Counseling services evaluation studies were conducted at one university counseling center in 1987, 1990, 1991, and 1993. The 1987 survey was a comprehensive effort to obtain data from 1,000 students living on campus. The next three surveys used a brief format of 50 items, focusing on current counseling center clients. Subjects included 436 students in 1987, 112 of whom had used counseling center services; 116 students in 1990; 109 students in 1991; and 150 students in 1993; for a total of 487 respondents who had used counseling services. The 1987 survey was completed primarily by freshmen and sophomores, 74% of whom were women. Respondents to the three subsequent surveys were primarily juniors and seniors, and between 75% and 83% were women. When clients ranked their presenting problems, depression and self-esteem were ranked highest in 1990; anxiety/stress in 1991; and relationship issues and self-esteem in 1993. All studies indicated that, in general, the students were satisfied with their counselor and the counseling they received, and felt welcomed by the receptionist. Many students felt counseling had helped them academically and may have been a contributing factor in their ability to stay in school. The three most positive responses were items which indicated that respondents would recommend the counseling center to a friend, would return if further help was needed, and believed that the counseling center provided needed services to students. (NB)
University Counseling Center Client
Satisfaction Surveys: A Four Study Review

by

Gary L. Silker and Ross J. Rapaport

Counseling Center
Central Michigan University
Mt. Pleasant, Michigan 48859
(517) 774-3381

Robert L. Quackenbush
Counseling and Psychological Services
Eastern Washington University
Cheney, Washington 99004-2495
(509) 359-2366

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Systematic evaluation of counseling services is an essential component of competent professional practice. According to the International Association of Counseling Services (1991) "An integral responsibility of the counseling service is to conduct ongoing evaluation and accountability research, to determine the effectiveness of its services, and to improve the quality of services." (p.6) The Council for the Advancement of Standards for Student Services/Development Programs, Standards and Guidelines for Counseling Services (1988) state that "There must be systematic and regular research on and evaluation of... the counseling services to determine whether the educational goals and the needs of students are being met... Results of these regular evaluations must be used in revising and improving the program goals and implementation". (p.28)

Bishop and Trembly (1987) believe that counseling centers need to engage in service evaluation, link results to accountability needs, and strive to overcome common internal obstacles encountered in conducting evaluation studies. There are additional important reasons to evaluate university counseling center services including: providing counselors with direct feedback, quality assurance, appropriately retaining students, and the professional development of the staff involved in the evaluation project.

During these times of decreasing budgets, increased caseloads, clients with more severe problems, and decreasing staff sizes, it is often difficult to make time to conduct evaluation studies. If these factors are combined with low staff interest or expertise in research and evaluation activities, it becomes an almost insurmountable task to complete a study of the services provided. In addition, often data that is collected is not used. Results of
evaluation studies may not be compiled, reported, read, or discussed in any systematic manner by counseling services staff or others.

The purpose of this paper is to summarize and discuss what we learned from conducting counseling services evaluation studies in 1987, 1990, 1991, and 1993. A brief summary of the data collected and findings of the four surveys are presented below.

**METHOD**

The 1987 survey (Misner & Rapaport, 1988) was a comprehensive effort to obtain data from 1,000 students living on campus. The following three surveys (1990, 1991, & 1993) used a brief format of 50 items, focusing on current counseling center clients. This brief format survey instrument was developed after consultation with various counseling center directors in the Midwest. This survey provided demographic, general (center-wide), and individual counselor feedback on client satisfaction. All potential respondents were informed that their participation in the survey was optional, and that their decision to participate or not to participate in the study would not affect their receiving counseling services. Clients completed the survey in about 10 minutes.

The number of respondents for each of the surveys were as follows: 1987, n=112 for users and n=324 for non-users; 1990, n=116; 1991, n=109; 1993, n=150; for a total of 487 respondents who had used counseling services. All surveys were conducted during the spring semester. Data collection for the last two studies was expanded from one to two weeks to provide an opportunity for input from clients seen biweekly. For the 1990 and 1991 studies students were given the option of returning questionnaires through the campus mail. For the 1993 study, students were asked to complete the questionnaire prior
to their counseling session if they were an ongoing client, and immediately following their session if they were new to the center.

RESULTS

The 1987 survey respondents were primarily freshmen and sophomores as expected, since students living on campus were surveyed. Seventy-four percent were women. Respondents to the three subsequent surveys were primarily juniors and seniors, and between 75% to 83% were women. Most respondents were single, Caucasian, and women; somewhat similar to the overall demographics of annual counseling center users. Respondents were typically referred by "a friend," by a direct referral from an individual or office, or had learned about the counseling center from a brochure or a flyer. The student newspaper and campus phone book were least frequently cited as referral sources.

Clients were asked to rank their presenting problems if they had addressed more than one concern in counseling. Depression and self-esteem were ranked highest in 1990, anxiety/stress in 1991, and relationship issues and self-esteem in 1993. For all surveys, the most frequently listed personal concerns were: anxiety or stress, depression, self-esteem, relationship issues, and family problems.

Typically respondents said they had been seen for brief counseling which is consistent with center policy. The more recent studies seemed to show a trend of a greater number of personal counseling sessions among respondents. This may be the result of the center no longer being primarily responsible for academic advising. In the 1987 study 79% of respondents had completed one to five counseling sessions, 15% six to ten sessions, and
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6% more than 11 sessions. In the later studies the percentage of students receiving one to five counseling sessions decreased to a range of 61% to 67%, and the frequency of more than 11 sessions increased to a range of 21% to 24%.

All studies indicated that in general the students were satisfied with their counselor and the counseling they received, and felt welcomed by the receptionist. Many students felt counseling had helped them academically and may have been a contributing factor in their ability to stay in school. For example, in response to an open ended question that asked "Has your counseling experience helped you progress or stay in school?" an increase in affirmative responses was observed from 64% in 1990 to 74% in 1993. The three most positive responses (all with means of 4.7 on the five point Likert type scale) were items which indicated that respondents would recommend the counseling center to a friend, would return if further help was needed, and believed that the counseling center provided needed services to students. Not all respondents were positive, however, and some negative comments were made pertaining to specific situations or individual treatment. For example, many students stated that the physical layout of the waiting area lacked privacy.

Reviewing client satisfaction feedback on individual counselors based on 20 items using a 5 point Likert type scale, strong student responses were seen on "Allowed me to express my thoughts and feelings" (M=4.69), "Listened to what I had to say" (M=4.67), and "I am satisfied with the relationship I had with my counselor" (M=4.65). These results are consistent with Bishop and Walker (1990) who studied the relationship between counseling and retention. They found that the following components of a counseling relationship
improved retention: having someone to listen, helped in organizing my thinking, and receiving personal support in dealing with problems.

DISCUSSION

The 1990 survey provided a core group of items for assessing client satisfaction with counseling which could be added to as needed. For example, on the 1991 survey additional items were added concerning student responses to being placed on a waiting list, and requested groups and services. In 1993 added questions concerned student awareness of new counseling center policies and whether or not written policy statements were read. The 1993 survey was structured so that individual analysis of "walk-in" and "ongoing" clients was possible.

Conducting a satisfaction survey must be made a priority or it will not happen. The demands of providing direct clinical services make it difficult to make the time to conduct an evaluation or accountability study. Gaining the support and cooperation of all counselors and support staff is essential for an effective study. The data collection method we used for the 1990, 1991, and 1993 studies required counselors to remind students about the study and to give the questionnaire to walk-in clients. Support staff gave all other respondents the questionnaire. Without input and cooperation from these individuals the studies literally could not be completed. Cooperation also involves soliciting input and reactions to the questionnaire from all those individuals expected to use the data collected.

Writing up the results of the study can take considerable time. Steps need to be taken to simplify report writing as much as possible, make the report brief, and include
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narrative, tables, or graphs as appropriate. Consequently, for the 1993 study a one page "executive summary" of findings was prepared. Since preparing even a brief report can be time consuming, we also instituted a "tear-off" page of counselor specific information for our 1993 study. It was photocopied, so that a complete data set was maintained, and given immediately to counselors.

Taking time to thoughtfully discuss study results as a staff is essential. Time must be scheduled to do this, otherwise day to day demands may interfere with thoughtful consideration of what can be learned from study results.

Finding a staff member interested in coordinating the study's implementation is often difficult. Counselors may not feel comfortable with their data collection skills, feel overwhelmed by these kinds of projects, or not believe they can devote the time necessary to conduct a study in a competent and professional manner. Simplifying the process as much as possible and rotating responsibility for project implementation among interested counselors has been quite effective at our center. Each time the project is implemented the person responsible has a good foundation upon which to build and to make his or her own unique contributions.

Large survey studies of the campus can be very time consuming. Smaller and more focused studies tend to be more manageable. Developing a planning timetable concerning when satisfaction studies are conducted, reported, and discussed is a practice we plan to strengthen. This will allow us to be more systematic in our ability to respond to changing student preferences and needs.
As a result of conducting these evaluation studies, we have learned that brief client surveys: (1) are valuable in documenting the counseling center's effectiveness for accountability, (2) provide individual counselors with client feedback, (3) facilitate counseling service revision, and (4) led us to examine the satisfaction of special populations like minority or non-traditional clients. Client satisfaction research has become an important resource for review of our counseling center operation and program development. Copies of the brief survey instrument and executive summary can be obtained by contacting the first author.
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References


