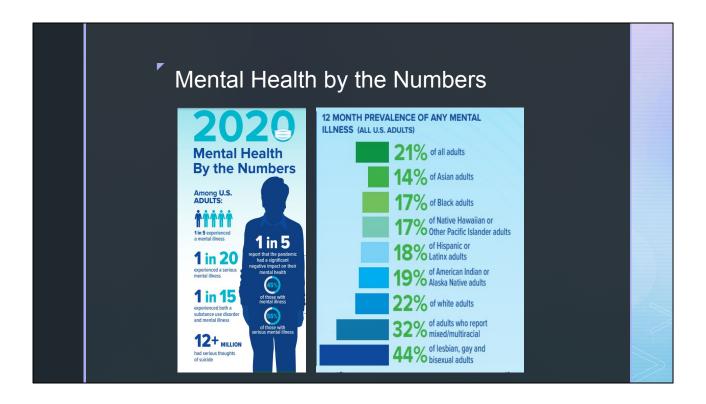


Intended Audience : Executives in charge of customer retention or customer experience at virtual therapy services that match patients to therapists, such as

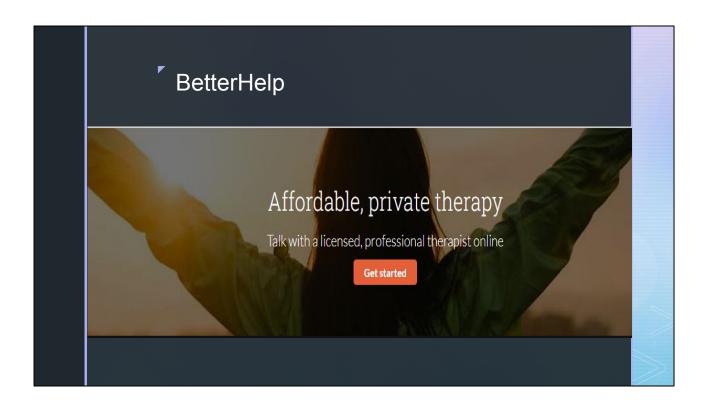
BetterHelp

Date: 13th April, 2022

Team Members: Daniele Grandi, Kelianne Heinz, Laban Anunda, Srila Maiti



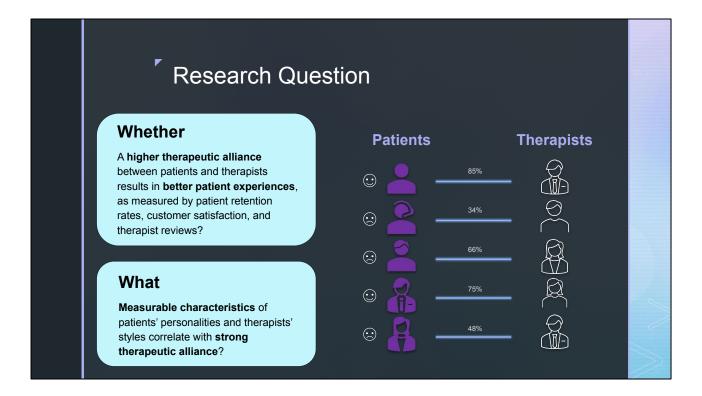
Mental health is important at every stage of life, from childhood and adolescence through adulthood. Mental and physical health are equally important components of overall health. Most people with mental health problems can get better with the help of therapy, treatment over time. The first step is **getting help.**



BetterHelp is the world's largest online therapy platform working towards making professional therapy accessible, affordable, and convenient — so anyone struggling with life's challenges can get help, anytime and anywhere through their platform from the licensed, trained, experienced, and accredited psychologists, therapists, clinical social workers and board licensed professional counselors.



The value of therapy can be heavily dependent on the quality of the relationship between patient and therapist, known as the "therapeutic alliance". The therapeutic alliance represents the collaboration and partnership of the therapist and patient in working towards achieving the patient's mental health goals, and a strong therapeutic alliance results in improved patient outcomes. Two important indicators of therapeutic alliance strength include patient satisfaction with their care, and patient attendance to follow-up appointments (also known as retention).



With this study, we would like to understand whether a higher therapeutic alliance between patients and therapists results in better patient experiences.

And we are measuring patient experience with some business metrics like retention rate, customer satisfaction, and therapist reviews.

Secondly, while there is some literature that talks about what characteristics of patients and therapists correlate with strong therapeutic alliance, we would like to dig deeper into this question and validate these ideas within our business model.

Study Design

Exploratory sequential mixed methods design: The initial initial qualitative stage will inform the second quantitative stage.

Part 1

Interviews with therapists and patients.

 We will also consider focus groups with patients.

Part 2

Surveys

- We will use the exploratory sequential mixed methods approach. We will
 conduct interviews with therapists and patients in the first phase and this will
 inform the survey questions in the second phase.
- Prior to conducting the interviews, the research team will review existing online reviews of BetterHelp to understand the existing feedback of customers and to tailor the focus of the interviews and focus groups.
- The attributes of interest, which will be identified in phase 1, will be quantified with patient and therapist participants using surveys.

Data

Part 1

- Qualitative review of current patient experience and perception.
- Qualitative interviews with patients and therapists.



Part 2

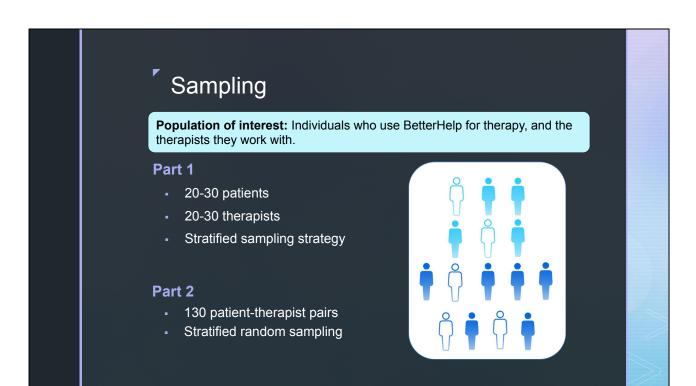
- Attributes measured in participating therapist and patient pairs.
- Age and gender of participants.
- Therapeutic alliance of each pair quantified.

In Part 1 of the study, we will collect existing qualitative data on patient experience and perception through public sources such as social media posts and customer reviews, and through BetterHelp's customer feedback. This data will help inform themes to focus on in the next portion of Part 1, where we will conduct interviews or focus groups with patients and therapists to collect data on attributes participants believe impact therapeutic alliance strength.

In Part 2, we will measure the attributes identified through analysis of part 1 data in participating therapist and patient pairs. We will also collect the age and gender of participants. Finally, we will quantify the therapeutic alliance of each pair using surveys designed to measure alliance strength (based on existing methodologies), and BetterHelp's existing customer satisfaction and retention analytics.

Potential image source:

https://blog.optimalworkshop.com/qualitative-research-methods/



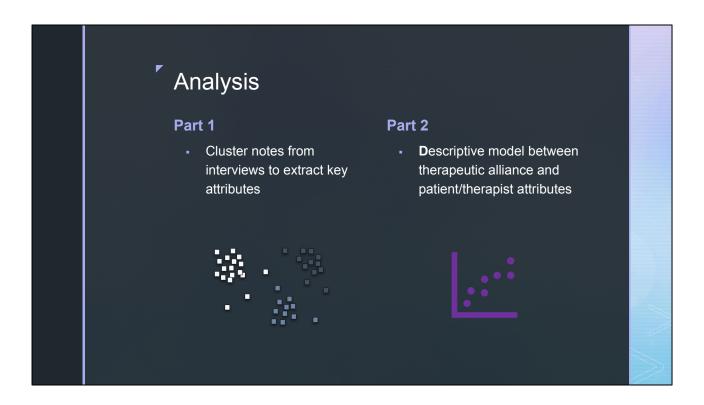
For this study, our population of interest is all individuals who use BetterHelp for therapy, and the therapists they work with.

To collect our part 1 qualitative data, we will interview 20-30 patients and 20-30 therapists selected using a stratification sampling strategy to ensure diverse and representative viewpoints are captured. Our sampling frame will be the patients and therapists present in BetterHelp's user and employee database.

To collect our part 2 quantitative data, we will select at minimum 130 patient-therapist pairs using stratified random sampling from BetterHelp's employee database and the set of users who have signed up for the service but have yet to have an appointment with a therapist.

Image source:

https://www.qualtrics.com/experience-management/research/stratified-random-sampling/



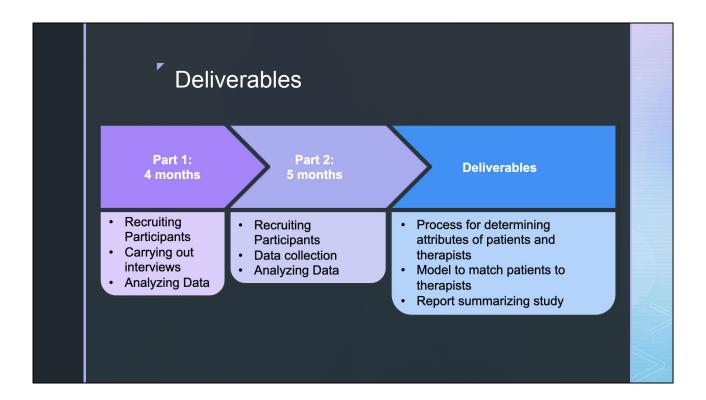
In this study, we are going to collect a lot of data. How we are going to analyze it?

For part 1, each interviewer will write down a set of attributes that have emerged from the interviews. Then, the team will go through a clustering exercise to identify themes, and arrive at a consensus regarding which attributes are the most important and measurable.

In part 2, we will use linear regression analysis to build a descriptive model to describe how therapeutic alliance is related to the attributes that we identified in part 1.

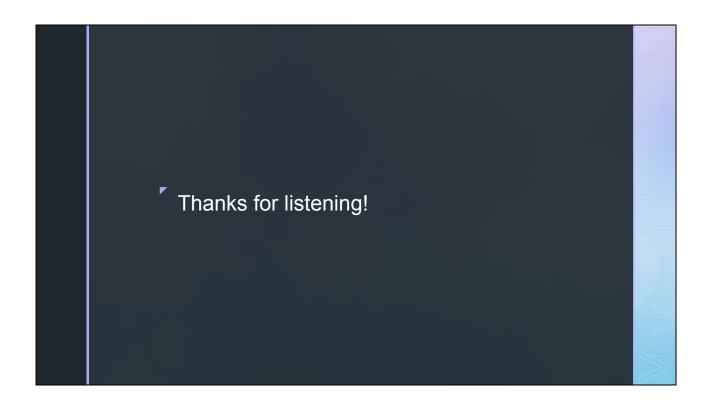


- Even though we are getting informed consent from participants and we're being guided by the Belmonte report guidelines, there might be some ethical risks that we might not be aware of at the moment. There could also be:
- Data Bias: Since the sampling frame is BetterHelp's database, findings from the data may not be applicable beyond Better Help, i.e. findings will only be applicable to Better Help patients and therapists.
- Overrepresentation and underrepresentation of particular groups within the data: If BetterHelp is popular with a certain gender and/or age, there's risk of other groups not being represented in the sample.
- During the interview process, the open ended questions need to be very clearly phrased to avoid any biases that may arise.
- Some patients might not be willing to participate in the study if they think there's stigma associated with mental health. There is therefore a risk of not being able to analyze a sufficient sample size for both part 1 (qualitative) and part 2 (quantitative).
- **Stakeholder Expectation:** As this is an observational study, the outcome will not be immediate which might be concerning to stakeholders. Results of the study will need to be validated which might have extra time and cost implications.



The study will be carried out in two parts over an estimated 9 total months. The final deliverables for the project will be:

- Additional intake survey questions to determine the attributes of an incoming patient.
- Onboarding survey questions to determine the attributes of therapists employed by BetterHelp.
- A model to match patients to the therapist they are predicted to form the strongest therapeutic alliance with.
- A report summarizing our findings, implementation, and expected impact.



We looking forward to your questions!