

Importance of Choice of Provider and Treatment

Choice is vital to recovery for those with behavioral health issues. As new forms of health care delivery and payment are implemented, it is important that consumer choice be protected in order to improve and sustain the efficacy of treatment.

Choice of Provider

The relationship between those rendering services and those receiving services is key to the delivery of quality and effective health care. Quality outcomes stem from the therapeutic alliance, or trust formed between the client and clinician, which allow them to collaborate effectively, overcome obstacles, and work together towards the client's agreed-upon long-term goals.¹

- Research over the past several decades has demonstrated that the therapeutic alliance to be a strong forecaster of positive outcomes.²
- Clients that have weaker therapeutic alliances with their clinician were more likely to drop out of psychotherapy.³
- Patient experience of a provider's services is closely linked to both adherence to recommended treatment and to outcomes.⁵

Choice of Treatment

Not only is choice of provider important to the recovery process, but choice of treatment by individuals receiving services improves health care delivery and outcomes. By giving individuals choice of treatment, it empowers them and improves their engagement with services. Studies show that choice of treatment is linked with an increased likelihood of remaining in treatment and of recovery.

- Within the older adult population, individuals who were given a choice of treatment options were less likely to drop out of treatment prematurely.⁶
- Individuals who received their preferred treatment were half as likely to drop out of treatment as those who did not receive their preferred treatment, and also had a higher probability of showing greater improvement on the road to recovery than individuals who did not receive their preferred treatment.⁸
- Individuals experiencing a phobia who were able to choose their treatment from a list of alternatives scored significantly higher on a behavioral scale after treatment than their peers with no choice.¹⁰

¹ G. Tryon and A. Kane, *The Helping Alliance and Premature Termination*, 3 *Counseling Psychology Quarterly* 233-238 (1990).

² J. Safran, et al., *Alliance, Negotiation and Rupture Resolution*, in *Handbook of Evidence Based Psychodynamic Therapy*, at 208 (2009) ("the quality of the patient-therapist relationship is more important than the treatment modality").

³ J. Sharf, et al., *Dropout and Therapeutic Alliance: a Meta-Analysis of Adult Individual Psychotherapy*, 47 *Psychotherapy Theory, Research, Practice, Training*, 637-645 (2010).

⁵ C. Dolyle, et al., *A systematic review of evidence on the links between patient experience and clinical safety and effectiveness*, <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3549241/> (Jan. 2013).

⁶ P. Rokke and et al., *The Role of Client Choice and Target Selection in Self-management Therapy for Depression in Older Adults*, 14 *Psychology and Aging* 155-169 (1999).

⁸ J. Swift and J. Callahan, *The impact of client treatment preferences on outcome: a meta-analysis*, 65 *J. Clinical Psychology* 368-381(2009).

¹⁰ D. Devine and P. Fernald, *Outcome effects of receiving a preferred, randomly assigned, or nonpreferred therapy*, 41 *J. Counseling and Clinical Psychology* 104-107 (1973).