INTRODUCTION

- Premature termination limits therapy clients’ potential improvement and causes inefficient use of clinic resources.
- At least 20-48% of clients terminate therapy prior to achieving significant therapeutic gains, and these rates of premature termination vary depending on its operational definition and the nature of the treatment setting.
- An increasing amount of college students are experiencing mental health problems due to social, academic, financial, and developmental pressures within college life, and the transition to independence.
- University clinics face unique challenges in premature termination, which are compounded when clientele includes both college and community members.
- Prior studies have defined premature termination by means of:
  - Therapist judgment
  - Failure to attend the last scheduled appointment
  - Median-split procedure
  - Failure to return to therapy after intake
- Each of these methods presents interpretation problems. It may be more meaningful to examine details about the end of therapy.
- Current Study
  - We examined predictors of clients’ termination circumstances. Specifically, we investigated the extent to which client factors or therapy process were related to the length of therapy, who initiated termination, and reason for termination.
  - Understanding barriers to therapy retention may inform interventions to improve engagement in treatment.

METHODS

- Archival data was reviewed from closed adult case files (N=114) from a university-based psychology clinic.
- The clients (71% female, Mean age=32.03, SD = 13.08) sought therapy at the clinic between 2007-2013, with an average of 3.4 presenting concerns (see further demographics in Table 2).
- A coding manual was developed a priori to allow for more efficient reviews of progress notes, psychotherapy report[s], initial telephone screening and other documentation.
- Predictors included:
  - Client Demographics: Education, Ethnicity, Income
  - Client Psychological History: Previous therapy, # of presenting concerns, # Axis I diagnoses, BDI score, BAI score
  - Therapeutic Process Factors: Homework Completion, Tardiness to Session
- Results of clients prior to termination were used in a series of linear, logistic, and multinomial regression analyses were conducted.
- Table 1. Significant predictors of aspects of client termination.

RESULTS

- Clients reported moderate symptoms of anxiety (mean BAI = 18.4) and depression (mean BDI-II = 22.2) upon initiating therapy.
- On average, clients scheduled 16.5 sessions of individual therapy, attending a mean of 75.8% of their scheduled sessions.
- Clients initiated termination in 29.7% of cases, while 9.9% of cases were terminated via therapist initiative and 33.9% were terminated based on mutual agreement on discontinuing treatment.

CONCLUSIONS

- Process and diagnostic variables, but not client demographics, were significant predictors of session attendance, agent of termination, and reasons for termination.
- Homework completion and tardiness to sessions were associated with agent of termination. Patients who were more compliant with homework were more likely to terminate mutually with their therapist, while those who were late to treatment sessions were more likely to have treatment terminated by their therapist.
- Patients with previous therapy experience were less likely to terminate therapy due to dissatisfaction with services, and patients with more Axis I diagnoses were more likely to terminate treatment due to partial remission of symptoms than due to complete remission of symptoms.
- Quality of homework completion predicted whether presenting problems were resolved, such that less homework compliance was more strongly associated with only partial symptom remission than complete symptom remission.