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ABSTRACT

This paper discusses the results of a study that investigated the reliability and validity of the Youth Client Satisfaction Questionnaire (YCSQ). The YCSQ is administered as a telephone interview, which provides a higher response rate than mailed surveys. Participants in the study were 87 clients (ages 11-17) and their parents who had completed therapy at a community mental health center for children in northeastern Ohio. The sample included only subjects who had participated in at least three therapy sessions. Telephone administration of the YCSQ usually took about 10 minutes unless there was spontaneous elaboration. One-half of the subjects responded to the questionnaire again in three weeks to assess reliability. Results of the survey indicate that the YCSQ is a reliable, internally consistent, and valid measure of satisfaction of mental health services for young clients, however, more research is urged. The 14 rated items on the survey demonstrated satisfactory psychometric properties and an interpretable factor structure, suggesting that the relationship with the therapists and perceived benefits of counseling are two main components of overall youth satisfaction. (CR)

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Introduction

Current thinking about the child mental health system emphasizes the importance of consumer satisfaction and a child-centered approach (Knitzer, 1982; Stroul & Friedman, 1986). Successful implementation of these principles requires a reliable and valid method of producing differentiated information about young people's satisfaction with their services. Efforts to develop such methods have only recently begun. Existing measures have been characterized as being limited by a lack of psychometric information, sampling problems, vulnerability to social desirability response bias, and a lack of differentiation among dimensions of satisfaction (Young, Nicholson, & Davis, 1995).

The Youth Client Satisfaction Questionnaire (YCSQ) was designed to differ from existing measures of this construct by combining several characteristics. First, this instrument is administered as a telephone interview, which provides a higher response rate than mailed surveys (Young et al., 1995). The YCSQ also provides differentiated information about dimensions of client satisfaction, and its directions and item wording are designed to minimize social desirability response bias.

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Method

Participants were 150 clients and their parents who had completed therapy at a community mental health center for children in northeastern Ohio. The age range was 11-17 and the mean age was 13.23 (SD = 1.72). The sample was 51% female. Ethnic composition was 43% African American, 50% White, 5% Hispanic, and 2% other ethnic group. The sample included only subjects who had participated in at least three therapy sessions (not counting the initial diagnostic assessment).

The primary income source was employment for 37% of the families, with 63% receiving AFDC or another form of income assistance. A total of 62% of the families were headed by a single parent, and 38% of the families provided two-parent homes. Eighteen percent of the youth had a history of juvenile court involvement. At intake, 28% of the sample were diagnosed with Oppositional-Defiant Disorder, 8% with Adjustment Disorder with Mixed Emotional Features, 8% with Sexual Disorder Not Otherwise Specified (juvenile sex offenders), 6% with Dysthymic Disorder, and the remainder widely dispersed among a number of diagnoses.

Most subjects participated in a combination of treatment modalities, so that the following proportions add up to more than 100%. Seventy-seven percent of the subjects received individual therapy, 91% family therapy, and 22% group therapy.

Fifty-eight percent of the consumers eligible for the study became participants (N = 87). Only 34% of the attrition was due to client unwillingness to participate. The remainder of non-participants resulted from the family not having a phone, moves without forwarding information, the family's inability to complete the interviews by eight weeks from their last appointment, language barriers, and the child no longer being in the home.

Candidate items for the YCSQ were generated on the basis of a literature review, focus groups with clinicians, and individual exploratory interviews with 10 young clients and their parents. This resulted in 17 candidate items. The design of the YSCQ involved combining psychometric considerations with the need to maximize ease and comfort of responding. Responses were coded in the form of a four-point Likert-type scale. However, rather than presenting the scale directly to subjects, responses were obtained through very brief, scripted exchanges between interviewer and youth, with follow-up questions when necessary. The items were given different scale anchors, depending on the item content.

Telephone administration of the YCSQ usually took about 10 minutes unless there was spontaneous elaboration. One-half of the subjects responded to the questionnaire again in three weeks to assess reliability. One item was

again in three weeks to assess reliability. One item was repeated as a reliability check. Five protocols were excluded because of evidence of random responding.

The procedure also included the Child Behavior Checklist (CBCL; Achenbach, 1991a) and the Youth Self-report (YSR; Achenbach, 1991b), which were administered prior to and after therapy as an assessment of outcome. Parents also completed a measure of their satisfaction with services (Kotsopoulos, Elwood, & Oke, 1989) during a telephone interview.

Results

Because YCSQ items have different anchors, there were questions about the parametric versus nonparametric nature of the data. In order to address this issue, we computed Spearman correlations for the psychometric analyses addressed below and compared them to the corresponding Pearson correlations. The 51 pairs of correlations were extremely similar, with no significant differences, suggesting that YCSQ scaling design does not result in marked departure from interval equality and item comparability, so that parametric procedures are appropriate for the data.

There were three criteria for retaining items in the measure: (a) test-retest reliability correlation ³ .50; (b) part-whole correlation ³ .40; and (c) correlation with a validation item about overall satisfaction ³ .30 (see Table 1). Fourteen items met these criteria. All correlations reported below are significant with $p < .0001$ unless otherwise indicated. The average reliability correlation was .67, with an average part-whole correlation of .65, and an average validity correlation of .48. The item with the highest part-whole correlation (.78) was the one about overall satisfaction. Total scores had a reliability correlation of .92. Cronbach's alpha was .90.

Total scores on the instrument ranged from 8 to 42, with a mean of 30.64 and a standard deviation of 8.11. The average item score was 2.19. Given an item score range of 0 to 3, these results indicate that the sample as a whole expressed a fairly high degree of satisfaction with their services—a finding consistent with the general client satisfaction literature (Young et al., 1995).

We performed a principal components analysis with varimax rotation in order to identify the major factors of youth consumer satisfaction. Two factors emerged. The Relationship with Therapist factor included six items asking whether the youth liked the counselor, had a good time in therapy, perceived the therapist as understanding, caring, having helpful ideas, and as understanding his or her cultural group. The Benefits of Therapy factor included eight items asking about therapy-caused change in the areas of feelings, behavior, self-concept, personal problems, and family relationships, and asking about beneficial learning,

family relationships, and asking about beneficial learning, understanding therapeutic goals, and overall satisfaction. Cronbach's alpha for the individual factors was .85 in both cases. The inter-factor correlation was .66.

In order to assess convergent validity, we computed correlations between the YCSQ and several other measures of treatment quality (see Table 2). YCSQ scores were somewhat positively related to improvement from pretest to posttest on the CBCL ($r = .18, p < .05$), but not the YSR ($r = -.04, ns$). YCSQ scores had correlations of .37 with improvement in DSM III-R Global Assessment of Functioning scores, .41 with a therapist rating of treatment progress, .53 with parent satisfaction scores, and .47 with a parent rating of treatment progress.

Boys produced higher YCSQ scores than girls ($t = 2.00, p < .05$). There was a marginally significant correlation with age ($r = -.15, p < .07$). African American and White clients produced similar scores ($t = .29$). Client satisfaction did not differ depending on parental employment status ($t = 1.67$), single versus two-parent families ($t = .56$), past treatment history at our agency ($t = .58$) or another setting ($t = .59$), or youth involvement in the juvenile justice system ($t = .52$). YCSQ scores showed a marginally nonsignificant correlation of .16 ($p < .06$) with number of sessions.

The interview included two questions asking whether the youth wanted to receive counseling or if they were required to come. There was no relation between client satisfaction and whether the youth chose or were required to begin counseling ($r = .12$). Youth who reported voluntary participation in therapy by the time of termination were more satisfied with their services ($r = .50$).

Conclusions

The results suggest that the YCSQ is a reliable, internally consistent, and valid measure of satisfaction of mental health services for young clients, however, more research is needed. The 14 retained items demonstrated satisfactory psychometric properties and an interpretable factor structure suggesting that the relationship with the therapist and the perceived benefits of counseling are two main components of overall youth satisfaction. Youth client satisfaction showed significant relations with 5 of 6 other measures of treatment effectiveness (with the exception of the YSR), providing evidence of convergent validity for the YCSQ.

Telephone interviews proved to be a feasible method of administration. Given that mailed questionnaires often have low return rates and that terminations are often unplanned, the telephone method seems to have practical advantages. However, youth may not have felt the survey was anonymous when conducted by phone by staff from the center, leading to bias towards positive responses

The descriptive results suggest that most young counseling clients express a fairly high level of satisfaction with their services even when directions and items wording are designed to give permission for dissatisfied as well as satisfied responses. Clients who began treatment involuntarily ended with the same level of satisfaction as youth who initially wanted to receive therapy. Interpretation of these results should be cognizant of the possibility that clients who had dropped out prior to their third therapy session and those who were not recruited for the study may have had a lower level of satisfaction than our study participants.

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