student; provide assessment feedback to student
• Supervise first year doctoral practicum trainees, providing one-on-one weekly supervision to two first year doctoral students
• Present outreach topics to various student groups, including anxiety management and overcoming mental health counseling stigma
Step By Step, Inc., Allentown, PA
**Outpatient Counselor**
May 2015-August 2015
- Utilized motivational interviewing to help clients diagnosed with co-occurring mental health and substance related disorders
- Maintained client case load and served case management duties to refer clients to appropriate services in the community
- Followed PA client placement criteria to determine appropriate level of care

Lafayette College Counseling Center, Easton, PA
**Doctoral Practicum Trainee**
August 2013-May 2014
- Conducted intakes to access client needs and developed individualized treatment goals and plans for clients
- Provided short and long-term individual therapy for undergraduate students utilizing evidenced based approaches to treatment
- Utilized process and outcome measures with ORS/SRS to inform treatment
- Administered and interpreted the Strong Interest Inventory and NEO-PI-R

Staff Counselor – Part-time
January 2015-May 2015
- Hired as part time counselor after practicum experience to fill vacant staff position
- Continued to provide individualized, evidenced based treatment to students as noted above
- Provided walk-in hours to assist students needing immediate services

Lehigh University Counseling & Psychological Services, Bethlehem, PA
**Doctoral Practicum Trainee**
August 2012-May 2013
- Provided short-term psychotherapy to undergraduate and graduate students
- Developed individual treatment goals and plans for clients
- Co-facilitated counseling group for female students struggling with body image disorders and a general process group
- Administered and interpreted the MCMI, Strong Interest Inventory, and NEO-PI-R
- Utilized online scheduling using Titanium software
Lenape Valley Foundation, Partial Outpatient Program, Doylestown, PA

**Doctoral Practicum Trainee**
May 2012-August 2012
- Conducted intakes and devised treatment plans for adults with acute psychological disorders
- Led psychoeducational groups and process groups
- Provided individual counseling and crisis interventions when needed
- Utilized electronic health record keeping with Askesis/PsychConsult

Pinebrook Family Services, Allentown, PA

**Doctoral Practicum Trainee**
August 2011-May 2012
- Provided short-term psychotherapy to children, adolescents, and adults
- Conducted family sessions to help inform treatment of identified clients
- Developed treatment plans and therapeutic goals with clients

Outreach and Support for International Students and Scholars, Indiana University, Bloomington, IN

**Co-Facilitator**
August 2009-May 2010
- Developed and planned counseling sessions based upon international graduate student
- Co-led group counseling sessions for international students and community members

Alcohol Alternative Intervention Program, Indiana University

**Master’s Level Counseling Intern**
August 2009-May 2010
- Counseled individual students who violated Indiana University alcohol policies on a short-term basis
- Utilized motivational interviewing techniques to help clients analyze current behaviors
- Aided students in developing goals to prevent future alcohol abuse

Catholic Charities, Bloomington, IN

**Master’s Level Counseling Intern**
June 2009-May 2010
- Provided long-term individual counseling for adults
- Helped develop and co-facilitated an adult counseling group for Martha’s House, a local homeless shelter
- Co-led social skills group for children 8-9 years old
Supervision Experience

Step By Step, Inc., Allentown, PA

Internship Supervisor and Assistant Director
June 2013-May 2015

• Recruited, trained, and supervised Bachelor and Master’s level interns and practicum students working with co-occurring substance use and mental health clientele
• Provided on-site individual supervision on a weekly basis to all interns
• Reviewed intern audiotapes of counseling sessions weekly
• Provided quarterly evaluations and offer feedback to interns regarding clinical and professional performance
• Maintained client case load, providing individual counseling and case management services

Lehigh University Doctoral Supervision Seminar, Bethlehem, PA

Individual and Group Supervisor
August 2012-May 2013

• Provided weekly off-site supervision to Master’s level student working at a community based internship
• Provided weekly supervision through online meetings to a Master’s level student working at an international school setting
• Reviewed audio tape on a regular basis for individual supervisees
• Co-facilitated weekly group supervision sessions for three Master’s level students enrolled in the Counseling and Human Services and School Counseling Master’s programs

Presentations


Publications

Research Experience

Doctoral Qualifying Project: The Schedule of Sexist Events: A Confirmatory Factor Analysis with Sexual Minority Women

Advisor: Dr. Cirleen DeBlaere, Lehigh University
January 2012-January 2013
Lead researcher of a quantitative study that used confirmatory and exploratory factor analyses to assess the factor structure of a well-known measure of sexist experiences for sexual minority women. Responsibilities included literature review, IRB submission, participant recruitment, and data analyses. Structural equation modeling was utilized to perform the confirmatory factor analyses and SPSS software was utilized to conduct exploratory analyses.

Content Analysis of LGBT Counseling Literature

Primary Researcher: Dr. Matthew Malouf, Lehigh University
February 2011-May 2011
Member of a qualitative research team designed to assess the prevalence of LGBT research within the field of psychology. Responsibilities included coding articles.

Sexual Minority Women of Color Wellbeing

Primary Researcher: Dr. Cirleen DeBlaere, Lehigh University
August 2010-May 2011
Conducted literature reviews for topics including discrimination related to lesbian and bisexual women and women of color. Performed data cleaning techniques using NORM software.

Native Themed Mascots

Primary Researcher: Dr. Jesse Steinfeldt, Indiana University
July 2009-August 2010
Transcribed interviews of Native Indian advocates to investigate the influence of native themed mascots on Native Indian wellbeing.

Male Masculinity in Athletics

Primary Researcher: Dr. Jesse Steinfeldt, Indiana University
January 2009-August 2009
Assisted in creating research designs and methods and entered research data into excel files.

Psychological Wellbeing of Widowers

Primary Researcher: Dr. Jason Troyer, Maryville College
August 2008
Utilized SPSS to transfer data from written surveys regarding widowers’ experiences and wellbeing.
Bachelor’s Thesis: Attitudes Towards the Effectiveness of Psychotherapy and Psychotropic Medication

Advisor: Dr. Jason Troyer, Maryville College
August 2005–March 2006
Independent quantitative research method designed to assess the attitude of Maryville College students regarding treatment of mental health issues. Responsibilities included research design, participant recruitment, and data collection and analysis. SPSS was utilized to analyze results.

Professional Experience

Valley Youth House, Bethlehem PA
Student Assistance Program Counselor
August 2014–May 2015
- Provided brief individual counseling to middle and high school students referred for services through the Student Assistance Program
- Assessed student needs and referred them, if necessary, to other community services
- Consulted with guidance counselors, other members of school staff, and families to ensure students in need were provided services

Lafayette College Career Services, Easton, PA
Graduate Assistant
February 2014–July 2014
- Assisted in designing, planning, and implementing the summer Nonprofit Leadership Development Program (NLDP)
- Advertised and promoted the NLDP to recruit students at Lafayette and other Lehigh Valley Association of Independent Colleges (LVAIC) sites
- Facilitated weekly structured discussions related to various nonprofit topics throughout the summer
- Recruited nonprofit leaders in the area to present at weekly meetings for the NLDP
- Served as the contact person for area nonprofits in order to advertise available internship positions

Lehigh University Lehigh Ropes Course, Office of Student Leadership Development, Bethlehem PA
Graduate Assistant
June 2011–June 2013
- Recruited, trained, and supervised student Ropes Course facilitators
- Advertised and promoted use of the Ropes Course, managing all necessary paperwork regarding scheduling courses
- Served as a general staff member to the Office of Student Leadership Development, aiding in preparation and execution of office activities and events
- Maintained the Ropes Course area and supplies needed for events
Teaching Experience

Lehigh University, *Bethlehem, PA*

**Teaching Assistant**

*Course:* Professional Seminar – Ethics  
*Professor:* Samuel Knapp, Ed.D, ABPP  
*June-July 2012*

- Assisted in class room activities, including lectures, testing, and group work  
- Developed lesson plan and activity to instruct students in ethical decision-making  
- Maintained course online site

Ivy Tech Community College, *Bloomington, IN*

**Math Tutor**  
*November 2008-August 2010*

- Tutored college students in individual sessions to teach and aid mastery of mathematical concepts  
- Provided constructive feedback on math exercises  
- Taught and advised students on productive study habits

Social Activism Experience

Lehigh University Counseling and Psychology Services’ Outreach Program

**Volunteer**  
*October 2011-August 2012*

Graduate Student Senate, Lehigh University

**Student Representative**  
*August 2010-May 2011*

Lehigh University Prison Project

**Volunteer Tutor**  
*September 2010-December 2010*

Diversity Council, Indiana University Graduate and Professional Student Association

**Student Representative**  
*September 2009-May 2010*

Indiana University Multicultural Counseling Competency Experience & Advocation

**Student Member**  
*August 2009-May 2010*

Awards and Certifications

2013  
Certification in HIV/AIDS; STD’s/Hepatitis/Tuberculosis; Confidentiality; Pennsylvania Client Placement Criteria – Pennsylvania Department of Drug and Alcohol Programs

2013  
Student Affiliates of Division Seventeen Travel Award – APA Division 17
2013  College of Education Dean’s Endowed Student Travel Scholarship –
       Lehigh University
2011  Protecting Human Research Participants certification – National Institute
       of Health Office of Extramural Research
2010  Teacher Development Certification – Lehigh University
2006  David H. Briggs Award, Outstanding Academic Work in Psychology
       Major – Maryville College

Professional Memberships and Service

American Psychological Association
   Student Affiliate Member
   August 2011-Present
       • Division 17 – Society of Counseling Psychology

American Psychological Association, Ethics and Division 44 Travel Grant
   Selection Process Assistant
   Supervisor: Dr. Cirleen DeBlaere, Lehigh University
   November 2012