

**Exploring Patients' Feelings of Satisfaction and Overall Effectiveness of Treatment from  
Outpatient Therapy Practices: Identifying Relational Differences Between Length of Time  
in Treatment and Mental Health Condition**

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**ABSTRACT**

Seeking treatment from qualified mental health therapists in outpatient practices is a major step in mental health recovery and maintenance, yet it is a step that is not always effective, nor do those seeking treatment always feel satisfied with their overall care. The present study hopes to explore the relationship between the length of time a client is in treatment as well as the mental health conditions being treated with a mental health counselor with how satisfied they were with the treatment and its effectiveness. A group of 40 participants partook in a Mental Health Treatment Satisfaction Survey online as the form of data collection. Within the survey, questions regarding their level of care, the satisfaction of their care, and how effective they believed their care was were asked to judge an overall satisfaction score. Statistical analysis did show a slight trend towards significance in the amount of time an individual spent in the treatment leading to better overall feelings of satisfaction and effectiveness, yet the number of mental health conditions the individual was diagnosed with showed little to no trend towards significance in regard to therapeutic satisfaction and effectiveness. Confounds of this study may include whether or not they sought treatment from multiple therapists and how much time has passed since seeing a therapist, and these can be considered in future research. Current knowledge in this field will benefit from the analysis of mental health outpatient care overall satisfaction with the treatment they received in order to contribute to better quality and efficiency of treatments regarding the length of time they sought treatment and the mental health conditions they sought treatment for.

## INTRODUCTION

Outpatient mental health therapy is the most widely recognized way of treating mental health conditions, yet the quality of caring for these conditions is not up to par with the quality of care for physical conditions (Kilbourne et al., 2018). Due to this, there is prospective research within finding a more client-based measurement to ensure the quality of care which factors into client satisfaction and client feelings of effectiveness as many tools for measuring these factors reference the mental health care delivery. Regardless of these prospects, there are currently very few resources that measure a client's feelings of satisfaction and effectiveness because there is a difference in quality in regard to the care that is delivered which hinders the recovery process for those seeking therapy (Luther et al., 2018). In addition to the lack of resources to measure the quality of treatment with outpatient mental health therapy, there are factors of which that may not be taken into consideration for the client's satisfaction and feelings of effectiveness such as the length of time spent in treatment and the number of mental health diagnoses. The relationship of these factors is not widely researched separately in current literature when factoring in a client's feelings of satisfaction and effectiveness, which may be prospective for better quality of care.

*Length of Treatment.* A client's overall length of time in treatment appears as though it would affect their overall satisfaction with their treatment as well as how effective they perceive their treatment to be. However, a study that pulled clinical records to determine if improvements in CORE-OM/10 scores were a result of length, duration, or intensity of therapy found that there was no relationship between these factors and therapeutic gains (Evans et al., 2017). Evans et al. (2017) propose that for those seeking therapy, the responses to treatment depend on the individual and therapeutic gains do not rely on the number of sessions or treatment intensity. This points out effectiveness from a clinical perspective as current literature does not have conclusive evidence from a patient perspective.

Client satisfaction is an important process indicator of therapy effectiveness as well as the therapist's ability to recognize the indicators of client satisfaction (Keum et al., 2021). The factors that tend to be reliant on a client's perception of effectiveness with the therapeutic process are the outcome and the improvements of symptoms, yet the average rate of change is still expected to decline after each session regardless of how long the treatment is (Stulz et al., 2013). This proposes questions in current literature as to whether a longer length of treatment employs a decreased efficacy of treatment for the client, however factors such as serious mental health conditions also influence the efficacy of treatment.

*Number of Diagnoses.* The tools used to measure overall client satisfaction tend to not factor in the differences in clients such as the type of condition or amount of conditions they are seeking care for (Blenkiron & Hammill, 2003). In addition, the consideration for comorbid conditions and disorders is not a popular concept in current research and literature when determining overall client satisfaction. However, there still seems to be a relationship between comorbid conditions and satisfaction rates as those with a comorbid personality and depressive disorder tend to have lower satisfaction rates in therapy than those with only a depressive disorder (Gebhardt & Martin, 2016).

Client-perceived effectiveness is a topic in current literature that is also not commonly associated with the number of diagnoses a client has. Despite this, the efficacy of treatment is also seen as reliant on the client's receptiveness to the therapeutic process which is more widely researched. Within the current accessible literature, psychiatric comorbidities have been found to be a potential factor in the lack of receptiveness and compliance to treatment (López-Torres et al., 2013). However, this does not pull any conclusive information about whether the number of

diagnoses influences a client's overall feelings of satisfaction or feelings of treatment effectiveness.

### **HYPOTHESIS**

There is expected to be a moderately significant relationship between the length of treatment and overall feelings of satisfaction and effectiveness, as well as the relationship of the number of diagnoses and overall feelings of satisfaction and effectiveness. This includes that those who are in therapy longer will have better overall feelings of satisfaction and effectiveness, and those with only one mental health condition will have better overall feelings of satisfaction and effectiveness.

### **METHODS**

#### **Participants**

There were 40 participants in the current study that was open to anyone of any race, any gender, and any age over 18. Exclusion criteria included that participants must be over the age of 18 and participants were excluded from the study if they have not been diagnosed with at least one mental health condition (n=4). In total, 36 participants were included in the study. 85% of the participants were female, 10% of the participants were male, and 5% of the participants were non-binary, and the age groups were 18-25, 26-25, 36-45, 46-55, and 55+.

#### **Design/ Measures**

Major variables that were included in this study were whether each participant has been diagnosed with one or more mental health conditions, the length of time spent in treatment, age, and gender. Each variable was run through a One-Way ANOVA statistical analysis ( $\alpha=0.05$ ) on SPSS to determine the variable's significance toward feelings of satisfaction and effectiveness.

## **Procedures**

Upon clicking the link to the online survey, participants began by reading and clicking “Yes” or “No” on an informed consent document (Appendix A) as shown in the survey. The participants of the study were then asked to answer questions that inquired about some background information and their experiences while participating in mental health counseling or therapy in this survey (Appendix B). Once every question was completed, the participants then were thanked for their participation, they were offered a copy of their responses and consent form, and then allowed to leave/close the survey window. The materials that were needed include an online survey platform such as Google Forms. Each participant was provided with the study’s questionnaire through this method.

## **RESULTS**

### **Demographics of Participants**

A majority of participants that participated in this study were able to classify themselves as white (n=40), female (n=34), and between the ages of 18 and 25 (n=26), and therefore, this study mainly represents these demographics. 100% of participants were white, 85% of participants were female (Figure 1), and 65% of participants were between the ages of 18 and 25 (Figure 2).

Half of the participants have disclosed that they have seen a mental health counselor (n=20, 50%), while remaining participants stated that they are currently seeing a mental health counselor (n=17, 42.5%), or have never seen a mental health counselor (n=3, 7.5%). Participants also reported the length of time they sought treatment which included the options of 0-6 months (n=13, 35.1%), 7-12 months (n=6, 16.2%), 12-18 months (n=5, 13.5%), and 18+ months (n=13,

35.1%), and whether they have been diagnosed with one mental health condition (n=14, 37.8%), more than one mental health condition (n=22, 59.5%), or preferred not to answer (n=1, 2.7%).

### **Length of Time in Treatment**

Within the statistical analysis, the relationship between the length of time a participant spent in therapy and their overall feelings of satisfaction and effectiveness was found to hold a very slight trend toward significance. Means and significance are displayed per question in the survey (Table 1) and there were two quantitative data points that displayed significant differences,  $[F(3, 29)=3.478, p<.05]$  within a Pearson's correlation coefficient ( $p<0.05$ ).

### **Number of Diagnoses**

When the data of whether participants were diagnosed with one or more mental health conditions were run through the One-Way ANOVA statistical analysis with the questions regarding the participant's overall feelings of satisfaction and effectiveness of their therapeutic process, there were no significant differences found (Table 2). One quantitative data point showed a trend toward significance within [describe in detail] ( $p<0.08$ ). However, due to there being fewer than three groups to compare means, *post hoc* tests may not be conclusive.

### **Age**

Age has been included as a secondary finding within the current study. The participants' age showed a moderate correlation with overall feelings of satisfaction and effectiveness when comparing means in statistical analysis. Eight of the quantitative data points in the analysis showed significance and four data points showed a trend toward significance (Table 3).

### **Gender**

While the number of participants was majority female (n=34, 85%), an analysis based on gender was run in this study to conclude any possible relationship between gender and overall feelings of satisfaction and effectiveness. Based on the statistical analysis, there was no significance found (Table 4).

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## **DISCUSSION**

Patient satisfaction is a prospective determinant of the overall effectiveness of the therapeutic process when seeking mental health care, and feeling as though treatment was effective is a sign of quality and efficient therapy. This study aimed to determine whether the length of time in therapy and the number of diagnoses had any relation to a patient's overall feelings of satisfaction and effectiveness toward their mental health therapy. In regards to the length of time, a participant spent seeing a mental health counselor, the data only showed slight significance (see Table 1). However, the length of time spend in therapy based on these participants did show a slight trend with their overall satisfaction scores which were a sum of their scores (see Figure 3).

In addition to the length of time spent in therapy, statistical analysis did not seem to show much, if any, significance in regard to the number of diagnoses a participant had. This may be due to there being two groups, having one diagnosis or more than one diagnosis, and therefore the post hoc test did not run properly. Figure 4 and Figure 5 show this to be accurate through a comparison of questions that inquired about feeling satisfied with the treatment and feeling dissatisfied with some things in treatment. Both analyses showed that there was little to no significant difference between the number of diagnoses and overall feelings.



Age and gender were run through analysis as secondary findings to determine whether these variables had an effect on a client's overall feelings of satisfaction and effectiveness. Due to the potential of not having a diverse enough sample for gender, there was not a significant relationship between gender and feelings of satisfaction and effectiveness; this may also be due to there simply not being a difference. Age showed the most significant relationship and a trend toward significance as seen in Table 3 which significantly exceeds all other variables in this study.

### **Limitations of the Study**

The confounds that have been determined for this study include inquiring about if participants have seen multiple therapists and how long it has been since particular participants have seen a therapist. In addition, the post hoc test for the number of diagnoses in the statistical analysis was inconclusive due to not having at least three test groups. There would have to be a better measure of how many diagnoses a participant has in order for the analysis to be successful. This study also did not have a sample size that accurately represents a population aside from white females that are aged 18-25, and therefore this area could be improved.

### **CONCLUSIONS AND FUTURE DIRECTIONS**

Current research and literature do not seem to take the length of time in therapy and the number of diagnoses into account for client feelings of satisfaction and feelings of effectiveness, and with the conclusions pulled from this study, it appears as though these factors are not the most important variables to take into account. The current study does bring about a more beneficial way of discovering the satisfactory rates of outpatient mental health practices in order for more patients to feel satisfied with their care and feel as though their time in therapy was effective, but due to a lack of population diversity, there would need to be more diverse

population to fully understand whether or not the amount of diagnoses and length of time in therapy influences feelings of satisfaction and effectiveness. Client feelings of satisfaction relate to the overall effectiveness of mental health treatment and therefore, the application for this in real life revolves around a better understanding of what mental health care can improve from the client's perspective.

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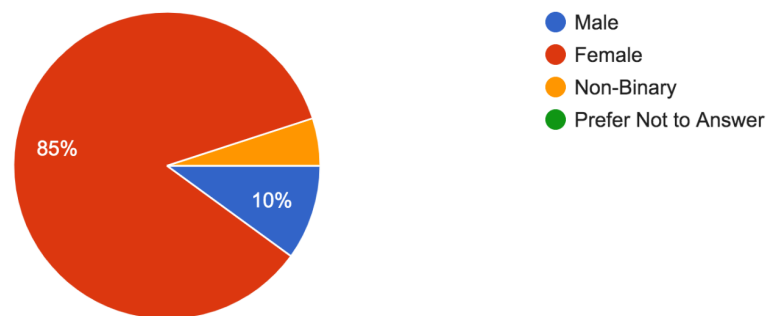
<https://doi.org/10.1007/s11414-018-9601-3>

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**FIGURES**

What is your gender?

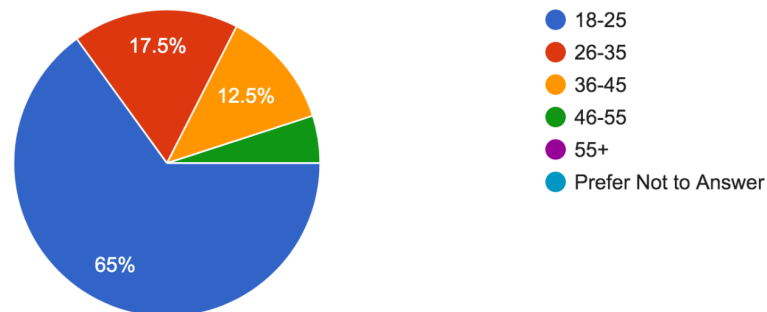
40 responses



**Figure 1. Gender Dispersion.** A majority of the 40 participants were female ( $n=34$ , 85%), with the next majority being male ( $n=4$ , 10%). Participants that are non-binary ( $n=2$ , 5%) contributed the least to the gender demographic.

How old are you?

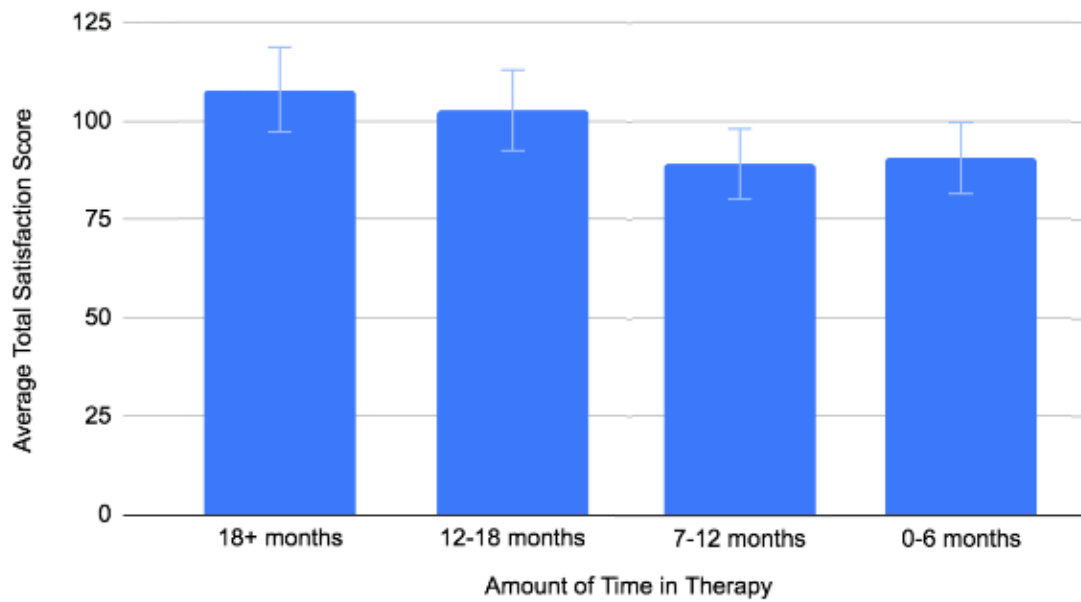
40 responses



**Figure 2. Age Groups of Participants.** Although there is more of a diverse sample when it comes to age, the majority of participants were between the ages of 18 and 25 ( $n=26$ , 65%). The other 45% consisted of the age groups of 26-35 ( $n=7$ , 17.5%), 36-45 ( $n=5$ , 12.5%), and 46-55 ( $n=2$ , 5%). Anyone under the age of 18 was excluded from participation, and those ages 55+ were excluded from the data due to a lack of responses.

Amount of Time in Therapy

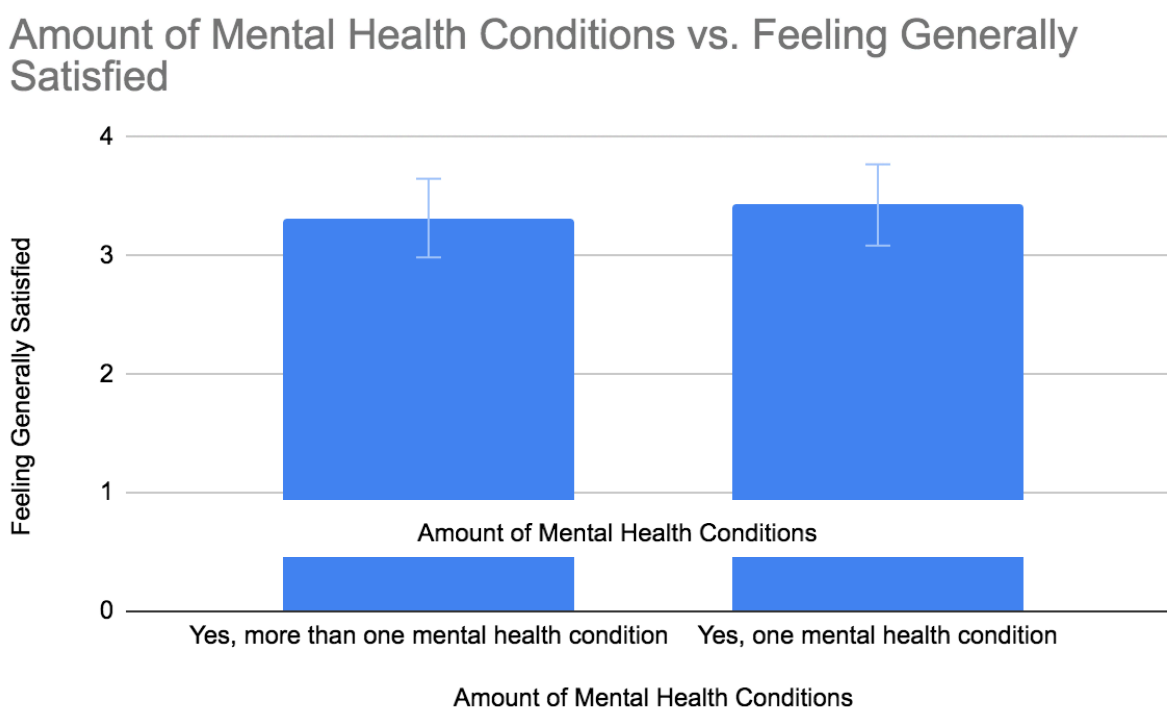
Amount of Time in Therapy vs. Total Satisfaction Score



**Figure 3. Average Sum of Total Satisfaction Scores Compared to the Amount of Time.**

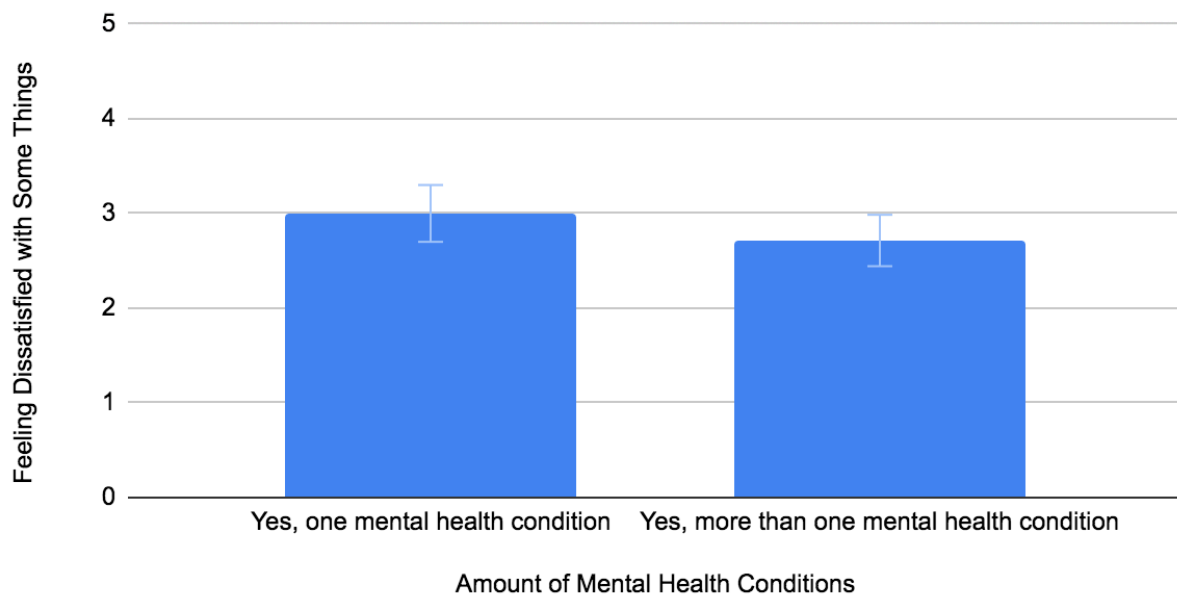
After converting each participant's responses into numerical data, a sum was calculated for each

participant and an average was taken for each age group. With this average, the graph shows that those who have seen a therapist for longer than 18 months had the highest total satisfaction score with  $r(40)=0.80$ ,  $p<0.05$ .



**Figure 4. Feelings of General Satisfaction of Care with Number of Diagnoses.** An average score for those who answered a question with Strongly Disagree (1), Disagree (2), are Neutral (3), Agree (4), Strongly Agree (5), or Prefer Not to Answer (0) based on whether they felt they were generally satisfied and an average of scores was taken based on the number of mental health conditions a participant had. In comparison, there is not a strong difference in answers based on the number of diagnoses a participant had with  $r(40)=0.80$ ,  $p<0.05$ .

### Amount of Mental Health Conditions vs. Dissatisfied with Some Things



**Figure 5. Feelings of Dissatisfaction with Some Things with Number of Diagnoses.** An average score for those who answered a question with Strongly Disagree (5), Disagree (4), are Neutral (3), Agree (2), Strongly Agree (1), or Prefer Not to Answer (0) based on whether they felt they were dissatisfied with certain things in therapy and an average of scores was taken based on the number of mental health conditions a participant had. In comparison, there is not a strong difference in answers based on the number of diagnoses a participant had with  $r(40)=0.80$ ,  $p<0.05$ .



## TABLES

		ANOVA				
		Sum of Squares	df	Mean Square	F	Sig.
ExcellentQuality	Between Groups	3.511	3	1.170	.728	.543
	Within Groups	51.462	32	1.608		
	Total	54.972	35			
GotLookingFor	Between Groups	3.840	3	1.280	.746	.533
	Within Groups	54.910	32	1.716		
	Total	58.750	35			
MetNeeds	Between Groups	7.109	3	2.370	1.661	.195
	Within Groups	45.641	32	1.426		
	Total	52.750	35			
WouldRecommend	Between Groups	.632	3	.211	.098	.961
	Within Groups	69.006	32	2.156		
	Total	69.639	35			
SatisfiedWHelp	Between Groups	4.940	3	1.647	1.107	.361
	Within Groups	47.615	32	1.488		
	Total	52.556	35			
HelpWProblems	Between Groups	4.590	3	1.530	1.078	.372
	Within Groups	45.410	32	1.419		
	Total	50.000	35			
GenerallySatisfied	Between Groups	5.338	3	1.779	1.390	.264
	Within Groups	40.968	32	1.280		
	Total	46.306	35			
ComeBack	Between Groups	3.494	3	1.165	.470	.705
	Within Groups	79.256	32	2.477		
	Total	82.750	35			
UnderstandInfo	Between Groups	5.120	3	1.707	2.092	.121
	Within Groups	26.103	32	.816		
	Total	31.222	35			
BoundariesRespected	Between Groups	2.568	3	.856	.894	.455
	Within Groups	30.654	32	.958		
	Total	33.222	35			
ListenedCarefully	Between Groups	4.500	3	1.500	1.038	.389
	Within Groups	46.250	32	1.445		
	Total	50.750	35			
AdequateTime	Between Groups	8.724	3	2.908	1.815	.164
	Within Groups	51.276	32	1.602		
	Total	60.000	35			
CourtesyRespect	Between Groups	3.408	3	1.136	1.262	.304
	Within Groups	28.814	32	.900		
	Total	32.222	35			
EasyToSee	Between Groups	4.889	3	1.630	1.280	.298
	Within Groups	40.750	32	1.273		
	Total	45.639	35			
ReducedRelapse	Between Groups	5.078	3	1.693	1.666	.195
	Within Groups	31.494	31	1.016		
	Total	36.571	34			
ConcernsAddressed	Between Groups	6.559	3	2.186	1.783	.171
	Within Groups	38.013	31	1.226		
	Total	44.571	34			
UsefulTechniques	Between Groups	5.065	3	1.688	1.503	.233
	Within Groups	34.821	31	1.123		
	Total	39.886	34			
IUseCopingMechs	Between Groups	2.356	3	.785	.630	.601
	Within Groups	38.615	31	1.246		
	Total	40.971	34			
SymptomLesson	Between Groups	7.741	3	2.580	1.911	.148
	Within Groups	41.859	31	1.350		
	Total	49.600	34			
NoIssueWTreatment	Between Groups	4.156	3	1.385	.810	.498
	Within Groups	38.615	31	1.246		
	Total	42.771	34			

EffectiveTimeUse	Between Groups	5.301	3	1.767	1.324	.284
	Within Groups	41.385	31	1.335		
	Total	46.686	34			
EmpatheticAttentive	Between Groups	4.305	3	1.435	1.213	.321
	Within Groups	36.667	31	1.183		
	Total	40.971	34			
ComfortableTalking	Between Groups	5.239	3	1.746	1.689	.190
	Within Groups	31.026	30	1.034		
	Total	36.265	33			
DissatisfiedWSome	Between Groups	2.858	3	.953	.549	.653
	Within Groups	52.083	30	1.736		
	Total	54.941	33			
CouldBeBetter	Between Groups	2.091	3	.697	.357	.784
	Within Groups	60.481	31	1.951		
	Total	62.571	34			
ProperDiagnosis	Between Groups	5.668	3	1.889	1.712	.185
	Within Groups	34.218	31	1.104		
	Total	39.886	34			
NotEffective	Between Groups	12.765	3	4.255	2.145	.115
	Within Groups	59.500	30	1.983		
	Total	72.265	33			
NeedsNotMet	Between Groups	17.526	3	5.842	3.478	.029
	Within Groups	48.717	29	1.680		
	Total	66.242	32			
ConditionImproved	Between Groups	9.684	3	3.228	2.955	.048
	Within Groups	33.859	31	1.092		
	Total	43.543	34			

**Table 1. One-Way ANOVA Analysis for Length of Time in Therapy.** Only two of the questions that participants answered showed significance in Pearson's  $r$  correlation coefficient with an alpha level of  $p < .05$ , which is based on the length of time in therapy. These included that

they felt as though their needs were not met and that their condition improved in therapy.

ANOVA						
		Sum of Squares	df	Mean Square	F	Sig.
ExcellentQuality	Between Groups	1.342	1	1.342	.851	.363
	Within Groups	53.630	34	1.577		
	Total	54.972	35			
GotLookingFor	Between Groups	6.003	1	6.003	3.870	.057
	Within Groups	52.747	34	1.551		
	Total	58.750	35			
MetNeeds	Between Groups	1.718	1	1.718	1.144	.292
	Within Groups	51.032	34	1.501		
	Total	52.750	35			
WouldRecommend	Between Groups	2.606	1	2.606	1.322	.258
	Within Groups	67.032	34	1.972		
	Total	69.639	35			
SatisfiedWHelp	Between Groups	1.478	1	1.478	.984	.328
	Within Groups	51.078	34	1.502		
	Total	52.556	35			

GenerallySatisfied	Between Groups	.104	1	.104	.077	.783
	Within Groups	46.201	34	1.359		
	Total	46.306	35			
ComeBack	Between Groups	2.367	1	2.367	1.001	.324
	Within Groups	80.383	34	2.364		
	Total	82.750	35			
UnderstandInfo	Between Groups	.975	1	.975	1.097	.302
	Within Groups	30.247	34	.890		
	Total	31.222	35			
BoundariesRespected	Between Groups	.144	1	.144	.148	.703
	Within Groups	33.078	34	.973		
	Total	33.222	35			
ListenedCarefully	Between Groups	.263	1	.263	.177	.677
	Within Groups	50.487	34	1.485		
	Total	50.750	35			
AdequateTime	Between Groups	3.753	1	3.753	2.269	.141
	Within Groups	56.247	34	1.654		
	Total	60.000	35			
CourtesyRespect	Between Groups	.092	1	.092	.098	.756
	Within Groups	32.130	34	.945		
	Total	32.222	35			
EasyToSee	Between Groups	3.256	1	3.256	2.612	.115
	Within Groups	42.383	34	1.247		
	Total	45.639	35			
ReducedRelapse	Between Groups	1.905	1	1.905	1.813	.187
	Within Groups	34.667	33	1.051		
	Total	36.571	34			
ConcernsAddressed	Between Groups	.809	1	.809	.610	.440
	Within Groups	43.762	33	1.326		
	Total	44.571	34			
UsefulTechniques	Between Groups	1.536	1	1.536	1.322	.259
	Within Groups	38.350	33	1.162		
	Total	39.886	34			
IUseCopingMechs	Between Groups	.940	1	.940	.775	.385
	Within Groups	40.031	33	1.213		
	Total	40.971	34			
SymptomLesson	Between Groups	.240	1	.240	.160	.691
	Within Groups	49.360	33	1.496		
	Total	49.600	34			
NoIssueWtreatment	Between Groups	.202	1	.202	.117	.734
	Within Groups	56.941	33	1.725		
	Total	57.143	34			
EffectiveTimeUse	Between Groups	1.060	1	1.060	.767	.388
	Within Groups	45.626	33	1.383		
	Total	46.686	34			
EmpatheticAttentive	Between Groups	.185	1	.185	.149	.702
	Within Groups	40.787	33	1.236		
	Total	40.971	34			
ComfortableTalking	Between Groups	.401	1	.401	.358	.554
	Within Groups	35.864	32	1.121		
	Total	36.265	33			
DissatisfiedWSome	Between Groups	.655	1	.655	.386	.539
	Within Groups	54.286	32	1.696		
	Total	54.941	33			
CouldBeBetter	Between Groups	1.071	1	1.071	.575	.454
	Within Groups	61.500	33	1.864		
	Total	62.571	34			
ProperDiagnosis	Between Groups	.739	1	.739	.623	.436
	Within Groups	39.147	33	1.186		
	Total	39.886	34			
NotEffective	Between Groups	.543	1	.543	.242	.626
	Within Groups	71.722	32	2.241		
	Total	72.265	33			
NeedsNotMet	Between Groups	.183	1	.183	.086	.771
	Within Groups	66.060	31	2.131		
	Total	66.242	32			
ConditionImproved	Between Groups	1.875	1	1.875	1.485	.232
	Within Groups	41.668	33	1.263		
	Total	43.543	34			

**Table 2. One-Way ANOVA Analysis for Number of Diagnoses.** There was only one question from the survey that produced a trend toward significance in Pearson's  $r$  correlation coefficient with an alpha level of  $p < .05$ , which is based on the number of diagnoses the participant had. This included the question inquiring about the participant getting what they were looking for in therapy.

		ANOVA				
		Sum of Squares	df	Mean Square	F	Sig.
ExcellentQuality	Between Groups	11.387	3	3.796	2.787	.057
	Within Groups	43.585	32	1.362		
	Total	54.972	35			
GotLookingFor	Between Groups	13.963	3	4.654	3.325	.032
	Within Groups	44.787	32	1.400		
	Total	58.750	35			
MetNeeds	Between Groups	6.495	3	2.165	1.498	.234
	Within Groups	46.255	32	1.445		
	Total	52.750	35			
WouldRecommend	Between Groups	9.813	3	3.271	1.750	.177
	Within Groups	59.826	32	1.870		
	Total	69.639	35			
SatisfiedWHelp	Between Groups	10.501	3	3.500	2.664	.065
	Within Groups	42.054	32	1.314		
	Total	52.556	35			
HelpWProblems	Between Groups	6.658	3	2.219	1.639	.200
	Within Groups	43.342	32	1.354		
	Total	50.000	35			
GenerallySatisfied	Between Groups	7.535	3	2.512	2.073	.123
	Within Groups	38.770	32	1.212		
	Total	46.306	35			
ComeBack	Between Groups	8.936	3	2.979	1.291	.294
	Within Groups	73.814	32	2.307		
	Total	82.750	35			
UnderstandInfo	Between Groups	2.398	3	.799	.887	.458
	Within Groups	28.825	32	.901		
	Total	31.222	35			
BoundariesRespected	Between Groups	2.149	3	.716	.738	.537
	Within Groups	31.073	32	.971		
	Total	33.222	35			
ListenedCarefully	Between Groups	8.880	3	2.960	2.262	.100
	Within Groups	41.870	32	1.308		
	Total	50.750	35			
AdequateTime	Between Groups	10.318	3	3.439	2.215	.105
	Within Groups	49.682	32	1.553		
	Total	60.000	35			
CourtesyRespect	Between Groups	3.432	3	1.144	1.271	.301
	Within Groups	28.790	32	.900		
	Total	32.222	35			
EasyToSee	Between Groups	5.630	3	1.877	1.501	.233
	Within Groups	40.009	32	1.250		
	Total	45.639	35			

EasyToSee	Between Groups	5.630	3	1.877	1.501	.233
	Within Groups	40.009	32	1.250		
	Total	45.639	35			
ReducedRelapse	Between Groups	6.052	3	2.017	2.049	.127
	Within Groups	30.519	31	.984		
	Total	36.571	34			
ConcernsAddressed	Between Groups	11.302	3	3.767	3.510	.027
	Within Groups	33.269	31	1.073		
	Total	44.571	34			
UsefulTechniques	Between Groups	4.684	3	1.561	1.375	.269
	Within Groups	35.201	31	1.136		
	Total	39.886	34			
IUseCopingMechs	Between Groups	4.757	3	1.586	1.357	.274
	Within Groups	36.214	31	1.168		
	Total	40.971	34			
SymptomLesson	Between Groups	6.636	3	2.212	1.596	.210
	Within Groups	42.964	31	1.386		
	Total	49.600	34			
NoIssueWTreatment	Between Groups	13.286	3	4.429	3.130	.040
	Within Groups	43.857	31	1.415		
	Total	57.143	34			
EffectiveTimeUse	Between Groups	9.988	3	3.329	2.812	.056
	Within Groups	36.698	31	1.184		
	Total	46.686	34			
EmpatheticAttentive	Between Groups	10.439	3	3.480	3.533	.026
	Within Groups	30.532	31	.985		
	Total	40.971	34			
ComfortableTalking	Between Groups	8.096	3	2.699	2.874	.053
	Within Groups	28.169	30	.939		
	Total	36.265	33			
DissatisfiedWSome	Between Groups	14.237	3	4.746	3.498	.027
	Within Groups	40.705	30	1.357		
	Total	54.941	33			
CouldBeBetter	Between Groups	14.084	3	4.695	3.002	.045
	Within Groups	48.487	31	1.564		
	Total	62.571	34			
ProperDiagnosis	Between Groups	13.753	3	4.584	5.438	.004
	Within Groups	26.133	31	.843		
	Total	39.886	34			
NotEffective	Between Groups	19.697	3	6.566	3.747	.021
	Within Groups	52.568	30	1.752		
	Total	72.265	33			
NeedsNotMet	Between Groups	14.588	3	4.863	2.730	.062
	Within Groups	51.655	29	1.781		
	Total	66.242	32			
ConditionImproved	Between Groups	2.556	3	.852	.644	.592
	Within Groups	40.987	31	1.322		
	Total	43.543	34			

Table 3. One-Way

**ANOVA Analysis for Age.** Age produced the highest significance in Pearson's  $r$  correlation

coefficient with an alpha level of  $p < .05$  with eight questions. Four showed a trend toward significance.

## ANOVA

		Sum of Squares	df	Mean Square	F	Sig.
ExcellentQuality	Between Groups	4.356	2	2.178	1.420	.256
	Within Groups	50.617	33	1.534		
	Total	54.972	35			
GotLookingFor	Between Groups	3.050	2	1.525	.904	.415
	Within Groups	55.700	33	1.688		
	Total	58.750	35			
MetNeeds	Between Groups	3.050	2	1.525	1.013	.374
	Within Groups	49.700	33	1.506		
	Total	52.750	35			
WouldRecommend	Between Groups	1.472	2	.736	.356	.703
	Within Groups	68.167	33	2.066		
	Total	69.639	35			
SatisfiedWHelp	Between Groups	4.439	2	2.219	1.522	.233
	Within Groups	48.117	33	1.458		
	Total	52.556	35			
HelpWProblems	Between Groups	.950	2	.475	.320	.729
	Within Groups	49.050	33	1.486		
	Total	50.000	35			
GenerallySatisfied	Between Groups	2.089	2	1.044	.779	.467
	Within Groups	44.217	33	1.340		
	Total	46.306	35			
ComeBack	Between Groups	2.133	2	1.067	.437	.650
	Within Groups	80.617	33	2.443		
	Total	82.750	35			
UnderstandInfo	Between Groups	.422	2	.211	.226	.799
	Within Groups	30.800	33	.933		
	Total	31.222	35			
BoundariesRespected	Between Groups	3.556	2	1.778	1.978	.154
	Within Groups	29.667	33	.899		
	Total	33.222	35			
ListenedCarefully	Between Groups	.383	2	.192	.126	.882
	Within Groups	50.367	33	1.526		
	Total	50.750	35			
AdequateTime	Between Groups	3.133	2	1.567	.909	.413
	Within Groups	56.867	33	1.723		
	Total	60.000	35			
CourtesyRespect	Between Groups	1.106	2	.553	.586	.562
	Within Groups	31.117	33	.943		
	Total	32.222	35			
EasyToSee	Between Groups	3.672	2	1.836	1.444	.251
	Within Groups	41.967	33	1.272		
	Total	45.639	35			
ReducedRelapse	Between Groups	3.270	2	1.635	1.571	.223
	Within Groups	33.302	32	1.041		
	Total	36.571	34			
ConcernsAddressed	Between Groups	4.149	2	2.075	1.642	.209
	Within Groups	40.422	32	1.263		
	Total	44.571	34			
UsefulTechniques	Between Groups	.179	2	.089	.072	.931
	Within Groups	39.707	32	1.241		
	Total	39.886	34			
IUseCopingMechs	Between Groups	.083	2	.042	.033	.968
	Within Groups	40.888	32	1.278		
	Total	40.971	34			



SymptomLesson	Between Groups	5.462	2	2.731	1.980	.155
	Within Groups	44.138	32	1.379		
	Total	49.600	34			
NoIssueWTreatment	Between Groups	7.083	2	3.541	2.264	.120
	Within Groups	50.060	32	1.564		
	Total	57.143	34			
EffectiveTimeUse	Between Groups	2.263	2	1.132	.815	.452
	Within Groups	44.422	32	1.388		
	Total	46.686	34			
EmpatheticAttentive	Between Groups	2.083	2	1.042	.857	.434
	Within Groups	38.888	32	1.215		
	Total	40.971	34			
ComfortableTalking	Between Groups	4.336	2	2.168	2.105	.139
	Within Groups	31.929	31	1.030		
	Total	36.265	33			
DissatisfiedWSome	Between Groups	1.493	2	.746	.433	.652
	Within Groups	53.448	31	1.724		
	Total	54.941	33			
CouldBeBetter	Between Groups	4.149	2	2.075	1.136	.334
	Within Groups	58.422	32	1.826		
	Total	62.571	34			
ProperDiagnosis	Between Groups	.929	2	.464	.381	.686
	Within Groups	38.957	32	1.217		
	Total	39.886	34			
NotEffective	Between Groups	6.339	2	3.170	1.490	.241
	Within Groups	65.925	31	2.127		
	Total	72.265	33			
NeedsNotMet	Between Groups	4.814	2	2.407	1.175	.322
	Within Groups	61.429	30	2.048		
	Total	66.242	32			
ConditionImproved	Between Groups	4.983	2	2.491	2.067	.143
	Within Groups	38.560	32	1.205		
	Total	43.543	34			

**Table 4. One-Way ANOVA Analysis for Gender.** 85% of participants in this study were female and therefore, there was not an accurate population sample. Due to this factor or potential for no differentiation with gender and overall feelings of satisfaction and effectiveness, there was no trend toward significance in Pearson's  $r$  correlation coefficient with an alpha level of  $p < .05$ .

## APPENDIX A

### Consent Form

#### Consent to Participate in Research

##### The Research Team

The following research is being conducted by a trained research team who may be reached at the following contacts:

Primary Researcher:

Cassie Stopczynski  
[cstopczynski@rochesteru.edu](mailto:cstopczynski@rochesteru.edu)

Faculty Sponsor:

Dr. Jessica J Matyas  
[JMatyas@rochesteru.edu](mailto:JMatyas@rochesteru.edu)  
Office: (248) 218 - 2157

##### Purpose of the study

The major goals of the present study are to relate overall client satisfaction and the effectiveness of outpatient mental health therapy based on the length of time of treatment and mental health condition in order to contribute to better quality and efficiency of treatments.

##### Procedures

This survey is expected to take 5-10 minutes to complete. You will be asked to answer a detailed questionnaire about your experiences while seeking outpatient mental health treatment from a counselor or therapist. You are welcome to contact the research team after completing your participation if you want to learn more about the research results. All participants must be 18 years old or older.

##### Risks Involved in Participation

Care has been taken to minimize or eliminate significant risks during the procedures of this survey. Those who feel distressed or uncomfortable are invited to reach out to the MacKinnon Psychology and Counselling Center by emailing [Mschroeder@rochesteru.edu](mailto:Mschroeder@rochesteru.edu). In addition to this resource, those who have the onset of an emergency situation such as ideations of self-harm or suicide and would like anonymous support, please call 988 or visit SAMHSA.gov. Potential negative effects that you may experience during the course of this study include:

- Temporary discomfort due to questions about your mental health and treatment
- Reflection of times when seeking mental health treatment

While the present study is collecting data such as your email address, this data will remain confidential and be stored in a secure server until the completion of the study, at which time it will be destroyed. All responses will be scored within 24 hours of receiving them as a result of potentially sensitive answers, and at no time will your personal information be available to anyone outside of the above research team.

**Benefits of the Current Research**

If successful, the results of this study may be applicable to ensuring quality mental health therapy for outpatient practices. Participation in the experiment may lead the participants to feel positive emotions like satisfaction and social approval toward more positive and qualitative experiences with mental health therapy in the future.

**Signature of Informed Consent**

I have read and understood the above information, and voluntarily agree to participate. I understand that my participation in this study is entirely voluntary and that I may withdraw my consent at any time with no penalty or consequences.

- I consent.
- I do not consent.

Please enter your email address below

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**APPENDIX B****Survey Instrument****Background Information**

What is your age?

- 18-25
- 26-40
- 41-65
- 65+
- Prefer not to answer

What is your gender?

- Male
- Female
- Non-Binary
- Other \_\_\_\_\_
- Prefer not to answer

What is your race?

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White
- Other \_\_\_\_\_
- Prefer not to answer

Have you ever received mental health treatment through an outpatient counselor or therapist?

- Yes, but I am not currently receiving treatment
- Yes, and I am currently receiving treatment
- No, I have never received treatment
- Prefer not to answer

If yes, how long did you receive treatment, or have been receiving treatment?

- 0-6 months
- 7-12 months
- 13-18 months
- 18+ months
- Prefer not to answer

If yes, have you been diagnosed with one or more mental health conditions?

- Yes, one mental health condition
- Yes, more than one mental health condition
- No, treatment did not relate to mental health condition(s)

- Prefer not to answer

Please fill in each condition that would be applicable to you and your diagnosis.

- Prefer not to answer
- Anxiety disorder (Panic disorder, social anxiety disorder, phobia, generalized anxiety disorder, etc.)
- Dissociative disorder
- Depression
- Bipolar disorder (Type I, Type II, or cyclothymia)
- Post-traumatic stress disorder
- Acute stress disorder
- Substance-induced disorder
- Hypochondriasis
- Eating disorders (Pica, Anorexia nervosa, Binge eating disorder, Bulimia disorder, Purging disorder, etc.)
- Personality disorder (Paranoid personality disorder, Antisocial personality disorder, Borderline personality disorder, Avoidant personality disorder, etc.)
- Schizophrenia spectrum (Delusional disorder, Schizoaffective disorder, etc.)
- Other \_\_\_\_\_
- Not applicable

### **Survey Questions Based on Satisfaction of Mental Health Treatment**

The following questions will inquire about your overall satisfaction with the treatment you received from a mental health counselor or therapist.

#### **Mental Health Treatment Satisfaction Survey**

The following questions are sourced from the Client Satisfaction Questionnaire (CSQ-8). Please answer the following questions based on whether you Strongly Disagree, Disagree, are Neutral, Agree, Strongly Agree, or Prefer Not to Answer with the following statements. Apply each question that appears in the past tense as if it were present tense if you are still currently seeing a mental health counselor or therapist.

- The quality of care that I received was excellent.
- I got the kind of service I was looking for.
- The treatment from my counselor or therapist met all of my needs.
- I would recommend my counselor or therapist to someone in need of similar help.

- I am satisfied with the amount of help I received.
- The treatment I received helped me deal with my problems more effectively.
- In an overall, general sense, I am satisfied with the services I received.
- I would return to my counselor or therapist if I need future help.

### **Mental Health Treatment Satisfaction Survey (Continued)**

The following questions are sourced from the Mental Health Service Satisfaction Scale (MHSSS). Please answer the following questions based on whether you Strongly Disagree, Disagree, are Neutral, Agree, Strongly Agree, or Prefer Not to Answer with the following statements. Apply each question that appears in the past tense as if it were present tense if you are still currently seeing a mental health counselor or therapist.

- I was given information in a way that I could understand.
- My privacy and boundaries were respected.
- I felt as though my counselor or therapist listened to me carefully.
- There was adequate time to see my counselor or therapist.
- I was treated with courtesy and respect.
- It was easy to come to see my counselor or therapist.
- I feel as though the treatment reduced my relapse of symptoms.

### **Survey Questions Based on Effectiveness of Treatment**

Please answer the following questions based on whether you Strongly Disagree, Disagree, are Neutral, Agree, Strongly Agree, or Prefer Not to Answer with the following statements. Apply each question that appears in the past tense as if it were present tense if you are still currently seeing a mental health counselor or therapist.

- When seeing my counselor or therapist, I feel as though my concerns were addressed.
- The techniques that were used in my therapeutic process were useful and applicable to my situation.
- I use the coping mechanisms I was taught frequently.
- The symptoms I experienced prior to treatment have lessened.
- I had no issues with the type of treatment I received from my counselor or therapist.
- There was an effective use of time during my sessions with my counselor or therapist.
- My counselor or therapist was empathetic and attentive to my needs.
- I felt comfortable speaking with my counselor or therapist about my problems.
- I am dissatisfied with some things about the mental health treatment I received.
- There are some things with my counselor or therapist and the treatment I received that could be better.
- The counselor or therapist made a proper diagnosis for me.

- My experience in therapy was not effective.
- I feel as though my needs were not met when seeing my counselor or therapist.
- My existing or pre-existing condition has improved.

### **Disclosure Statement**

Thank you for participating in the above study. By selecting the answer below, you are providing final consent for us to use the information you provided for the betterment of science and the betterment of quality outpatient mental health treatments. If you have any questions or concerns, please feel welcome to reach out to the research team at any time. If you feel prolonged discomfort

as a result of this study, please contact the MacKinnon Psychology and Counseling Clinic at MSchroeder@rochesteru.edu to speak to someone. In addition, if you feel as though you are in an

emergency situation such as ideations of self-harm or suicide and would like anonymous support, please call 988 or visit SAMHSA.gov.

- I understand

Submit Form