Counselling and Psychotherapy Research

ORIGINAL ARTICLE ON SOCIAL INEQUALITIES

Change in symptomatic burden and life satisfaction during short-term psychotherapy: Focusing on the role of family income

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Abstract

Objective: The article examines the role of family income on the relationship between change in symptomatic burden and change in life satisfaction during six sessions of naturalistically delivered individual psychotherapy. Method: Five hundred and thirty-two clients receiving psychotherapy were assessed at baseline and on a session-to-session basis with the OQ-30.2 and with a life satisfaction questionnaire. Data were analysed using a bivariate latent class model with structured residuals that included cross-lagged and autoregressive components between residual scores at each time point. Adjusted family income and a binary low versus high-income group variable were added as exogenous baseline covariates at different stages of the analyses. Results: Regardless of income level, clients show improvement in psychological distress and life satisfaction as a function of time during treatment. Initial levels and improvement in life satisfaction are related to initial levels and improvement in psychological distress, and lower family income is related to slower decreases in psychological distress. When the whole sample is analysed, psychological distress and life satisfaction show reciprocal prospective relationships at the within-person level. When models are estimated by income group, casual relationships at the within-person level vary as a function of income. Conclusion: Family income level appears to play a significant role in the relationship between symptom improvement and life satisfaction during psychotherapy.

Keywords: psychotherapy outcome, income, life satisfaction, happiness, mixed-effects modelling

doi: 10.1002/capr.12158

Over one hundred years ago, Freud published his ‘Studies in Hysteria’ and commented that the overall purpose of psychoanalysis was to transform ‘…hysterical misery into common unhappiness’ (Breuer & Freud, 1955; p. 305). Freud argued that ‘With a mental life that has been restored to health, you will be better armed against that unhappiness’ (Breuer & Freud, 1955, p. 305). This early conceptualization of psychotherapy introduces the relationship between symptomatic relief during therapy and its potential effects on general happiness. Furthermore, it argues for a specific mechanism: psychotherapy acts primarily on symptom relief which subsequently may produce an improvement in happiness. However, more than one hundred years have passed since the formulation of this hypothesis and Freud’s proposed mechanism has not yet been empirically tested in psychotherapy studies. In terms of symptomatic relief, data support the contention that most forms of psychotherapy produce clinically meaningful change in a variety of outcomes across psychiatric diagnoses including depression (Carter et al., 2013), anxiety disorders (Cuijpers, Sijbrandij, et al., 2013) and personality disorders (Bamelis, Evers, Spinhoven & Arntz, 2014). However, compared to the evidence on the effectiveness of psychotherapy on psychiatric outcomes, much less attention has been devoted to