Compare the quality of consultation and psychotherapy government agencies and the private sector in Kurdistan province

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Abstract. Each organization for growth and progress should pay attention to self-assessment. The feedback process evaluation and quality improvement organizational weakness. This study aimed to compare the quality of consultation and psychotherapy government agencies and the private sector in Kurdistan province. The research is descriptive and comparative. The study population included all psychotherapy and counseling centers in Kurdistan and all the patients at the centers. For this purpose, the sampling method chosen 16 of them to approach the clients available, 400 people were selected from public and private facilities and questionnaire quality services with 49 question of Jafari with the reliability of 0.83 and a correlation coefficient of (Cronbach's alpha = 0.76), was carried out on them. To analyze the data independent t-test was used. The results showed that, between the quality and satisfaction of centers of consultation and psychotherapy government agencies and the private sector in Kurdistan province there is a significant difference. This means that client satisfaction was higher in finance of government agencies however in physical space, handling of personnel and equipment private sector achieved a higher rating.

1. Introduction.

Now days have many reasons to process psychotherapy and counseling are increasingly spread in the society, especially government agencies and considered as an integral part of it [19]. Counseling and psychotherapy, techniques and services that help people understand the most important means efficiency and environmental compatibility in the life and optimal growth of mind, social, and spiritual makes [12]. Due to the emergence of problems and diverse needs of today's diverse societies and their impact on people the importance and necessity of counseling and psychotherapy hundredfold in life [1]. But the basic point is that this should be proportional to the centers of this problem [11]. One of the ways that this information can be obtained from the evaluation of these centers [20]. The review has identified many weaknesses and limitations of the stations and useful guidelines to improve the quality and adaptability they provide [10]. Currently, consultants are hired in various environments, in some places, work as general counsel and in other places, to offer specialized services to specific segments of pay. Almost three-fifths of the advice students worked in public centers and %13 of them are engaged in private practice or work in the private sector and the remaining ten percent will continue to study [6]. In these centers counselors, psychotherapists and social workers provide a variety of services such as career counseling, family, health, education, addiction and balanced life help people adopt more and more successful [12] and with proper choices in different areas of his life to take more pleasure [9].

They move people in a positive and productive to earn to their potential for adaptation and socialization of power and uses [2] and with changes in their perceptions and with gain new insight in order to make positive direction in life [18]. But in any case need a consultant that works in any environment to provide their services and achieve specific goals and standards it is aware of counseling skills [21]. Equip yourself with this technics consultants provide position to develop and provide prevention and treatment of their clients and promote their career possible [13]. In fact,
these techniques are tools that a counselor or therapist use them to achieve its goals [5]. Consultant
techniques to help advisers interact with clients and it creates a memorable experience and a more
efficient and higher quality services to offer clients [4].

Rodriguez (2003) examined the effectiveness of psychological services during a period of 16
months for the 548 bodies. Assessment twice (time between treatment and after treatment) was
performed. The results show the influence of some factors related to the client and consultant skills
in the consultation process is satisfaction [16]. Wu and Leaf (2002) in a similar study to evaluate the
client satisfaction and quality of services provided. The results suggest a strong association between
factors related to consulting and factors underlying skills (of treatment) is satisfaction [22]. In
Iran Parvizi, Rahgozar, Vamaghi and Foroogh (2003), in these areas concluded that the consent of
the physical location and access and treat employees in the private sector is significantly higher than
government agencies [14].

Currently, a significant number of these centers (police, marty Foundation, welfare and
education, etc.) in the province are providing services to citizens. Increasing the number of clients
the centers of their activities is a useful indication [17]. People expect the centers with lower costs,
taking into account their satisfaction and fairness in providing consultative services and receive
appropriate services. The government is also desirable to ensure quality of service, distribution
service and to provide access to financial services for low-income people will follow [8]. In many
countries, part of the psychological and counseling services provided by the private sector and the
privatization of government support services because they believe that the privatization have a great
benefit to the government [23]. So, even though the public and private sector incentives client
satisfaction measurements are not identical, but both seem necessary [14]. The main problem of this
study is the fact that public and private counseling centers in the implementation of quality
standards advice how successful they are and whether there are differences between the
performance of these centers offer services and provide quality service possible is the difference?

2. Research Methodology.

Due to the nature of the present study, investigate is descriptive and comparative. The study
population include all centers psychotherapy and counseling in government agencies and the private
sector in Kurdistan and all visitors to the center in 1393, which should be noted that in the province,
a total of 30 Consultation Center government and 18 units private In the 5000 case that state
institutions in the province and the private sector are estimated to hold 4,000 samples of the type of
sampling procedure is available. That the cities, according to sprawl on the basis of geographical
location at the provincial level, (the city of Marivan, Saqez, Kamyaran, Qorveh and Sanandaj) were
selected. Then between the public and private centers, counseling and psychotherapy in these cities
the sample were equal selection and questionnaire was conducted.

3. Tools of data collection.

The collect data to assess the quality of consulting: questionnaire quality of consulting.

This questionnaire by Jafari and colleagues (2003) were made and came into force in Iran. The
questionnaire was designed to assess and verify 4 professors fan is located. In the initial phase
questionnaire to 10 patients in private and public institutions. The questionnaire bugs such words
and phrases that are inaudible patrons seemed to be correct. To determine reliability and test - retest
(TE TEST - RE TEST), a questionnaire with 24 questions (12 out of every group of government
agencies and private clients) were completed within two weeks Pearson correlation coefficient in
public centers (r = % 83) and in private centers (r = % 85), respectively. The correlation coefficient
of the questionnaire was calculated by Cronbach's alpha of % 76 and internal correlation coefficient
(Cronbach's alpha = 0.76) has been reported. This form of 46 questions divided into three categories
depending on which was formed the first class of the individual information such as age, sex,
education and services and asked for the second opinion researcher on the (physical structure,
appliances, consulting, quality consulting, including consulting) puts into question any of these
cases based on the 4 options next 5 (very good, good, bad, very bad) to answer is given in response to questions in the form of model (Very Good, good, bad, very bad) was performed slopes leading scores in each area is between 5 to 20 and scores of each area on the 3rd floor weak (grades 5 to 10), intermediate (grades 10 to 15) and good grades (15 to 20) division and then of quality after picking up scores of four areas mentioned in the poor category (20 to 40) average (40 to 60) and good (60 to 80) were classified and third questions, comments clients about the quality of the measures, the scale 8 questions that are easy to implement, and scored this category of client satisfaction Simply by adding the scores of the individual questions can be obtained. For each question a score between 1 and 4 in the range of scores between 8 and 23 is considered a sign that higher scores greater satisfaction.

4. Method analysis the data.

The descriptive analysis of data from deviation criterion and tables descriptive and inferential analysis to study data and research questions using T-test for independent groups was used for all the assumptions. In order to answer the questions of descriptive and inferential statistical analyzes were performed using SPSS 22 software.

5. Findings.

As shown in Table 1 (Descriptive Index), demographic data sample is provided. According to the data table (% 45.75) were males and (% 54.25) of them were women. In government agencies 140 individuals (% 35) with an age range of (21-25) years maximum and 5 of them (% 1.25) aged (36 – 40) years had the lowest prevalence of 81 persons in the private sector (% 20.25) with an age range of (21 – 25) years maximum, and 5 of them (%1.25) in the age range (31 - 35) years with the lowest prevalence in the studied sample are also examples of government agencies in 97 patients (% 24.25) with the highest education diploma and 45 of them (% 11.25) with the lowest frequency range and secondary level In the private sector, 96 subjects (% 24) with most higher education and 30 of them (% 7.5) with high school diploma have the lowest frequency of the samples studied.

<table>
<thead>
<tr>
<th>Table 1. Descriptive information statistical sample based on sexuality, age, educational between two groups</th>
<th>Government agencies</th>
<th>Private sector</th>
<th>Total percent</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>changeable</strong></td>
<td><strong>Abundance</strong></td>
<td><strong>Percent</strong></td>
<td><strong>Abundance</strong></td>
</tr>
<tr>
<td>Sexuality</td>
<td>Man</td>
<td>112</td>
<td>%28</td>
</tr>
<tr>
<td></td>
<td>Woman</td>
<td>118</td>
<td>%29.5</td>
</tr>
<tr>
<td>Age</td>
<td>16-20</td>
<td>45</td>
<td>%11.25</td>
</tr>
<tr>
<td></td>
<td>21-25</td>
<td>140</td>
<td>%35</td>
</tr>
<tr>
<td></td>
<td>26-30</td>
<td>30</td>
<td>%7.5</td>
</tr>
<tr>
<td></td>
<td>31-35</td>
<td>10</td>
<td>%2.5</td>
</tr>
<tr>
<td></td>
<td>36-40</td>
<td>5</td>
<td>%1.25</td>
</tr>
<tr>
<td>Educational</td>
<td>Secondary Diploma</td>
<td>45</td>
<td>%11.25</td>
</tr>
<tr>
<td></td>
<td>University</td>
<td>97</td>
<td>%24.25</td>
</tr>
<tr>
<td></td>
<td></td>
<td>88</td>
<td>%22</td>
</tr>
</tbody>
</table>

Table 2 show that 42 public centers in 146 patients (%36.5) with the highest number of (2 – 4) session and 30 of them (%7.5) with the number of sessions (9 - 7) with the lowest frequency in the private sector 79 of them (%19.75) with the highest number of (5 – 7) and 21of them (%5.25) with (7 -9) sessions, were the lowest frequency in the sample.
Table 2. Percentage distribution of the sample on the basis of consultations among the sample

<table>
<thead>
<tr>
<th>Number of session</th>
<th>Government agencies</th>
<th>Private sector</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>abidance</td>
<td>percent</td>
</tr>
<tr>
<td>(2 – 4)</td>
<td>146</td>
<td>%36.5</td>
</tr>
<tr>
<td>(5 – 7)</td>
<td>54</td>
<td>%13.5</td>
</tr>
<tr>
<td>(7 – 9)</td>
<td>30</td>
<td>%7.5</td>
</tr>
</tbody>
</table>

6. The inferential data.

Table 3. Compare scores of quality of services between government agencies and private sector.

<table>
<thead>
<tr>
<th>Changeable</th>
<th>Government agencies</th>
<th>Private sector</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>average</td>
<td>sd</td>
<td>average</td>
</tr>
<tr>
<td>Physical structure</td>
<td>13.12 ± 2.9</td>
<td>8 ± 1.069</td>
<td>0.001 ≤ 0.001</td>
</tr>
<tr>
<td>Advice aids</td>
<td>15.03 ± 3.87</td>
<td>11.50 ± 2.07</td>
<td>0.000 ≤ 0.001</td>
</tr>
<tr>
<td>How counseling</td>
<td>16.61 ± 1.30</td>
<td>15.62 ± 1.30</td>
<td>0/511 ≥ 0.001</td>
</tr>
<tr>
<td>Content Advisory</td>
<td>16.62 ± 1.30</td>
<td>16.12 ± 2.69</td>
<td>0/644 ≥ 0.001</td>
</tr>
</tbody>
</table>

According to Table 3, between private and public institutions in terms of providing quality physical structure there is a significant difference (p ≤ 0.001). As well as between private and public institutions in terms of providing quality advice aids, there is a significant difference (p ≤ 0.001). But between private and public institutions in terms of advice and consultation contains no significant difference (p ≥ 0.001).

Table 4. Comparison score of satisfaction of users between clients of government agencies and private sector.

<table>
<thead>
<tr>
<th>Changeable</th>
<th>Satisfaction of private sector</th>
<th>Satisfaction of government agencies</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Average</td>
<td>SD</td>
<td>Average</td>
</tr>
<tr>
<td>Quality service</td>
<td>3.16 ± 0.367</td>
<td>2.96 ± 0.548</td>
<td>P ≤ 0.05</td>
</tr>
<tr>
<td>Community Relations staff</td>
<td>3.11 ± 0.309</td>
<td>3.30 ± 0.485</td>
<td>P ≤ 0.05</td>
</tr>
<tr>
<td>Financial satisfaction</td>
<td>3.23 ± 0.522</td>
<td>2.49 ± 0.398</td>
<td>P ≤ 0.05</td>
</tr>
<tr>
<td>Tendency to refer</td>
<td>2.21 ± 0.406</td>
<td>2.69 ± 0.465</td>
<td>P ≥ 0.05</td>
</tr>
<tr>
<td>Consent to treatment</td>
<td>3.06 ± 0.54</td>
<td>3.17 ± 0.481</td>
<td>P ≥ 0.05</td>
</tr>
<tr>
<td>Reduce problems</td>
<td>2.83 ± 0.857</td>
<td>2.44 ± 0.849</td>
<td>P ≥ 0.05</td>
</tr>
<tr>
<td>Recommend Friends</td>
<td>2.21 ± 0.406</td>
<td>2.96 ± 0.465</td>
<td>P ≤ 0.05</td>
</tr>
<tr>
<td>Overall Satisfaction</td>
<td>3.73 ± 0.446</td>
<td>3 ± 0.296</td>
<td>P ≤ 0.05</td>
</tr>
</tbody>
</table>

According to Table 4, we conclude that the clients' satisfaction with the quality of mental health services and public or private centers there is a significant difference (p ≤ 0.001).

7. Discussion.

According to the results in Table 3, between the "physical structure and advisory aids" and "public and private centers" statistically significant difference. However, the difference in the two to three points, but for the benefit of private clinics and clinical trials have shown that physical space sector better quality than the public sector. The higher the satisfaction of physical space
centers are issues that are observed in some other studies. The results for this hypothesis with 
research Parviz and colleagues (2003) and parsley and colleagues (2008) [14, 10]. Then according 
to the results the authorities if they have satisfied clients should be satisfied with the quality of the 
components and quality physical facilities at the center of their attention.

Satisfaction of physical characteristics and auxiliary equipment in this study seem logical to 
government agencies. The standards of counseling centers to location, type of tables and chairs, 
independence, consultation rooms, using appropriate teaching aids and more attention, because to 
the extent that independent institutions and has become a standard trust people towards them 
increases. When you leave the room walking in the room may affect us. Sometimes when you get 
into the room, you feel relaxed and comfortable. Sometimes you may enter the room like some 
centers and health houses uncomfortable to you. The physical space. However, some counseling 
centers have problems, but shall have the discipline that the references comfort.

Select Tools, Sohoolan access to facilities for screening, or printing etc, can be determined 
through the course. Activities will be selected to advance these goals. For an updated or new can be 
used for audiovisual equipment. Tapes audiovisual aids are very strong consulting skills.
Educational facilities (video, CD, cassette and training aids), testing (to determine the correct 
intervention and proper diagnosis according to need), a variety of equipment and treatment facilities 
(the use of any means to treat), library (to introduce Book and offering brochures, public equipment.

According to the results in Table 3, the "quality of advice and content quality advice" and 
"public and private centers" statistically there is no significant difference. The results obtained for 
this hypothesis with research Behamps (2002) are consistent [3]. Making better use of the 
Diagnostic Interview for diagnosis, appropriate advice on how to respond to the questions of 
freedom of references in asking questions, teaching sessions at least weekly meeting, held at least 
weekly group counseling sessions, the proportion of the content of the consultation According to 
the present without a name and address to confidentiality, time critical or non-critical on the issue of 
the appropriate authorities, authorities, registration authorities as advice and information, 
monitoring and evaluation (analysis of results of consultation) are an essential component to the 
consultation process it is the duty of any consultants that these principles apply to provide quality 
counseling. (Fryer, 2001) and efficient use of staff in the performance of consultants and client 
satisfaction is effective. (Bahlakeh, 2004) stated that the social and human relations that govern how 
the quality of human resources with client satisfaction there is a significant relationship [12].

According to the results obtained in the table 4, client constituent satisfaction and "public and 
private centers" statistically there is significant difference, but there is not much difference. The 
more accurate comparison clients constituent satisfaction, there was a significant difference 
between private and public institutions, but with the exception of two cases of satisfaction with the 
quality of the consent of the other the difference in the financial accessibility of less than a score.
Check the ingredients satisfaction showed less satisfied clients access financial private sector than 
in government centers, the private sector is mainly due to limited coverage. The results for this 
hypothesis with research rafei (1380), and Jaafari and colleagues (2008), Zamani and colleagues 
(2011), Parvizi and colleagues (2003) are consistent [8, 14, 15, 23]. In connection with the consent 
of the cost difference, perhaps because of the consent of the authorities, the private sector and non-
subsidized income enough to return to the centers, while government agencies are generally low 
cost and small customers downloaded and even material help too. Attitude of personnel in client 
satisfaction is very important to the extent that it cannot continue to leave early treatment and re-
treatment and the lack of a center. It seems that by putting training sessions and workshops to 
increase the knowledge of staff and clinic staff public consultation processes and improve their 
interpersonal communication skills can be increased client satisfaction of the parameter.

8. Conclusion.

The study showed that the components of the questionnaire quality of advice, there are 
significant differences between private and public institutions in parameters such as finance, public 
centers of higher client satisfaction is but in terms of physical space, appliances, consulting,
personnel behavior results were in favor of the private sector and private centers of higher quality parameters. According to the results of the Research suggested that managers of government agencies in relation to the training of staff and psychologists on how to deal properly with the clients, and creating programs to promote physical space, to compensate for a lack of effort.

References.

[23] Zamani, P., Compare the satisfaction of clients of private clinics and public health care speech in Ahvaz, Research in Rehabilitation Sciences, 2011, 8 (7), 1193-1186.