

Patients' Perceptions of the Effectiveness of Counseling Therapy: A Qualitative Study in Mental Health Services

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Abstract

The evaluation of counseling therapy effectiveness in mental health services has traditionally relied on clinically defined and professionally driven outcome indicators, often marginalizing patients' subjective experiences. This study aims to explore how patients perceive and construct the effectiveness of counseling therapy, identify relational and contextual factors shaping these perceptions, and analyze their implications for therapeutic continuity. Using a qualitative approach with an interpretative phenomenological design, data were collected through in-depth semi-structured interviews with patients who had undergone at least three counseling sessions in mental health service settings. The data were analyzed thematically through iterative coding and interpretative processes. The findings reveal that patients conceptualize therapeutic effectiveness as a multidimensional and dynamic experience encompassing emotional validation, enhanced self-understanding, relational trust, and contextual relevance, rather than symptom reduction alone. The quality of the therapeutic relationship and service context emerged as central determinants shaping patients' perceptions. Positive perceptions were found to foster sustained engagement and real-life application of therapeutic insights, whereas negative perceptions contributed to therapy dropout despite clinical improvement. The study concludes that integrating patients' subjective perspectives into the evaluation of counseling therapy is essential for improving service quality, therapeutic continuity, and patient-centered mental health care.

Keywords: counseling effectiveness; mental health services; patient perception; qualitative study; therapeutic relationship

Introduction

Over the past two decades, global awareness of mental health has increased substantially, accompanied by expanded access to mental health services across diverse healthcare systems. International initiatives led by the World Health Organization and national governments have emphasized the integration of mental health into primary care, community-based services, and specialized clinical settings. This expansion has been driven by the rising prevalence of common mental health conditions such as anxiety, depression, and stress-related disorders, as well as by growing recognition of mental health as a fundamental component of overall well-being.



Empirical evidence from various countries demonstrates that access to counseling and psychological therapies has improved, particularly within institutional healthcare settings, universities, and primary care clinics (Caldarelli et al., 2024; Aljohani, 2025). However, despite these advances, critical questions remain regarding how the effectiveness of counseling therapy is understood, evaluated, and experienced by those who receive it.

In many contemporary mental health systems, the evaluation of counseling therapy effectiveness continues to be dominated by professionally defined and clinically measurable indicators. Symptom reduction, diagnostic remission, standardized outcome scores, and clinician-rated assessments remain the primary benchmarks for determining therapeutic success (Carr et al., 2023; Kvestad et al., 2024). While such indicators are undoubtedly valuable for evidence-based practice and policy accountability, they offer a partial and potentially reductive understanding of therapeutic effectiveness. Increasingly, scholars have argued that these measures insufficiently capture the subjective, relational, and experiential dimensions of therapy that are central to patients' lived realities (Boswell et al., 2021; Morgan et al., 2023). As a result, a disconnect often emerges between what is clinically classified as "effective" and what patients themselves perceive as meaningful or beneficial.

From the patients' perspective, counseling therapy is not merely a technical intervention aimed at symptom alleviation but a deeply personal and relational process. Qualitative studies have shown that patients frequently evaluate therapy based on whether they feel heard, understood, emotionally validated, and respected within the therapeutic relationship (Li et al., 2024; Sharkiya, 2023). These experiential dimensions, although difficult to quantify, play a crucial role in shaping patients' engagement, motivation, and willingness to continue therapy. When patients perceive therapy as ineffective, regardless of measurable clinical improvement, they may disengage, discontinue treatment, or lose trust in mental health services altogether (Grady et al., 2023a; Grady et al., 2023b).

The significance of patients' perceptions becomes even more apparent when considering therapy adherence and long-term outcomes. Research consistently indicates that patients' subjective evaluations of therapy influence attendance consistency, openness during sessions, and the application of therapeutic insights in everyday life (Khosravi et al., 2024; Stolper et al., 2022). Conversely, negative perceptions, such as feeling misunderstood, judged, or mismatched with the therapist's approach, are strongly associated with premature termination or dropout, even in cases where clinical indicators suggest progress (Morgan et al., 2023; Rutten et al., 2025). These findings highlight that patients' perceptions are not peripheral but central to the sustainability and effectiveness of therapeutic processes.

Despite this growing recognition, existing research on counseling therapy effectiveness remains disproportionately quantitative in orientation. Large-scale surveys, randomized controlled trials, and outcome-based studies continue to dominate the literature, particularly within clinical psychology and psychiatry (Carr et al., 2023; Olusola et al., 2024). While these studies provide valuable insights into efficacy across populations, they often overlook the nuanced ways in which patients interpret and make sense of their therapeutic experiences. As Demazure et al. (2021) note, patients' voices are frequently marginalized in evaluative frameworks that prioritize standardized metrics over narrative meaning.

A review of recent literature further reveals notable gaps in how patient perceptions of



counseling effectiveness are conceptualized and explored. First, Boswell et al. (2021), in their study *A Multimethod Study of Mental Health Care Patients' Attitudes Toward Clinician-Level Performance Information*, primarily examined patients' attitudes toward performance metrics rather than their lived experiences of therapy itself. Although informative, the study remained anchored in evaluative attitudes rather than experiential meaning-making. Second, Morgan et al. (2023), in *What Should Inpatient Psychological Therapies Be For?*, explored service users' views on therapeutic outcomes within inpatient settings but did not specifically investigate how patients define or construct the notion of "effectiveness" in counseling processes. Third, Li et al. (2024), through *Patient Experiences of Helpful and Unhelpful Psychotherapy*, offered rich qualitative insights into therapy experiences; however, their focus centered on perceived helpfulness rather than a broader conceptualization of effectiveness that includes relational, contextual, and continuity-related dimensions. Collectively, these studies demonstrate that while patient experiences are increasingly acknowledged, there remains limited qualitative inquiry into how patients themselves define and interpret therapeutic effectiveness as a multidimensional and contextually embedded phenomenon.

Furthermore, existing studies often underexplore the relational and contextual factors that shape patients' perceptions. Elements such as therapist empathy, trust, consistency of care, accessibility of services, and alignment between patient expectations and therapeutic approaches are frequently mentioned in passing but rarely examined as central analytical categories (Kirk et al., 2023; Seaward et al., 2021). Additionally, contextual conditions, including institutional constraints, environmental comfort, and systemic pressures on therapists, can indirectly influence patients' experiences yet remain insufficiently theorized within effectiveness evaluations (Last et al., 2024).

In light of these gaps, there is a pressing academic and practical need to reconceptualize the evaluation of counseling therapy effectiveness from a patient-centered perspective. Understanding how patients themselves construct meaning around effectiveness offers critical insights for refining therapeutic practice, enhancing service quality, and fostering more sustainable mental health interventions. Such an approach aligns with contemporary movements toward patient-centered care and participatory evaluation in mental health services (Cuperfain et al., 2021; Khosravi et al., 2024).

This study seeks to address these gaps by adopting a qualitative, interpretative approach to explore patients' perceptions of counseling therapy effectiveness within mental health services. The novelty of this research lies in its explicit focus on patients' meaning-making processes rather than predefined clinical outcomes. By foregrounding patients' narratives, this study aims to illuminate how effectiveness is understood in terms of emotional validation, relational quality, personal transformation, and therapeutic continuity. Accordingly, the study aims to (1) explore how patients interpret and define the effectiveness of counseling therapy, (2) identify relational and contextual factors that shape these perceptions, and (3) analyze the implications of patients' perceptions for the continuity and success of therapeutic processes within mental health services.



Research methods

This study employed a qualitative research approach with an interpretative phenomenological design to capture the lived experiences and subjective meanings constructed by patients undergoing counseling therapy. This approach was chosen to allow an in-depth exploration of how individuals make sense of their therapeutic experiences, particularly regarding perceptions of effectiveness, beyond measurable clinical outcomes (Creswell & Poth, 2018). The phenomenological orientation emphasizes participants' first-person accounts while acknowledging the interpretative role of the researcher in contextualizing these narratives within broader conceptual frameworks.

Participants were patients receiving mental health counseling services who had completed a minimum of three therapy sessions, ensuring sufficient exposure to the therapeutic process. A purposive sampling strategy was employed to capture variation in therapeutic experiences, including differences in therapy duration, presenting concerns, and service settings. The study was conducted across mental health service facilities, including clinics, hospitals, and psychological service centers, to reflect diverse therapeutic contexts.

Data were collected primarily through semi-structured, in-depth interviews designed to elicit rich narratives of patients' experiences with counseling therapy. Interview questions focused on participants' understandings of therapeutic effectiveness, perceived changes, relational dynamics with therapists, and factors influencing their willingness to continue therapy. Where feasible, limited observational notes on therapeutic interactions and reflective documentation, such as therapy notes or patient journals, were used to complement interview data. Data analysis followed a thematic analysis process involving open, axial, and selective coding, with iterative movement between empirical data and conceptual interpretation. To ensure analytical rigor, credibility was enhanced through data triangulation and member checking, while dependability and confirmability were supported through audit trails and researcher reflexivity.

Results and Discussion:

The Subjective Construction of Counseling Therapy Effectiveness from Patients' Perspectives

Patients' perceptions of counseling therapy effectiveness emerge as complex, multidimensional constructions that extend far beyond symptom reduction or diagnostic improvement. Consistent with qualitative mental health literature, this study indicates that patients predominantly define effectiveness through experiential and interpretative dimensions, particularly changes in self-understanding, emotional acceptance, and perceived personal growth. This finding aligns with Morgan et al. (2023), who argue that service users often conceptualize therapeutic success in terms of meaning-making and psychological integration rather than measurable clinical endpoints.

A recurring theme in patients' narratives is the perception that effective therapy facilitates deeper self-awareness. Participants described therapy as effective when it enabled them to reinterpret past experiences, recognize emotional patterns, and develop new ways of relating to themselves and others. Such interpretations resonate with Li et al. (2024), who found that patients frequently evaluate psychotherapy based on whether it feels "tailored" to their personal narratives rather than standardized treatment protocols. This reinforces the argument that



effectiveness, from a patient-centered perspective, is intrinsically linked to the subjective sense of being understood as a unique individual rather than as a diagnostic category.

Emotional validation emerged as another central component of perceived effectiveness. Patients repeatedly emphasized the importance of feeling heard, acknowledged, and emotionally legitimized during counseling sessions. These findings are consistent with Sharkiya (2023), who highlights that high-quality communication and empathetic engagement significantly influence patients' perceptions of care quality and therapeutic benefit. Emotional validation not only contributed to patients' immediate sense of relief but also fostered trust and openness, enabling deeper therapeutic engagement over time. In contrast, when patients perceived a lack of empathy or felt emotionally dismissed, they tended to question the overall value of the therapy, regardless of any observable symptom improvement.

Importantly, patients' constructions of effectiveness were deeply contextual and shaped by their psychosocial backgrounds. Factors such as prior experiences with mental health services, cultural norms surrounding emotional expression, and personal expectations of therapy influenced how effectiveness was interpreted. Demazure et al. (2021) similarly observed that marginalized or vulnerable populations often bring distinct interpretative frameworks to mental health services, affecting how therapeutic outcomes are perceived. This suggests that effectiveness cannot be universally defined but must be understood as situational and embedded within individual life contexts.

Another salient finding concerns the temporal dimension of perceived effectiveness. Patients rarely described effectiveness as an immediate outcome; instead, they viewed it as an evolving process marked by gradual changes in perspective, coping capacity, and emotional resilience. This aligns with Grady et al. (2023a), who note that patients often experience therapeutic progress as non-linear and cumulative. Consequently, therapies that emphasize short-term outcome metrics may fail to capture meaningful forms of progress that patients themselves value.

At the same time, patients did not entirely dismiss clinical improvements. Rather, symptom reduction was often described as a secondary or reinforcing indicator of effectiveness, meaningful insofar as it was accompanied by subjective insight and emotional clarity. This finding supports Khosravi et al. (2024), who argue for a balanced integration of clinical outcomes and experiential dimensions within patient-centered mental health evaluation frameworks. Patients' narratives suggest that when clinical improvements occur without corresponding subjective meaning, therapy may still be perceived as incomplete or insufficient. Overall, this subdiscussion underscores that patients construct counseling therapy effectiveness through interpretative processes grounded in lived experience. Effectiveness is understood not as a fixed endpoint but as a dynamic interplay between emotional validation, self-understanding, contextual relevance, and perceived personal transformation. These findings directly address the study's first research objective by illuminating how patients themselves define and make sense of therapeutic effectiveness within mental health services.



Relational and Contextual Factors Shaping Patients' Perceptions of Counseling Therapy Effectiveness

Beyond subjective meaning-making, patients' perceptions of counseling therapy effectiveness are profoundly shaped by relational and contextual factors embedded within the therapeutic environment. Among these, the quality of the therapeutic relationship consistently emerged as the most influential determinant of perceived effectiveness. Patients described trust, empathy, consistency, and a non-judgmental stance as foundational to their evaluation of therapy, corroborating extensive literature on the centrality of the therapeutic alliance (Grady et al., 2023b; Kirk et al., 2023).

Trust was frequently identified as a prerequisite for therapeutic effectiveness. Patients reported that trust enabled vulnerability, honesty, and emotional risk-taking, all of which were perceived as essential for meaningful therapeutic work. This finding aligns with Seaward et al. (2021), who emphasize that patients across diverse mental health settings associate professional competence with relational qualities rather than technical expertise alone. When trust was compromised, due to perceived inconsistency, perceived lack of confidentiality, or abrupt changes in therapists, patients often reassessed the effectiveness of therapy negatively, even if sessions remained technically structured.

Empathy and emotional attunement further shaped patients' experiences. Patients consistently valued therapists who demonstrated genuine understanding and emotional responsiveness. These relational qualities reinforced patients' sense of being valued and respected, thereby strengthening their engagement with therapy. Boswell et al. (2021) similarly found that patients' attitudes toward mental health services are significantly influenced by interpersonal experiences with clinicians, suggesting that relational dynamics function as implicit evaluative criteria for service quality and effectiveness.

Contextual factors related to service delivery also played a critical role. Accessibility, affordability, scheduling flexibility, and the physical environment of therapy sessions were frequently mentioned as influencing patients' perceptions. Comfortable, private, and non-intimidating settings were associated with greater openness and perceived effectiveness, consistent with findings by Kirk et al. (2023). Conversely, institutional constraints, such as limited session durations or long waiting periods, were perceived as barriers that diminished the therapeutic experience, even when the therapist-patient relationship itself was positive.

A particularly salient contextual factor was the alignment between patients' expectations and the therapeutic approach employed. Patients who entered therapy with unclear or unmet expectations often reported frustration and perceived ineffectiveness. Li et al. (2024) note that mismatches between patient expectations and therapeutic models can lead to perceptions of unhelpfulness, highlighting the importance of early expectation-setting within counseling processes. This study reinforces the idea that perceived effectiveness is not solely determined by what happens within sessions but also by how therapy is framed and communicated from the outset.

To synthesize these relational and contextual dimensions, **Table 1** summarizes key factors shaping patients' perceptions of counseling therapy effectiveness.



Table 1. Relational and Contextual Factors Influencing Patients’ Perceptions of Counseling Therapy Effectiveness

Dimension	Key Elements	Perceived Impact on Effectiveness
Therapeutic Relationship	Trust, empathy, non-judgmental stance	Enhances emotional safety and engagement
Therapist Consistency	Continuity of care, reliability	Strengthens trust and therapeutic depth
Service Accessibility	Scheduling, affordability, availability	Facilitates sustained participation
Therapeutic Environment	Privacy, comfort, emotional safety	Supports openness and self-disclosure
Expectation Alignment	Clarity of goals, shared understanding	Reduces frustration and perceived inefficacy

The analysis of Table 1 demonstrates that perceptions of effectiveness are co-constructed through interactions between interpersonal dynamics and service-level conditions. Relational factors primarily shape the emotional quality of therapy, while contextual factors determine whether patients can meaningfully engage with and sustain the therapeutic process. This dual influence echoes findings by Last et al. (2024), who argue that systemic and organizational conditions indirectly become “treatment conditions” from the patient’s perspective.

Importantly, these factors do not operate in isolation. Patients’ narratives reveal that positive relational experiences can sometimes mitigate contextual limitations, such as limited session frequency, while negative relational dynamics can overshadow otherwise well-resourced services. This interplay underscores the need for holistic evaluation frameworks that integrate relational quality and service context into assessments of counseling therapy effectiveness. By identifying these relational and contextual determinants, this subdiscussion directly addresses the study’s second research objective. It highlights that patients’ perceptions of effectiveness are not merely individual judgments but reflections of broader relational and institutional arrangements within mental health services.

Implications of Patients’ Perceptions for the Continuity and Success of the Therapeutic Process

Patients’ perceptions of counseling therapy effectiveness have substantial implications for the continuity and long-term success of therapeutic processes within mental health services. This study demonstrates that perceptions of effectiveness function not merely as retrospective evaluations but as dynamic forces that shape patients’ ongoing engagement, commitment, and behavioral integration of therapeutic insights. These findings reinforce the argument that effectiveness is not an outcome isolated at the end of therapy, but a continuously negotiated experience that influences whether therapy is sustained or prematurely discontinued (Morgan et al., 2023).

One of the most salient implications concerns therapy adherence and continuity. Patients who perceived counseling as effective, defined through emotional validation, relational trust, and personal meaning, expressed stronger motivation to continue therapy despite emotional



discomfort or slow progress. This observation aligns with Grady et al. (2023a), who found that patients' subjective sense of progress often sustains engagement even when challenges persist. In contrast, when patients perceived therapy as ineffective or emotionally misaligned, disengagement frequently occurred regardless of objective clinical improvement. Such findings underscore that patients' perceptions act as mediating variables between therapeutic input and sustained participation.

The role of perception in shaping therapeutic commitment also has implications for treatment outcomes beyond the clinical setting. Patients who perceived therapy as meaningful reported greater willingness to apply therapeutic insights in daily life, such as practicing coping strategies, reframing negative thoughts, or improving interpersonal relationships. This aligns with Khosravi et al. (2024), who argue that patient-centered care enhances the translation of therapeutic gains into everyday functioning. In this sense, perceived effectiveness operates as a catalyst for behavioral change, amplifying the real-world impact of counseling interventions.

Conversely, negative perceptions of effectiveness were associated with heightened risk of therapy dropout. Participants described discontinuing therapy when they felt misunderstood, emotionally invalidated, or misaligned with the therapist's approach. This finding is consistent with Li et al. (2024), who emphasize that perceptions of unhelpfulness often stem from relational ruptures rather than therapeutic content alone. Importantly, such dropout occurred even in cases where standardized outcome measures indicated clinical improvement, suggesting a critical mismatch between professional evaluations and patient experiences.

Patients' perceptions also emerged as implicit evaluative frameworks through which mental health services are judged. Rather than relying on formal outcome measures, patients assessed effectiveness through experiential indicators such as emotional safety, relational consistency, and perceived relevance of therapy to their lived contexts. Boswell et al. (2021) similarly note that patients' attitudes toward mental health services are shaped by experiential quality rather than abstract performance indicators. This finding suggests that patient perceptions can serve as valuable qualitative indicators of service quality that complement, rather than replace, quantitative outcome measures.

At an institutional level, these findings have implications for how effectiveness is conceptualized and monitored within mental health services. Measurement-based care initiatives increasingly incorporate patient-reported outcome measures (PROMs) and patient-reported experience measures (PREMs), yet qualitative dimensions of patient perception remain underutilized (Roos et al., 2025; Cuperfain et al., 2021). This study suggests that without systematically engaging with patients' narratives, evaluative frameworks risk overlooking critical determinants of therapeutic continuity and success.

Furthermore, patients' perceptions are shaped by broader systemic and contextual factors, including service accessibility, continuity of care, and organizational constraints affecting therapists' working conditions. As Last et al. (2024) argue, institutional pressures indirectly become treatment conditions from the patient's perspective. When patients perceive services as rushed, inconsistent, or constrained, these conditions may undermine perceived effectiveness regardless of therapist competence. Thus, improving therapeutic outcomes requires not only enhancing individual therapist skills but also addressing systemic factors that shape patients' experiences.



Overall, this subdiscussion demonstrates that patients' perceptions of counseling therapy effectiveness have far-reaching implications for therapeutic continuity, real-life application of therapeutic gains, and service evaluation. By centering patients' subjective experiences, mental health services can better understand the mechanisms through which therapy succeeds or fails beyond clinical metrics alone. These findings directly address the study's third research objective by elucidating how patient perceptions influence the sustainability and perceived success of therapeutic processes.

Conclusion

This study demonstrates that patients' perceptions of counseling therapy effectiveness are inherently multidimensional and cannot be reduced to clinical indicators such as symptom reduction or diagnostic improvement alone. Patients construct effectiveness through subjective experiences of emotional validation, relational trust, personal meaning, and contextual relevance. These findings challenge outcome-dominated evaluation models and underscore the importance of integrating experiential dimensions into conceptualizations of therapeutic effectiveness.

Relational factors, particularly the quality of the therapeutic alliance, emerged as central determinants shaping patients' perceptions. Trust, empathy, consistency, and alignment of expectations were found to be more influential than technical interventions in shaping patients' judgments of effectiveness. At the same time, contextual and institutional conditions, such as accessibility, service continuity, and environmental comfort, significantly influenced patients' experiences and engagement. These findings highlight that therapeutic effectiveness is co-produced through interpersonal relationships and service-level arrangements.

From a theoretical perspective, this study contributes to patient-centered mental health scholarship by foregrounding patients' meaning-making processes as legitimate evaluative criteria. Practically, the findings suggest that mental health services should integrate structured yet flexible mechanisms for eliciting and responding to patients' subjective feedback. Incorporating patients' perceptions into routine evaluation practices may enhance therapeutic continuity, reduce dropout rates, and ultimately improve the quality and sustainability of counseling services.

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