Virtual EMDR Platform Effectiveness Analysis
- Phase 2: Initial Findings -

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Virtual EMDR - Initial Findings

This summary reflects the Initial Findings outlined in the scope of work—specifically, basic descriptive statistics, participation rates, and segmentation by key demographic variables. These results are intentionally high-level and do not include psychometric testing, factor structure analysis, or hypothesis testing.

That said, the diversity and completeness of responses (n = 315) provide a strong foundation for future analytic phases. Participants are represented across all demographic categories included in the survey, offering early insight into the platform's reach and user diversity.

While this report is limited to descriptive findings, several patterns—particularly across symptom severity and demographic subgroups—highlight promising directions for subsequent validation and outcome modeling.

Initial Demographic Findings

1. Trauma-Related Variables
2. Clinical Characteristics
3. Sociodemographic Variables
4. Technological Accessibility
5. Usage Patterns
6. Psychosocial Factors

Initial Effectiveness Findings

7. Symptom Reduction
8. Emotional Regulation
9. Functionality and Daily Life
10. User Experience (no past EMDR)
11. User Experience (comparison: In-Person vs Virtual)
12. Cognitive and Behavioral Changes
13. Self-Efficacy and Empowerment
14. Overall Satisfaction

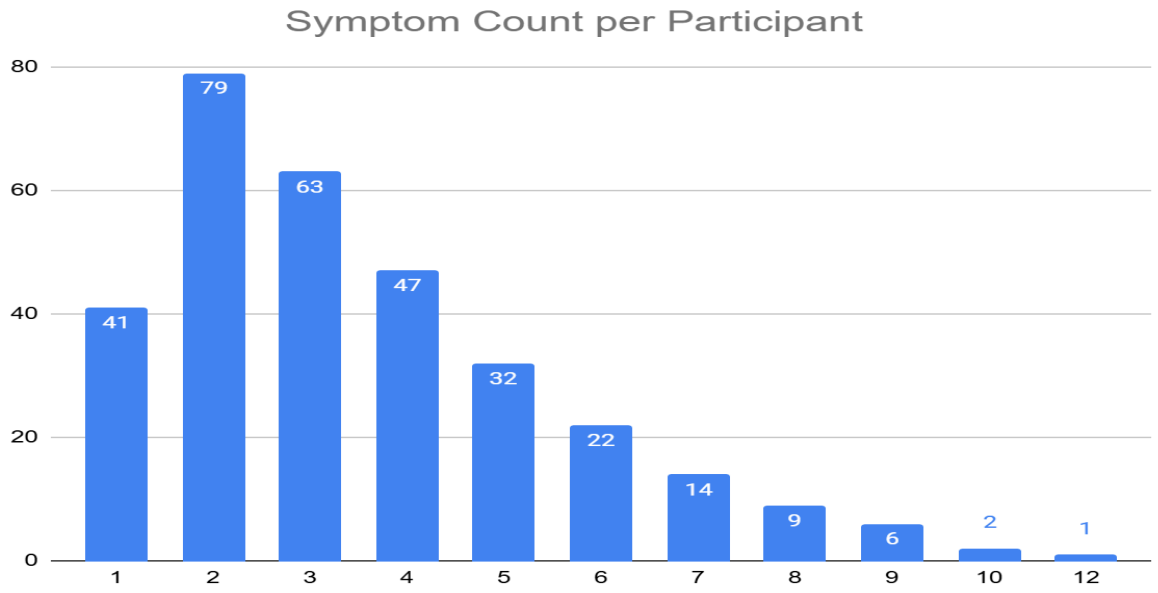
Looking Forward

Section 1: Trauma-Related Variables

To better understand user context and treatment needs, we examined key trauma-related indicators prior to Virtual EMDR use. Users reported a range of reasons for seeking support, including anxiety, grief, past abuse, and unresolved trauma—offering insight into the diverse motivations driving engagement. We also assessed recency and perceived severity of symptoms, both of which help contextualize baseline distress and inform expectations for treatment pacing and outcome. These variables may be valuable in future efforts to segment users and tailor onboarding or protocol recommendations accordingly.

Question 1: Reasons for Virtual EMDR Therapy

Understanding why users seek out the Virtual EMDR program offers insight into their initial needs and expectations. Respondents selected a variety of reasons—including anxiety, trauma recovery, emotional regulation, and support between therapy sessions—highlighting the platform's appeal across a range of use cases. These data inform how we position the program's value, and they may guide the development of tailored onboarding, messaging, or feature prioritization aligned with user intent.



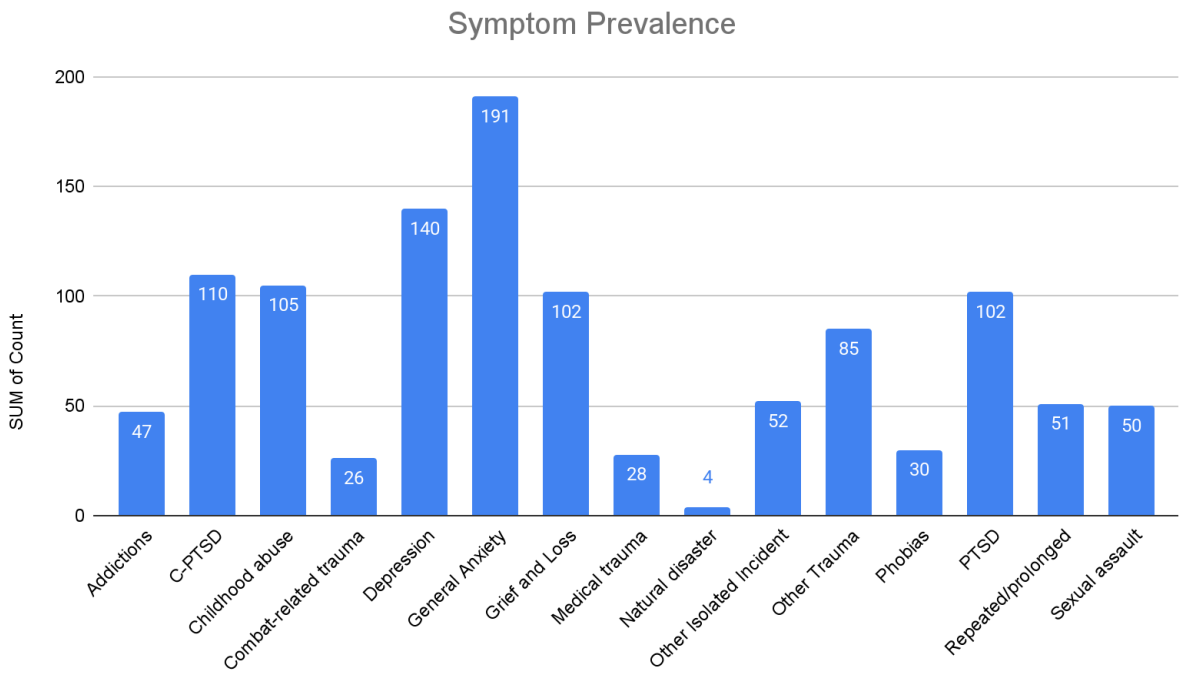
Participants reported a wide range of trauma-related symptoms and experiences. Among the 15 symptom categories assessed, **General Anxiety** was the most frequently reported, endorsed by 191 participants, followed by **Depression** (140), **C-PTSD** (110), and **Childhood Abuse** (105). These high prevalence rates highlight the emotional and psychological complexity of the population using the platform.

At the lower end of the distribution, less common symptoms included **Natural Disaster-related trauma** (4), **Combat-related trauma** (26), and **Medical trauma** (28), suggesting smaller but distinct user subgroups with specific needs.

Descriptive Statistics:

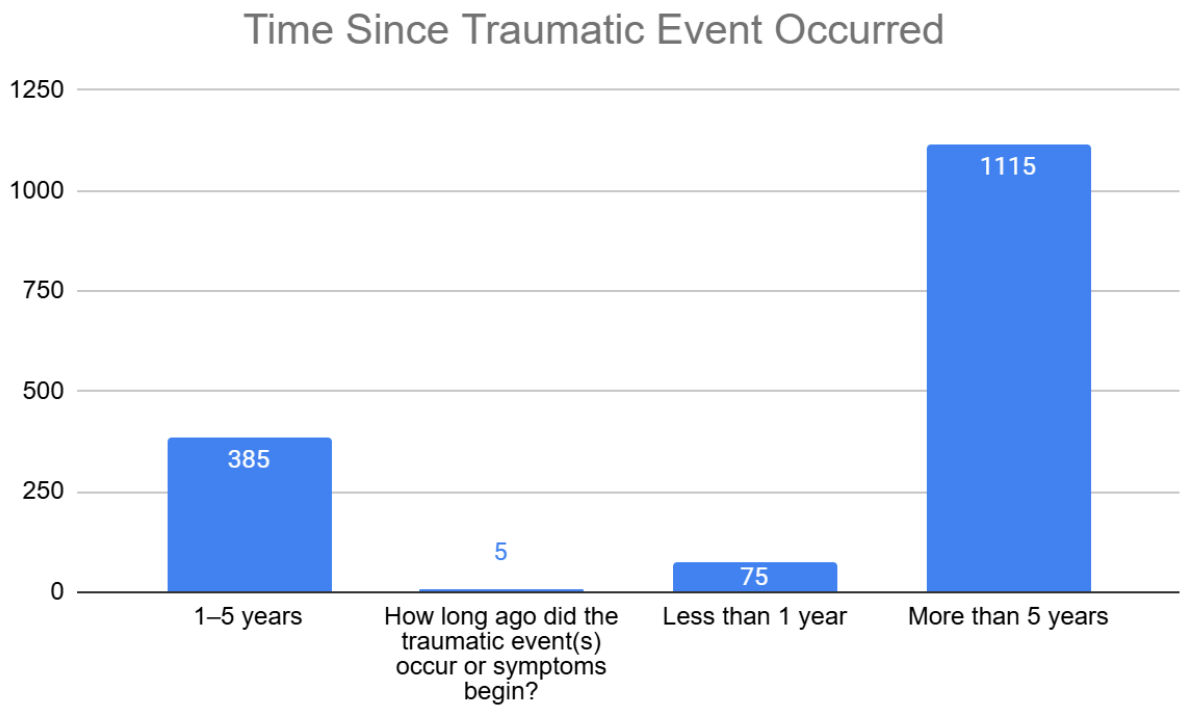
- **Total Symptom Categories**: 15
- **Standard Deviation**: ~51.3 (showing high variability in prevalence)
- **Highest Prevalence**: General Anxiety (191)
- **Lowest Prevalence**: Natural Disaster (4)

These findings provide a snapshot of the symptom landscape and highlight the importance of tailoring support across a range of trauma types. Future subgroup analyses may examine how symptom profiles relate to program engagement and outcome trajectories.



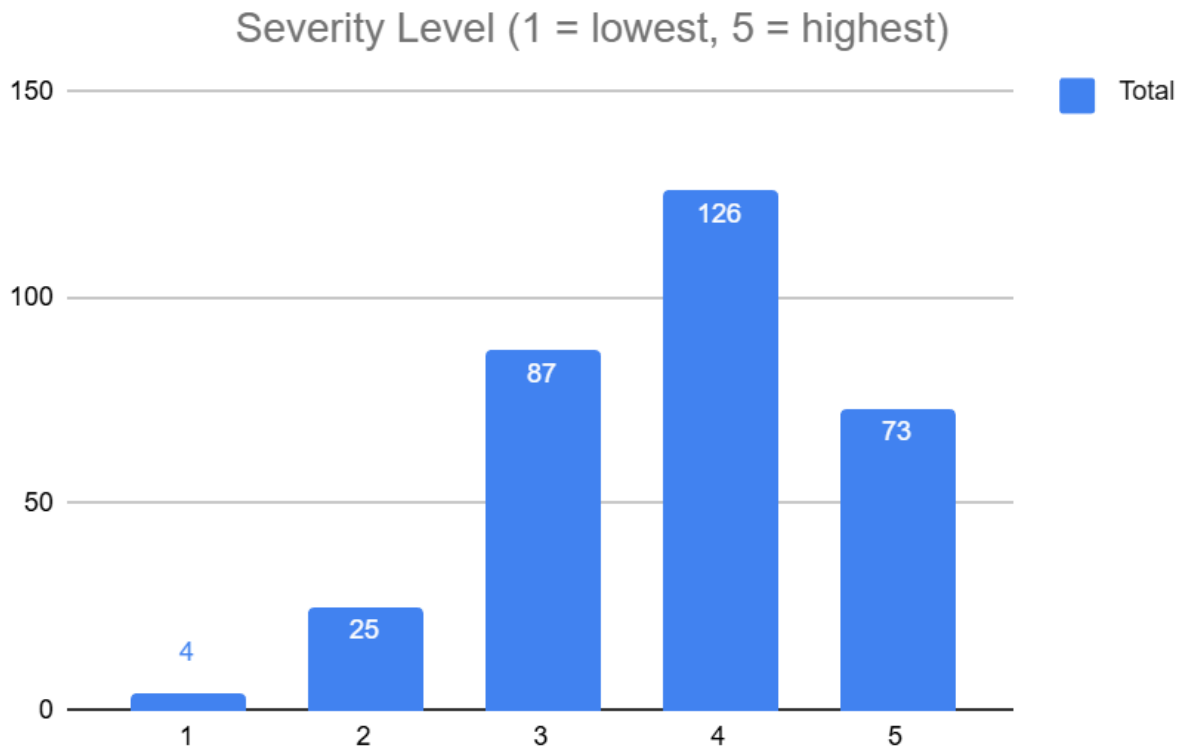
Question 2: Time Since Traumatic Event

Capturing how long ago users experienced their trauma or began noticing symptoms helps contextualize the chronicity and urgency of their mental health needs. Some users report long-standing symptoms, while others seek support closer to the time of the traumatic event. This variation may inform differences in treatment response and guide decisions around pacing, content sensitivity, or the introduction of stabilization tools for users presenting with more recent or acute distress.



Question 3: Severity of Trauma

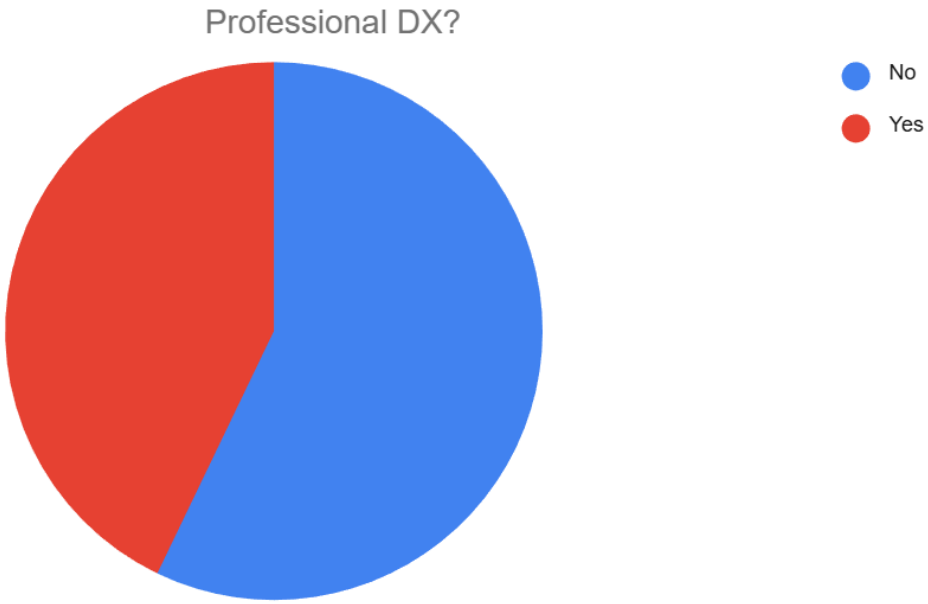
Severity level is a central predictor in evaluating Virtual EMDR's effectiveness. This measure will be used both as a control variable and as an outcome moderator in our primary analyses. It also provides the basis for identifying clinically significant change thresholds.



Section 2: Clinical Characteristics

Question 5: Professional Diagnosis

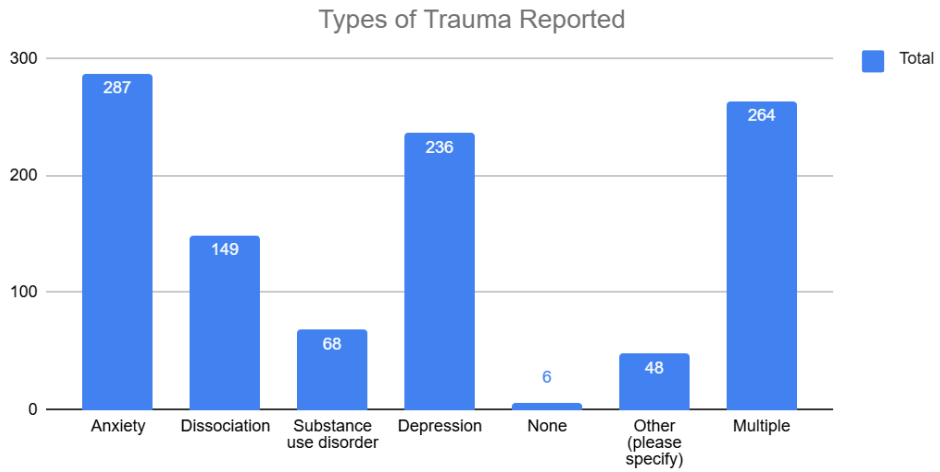
This variable distinguishes between users with a formal PTSD diagnosis and those without. It enables comparative analyses between self-identified and clinically diagnosed populations, helping us determine if the tool serves both groups effectively. We will also examine whether a formal diagnosis predicts different baseline severities or treatment responsiveness.

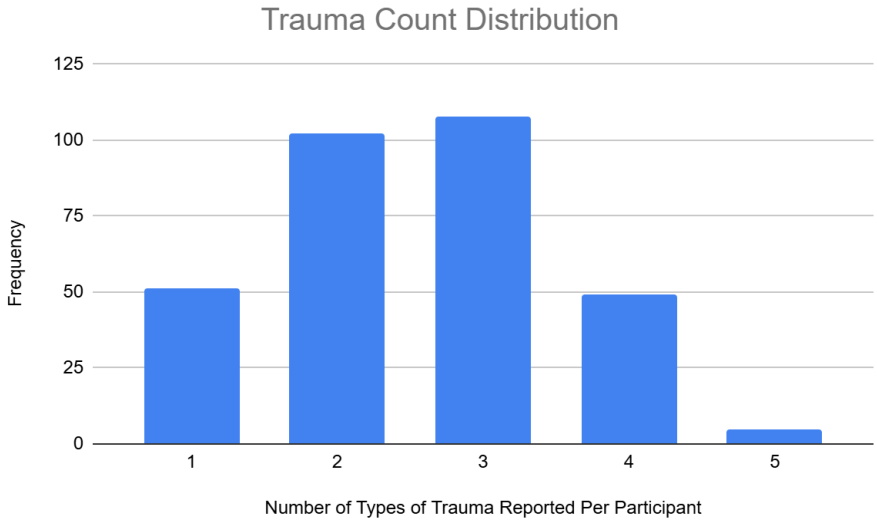


Question 6: Experienced Trauma

Trauma types in addition to PTSD (e.g., abuse, accidents, loss, combat) allow us to categorize user needs and investigate whether treatment outcomes vary by trauma category. These data will also guide potential development of trauma-type-specific treatment tracks or user guidance within the platform.

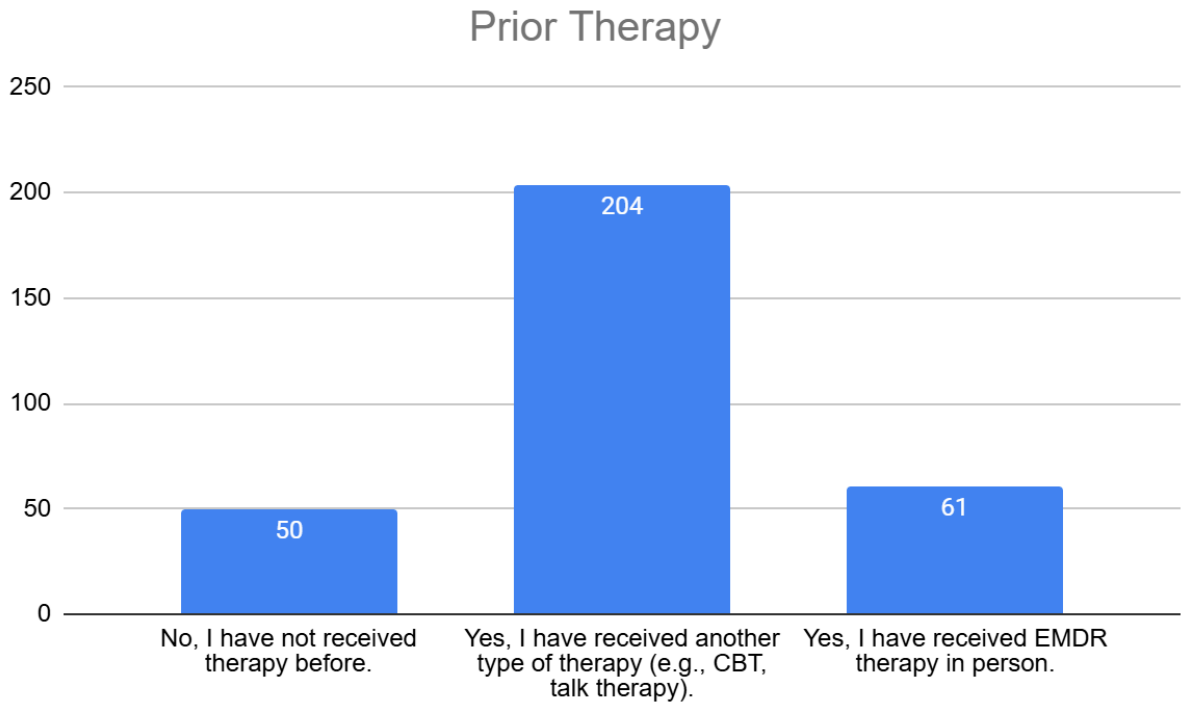
In addition to identifying the types of trauma reported, we analyzed how many distinct trauma types each user endorsed. This count helps us understand the cumulative burden of trauma experienced by individual users—a factor often linked to treatment complexity and symptom severity. These insights may inform personalization efforts within the platform, such as tailoring recommendations or pacing guidance for users with more extensive trauma histories.





Question 7: Prior Therapy for Trauma

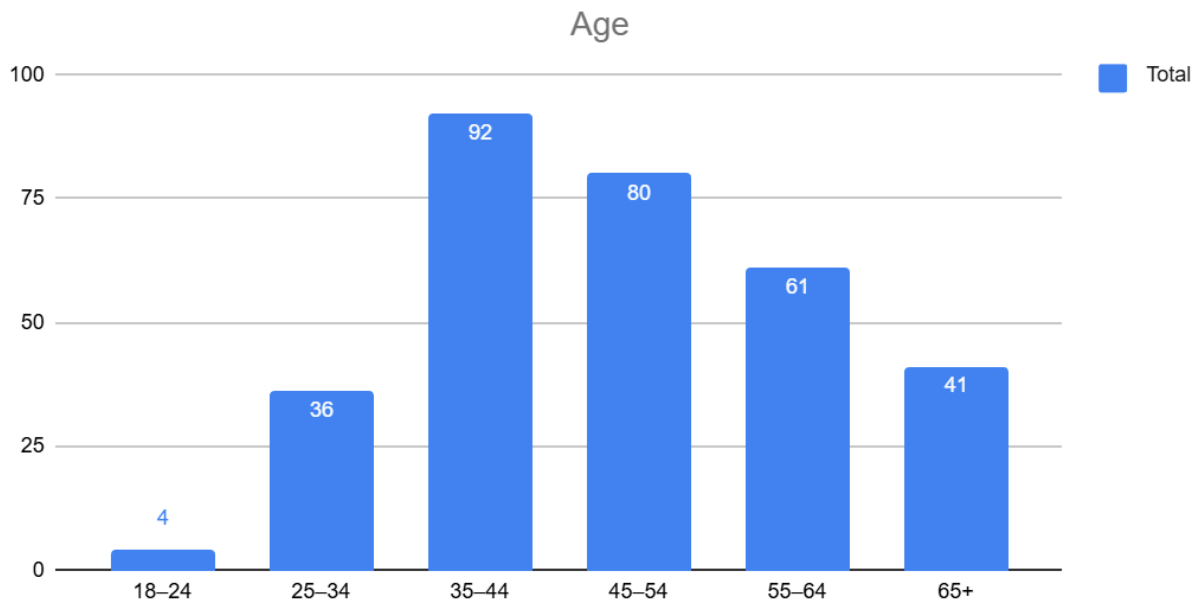
This item captures whether users engaged in therapy before using the Virtual EMDR program—a key variable for understanding user readiness, self-efficacy, and potential differences in treatment response. As one of the survey's branching logic questions, it introduced a dynamic path for follow-up, reflecting each user's therapeutic background. This distinction between therapy-experienced and therapy-naïve users will play a central role in future research phases, particularly in evaluating engagement patterns, perceived effectiveness, and the potential for Virtual EMDR to complement or substitute for traditional care.



Section 3: Sociodemographic Variables

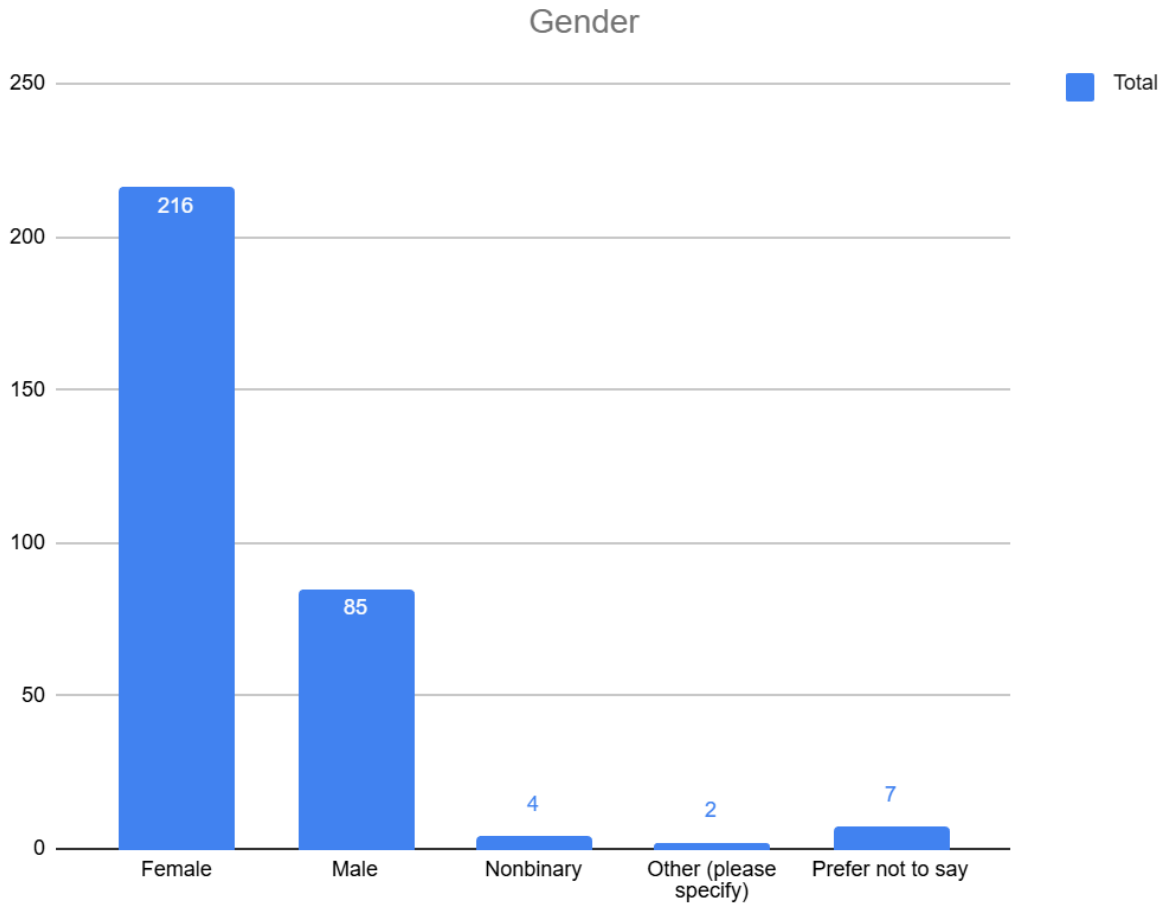
Question 8. Age

Participants' ages ranged across a wide spectrum, allowing us to analyze whether responses to Virtual EMDR vary by life stage. Age will be treated both as a continuous covariate and, where appropriate, a categorical variable (e.g., 18–29, 30–44, 45–59, 60+), particularly in exploratory subgroup analyses of severity reduction and platform usability.



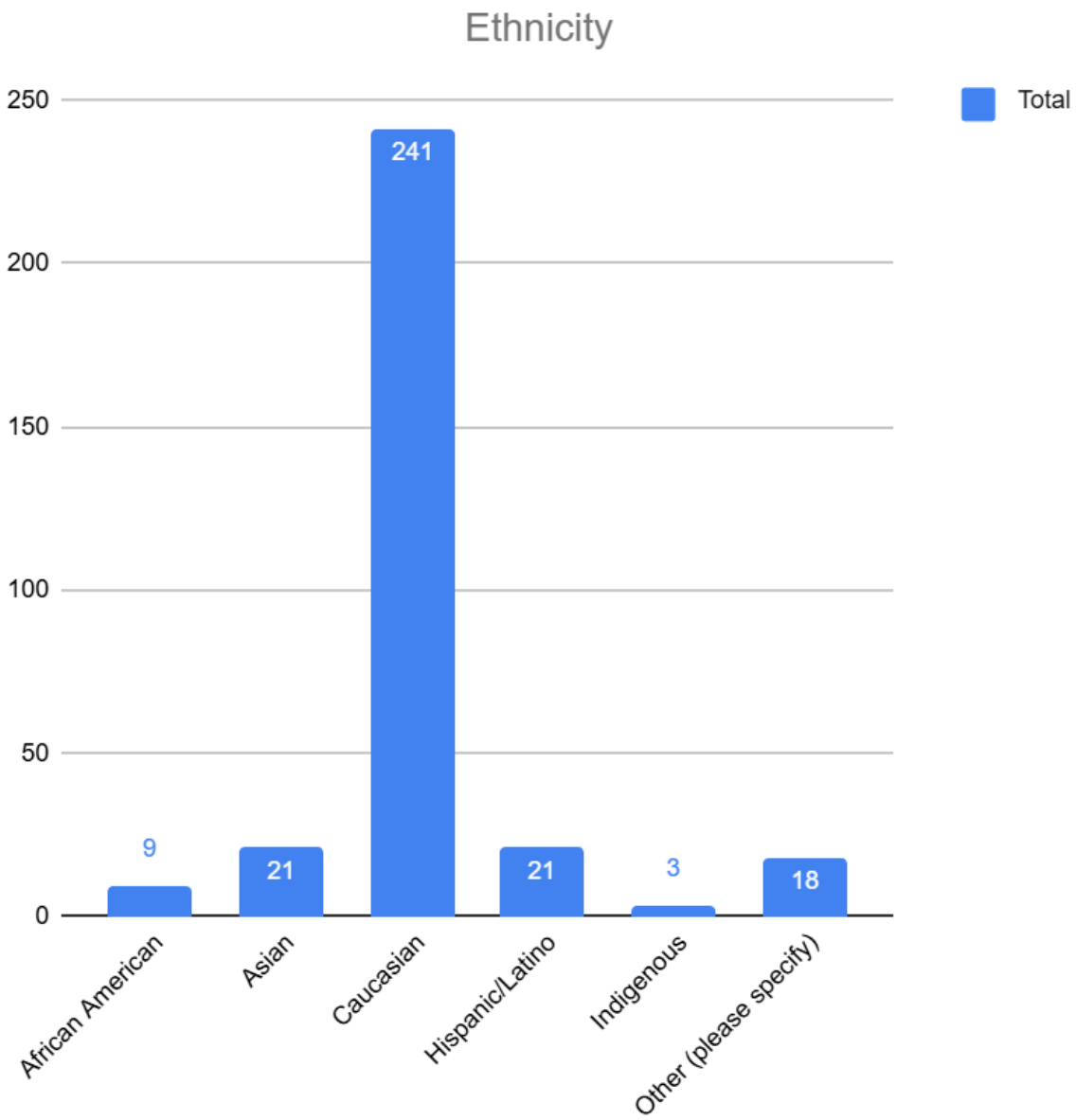
Question 9: Gender

Understanding gender differences in both trauma experiences and treatment response is vital. Gender will be incorporated as a grouping variable in interaction analyses (e.g., Gender × Severity Level) to examine differential effects on symptom reduction and engagement levels. This may help tailor messaging or treatment paths for different user segments.



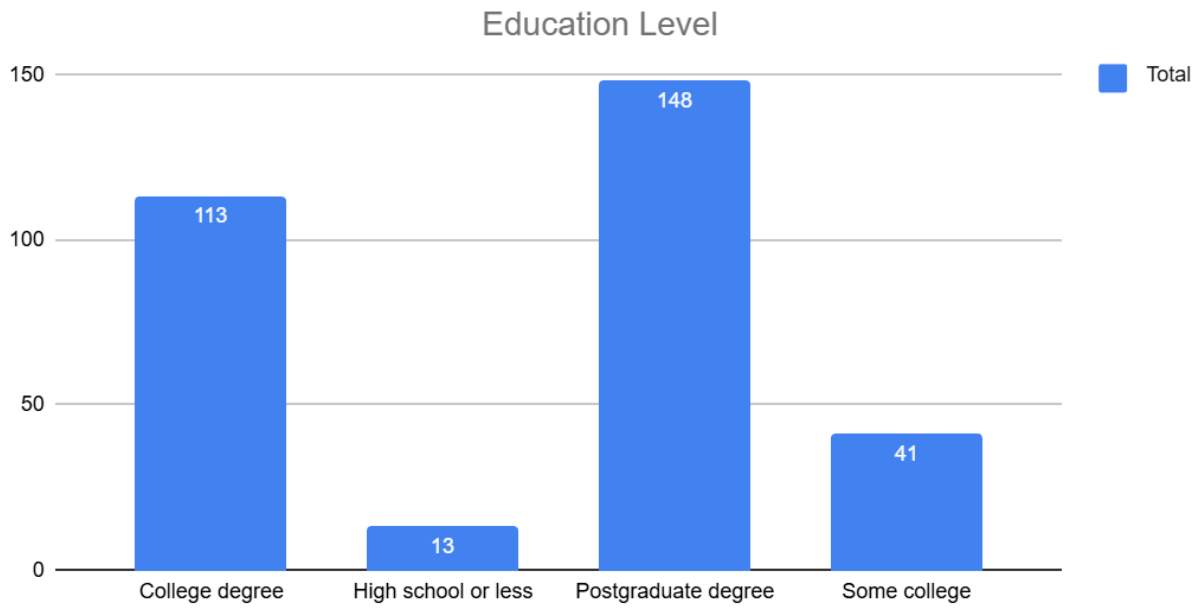
Question 10: Ethinicity

Ethnic background data will help assess the cultural representativeness of our sample and explore potential differential impacts of Virtual EMDR across racial/ethnic groups. We will also examine whether stigma, trauma type, or therapeutic engagement vary by ethnicity, which can inform targeted improvements or inclusivity considerations for future iterations of the platform.



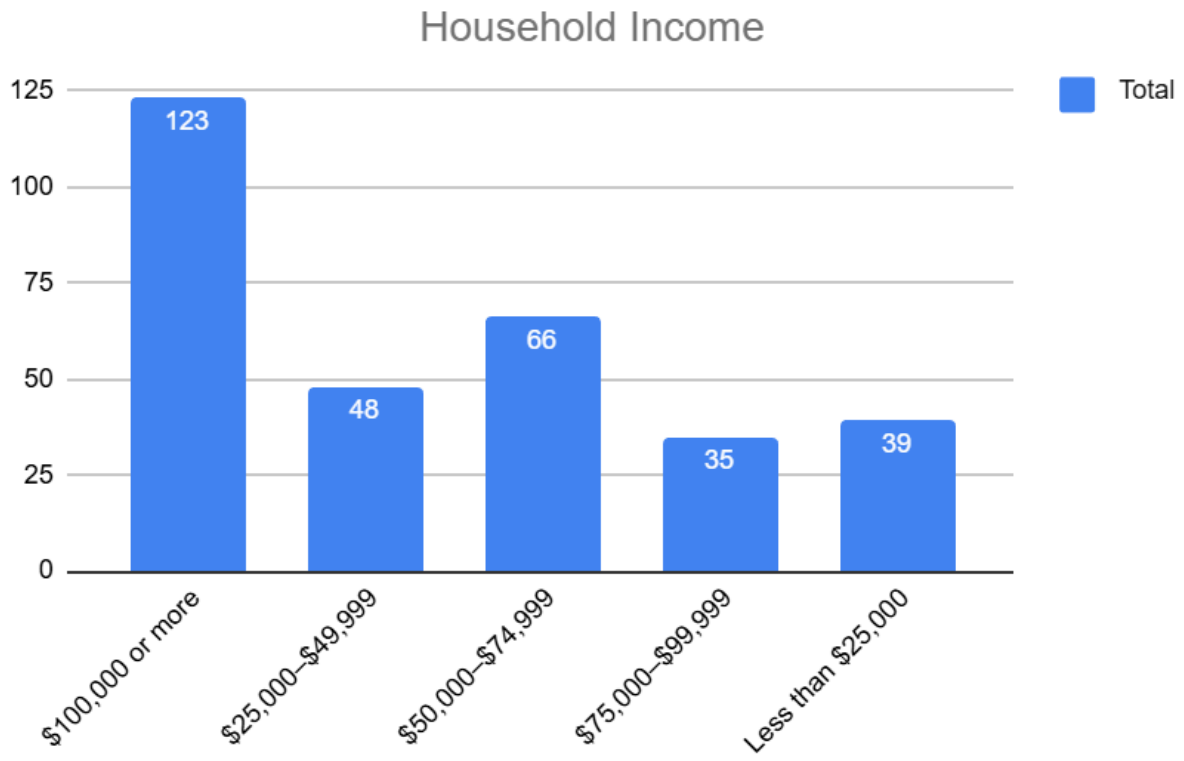
Question 11: Education Level

Education level may relate to health literacy and willingness to engage in digital mental health tools. We will use this variable to examine engagement patterns, dropout likelihood, and post-treatment outcomes. If strong associations are found, we may recommend differentiated onboarding content based on education level.



Question 12: Household Income

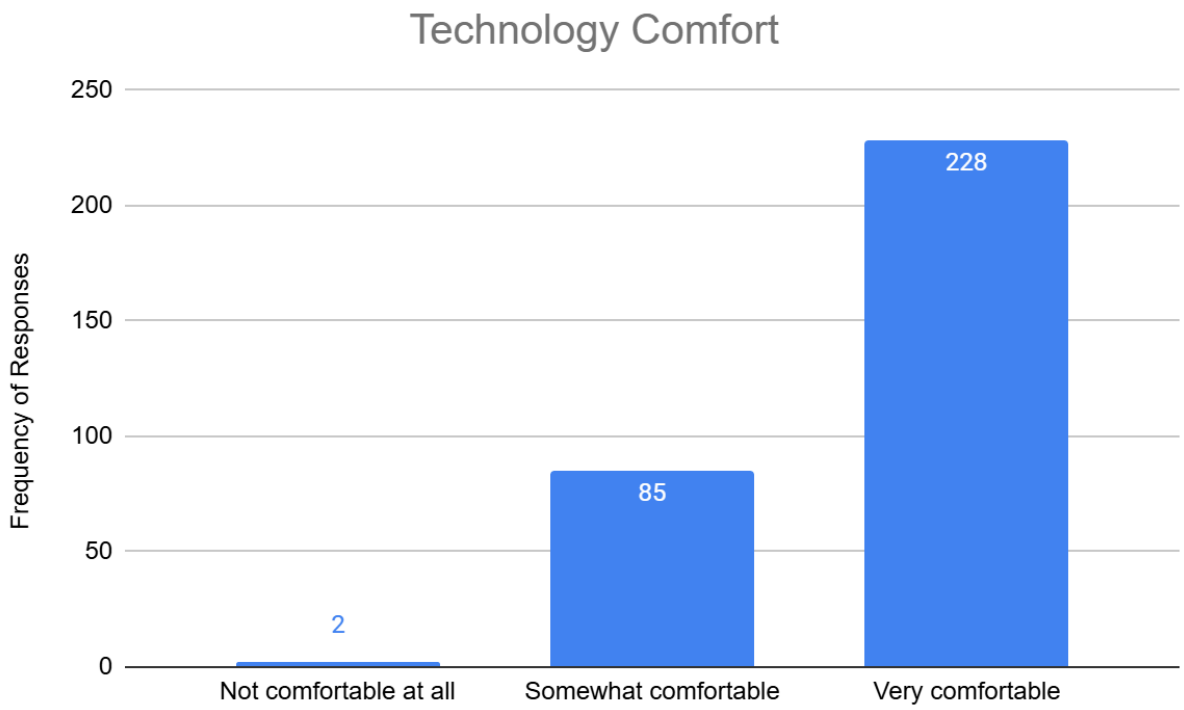
Income level is a proxy for access to care and socioeconomic stressors, which can influence both trauma exposure and recovery. We will assess whether financial background predicts initial severity or moderates changes in self-reported well-being. These insights may support future discussions on accessibility or sliding-scale pricing.



Section 4: Technological Accessibility

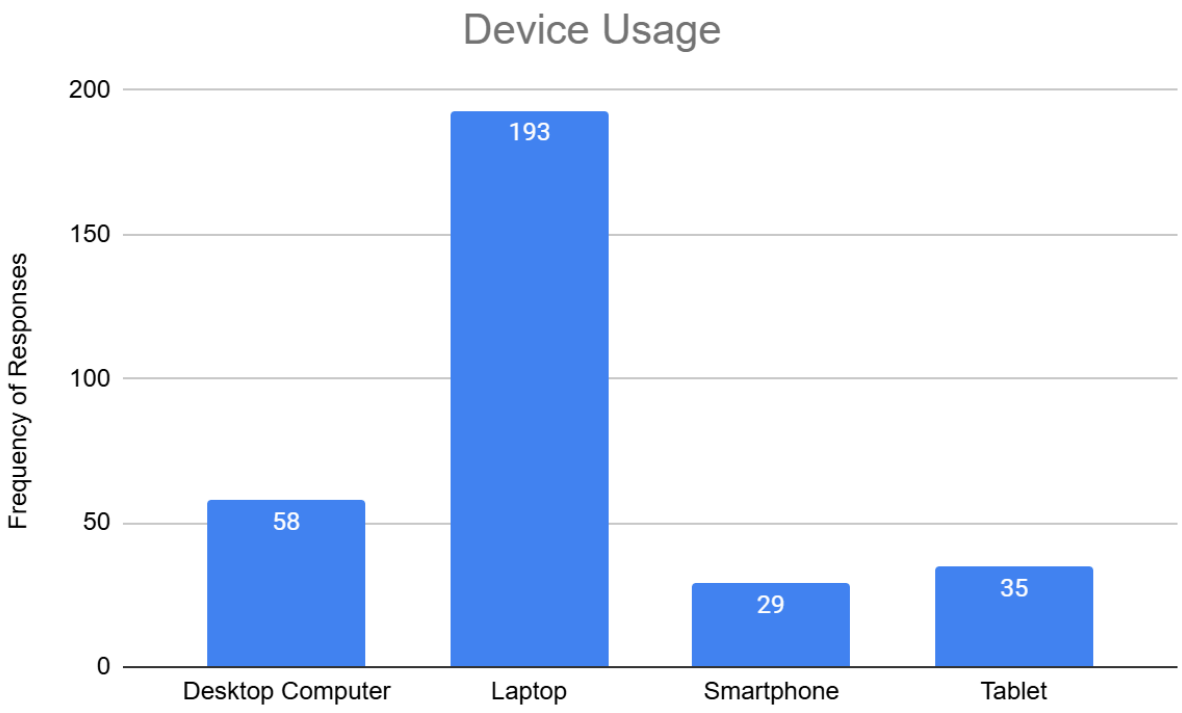
Question 13: Comfort with Technology for Therapy

User comfort with technology is a foundational factor in the success of any digital mental health platform. This item assesses each respondent's self-reported ease with engaging in therapy through a digital interface. These insights help us understand potential barriers to adoption, guide UX improvements, and inform whether certain users may benefit from enhanced onboarding or instructional support. Comfort with technology may also moderate user outcomes and will be explored further in future phases of analysis.



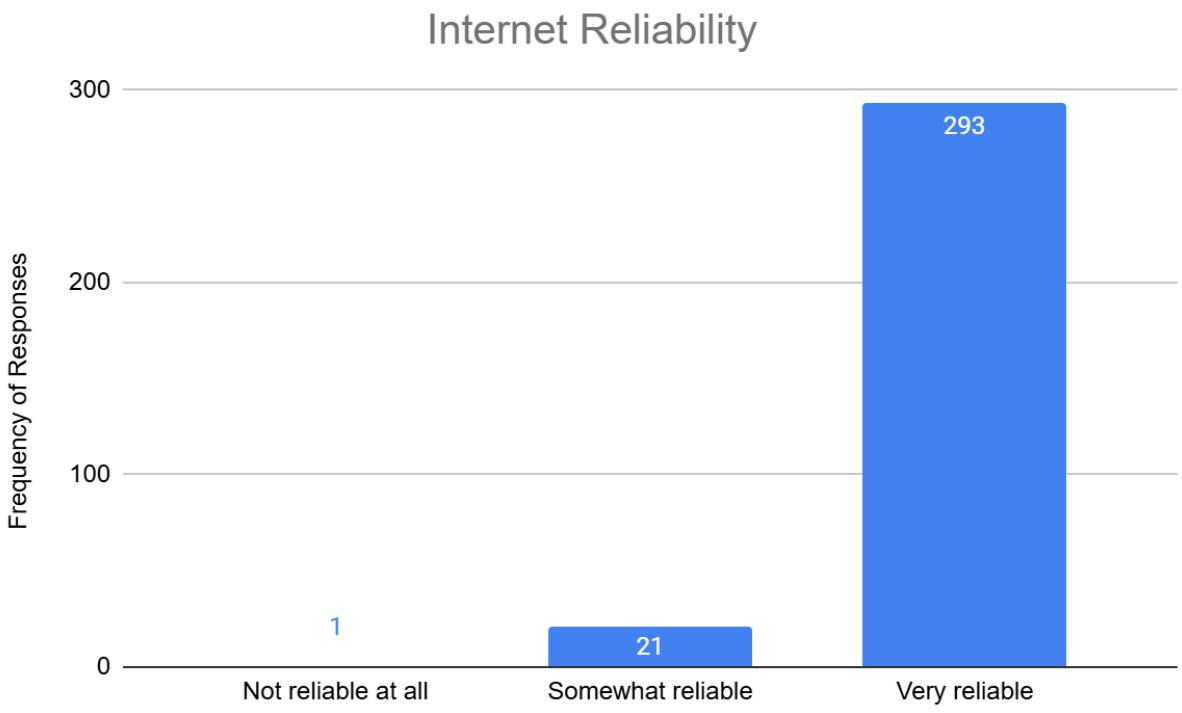
Question 14: Device Used for Virtual EMDR self-guided program

Identifying the type of device users relied on to access the Virtual EMDR program provides practical insight into how the platform is experienced across form factors. Whether users engaged via mobile, tablet, or desktop may influence session length, interface navigation, and overall ease of use. This information supports device-specific optimization efforts and may guide future design decisions to enhance accessibility, responsiveness, and user satisfaction across platforms. In future analyses, we may explore how device type correlates with overall satisfaction to determine whether the user experience varies meaningfully by access method.



Question 15: Internet Reliability

The stability of a user's internet connection can significantly impact the functionality and fluidity of a self-guided digital therapy experience. This item captures self-reported internet reliability, helping us understand potential friction points related to buffering, loading, or interrupted sessions. These insights are valuable for identifying accessibility gaps and may inform technical enhancements or offline feature development. As with device type, future analyses may examine whether internet reliability is associated with overall satisfaction or completion rates. However, with this distribution, we're likely not going to be able to use this item.

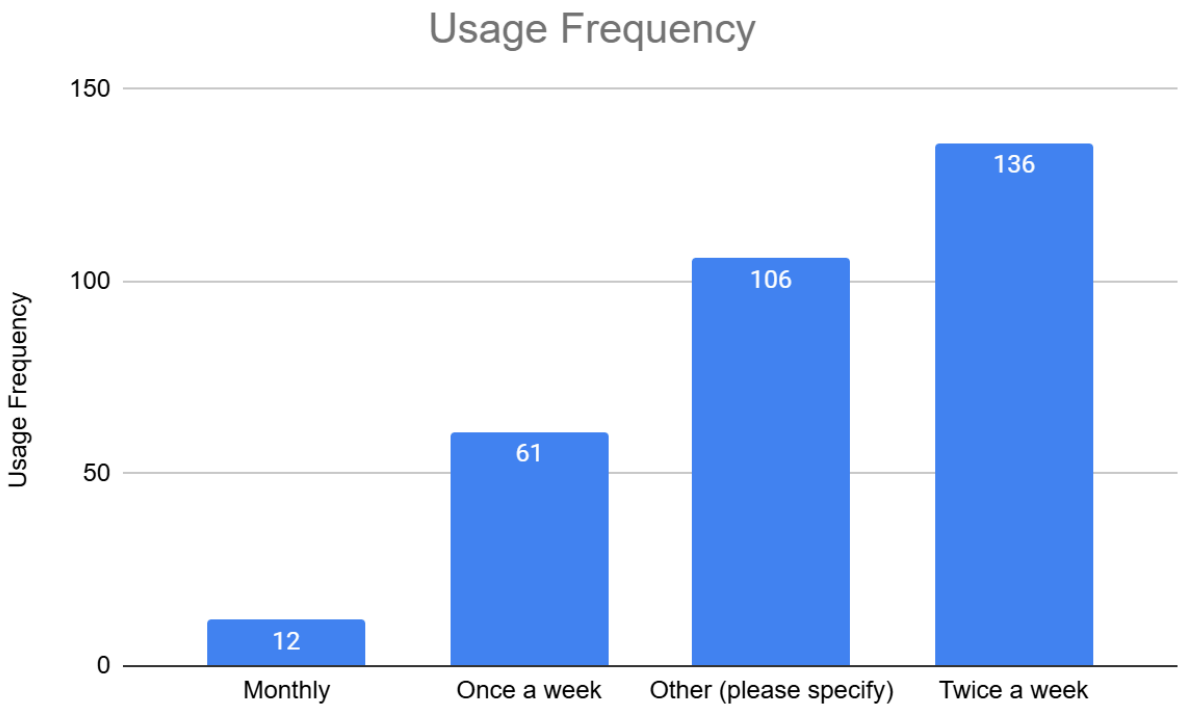


Section 5: Usage Patterns

Question 16: Frequency of Virtual EMDR Usage

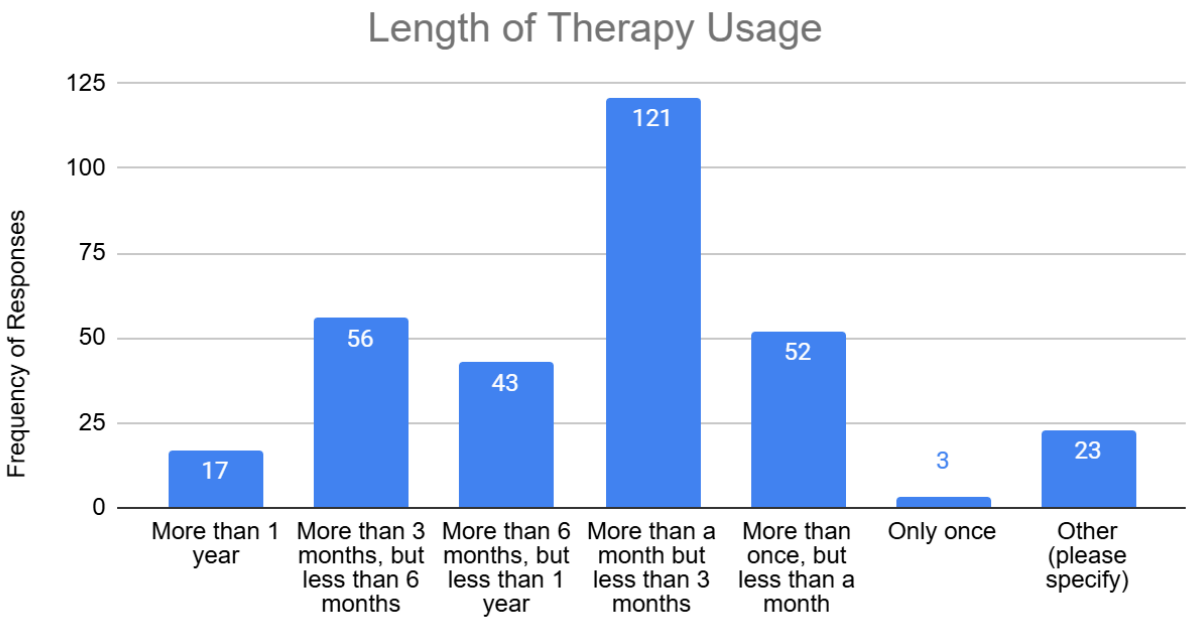
Understanding how often users engaged with the Virtual EMDR program offers important context for evaluating adherence, engagement, and self-directed treatment pacing. Reported usage patterns range from occasional to highly consistent, reflecting diverse approaches to integrating the platform into users' routines. This variable will be central to future analyses exploring how frequency of use relates to outcomes such as symptom reduction, satisfaction, and perceived effectiveness.

Given the large volume of responses provided in the "Other (please specify)" field, we recommend conducting a sentiment or thematic analysis of this open-text data to identify patterns in alternative usage behaviors or qualitative feedback not captured by the structured response options.



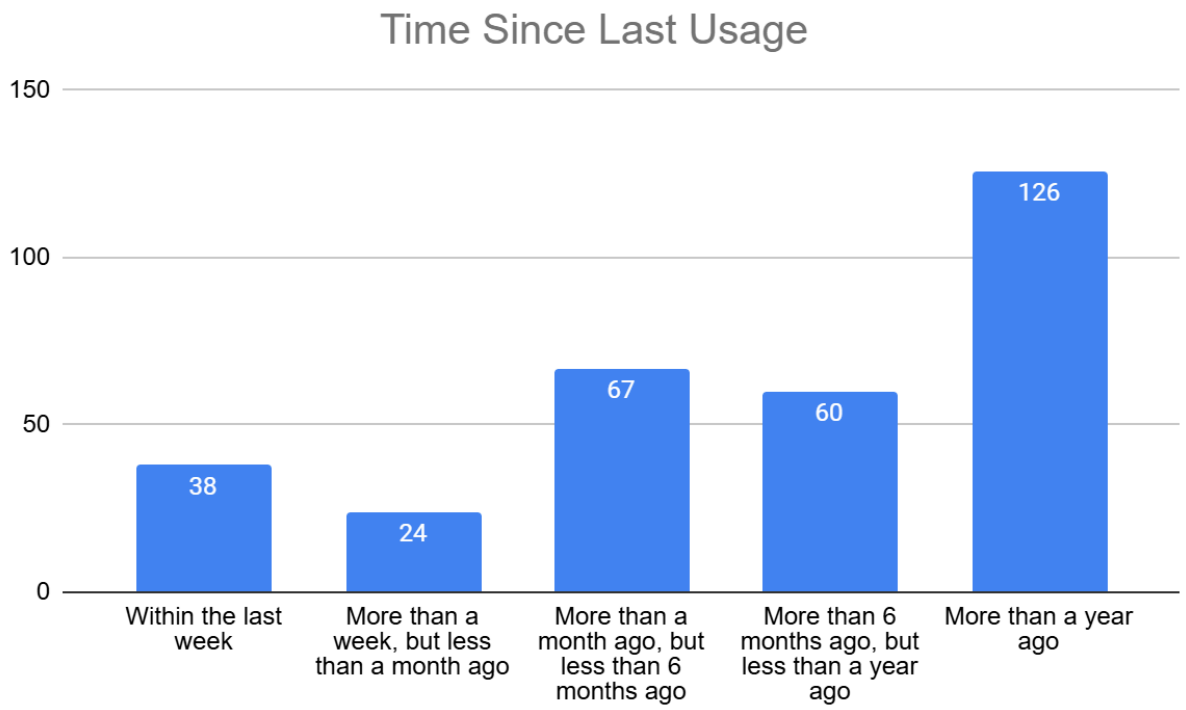
Question 17: Length of Therapy Usage

Understanding how long users remained engaged with the Virtual EMDR program provides insight into retention, treatment pacing, and overall user commitment. Reported durations vary widely, reflecting both short-term use for acute support and longer-term engagement for sustained therapeutic benefit. This variable will inform future analyses examining how usage length relates to reported outcomes such as symptom improvement and satisfaction.



Question 18: Time since last usage

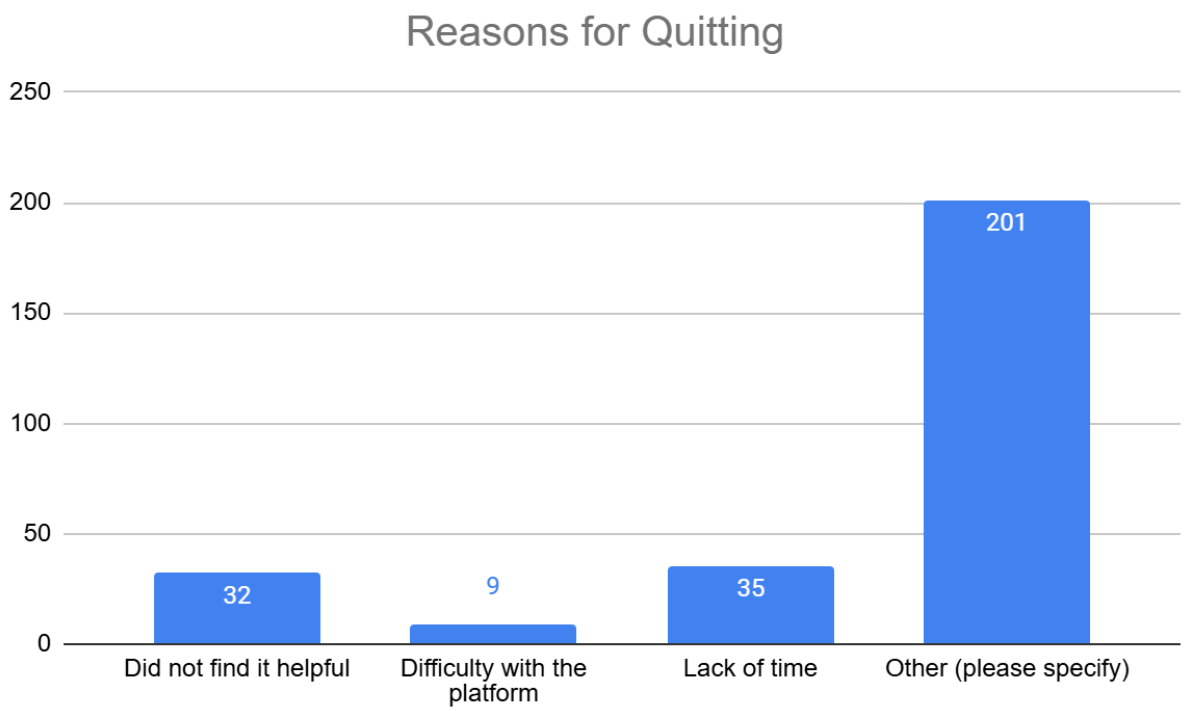
Capturing when users last engaged with the Virtual EMDR program helps us understand how recently participants interacted with the platform and how fresh their experiences may be when responding to outcome-related questions. This variable also provides insight into user retention, potential drop-off points, and the platform's ability to sustain engagement over time. Future analyses may explore how recency of use relates to satisfaction levels, symptom reporting, or likelihood of program completion.



Question 19: Reason for Discontinued Effort Before Wellness

This item explores why some users chose to stop using the Virtual EMDR program before experiencing full symptom relief. Understanding these reasons—whether due to technical challenges, emotional discomfort, time constraints, or other factors—can inform targeted improvements to the platform's design, guidance, and support features.

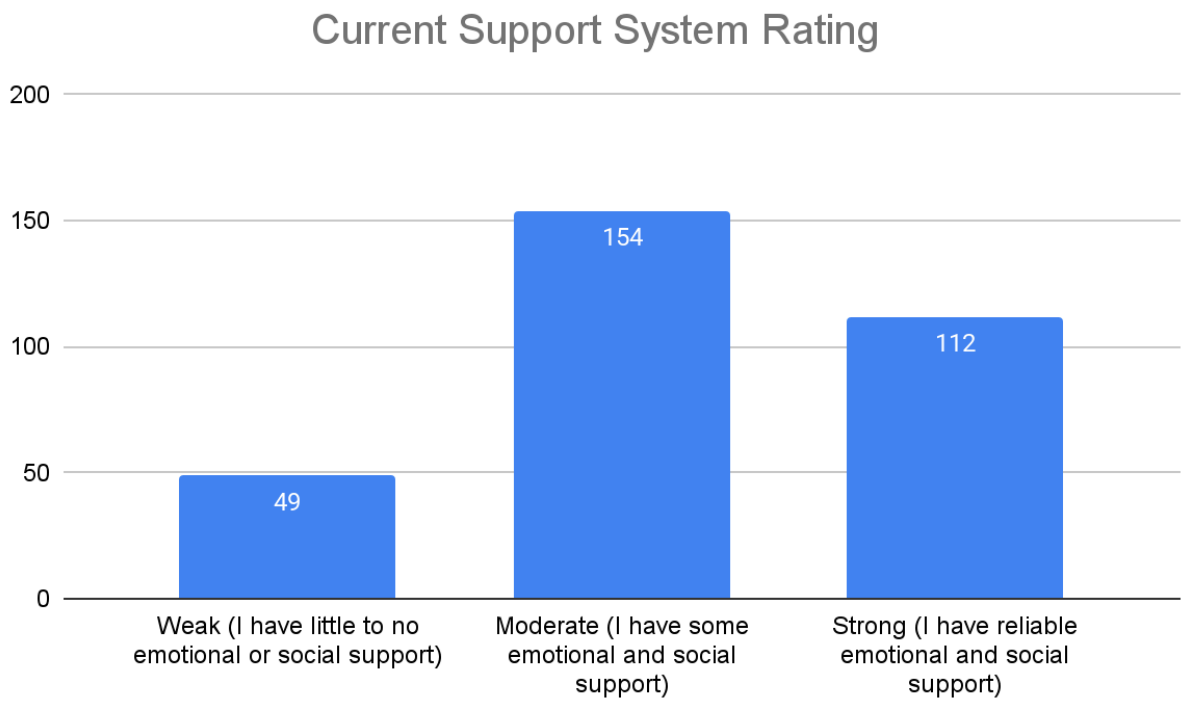
A notable portion of responses were submitted through the "Other (please specify)" option, suggesting diverse or nuanced user experiences. We recommend thematic analysis of these open-text responses to identify common barriers and potential enhancements that could improve retention and treatment completion.



Section 6: Psychosocial Factors

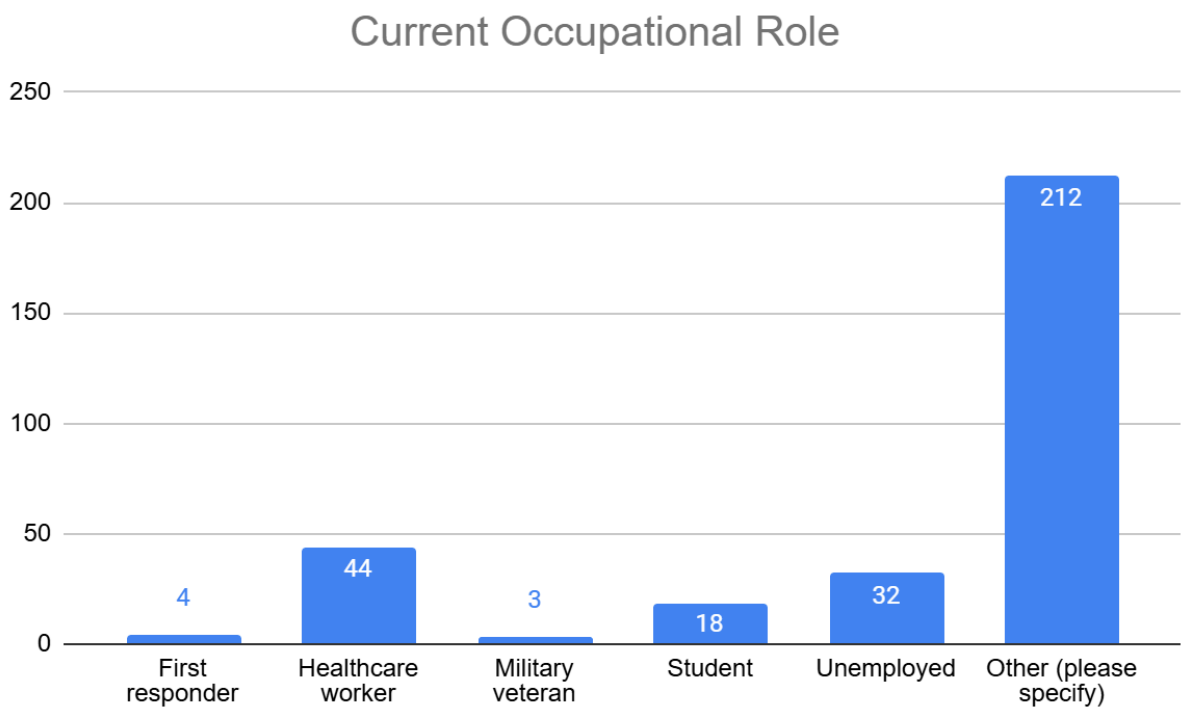
Question 19: Current Support System

This item captures how users rate the strength of their current support system, using a 3-point scale ranging from limited to strong. Social and emotional support are often critical factors in trauma recovery and may influence how individuals engage with self-guided therapeutic tools. By assessing perceived support, we gain insight into users' external resources and potential buffering factors. Future analyses may explore how levels of perceived support relate to program engagement, symptom improvement, and overall satisfaction.



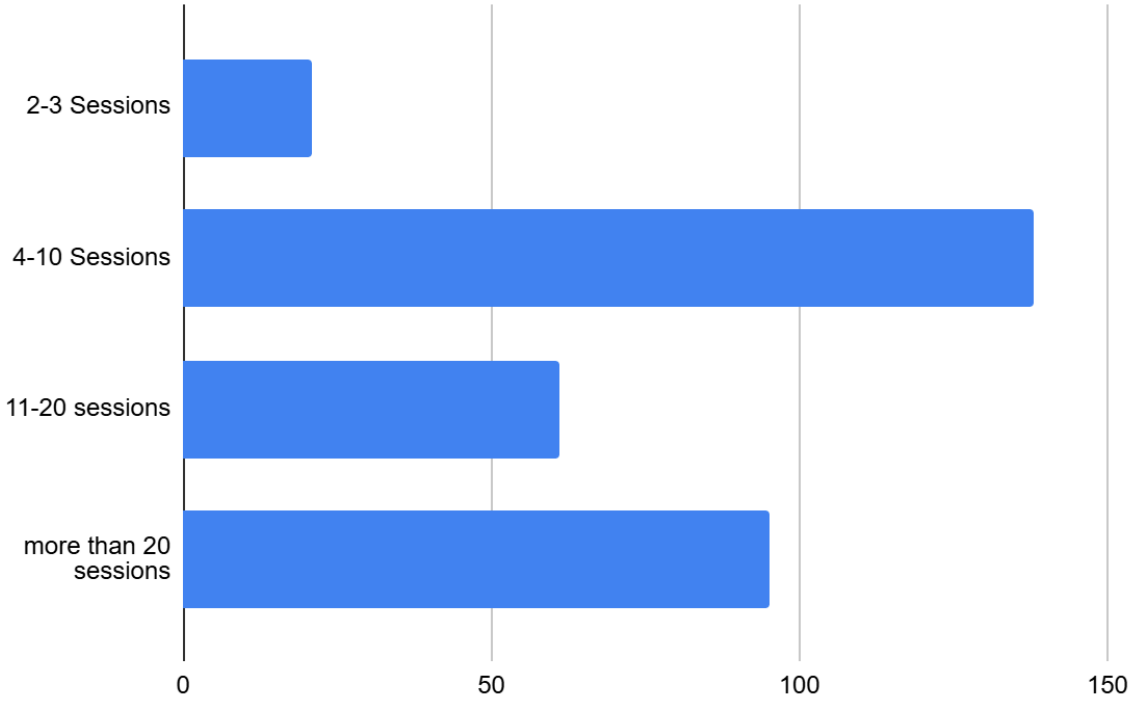
Question 20: Current Role

Understanding users' occupational roles helps contextualize the types of stressors or trauma exposures they may have experienced prior to engaging with the Virtual EMDR program. Roles such as military veteran, first responder, or healthcare worker often involve repeated exposure to high-stress or traumatic events, which may influence both symptom presentation and treatment needs. This variable may also support future segmentation and allow us to explore whether outcomes or engagement patterns differ across occupational groups. Given the use of an "Other (please specify)" option, we recommend reviewing open-text responses for additional role categories or emerging patterns not captured by the predefined list.



Question 21: Completed Virtual EMDR Sessions

Tracking the number of Virtual EMDR sessions each user completed provides a direct measure of program engagement and progress through the self-guided protocol. Session count can serve as an important indicator of user commitment, therapeutic exposure, and potential dosage effects. In future analyses, we plan to examine how the number of sessions completed relates to reported outcomes such as symptom reduction, emotional regulation, and overall satisfaction—offering insight into the effectiveness of different levels of engagement.



Initial Effectiveness Findings

This section presents early insights into users' self-reported outcomes based on their experiences with the Virtual EMDR self-guided program. Participants responded to a series of statements across seven key domains—ranging from symptom reduction and emotional regulation to satisfaction and perceived empowerment—using a 5-point Likert scale (1 = completely disagree, 5 = completely agree).

Each domain was designed to capture a specific dimension of therapeutic impact. For example, items related to **Symptom Reduction**, **Emotional Regulation**, and **Functionality in Daily Life** reflect core trauma recovery indicators, while **Cognitive and Behavioral Changes** and **Self-Efficacy and Empowerment** address shifts in mindset and perceived capability over time. Additionally, **User Experience** and **Satisfaction** items provide insight into the usability of the platform and users' overall impressions of effectiveness.

Importantly, this portion of the findings also introduces dynamic branching logic in Sections 10 and 11: users who had prior experience with in-person EMDR were shown a comparison set, while those without were asked about their experience with the platform itself. This approach ensures more tailored and context-sensitive feedback.

While these findings are descriptive at this stage, they lay the groundwork for future analyses exploring how user responses in these domains vary by factors such as session count, trauma severity, or prior therapy experience. Early trends in these responses will also help guide refinement of the platform, inform user guidance, and support broader outcome evaluation efforts in future phases.

Section 7: Symptom Reduction

The symptom reduction scale captures users' perceptions of change across five core trauma-related experiences following engagement with the Virtual EMDR self-guided program. These include reductions in intrusive thoughts, physical reactivity, avoidance behaviors, emotional overwhelm, and overall symptom severity—each assessed on a 1–5 Likert scale, where 1 indicates strong disagreement and 5 indicates strong agreement with the positive change.

Across all five items, users reported generally favorable outcomes. The **average symptom reduction score was 3.67** (SD = 0.94), with the majority of users falling in the moderate-to-high range of agreement that symptoms had improved. Notably, **49 users (15%) scored above 4.5**, and **an additional 33%** scored between 4.00–4.49, suggesting a meaningful perceived benefit for nearly half the sample. At the same time, **15% of users scored below 3.00**, reflecting a wide range of user experiences and outcomes—an important finding that supports the need for segmentation and tailored support.

Among individual symptom dimensions, the strongest areas of perceived improvement were **emotional overwhelm** and **symptom severity**, with mean scores of **3.78** and **3.80** respectively. In both items, nearly **three-quarters of users agreed or strongly agreed** that these symptoms had lessened. **Intrusive thoughts** and **physical reactions** followed closely, each showing strong agreement from a majority of users and relatively high mean scores (3.77 and 3.71, respectively).

In contrast, perceived improvement in **avoidance behaviors** was less consistent, with a lower average score of **3.30** and the largest share of neutral responses (36%). This suggests that avoidance may be a more resistant or slower-changing symptom, potentially requiring more sessions, guidance, or support to address effectively.

These findings offer strong early evidence that users are experiencing real gains in managing trauma-related symptoms through the self-guided platform. At the same time, the variability in scores across users and items highlights the opportunity—and need—for deeper analysis. In upcoming phases, we will compare these results across key user groups (e.g., prior therapy experience, trauma type, duration of use, technology comfort) to identify patterns that can inform more personalized guidance, platform refinements, and targeted messaging. Understanding not just whether the program works, but **for whom and under what conditions**, will be central to advancing its effectiveness and reach.

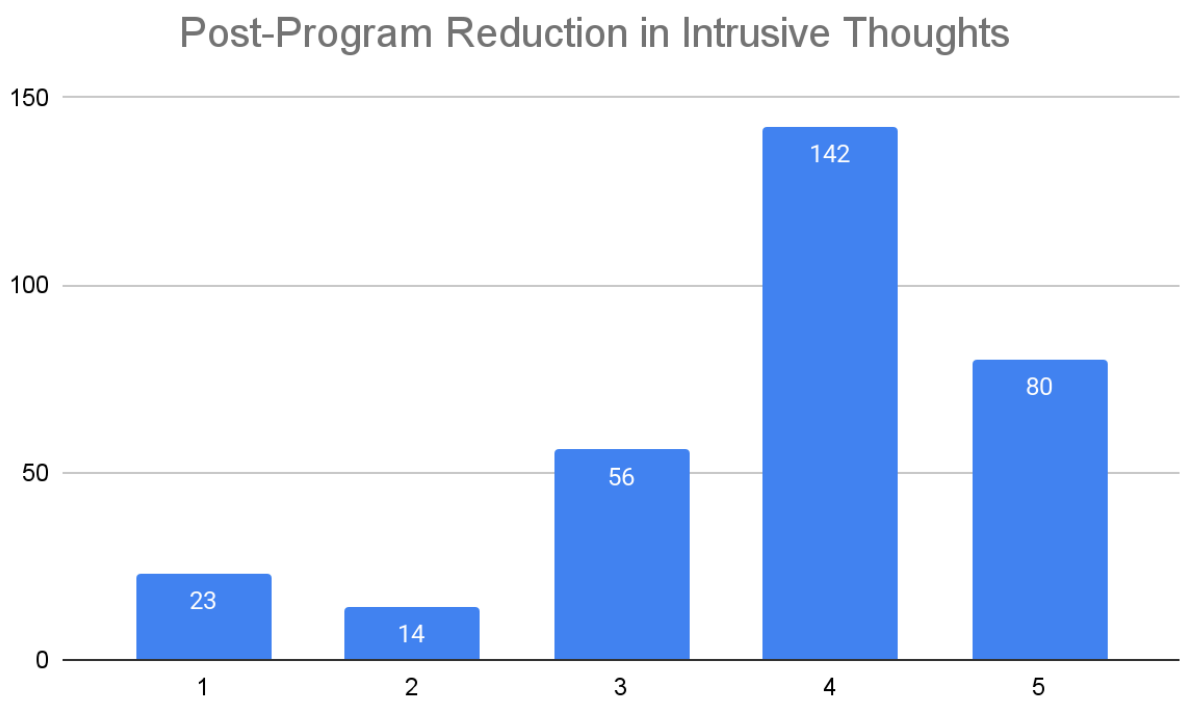
SR1: Post-Program Reduction in Intrusive Thoughts

As part of the symptom reduction scale, users were asked to rate the extent to which they experienced fewer unwanted, intrusive thoughts or memories following their use of the Virtual EMDR self-guided program. On a 1–5 Likert scale (1 = completely disagree, 5 = completely agree), the **average score was 3.77** with a **standard deviation of 1.10**, suggesting a generally positive response with some variability in individual experiences.

The response distribution highlights that:

- **80 users (25%)** strongly agreed (score of 5) they experienced fewer intrusive thoughts
- **142 users (45%)** agreed (score of 4), making this the most common response
- **56 users (18%)** reported a neutral response (score of 3)
- A smaller portion, **37 users (12%)**, disagreed or strongly disagreed (scores of 1 or 2)

These results suggest that the majority of users experienced at least some relief from intrusive thoughts, with nearly 70% agreeing or strongly agreeing that this specific symptom had improved.



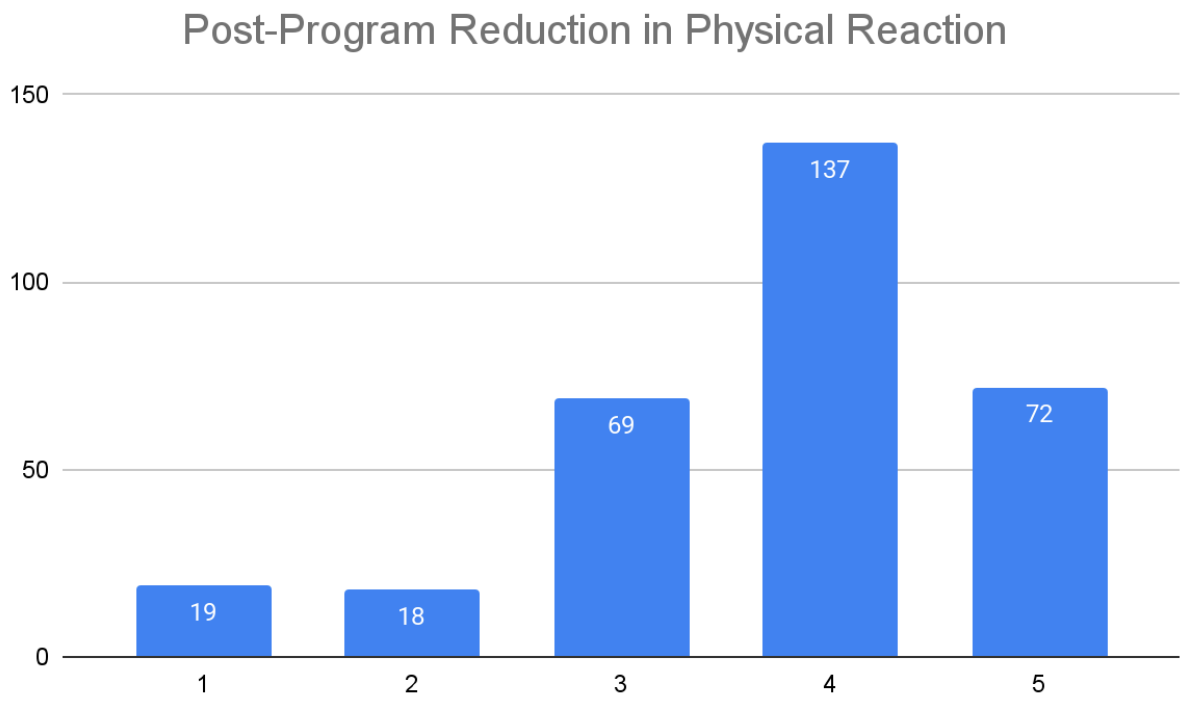
SR2: Post-Program Reduction in Physical Reaction

Users were asked whether they experienced fewer intense physical reactions (e.g., rapid heartbeat, sweating) when reminded of past traumatic events after using the Virtual EMDR self-guided program. Responses were rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree). The **average score was 3.71**, with a **standard deviation of 1.07**, indicating a generally favorable response, with moderate variability in perceived improvement.

The distribution of responses was as follows:

- **72 users (23%)** strongly agreed (score of 5) that physical reactions had decreased
- **137 users (43%)** agreed (score of 4), making this the most frequently selected rating
- **69 users (22%)** selected a neutral response (score of 3)
- A smaller group, **37 users (12%)**, reported little or no improvement (scores of 1 or 2)

Overall, these findings suggest that the majority of users perceived a reduction in trauma-related physical symptoms following their engagement with the program.



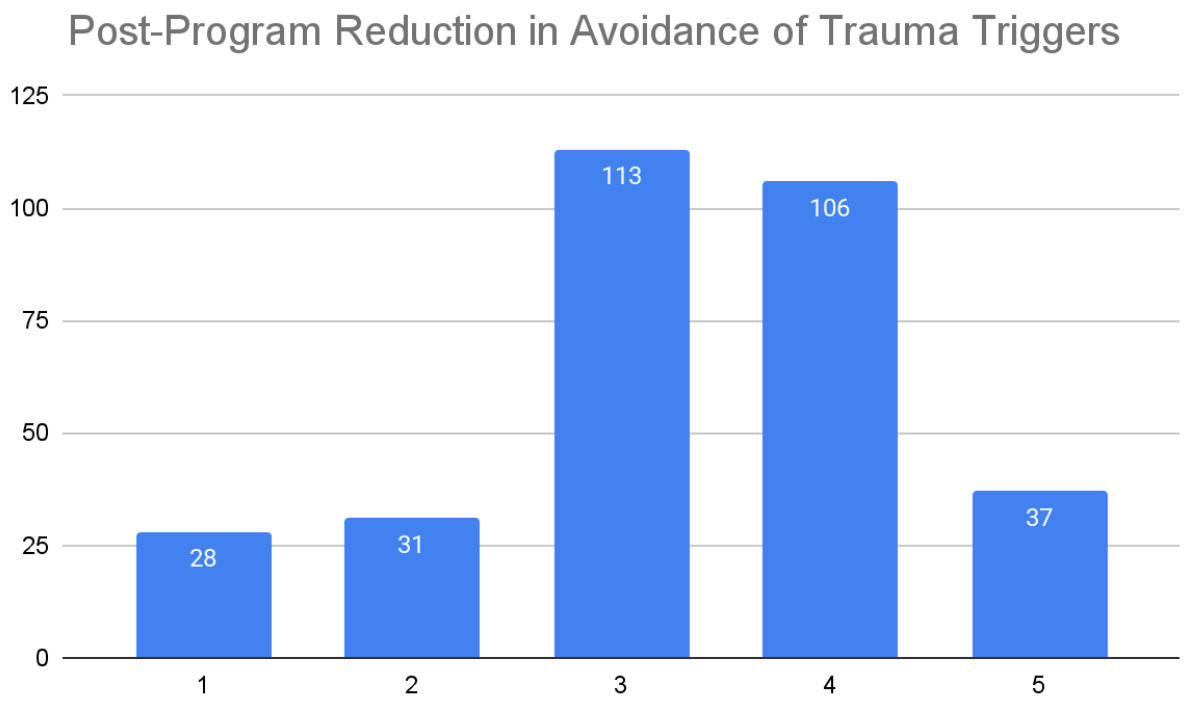
SR3: Post-Program Reduction in Avoidance of Trauma Triggers

Users were asked whether they avoid situations, people, or activities related to their trauma less often since using the Virtual EMDR self-guided program. Responses were measured on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree). The **average score was 3.30**, with a **standard deviation of 1.08**, indicating a modest but mixed perception of improvement in avoidance-related behaviors.

The distribution of responses reflects this variability:

- **37 users (12%)** strongly agreed (score of 5) that they were avoiding less
- **106 users (34%)** agreed (score of 4)
- The largest group, **113 users (36%)**, responded neutrally (score of 3)
- **59 users (18%)** disagreed or strongly disagreed (scores of 1 or 2)

These results suggest that while a portion of users experienced meaningful progress in confronting trauma-related triggers, many remained neutral or did not perceive significant change in this area. This dimension of symptom reduction may require more time, different pacing, or additional support.



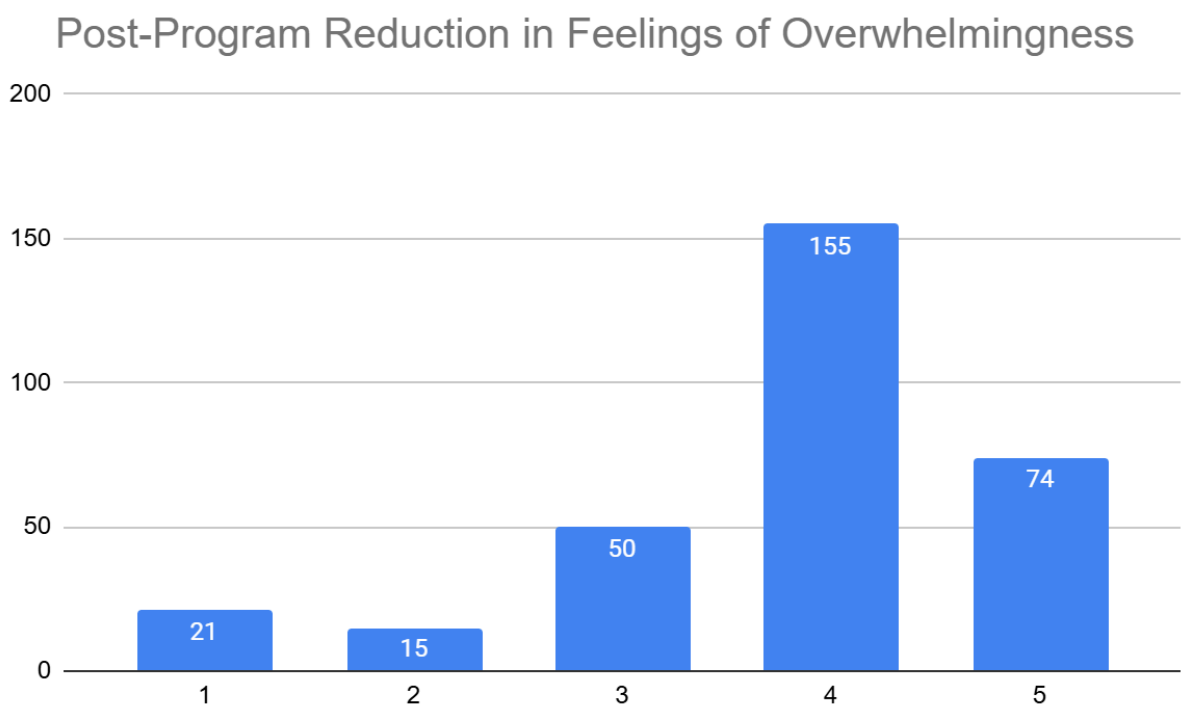
SR4: Post-Program Reduction in Feelings of Overwhelmingness

Users were asked whether they felt less overwhelmed by their psychological symptoms after completing sessions in the Virtual EMDR self-guided program. Responses were recorded on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree). The **average score was 3.78**, with a **standard deviation of 1.07**, indicating generally positive outcomes with a clear lean toward reduced emotional overwhelm.

The distribution of responses supports this trend:

- **74 users (23%)** strongly agreed (score of 5)
- **155 users (49%)** agreed (score of 4), the most frequently selected response
- **50 users (16%)** responded neutrally (score of 3)
- A smaller portion, **36 users (11%)**, disagreed or strongly disagreed (scores of 1 or 2)

These results suggest that a majority of users experienced meaningful relief from feelings of overwhelm following their engagement with the program. The consistency of positive ratings in this item reinforces the potential of Virtual EMDR to support emotional regulation and psychological stabilization.



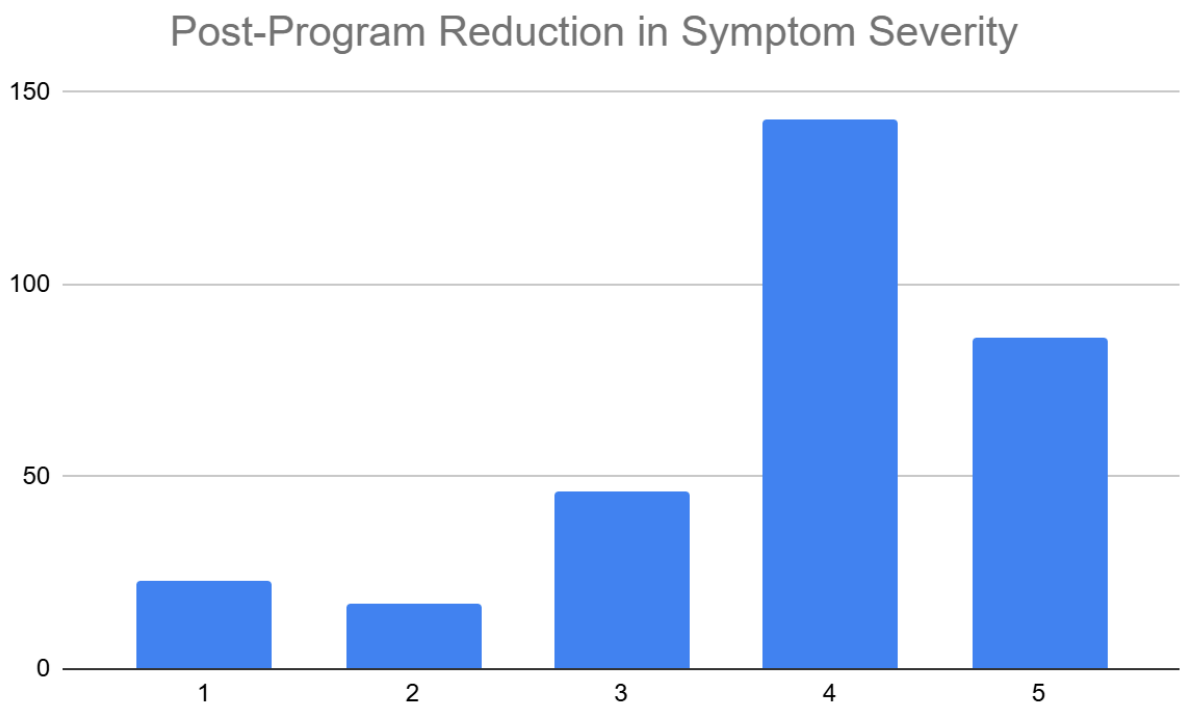
SR5: Post-Program Reduction in Symptom Severity

To gauge the overall impact of the Virtual EMDR self-guided program on psychological well-being, users were asked whether the severity of their symptoms had decreased after completing the program. Rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree), responses yielded a **mean score of 3.80** with a **standard deviation of 1.12**, suggesting that most users perceived moderate to strong symptom relief.

The response distribution further supports this positive trend:

- **86 users (27%)** strongly agreed (score of 5)
- **143 users (45%)** agreed (score of 4), the most common response
- **46 users (15%)** reported a neutral experience (score of 3)
- **40 users (13%)** disagreed or strongly disagreed (scores of 1 or 2)

These findings indicate that a substantial majority of users experienced a reduction in the overall intensity of their symptoms. As a broad measure of therapeutic effect, this item serves as a valuable indicator of the program's impact on users' day-to-day mental health.



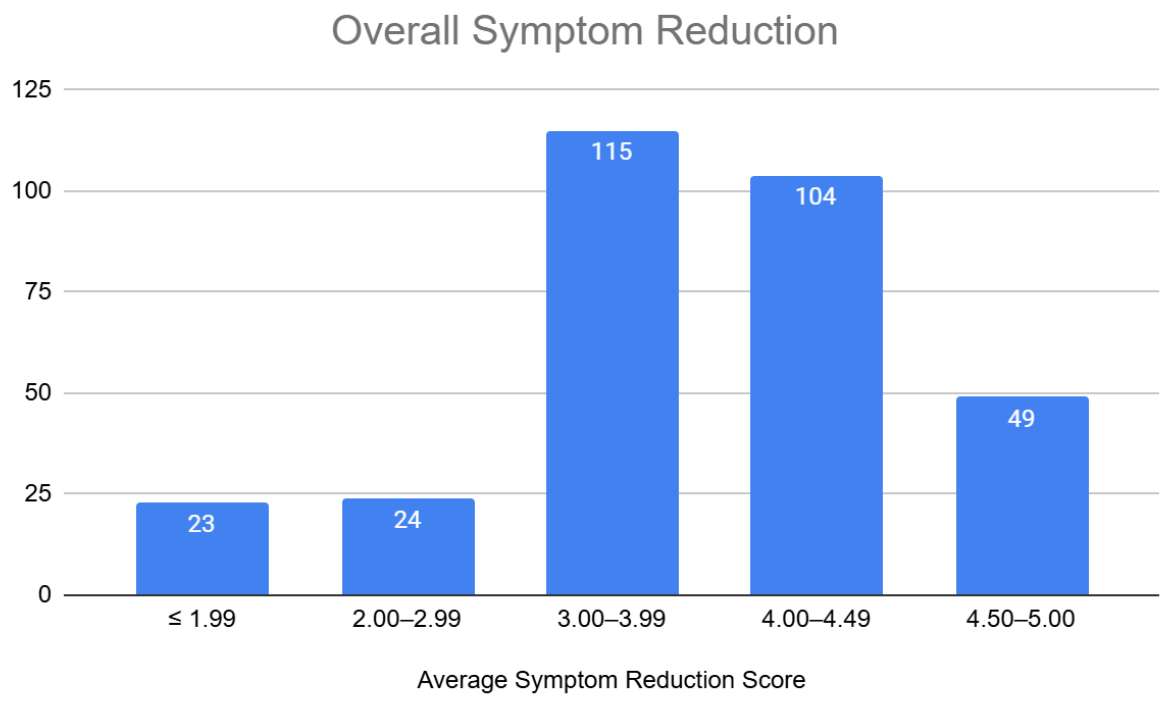
SR_avg: Symptom Reduction Averages

To assess changes in trauma-related symptoms, users responded to five items related to symptom reduction, with responses averaged to create an overall score on a 1–5 scale (1 = completely disagree, 5 = completely agree). The **mean score was 3.67** (SD = 0.94), indicating that, on average, users reported moderate to strong symptom improvement after using the Virtual EMDR self-guided program.

The distribution of scores reflects a diverse range of experiences:

- **49 users (15%)** reported scores above 4.5, indicating strong agreement that symptoms had reduced
- **104 users (33%)** scored between 4.00–4.49, suggesting consistent perceived benefit
- The largest group, **115 users (37%)**, fell between 3.00–3.99, reflecting moderate symptom relief
- A smaller portion, **47 users (15%)**, scored below 3.00, suggesting limited or unclear benefit

These results suggest that while the majority of users experienced meaningful reductions in trauma-related symptoms, a range of outcomes were reported. This variation provides a strong foundation for further analysis exploring how different user groups—based on trauma history, prior therapy experience, technology comfort, or usage patterns—may differ in their reported symptom reduction. Identifying these subgroup differences will support the development of more personalized and effective user experiences.



Section 8: Emotional Regulation

This section evaluates user-reported changes in emotional regulation following their engagement with the Virtual EMDR self-guided program. Emotional regulation is a critical marker of trauma recovery, encompassing users' ability to manage reactions such as anxiety, irritability, startle response, and emotional steadiness in the face of stress. Five items captured these dimensions, and responses were rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree). Together, these items provide insight into how the program may help users regain emotional control and stability over time.

The **overall average score across the five items was 3.57** (SD = 0.97), indicating moderate improvement in emotional regulation among users. Notably, **over 40% of users** scored between 4.00 and 5.00 on average, suggesting strong perceived benefit in emotional management. However, 15% of users scored below 3.00, highlighting that gains in this area were not universal—an important signal for future personalization and support strategies.

Several individual items stood out:

- **Managing anxiety** received the highest agreement overall, with a **mean of 3.63** and nearly **two-thirds of users agreeing or strongly agreeing** that they felt less anxious after using the program.

- **Emotional control in challenging or stressful situations** also emerged as a strength, with both items—managing emotional responses during difficulty (mean = 3.62) and remaining calm under stress (mean = 3.60)—showing similarly strong endorsement from a majority of users.

- **Irritability and anger regulation** (mean = 3.51) and **reduction in jumpiness/startle response** (mean = 3.49) showed slightly lower scores, with a more sizable portion of users responding neutrally. These findings may reflect the complexity of physiological and affective regulation in trauma recovery, where some symptoms may require more time or intensity of use to shift.

Collectively, these results indicate that the program is supporting emotional stabilization for many users, particularly in areas related to anxiety and stress regulation. The spread of scores across items and users, however, underscores the importance of examining these patterns more closely.

In future analyses, we will investigate how emotional regulation outcomes differ across key user groups—such as those with differing trauma histories, support systems, or prior therapy experience—to identify the conditions under which the program is most effective. These subgroup comparisons will help guide improvements in user pathways, content delivery, and personalization to enhance impact across diverse user populations.

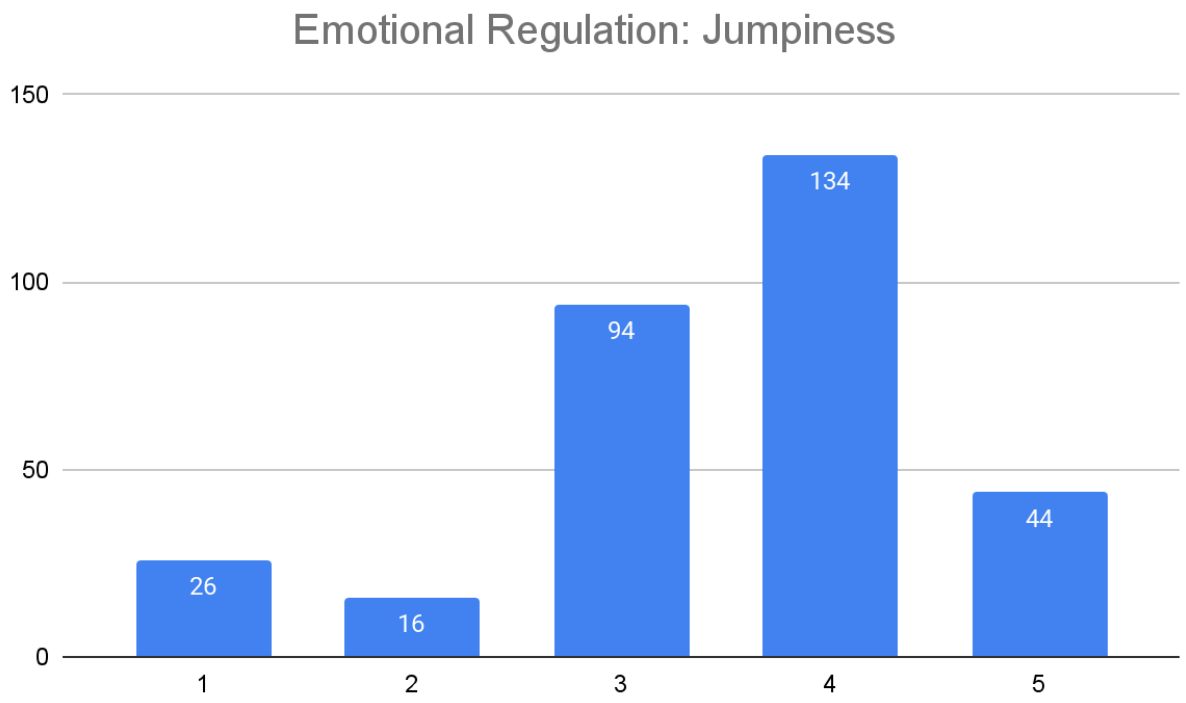
ER1: Post-Program Emotional Regulation in Jumpiness

As part of the emotional regulation dimension, users were asked whether they felt less jumpy or easily startled since beginning the Virtual EMDR self-guided program. This item reflects a common physiological response to trauma and is an important indicator of nervous system regulation and psychological stabilization. Rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree), the **mean score was 3.49**, with a **standard deviation of 1.06**, suggesting a moderate average improvement with meaningful variation across users.

The distribution of responses showed that:

- **44 users (14%)** strongly agreed (score of 5)
- **134 users (42%)** agreed (score of 4), the most common response
- **94 users (29%)** responded neutrally (score of 3)
- **42 users (13%)** disagreed or strongly disagreed (scores of 1 or 2)

These results indicate that while a majority of users reported a reduction in startle response, a significant portion remained neutral or uncertain about changes in this specific symptom. This may reflect the complexity and slower pace of change in physiological arousal patterns compared to cognitive or emotional symptoms.



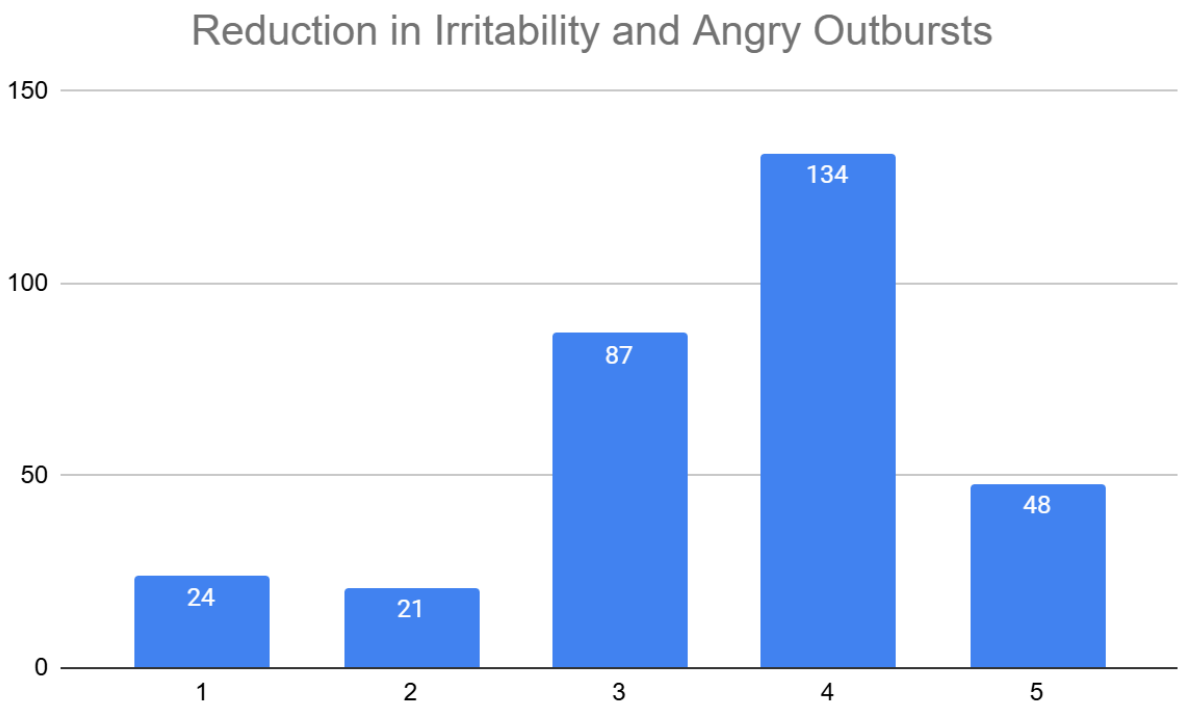
ER2: Post-Program Emotional Regulation in Irritability and Anger Outbursts

As part of the emotional regulation scale, users were asked whether they felt less irritable or were less likely to experience angry outbursts after using the Virtual EMDR self-guided program. This question targets common emotional responses linked to trauma and stress, offering insight into how the program may help users manage reactive emotions. Rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree), the **mean score was 3.51**, with a **standard deviation of 1.07**, reflecting a moderate average improvement across the user base.

The response distribution further illustrates this trend:

- **48 users (15%)** strongly agreed (score of 5)
- **134 users (42%)** agreed (score of 4), the most common response
- **87 users (27%)** responded neutrally (score of 3)
- **45 users (14%)** disagreed or strongly disagreed (scores of 1 or 2)

These findings suggest that many users experienced at least some reduction in emotional reactivity, with more than half agreeing that the program helped reduce irritability and anger. At the same time, a sizable neutral group may reflect either subtle changes or a need for continued emotional support.



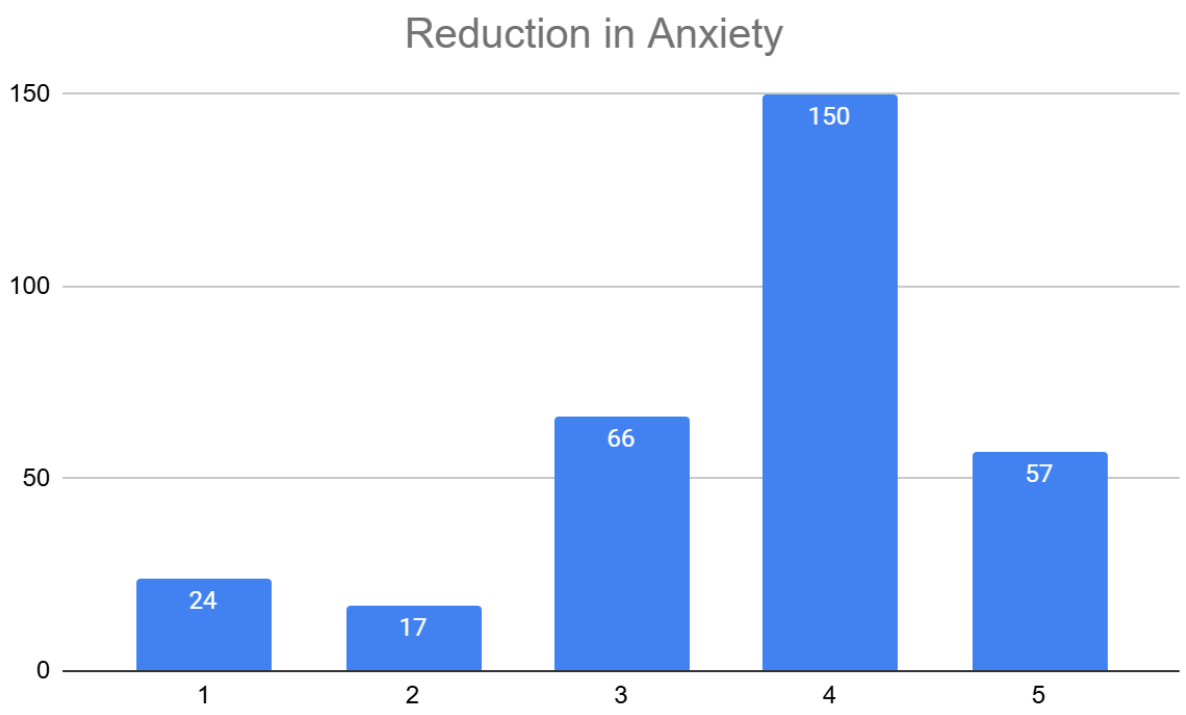
ER3: Post-Program Emotional Regulation in Anxiety

As part of the emotional regulation dimension, users were asked whether they felt less anxious as a result of using the Virtual EMDR self-guided program. Anxiety is a common trauma-related symptom, and reduction in anxious arousal is a meaningful indicator of therapeutic impact. Responses were captured on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree). The **mean score was 3.63**, with a **standard deviation of 1.08**, reflecting generally favorable user perceptions with a moderate spread of responses.

The distribution reveals:

- **57 users (18%)** strongly agreed (score of 5)
- **150 users (46%)** agreed (score of 4), the most common response
- **66 users (20%)** responded neutrally (score of 3)
- **41 users (13%)** disagreed or strongly disagreed (scores of 1 or 2)

These results suggest that the majority of users experienced a reduction in anxiety after engaging with the program, with nearly two-thirds reporting agreement or strong agreement. The presence of a neutral middle group also reflects the nuanced nature of emotional symptoms like anxiety, which may respond gradually or require ongoing support.



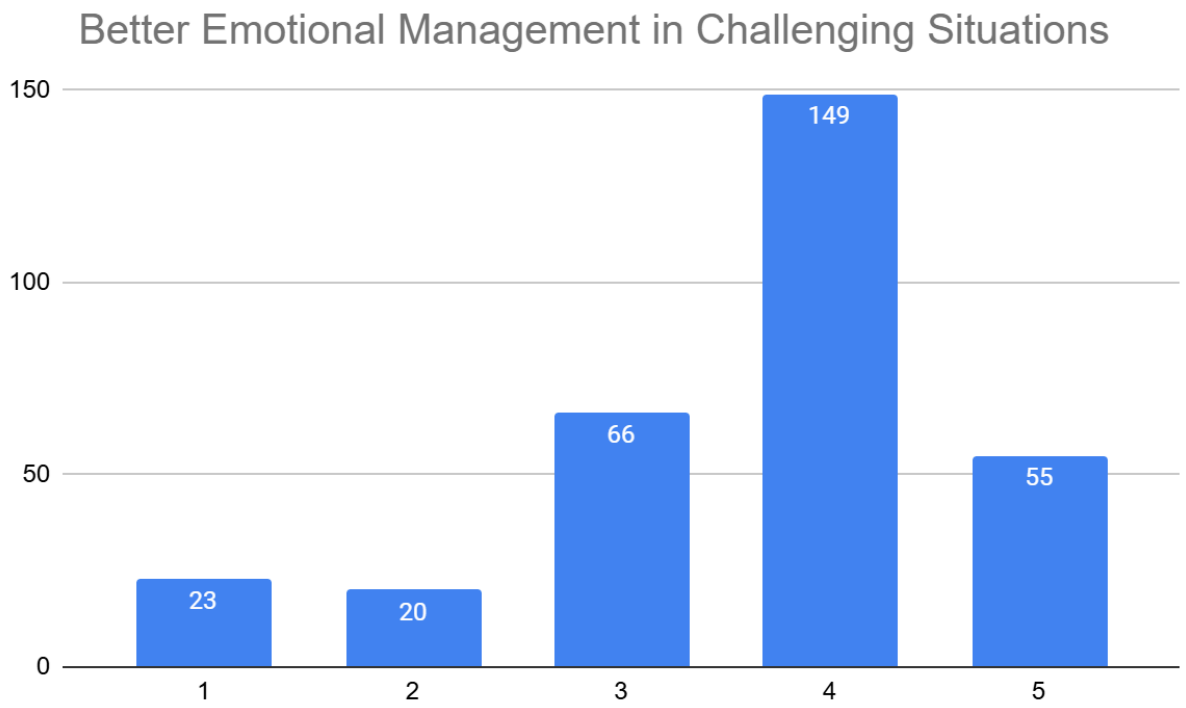
ER4: Post-Program Emotional Regulation in Challenging Situations

Users were asked whether they felt better able to manage their emotional responses in challenging situations after starting the Virtual EMDR self-guided program. This question reflects a critical aspect of emotional regulation—resilience and control in the face of stressors. Responses were recorded on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree). The **mean score was 3.62**, with a **standard deviation of 1.08**, suggesting moderate-to-strong perceived improvement with some variability across users.

The response breakdown was as follows:

- **55 users (17%)** strongly agreed (score of 5)
- **149 users (46%)** agreed (score of 4), the most frequent response
- **66 users (20%)** selected a neutral response (score of 3)
- **43 users (14%)** disagreed or strongly disagreed (scores of 1 or 2)

These findings indicate that a majority of users reported gains in their ability to manage emotions during difficult moments, with over 60% expressing agreement or strong agreement. This result reinforces the program's potential to strengthen users' capacity for emotional regulation under stress—an important predictor of well-being and functional recovery.



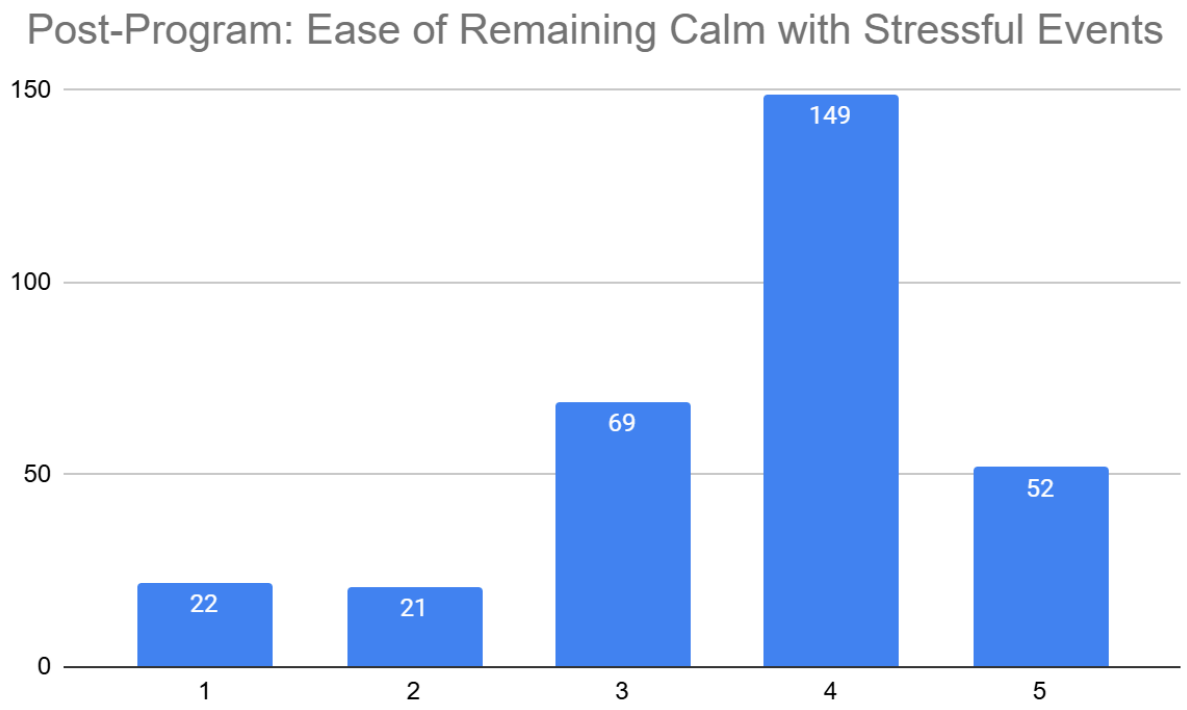
ER5: Post-Program Ease of Remaining Calm with Stressful Events

Users were asked whether they found it easier to remain calm when faced with stressful events after using the Virtual EMDR self-guided program. This item reflects a key goal of emotional regulation—reducing reactivity and maintaining emotional steadiness in challenging moments. Responses were rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree). The **mean score was 3.60**, with a **standard deviation of 1.06**, indicating generally positive outcomes with moderate variability in user experiences.

The response distribution was as follows:

- **52 users (17%)** strongly agreed (score of 5)
- **149 users (46%)** agreed (score of 4), the most common response
- **69 users (21%)** responded neutrally (score of 3)
- **43 users (14%)** disagreed or strongly disagreed (scores of 1 or 2)

These results suggest that a majority of users experienced a meaningful improvement in their ability to stay calm under stress, with over 60% reporting agreement or strong agreement. This is an encouraging indicator of the program's effectiveness in supporting emotional steadiness—particularly relevant for users managing trauma-related triggers in daily life.



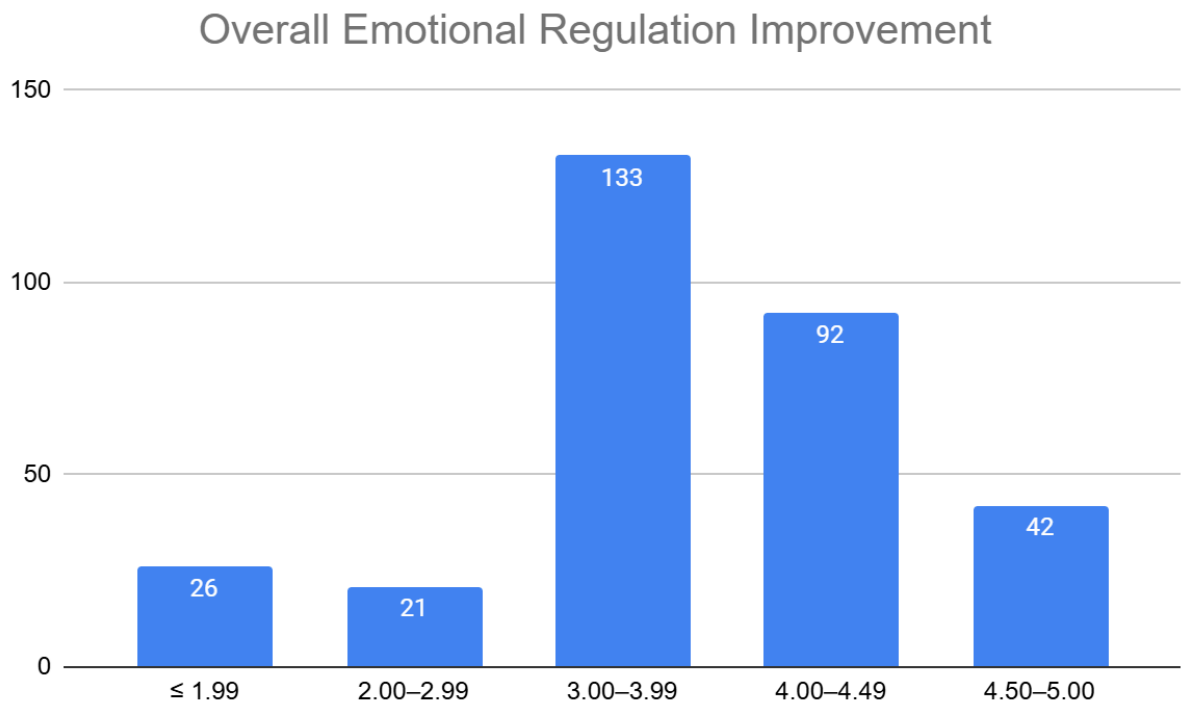
ER_avg: Overall Emotional Regulation Averages

To assess broader changes in emotional regulation, users responded to five items related to their ability to manage emotional responses, including reductions in anxiety, irritability, and reactivity in stressful or challenging situations. Responses across these items were averaged for each user to generate an overall emotional regulation score on a 1–5 scale (1 = completely disagree, 5 = completely agree). The **mean score was 3.57** with a **standard deviation of 0.97**, indicating that, on average, users experienced moderate improvement in emotional regulation following use of the Virtual EMDR self-guided program.

The score distribution reveals meaningful variation across user experiences:

- **42 users (13%)** scored in the highest range (4.50–5.00), suggesting strong perceived emotional improvement
- **92 users (28%)** fell between 4.00–4.49, indicating consistent gains
- The largest group, **133 users (41%)**, scored between 3.00–3.99, reflecting moderate improvement
- A smaller portion, **47 users (15%)**, scored below 3.00, indicating limited or no perceived change

These results highlight the program's potential to strengthen emotional regulation for a broad user base, while also pointing to individual variability that warrants deeper exploration. Future analyses will examine how emotional regulation outcomes relate to session engagement, trauma type, and support system strength—helping to identify patterns that could inform targeted improvements and personalized user support.



Section 9: Functionality and Daily Life

This section evaluates the extent to which users felt improvements in everyday functioning after engaging with the Virtual EMDR self-guided program. Five items addressed concentration, comfort re-engaging in previously avoided activities, relational quality, participation in joyful experiences, and overall ability to manage responsibilities. Together, these indicators provide a broader perspective on how symptom relief translates into enhanced daily life and well-being. All items were rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree), and scores were averaged to compute an overall functional improvement index.

The **average overall functional score was 3.49** (SD = 0.93), suggesting that users, on average, experienced moderate gains in their ability to function across personal, social, and occupational domains. The distribution reflects meaningful variation, with **32% of users scoring above 4.00**, indicating strong or consistent perceived improvements, while **16% scored below 3.00**, reflecting more limited or delayed functional change.

At the item level, several noteworthy patterns emerged:

- The strongest agreement was seen in users' ability to **re-engage in joyful activities**, with 57% of users agreeing or strongly agreeing that they could more easily participate in enjoyable experiences. This highlights a positive shift in emotional availability and daily quality of life.

- Similarly, over half of respondents reported **greater comfort engaging in previously avoided activities**, an important indicator of reduced avoidance—a common barrier in trauma recovery.

- Improvements in **relationships** and **general role functioning** (e.g., work, school, life responsibilities) were also evident, with approximately one-third of users expressing strong agreement that they had improved in these areas.

- **Concentration on daily tasks**, while improved for many, showed a relatively higher proportion of neutral responses (37%), suggesting that cognitive symptoms may be slower to shift or may require continued platform use for meaningful improvement.

These findings underscore the potential of the Virtual EMDR program to meaningfully impact users' functional well-being, beyond symptom relief alone. That said, the diversity in user experiences signals the need for more granular insights. In upcoming phases, we will compare functional improvement outcomes across key user subgroups—such as those with varying trauma histories, levels of prior therapy exposure, or session completion rates. These analyses will help us better understand which users experience the greatest benefit and will inform strategies for personalization, engagement, and platform refinement.

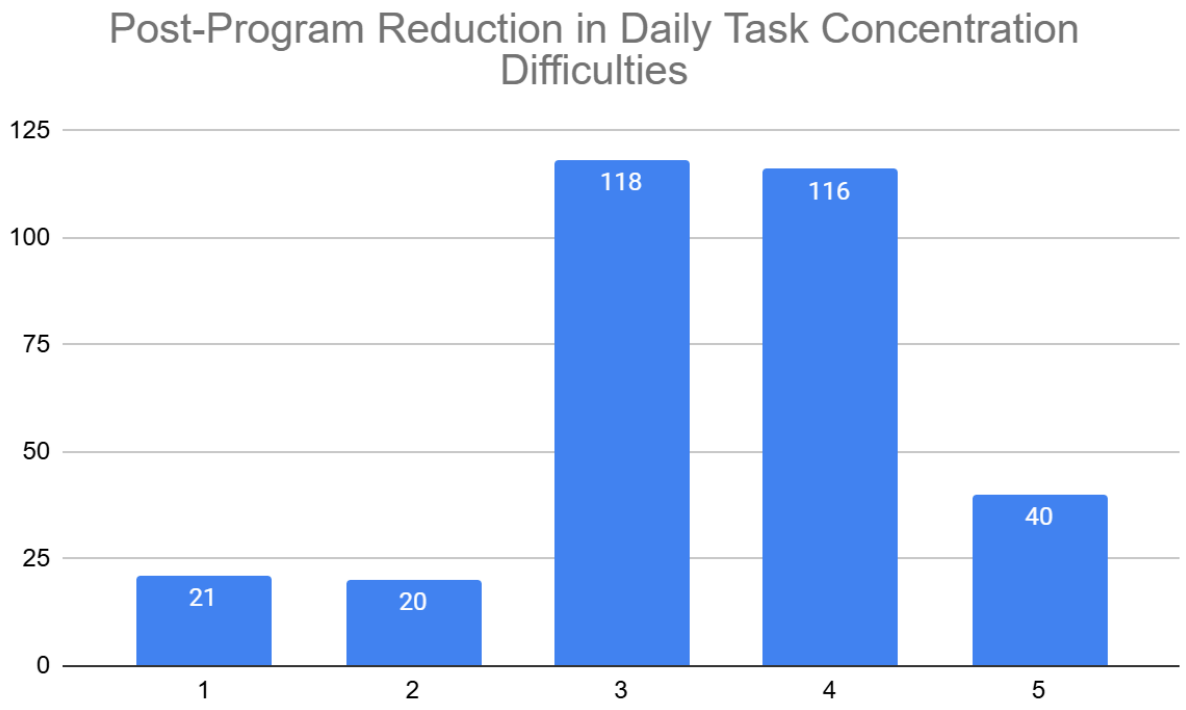
F&DL1: Post-Program Reduction in Daily Task Concentration Difficulties

As part of the functionality and daily life scale, users were asked whether they experienced less difficulty concentrating on daily tasks after using the Virtual EMDR self-guided program. This item captures a common challenge associated with trauma-related distress and evaluates whether users felt more mentally focused and capable in everyday activities. Responses were rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree). The **mean score was 3.43**, with a **standard deviation of 1.01**, suggesting a moderate average improvement in concentration with variability across individual experiences.

The distribution of responses shows a balanced spread:

- **40 users (13%)** strongly agreed (score of 5)
- **116 users (36%)** agreed (score of 4)
- **118 users (37%)** responded neutrally (score of 3)
- **41 users (13%)** disagreed or strongly disagreed (scores of 1 or 2)

These results indicate that while many users experienced enhanced focus and mental clarity in daily tasks, a significant portion remained neutral—suggesting that concentration may be a more subtle or secondary area of improvement for some.



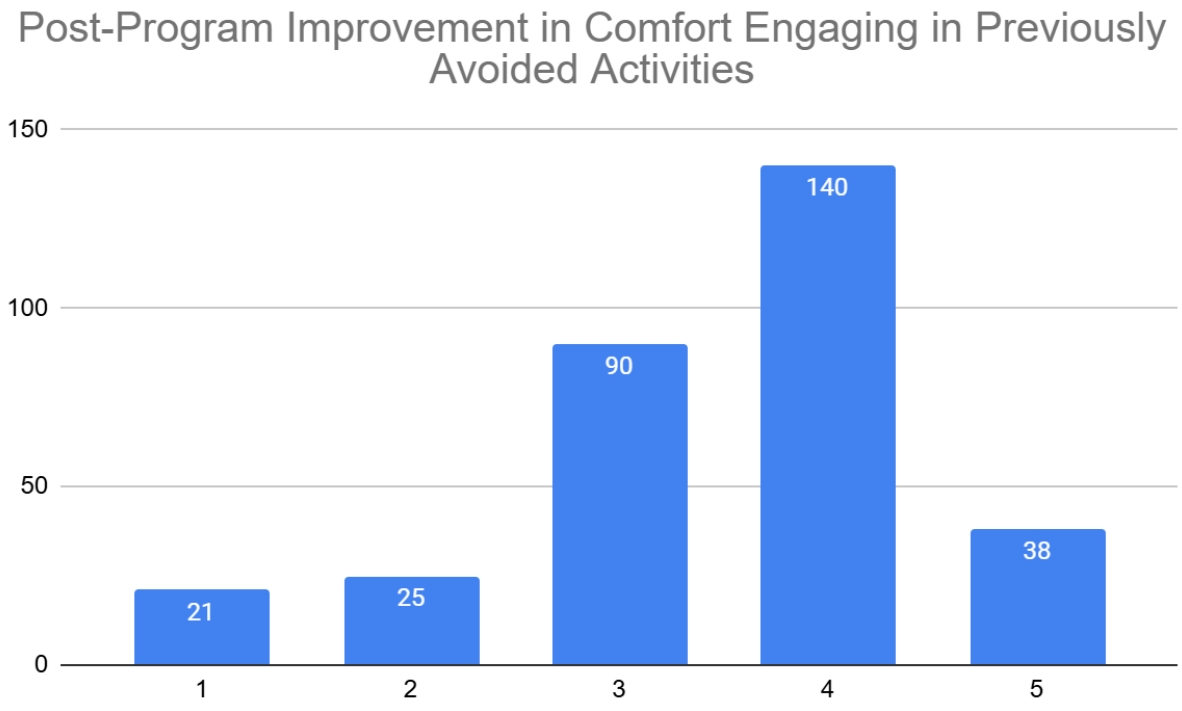
F&DL2: Post-Program Improvement in Comfort Engaging in Previously Avoided Activities

Users were asked whether they felt more comfortable participating in activities they had previously avoided due to distress, following their use of the Virtual EMDR self-guided program. This item reflects an important functional recovery marker, signaling reduced avoidance and improved readiness to re-engage with life. Rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree), the **mean score was 3.47**, with a **standard deviation of 1.03**, indicating moderate average improvement and a fairly broad distribution of responses.

The response breakdown reveals:

- **38 users (12%)** strongly agreed (score of 5)
- **140 users (43%)** agreed (score of 4), the most common response
- **90 users (28%)** responded neutrally (score of 3)
- **46 users (14%)** disagreed or strongly disagreed (scores of 1 or 2)

These results suggest that a large portion of users felt some relief from avoidance-related distress, with over half reporting improved comfort in re-engaging with previously difficult situations or activities. However, the notable neutral group indicates that for some users, this area may require further support or more time to change.



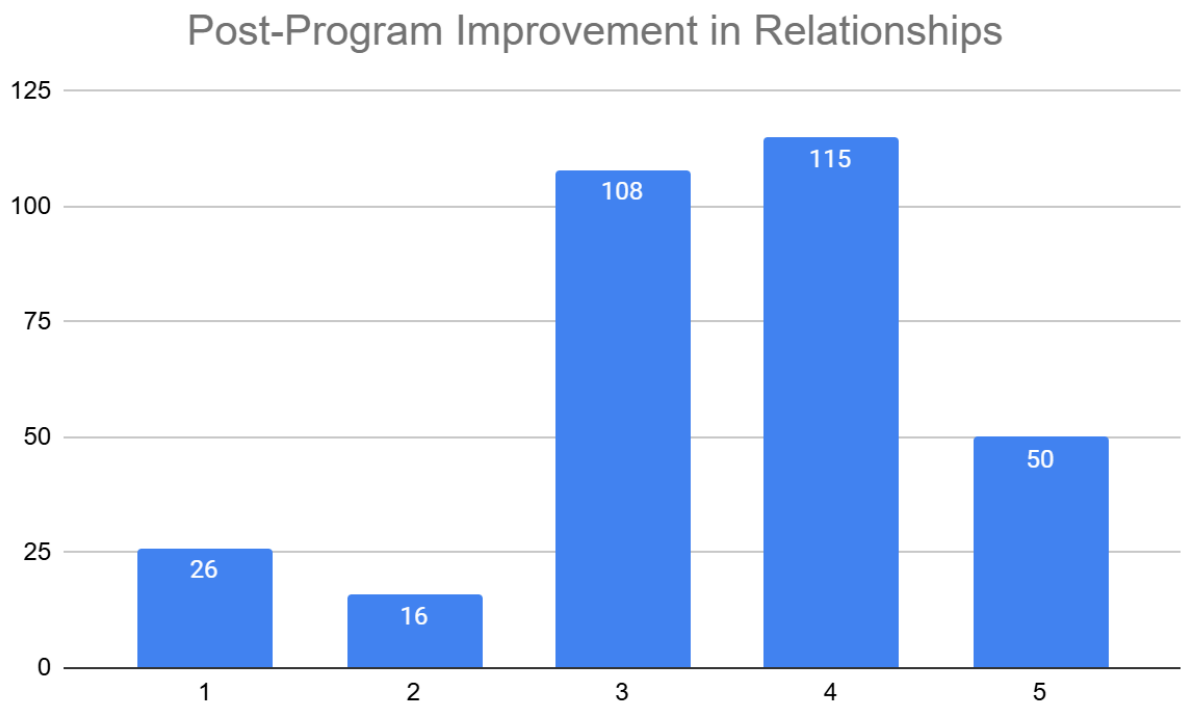
F&DL3: Post-Program Improvement in Relationships

Users were asked whether their relationships with family, friends, or colleagues had improved as a result of using the Virtual EMDR self-guided program. This item reflects how emotional and psychological progress may extend into social functioning—an important dimension of trauma recovery. Responses were measured on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree). The **mean score was 3.47**, with a **standard deviation of 1.08**, indicating moderate perceived improvement in relationship quality with a range of experiences reported.

The distribution of responses was as follows:

- **50 users (16%)** strongly agreed (score of 5)
- **115 users (37%)** agreed (score of 4)
- **108 users (35%)** responded neutrally (score of 3)
- **42 users (13%)** disagreed or strongly disagreed (scores of 1 or 2)

These findings suggest that many users noticed relational benefits following their use of the program, particularly in terms of reduced emotional reactivity or increased openness with others. However, the relatively high proportion of neutral responses highlights that relationship change may occur more gradually or depend on external factors beyond the platform itself.



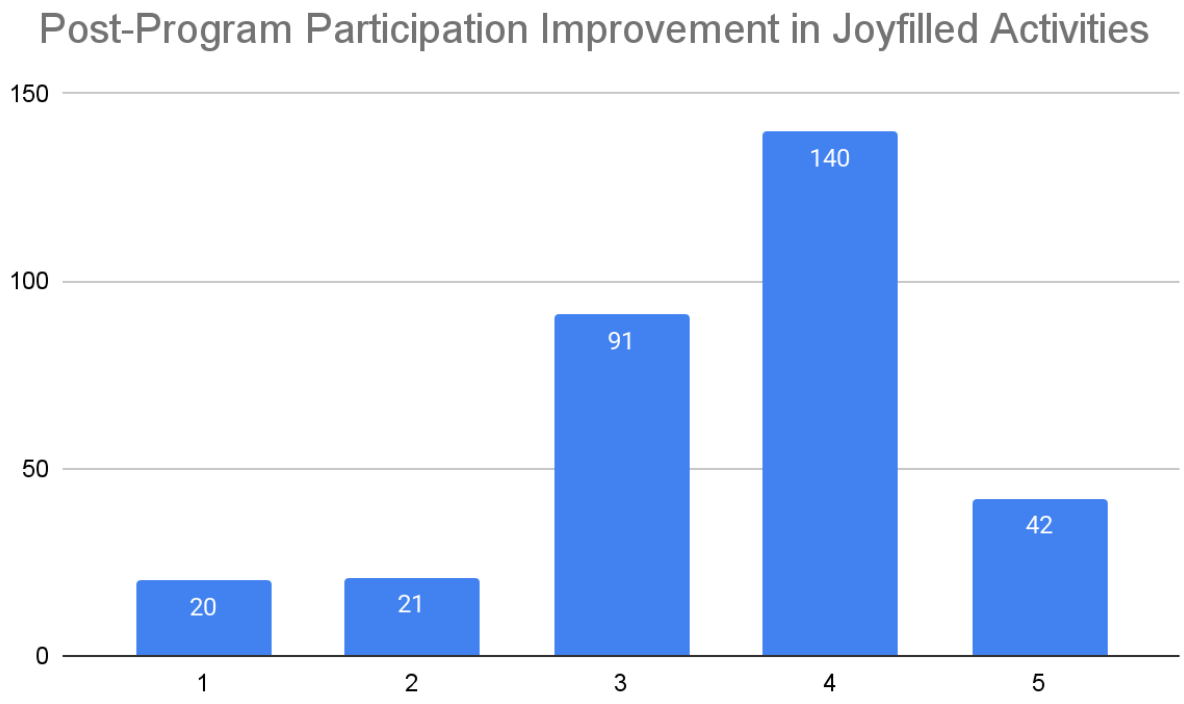
F&DL4: Post-Program Participation Improvement in Joyfilled Activities

Users were asked whether they were better able to participate in activities that bring them joy after completing the Virtual EMDR self-guided program. This item assesses improvements in emotional availability, engagement, and quality of life—important functional outcomes in trauma recovery. Responses were rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree). The **mean score was 3.52**, with a **standard deviation of 1.02**, indicating a moderately positive response overall with a reasonably consistent distribution.

The response breakdown is as follows:

- **42 users (13%)** strongly agreed (score of 5)
- **140 users (44%)** agreed (score of 4), the most common response
- **91 users (29%)** responded neutrally (score of 3)
- **41 users (13%)** disagreed or strongly disagreed (scores of 1 or 2)

These findings suggest that a majority of users experienced renewed capacity to engage in enjoyable or meaningful activities—often a key indicator of emotional recovery and reengagement with daily life. While the presence of a substantial neutral group suggests varied levels of impact, the strong positive trend is encouraging.



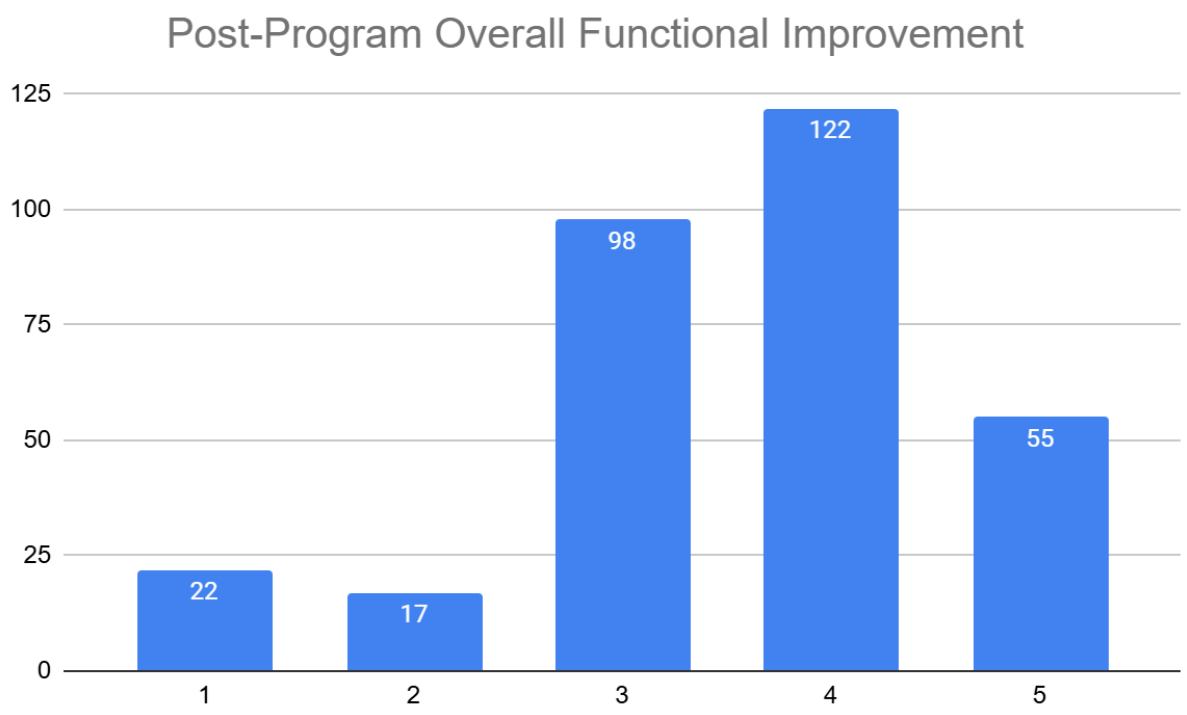
F&DL5: Post-Program Overall Functional Improvement

Users were asked whether their overall ability to function in work, school, or other life responsibilities had improved since using the Virtual EMDR self-guided program. This item serves as a broad indicator of general functional capacity and daily life effectiveness, capturing how emotional and psychological progress translates into real-world outcomes. Rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree), the **mean score was 3.49**, with a **standard deviation of 0.93**, indicating a moderate level of perceived improvement with a relatively consistent distribution.

The breakdown of responses is as follows:

- **55 users (17%)** strongly agreed (score of 5)
- **122 users (39%)** agreed (score of 4), the most common response
- **98 users (31%)** responded neutrally (score of 3)
- **39 users (13%)** disagreed or strongly disagreed (scores of 1 or 2)

These findings suggest that many users experienced functional gains following their engagement with the program, particularly in productivity, focus, and ability to manage responsibilities. At the same time, the presence of a sizable neutral group suggests that for some users, broader functional improvements may take more time or require continued use of the platform.



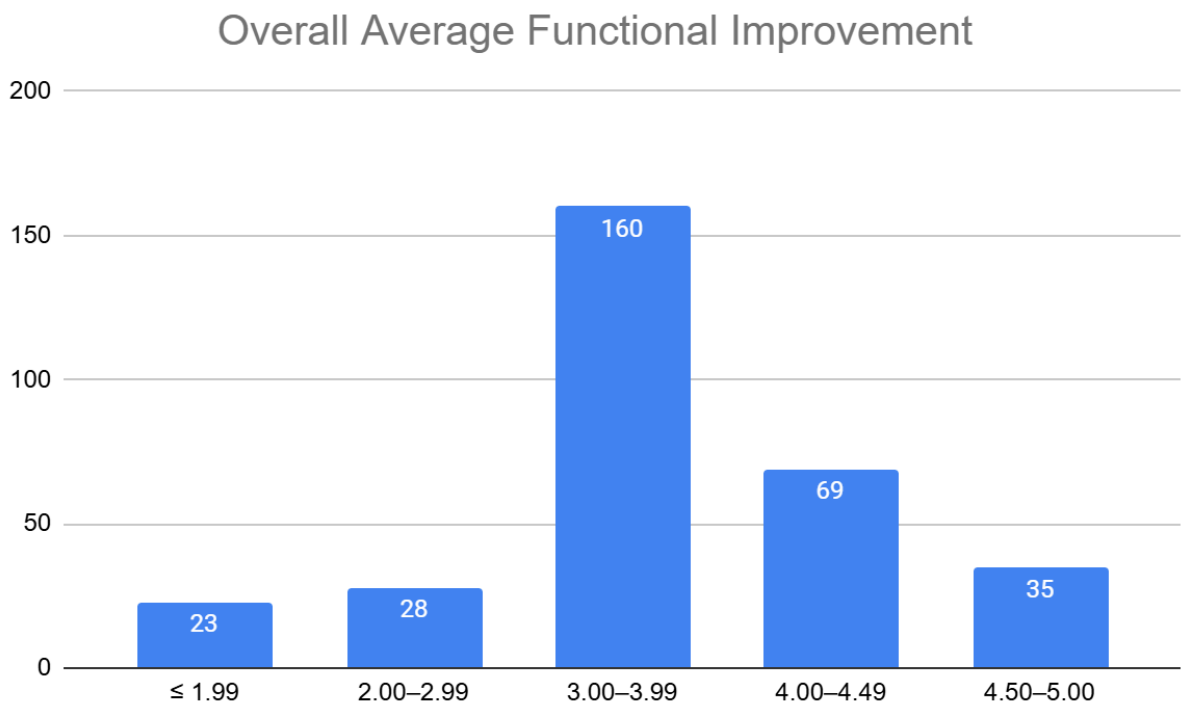
F&DL_avg: Overall Average Functional Improvement

To assess how users' day-to-day functioning changed following their use of the Virtual EMDR self-guided program, five items were averaged to create an overall functional improvement score. These items covered areas such as concentration, engagement in joyful activities, relational functioning, and the ability to manage responsibilities. Responses were rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree). The **mean score was 3.49**, with a **standard deviation of 0.93**, indicating a moderate overall improvement in users' perceived daily functioning.

The distribution of scores reflects a range of experiences:

- **35 users (11%)** reported strong functional improvement (4.50–5.00)
- **69 users (21%)** scored between 4.00–4.49, indicating consistent gains
- The largest group, **160 users (49%)**, fell between 3.00–3.99, reflecting moderate improvement
- **51 users (16%)** scored below 3.00, suggesting limited or no perceived change

These results indicate that a majority of users experienced at least some degree of functional improvement in their daily lives, with nearly one-third reporting strong and consistent gains. The spread of responses suggests meaningful individual variability, which will be further explored in future analyses. Comparing these functional outcomes across user groups—such as trauma type, therapy history, or session completion—will help identify who benefits most and inform enhancements to the platform's guidance and personalization.



Section 10: User Experience (no past EMDR)

This section evaluates participants' overall experience using the Virtual EMDR self-guided platform, with a focus on usability, comfort, engagement, and feature integration. The five items analyzed here cover core aspects of the user interface—ranging from ease of navigation to the platform's ability to support emotional focus during sessions. Together, these items offer a high-level perspective on the digital experience and its role in shaping therapeutic engagement.

A unique strength of this section is that it employed dynamic functionality: participants with no prior EMDR experience received one version of the question set, while those with past in-person EMDR were presented with a comparative format. This branching logic allows us to isolate feedback from first-time users versus those with a frame of reference—helping us better understand how the Virtual EMDR experience is perceived across different user backgrounds.

Notably, **254 of the 315 respondents (over 75%) had no prior EMDR experience**, suggesting that the platform is being widely adopted by first-time EMDR users. This insight has significant implications—not only for how the platform delivers value to new users, but also for how it could be positioned in future marketing efforts (e.g., "No prior EMDR experience required" or "Ideal for first-time users").

The average user experience score across all five items was **4.20 (SD = 0.77)**—a strong and consistent indicator that users found the platform smooth, intuitive, and emotionally safe. Scores for individual items were similarly high, with particularly strong endorsement for **ease of navigation (mean = 4.35)** and **perceived smoothness of the platform (mean = 4.24)**. Nearly **60% of users rated their overall experience above 4.0**, reinforcing that the platform is well-designed for self-guided use.

As we look ahead, subgroup analysis will explore whether user experience scores differ between first-time and returning EMDR users. These insights will guide further refinement of onboarding flows, feature prioritization, and user support—ensuring that the Virtual EMDR platform remains accessible, effective, and user-centered across diverse experience levels.

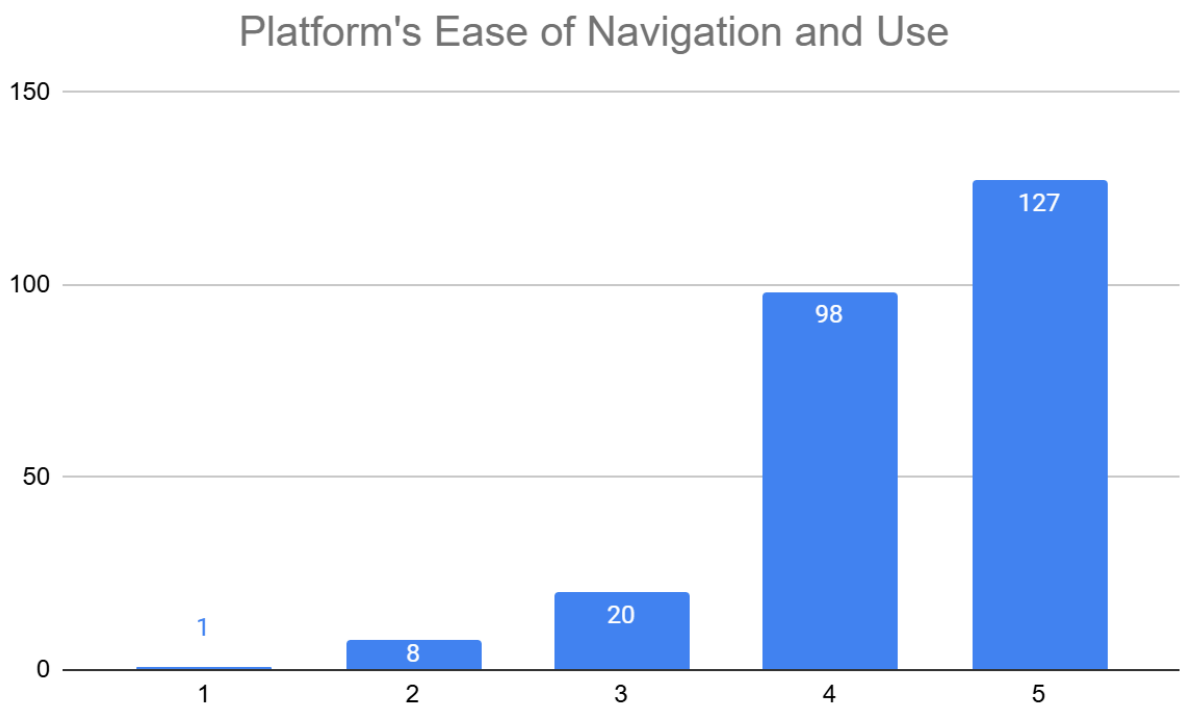
EQ1: Platform's Ease of Navigation and Use

Users were asked whether they found the Virtual EMDR self-guided platform easy to navigate and use during their sessions—an essential factor for usability, engagement, and overall user experience in a digital therapeutic setting. Rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree), the **mean score was 4.35**, with a **standard deviation of 0.79**, indicating a strong and consistent endorsement of platform usability.

The response distribution reinforces this positive trend:

- **127 users (40%)** strongly agreed (score of 5)
- **98 users (31%)** agreed (score of 4)
- **20 users (6%)** responded neutrally (score of 3)
- **9 users (3%)** disagreed or strongly disagreed (scores of 1 or 2)

These findings demonstrate that over **70% of users rated the platform's navigation experience a 4 or 5**, confirming the platform's user-friendly design and intuitive structure. The high usability rating is particularly important in a self-guided format, where ease of use directly supports program adherence and the user's therapeutic experience.



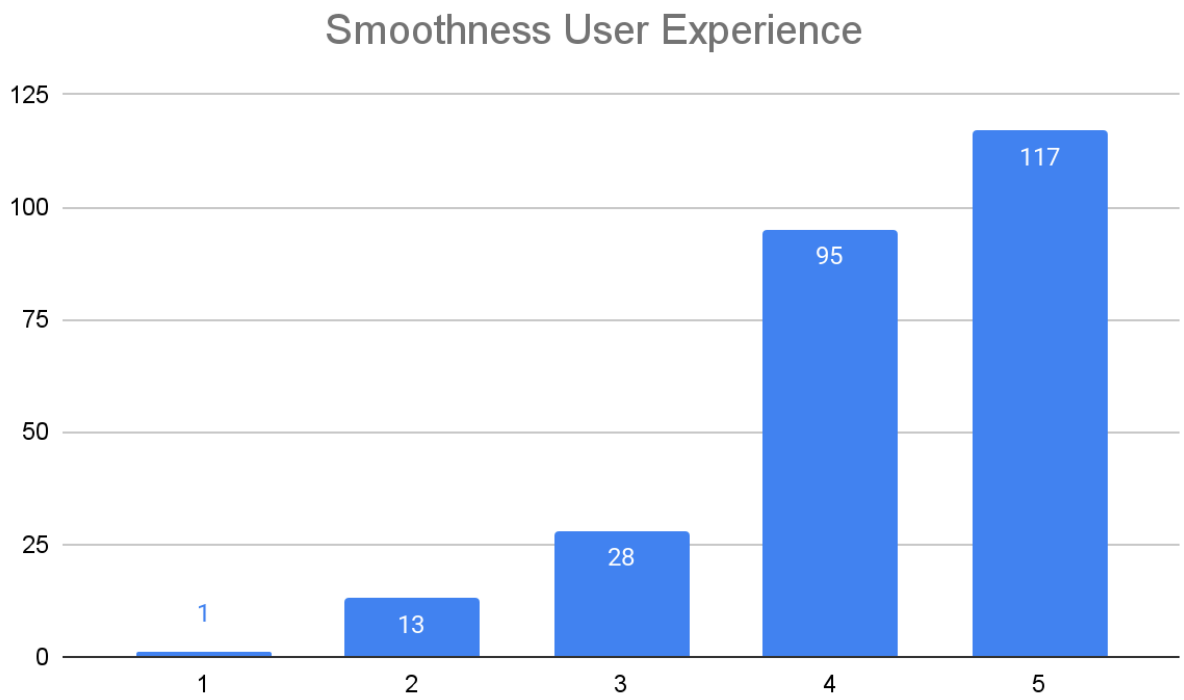
EQ2: The Platform provides a smooth user experience

Users were asked whether the Virtual EMDR self-guided platform provided a smooth and seamless experience throughout their sessions. This item reflects overall design stability, responsiveness, and functionality—key components of digital therapy delivery. Rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree), the **mean score was 4.24**, with a **standard deviation of 0.87**, suggesting strong overall satisfaction with the technical experience.

The distribution of responses shows:

- **117 users (37%)** strongly agreed (score of 5)
- **95 users (30%)** agreed (score of 4)
- **28 users (9%)** responded neutrally (score of 3)
- **14 users (4%)** disagreed or strongly disagreed (scores of 1 or 2)

These results indicate that more than **two-thirds of users (67%)** reported high satisfaction with the platform's smooth operation, reinforcing that the technical and interactive components of the program are functioning reliably. A seamless experience not only supports user trust but also reduces friction that could interrupt therapeutic engagement—making this a critical factor for sustained use and effectiveness.



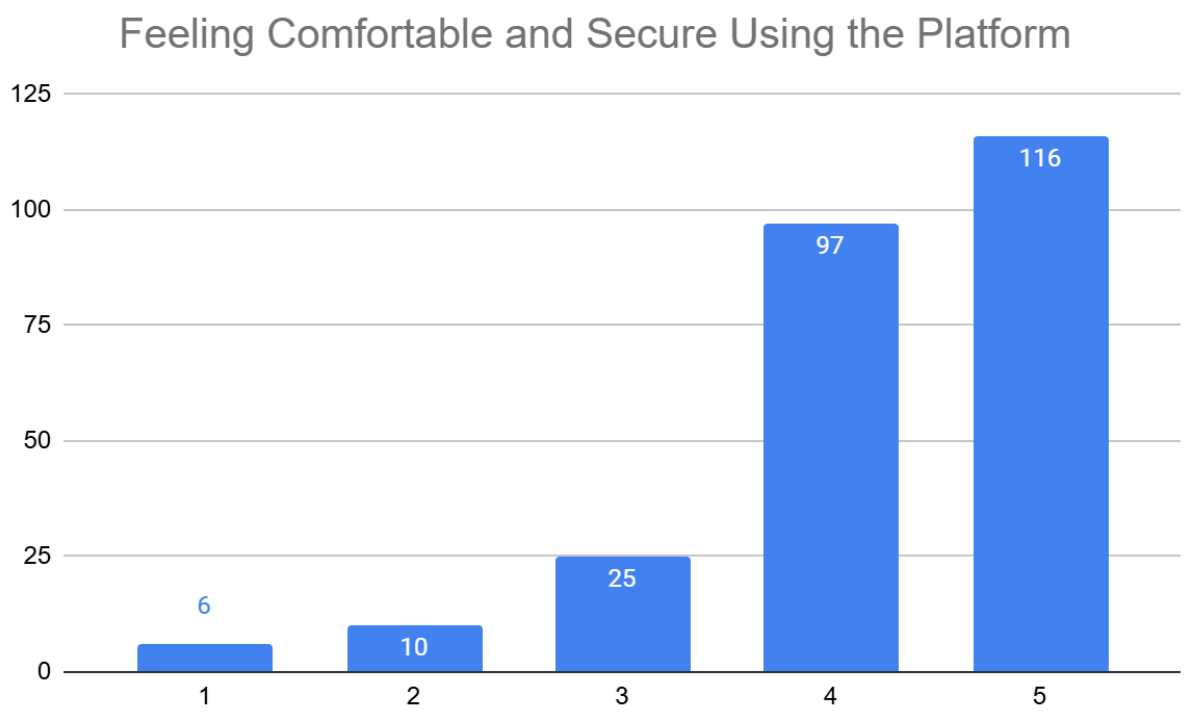
EQ3: Feeling Comfortable and Secure Using the Platform

Users were asked whether they felt comfortable and secure while using the Virtual EMDR self-guided platform—a critical factor in digital mental health settings, where psychological safety and privacy perceptions can influence engagement. Rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree), the **mean score was 4.21**, with a **standard deviation of 0.94**, indicating a strong overall sense of trust and emotional safety while using the program.

The response distribution showed:

- **116 users (37%)** strongly agreed (score of 5)
- **97 users (31%)** agreed (score of 4)
- **25 users (8%)** responded neutrally (score of 3)
- **16 users (5%)** disagreed or strongly disagreed (scores of 1 or 2)

With **68% of users** expressing strong comfort and confidence (scores of 4 or 5), these results suggest that the majority of participants felt psychologically safe navigating the platform and engaging in therapeutic exercises. This foundation of trust is essential for users to fully engage with emotionally sensitive content, and will continue to be a key area for monitoring and enhancement in future platform iterations.



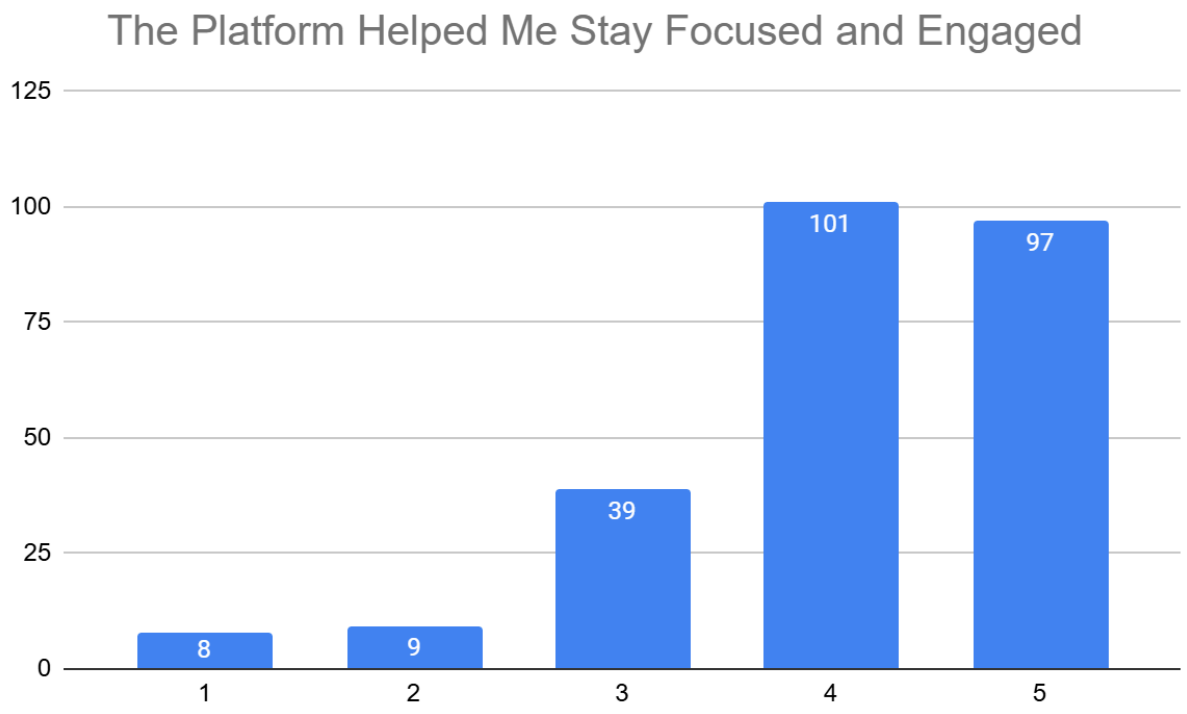
EQ4: The Platform Helped Me Stay Focused and Engaged

Users were asked whether the Virtual EMDR self-guided platform helped them stay focused and engaged throughout their sessions. This item reflects how well the platform supports sustained attention and emotional involvement—two essential components for therapeutic effectiveness in a self-directed format. Rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree), the **mean score was 4.06**, with a **standard deviation of 0.98**, indicating generally positive perceptions with some variability in user experience.

The response distribution was as follows:

- **97 users (31%)** strongly agreed (score of 5)
- **101 users (32%)** agreed (score of 4)
- **39 users (12%)** responded neutrally (score of 3)
- **17 users (5%)** disagreed or strongly disagreed (scores of 1 or 2)

With **63% of users** agreeing or strongly agreeing, these findings suggest that a majority of users found the platform effective in maintaining focus and engagement. This is a meaningful outcome for a self-guided therapeutic tool, where distraction or emotional disengagement can reduce the impact of the intervention. As future platform updates are considered, understanding which features most effectively promote sustained attention will be key to further optimizing user experience and therapeutic outcomes.



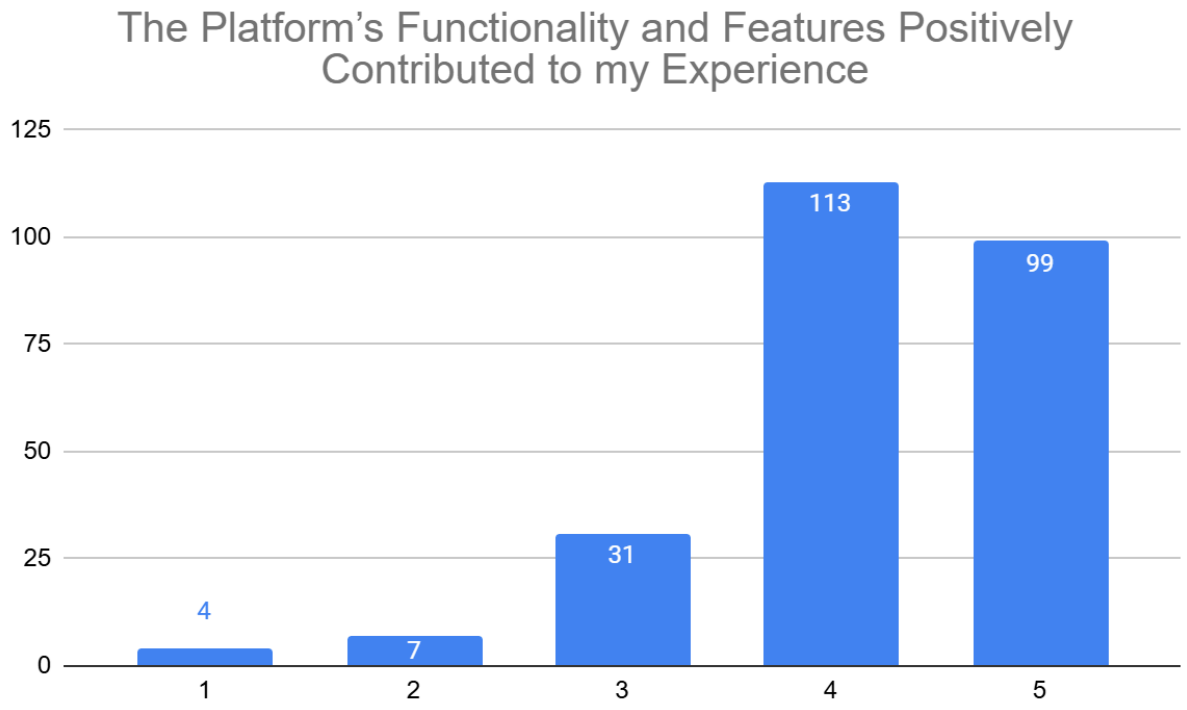
EQ5: The Platform's Functionality and Features Positively Contributed to my Experience

Users were asked whether the specific functionality and features of the Virtual EMDR self-guided platform contributed positively to their overall experience. This item reflects how the design, tools, and interactive components of the platform enhance usability, engagement, and therapeutic value. Rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree), the **mean score was 4.17**, with a **standard deviation of 0.86**, indicating a strong and consistent endorsement across users.

The response distribution was as follows:

- **99 users (31%)** strongly agreed (score of 5)
- **113 users (36%)** agreed (score of 4)
- **31 users (10%)** responded neutrally (score of 3)
- **11 users (4%)** disagreed or strongly disagreed (scores of 1 or 2)

With **67% of users** agreeing or strongly agreeing, these results highlight that the platform's features—such as session structure, interaction flow, and therapeutic tools—played a meaningful role in shaping a positive experience. The relatively low rate of disagreement further affirms the thoughtful integration of functionality with therapeutic intent. Future iterations can continue to build on these strengths while tailoring enhancements for users who may benefit from additional support or customization.



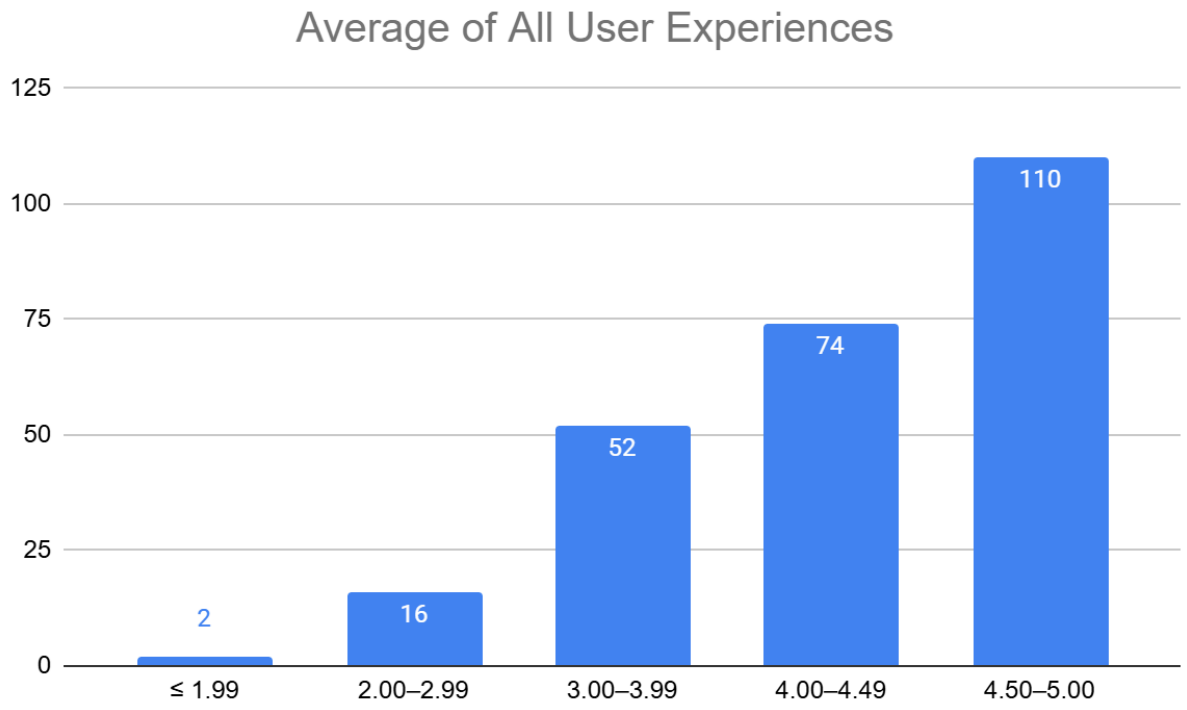
EQ_avg: Average of All User Experiences

To assess the broader usability and design effectiveness of the Virtual EMDR self-guided platform, five items were averaged to produce an overall user experience score. These items captured ease of navigation, platform smoothness, comfort and security, ability to stay focused, and the perceived contribution of platform features to the therapeutic experience. Rated on a 1–5 Likert scale, the **mean overall user experience score was 4.20**, with a **standard deviation of 0.77**, indicating consistently strong satisfaction with the platform's technical and experiential design.

The score distribution was as follows:

- **110 users (35%)** scored between 4.50–5.00, reflecting excellent user experience
- **74 users (24%)** scored between 4.00–4.49
- **52 users (17%)** scored between 3.00–3.99
- **18 users (6%)** scored below 3.00

These results demonstrate that **nearly 60% of users rated their experience above 4.0**, affirming the platform's effectiveness in delivering a smooth, intuitive, and psychologically safe environment for self-guided therapy. This strong usability foundation is critical for user engagement and therapeutic success, particularly in a digital mental health setting. Future analysis will explore how user experience scores align with symptom reduction, session completion, and demographic patterns—helping to further refine platform accessibility and effectiveness across diverse user groups.



Section 11: User Experience (Comparison: In-Person vs Virtual)

To evaluate how well the Virtual EMDR self-guided program holds up against traditional, clinician-led EMDR therapy, a subset of participants who had prior in-person EMDR experience were asked to reflect on multiple dimensions of comparison. These items covered ease of use, therapeutic effect, emotional safety, user engagement, and overall outcome parity. Their responses offer critical insight into the platform's perceived credibility, functionality, and emotional resonance for users familiar with conventional EMDR delivery.

Across all five comparison items, average scores ranged from 3.54 to 3.80, with a combined average of **3.68** (SD = 1.07), indicating generally favorable impressions. Notably, **44% of experienced users rated the program 4.0 or higher across comparison dimensions**, suggesting that nearly half perceived the Virtual EMDR experience to be comparable—or even superior—to in-person sessions.

Several trends are worth highlighting:

- **Ease of use (M = 3.80)** emerged as the highest-rated item, affirming that users found the self-guided interface intuitive and accessible—even when compared to live clinician guidance.
- **Therapeutic effect and overall outcome** scores reflected moderate agreement, with just over half of users reporting that the digital format matched their in-person experiences in terms of psychological impact.
- **Comfort, security, and engagement** were consistently rated positively, reinforcing the platform's ability to foster emotional safety and maintain attention—essential for trauma processing.

While the majority of comparative responses skewed positive, the presence of a meaningful neutral and critical subgroup points to opportunities for enhanced personalization. These users may differ in trauma history, session completion, or technology preferences—factors that will be explored in future subgroup analyses.

Importantly, **75% of all survey participants had no prior EMDR experience**, meaning their perceptions of the program are not colored by traditional comparisons. For the remaining 25% with prior experience, these findings strongly suggest that Virtual EMDR offers a credible and accessible therapeutic experience that, for many, parallels the support they received in clinical settings. As such, the platform shows promise not only as a first-line solution, but also as a viable complement or alternative to traditional EMDR therapy—especially when access to in-person care is limited.

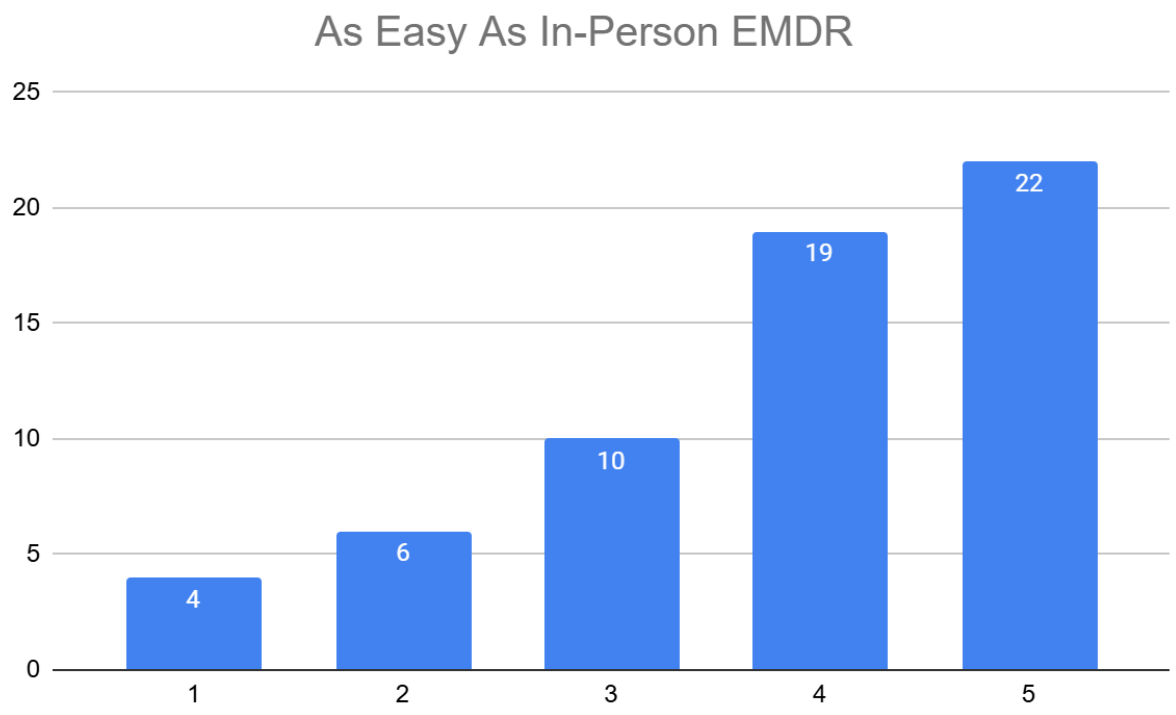
Comp1: As Easy As In-Person EMDR

Participants with prior EMDR experience were asked whether they found the Virtual EMDR self-guided program to be as easy to use as in-person EMDR sessions. This item offers valuable insight into how experienced users perceive the accessibility and usability of the digital format relative to traditional therapeutic delivery. Rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree), the **mean score was 3.80**, with a **standard deviation of 1.21**, indicating moderately high agreement with some variability.

The response distribution was as follows:

- **22 users (31%)** strongly agreed (score of 5)
- **19 users (27%)** agreed (score of 4)
- **10 users (14%)** responded neutrally (score of 3)
- **10 users (14%)** disagreed or strongly disagreed (scores of 1 or 2)

These results suggest that **58% of users with prior EMDR experience** found the self-guided program to be as easy to use as in-person sessions. While a smaller sample, this finding is encouraging—it demonstrates that the digital format is not only functional for first-time users, but also holds up well in comparison for those with traditional EMDR experience. This supports the platform's viability as a complementary or alternative solution and reinforces the importance of continued improvements that ensure ease of use, especially for those transitioning from in-person care.



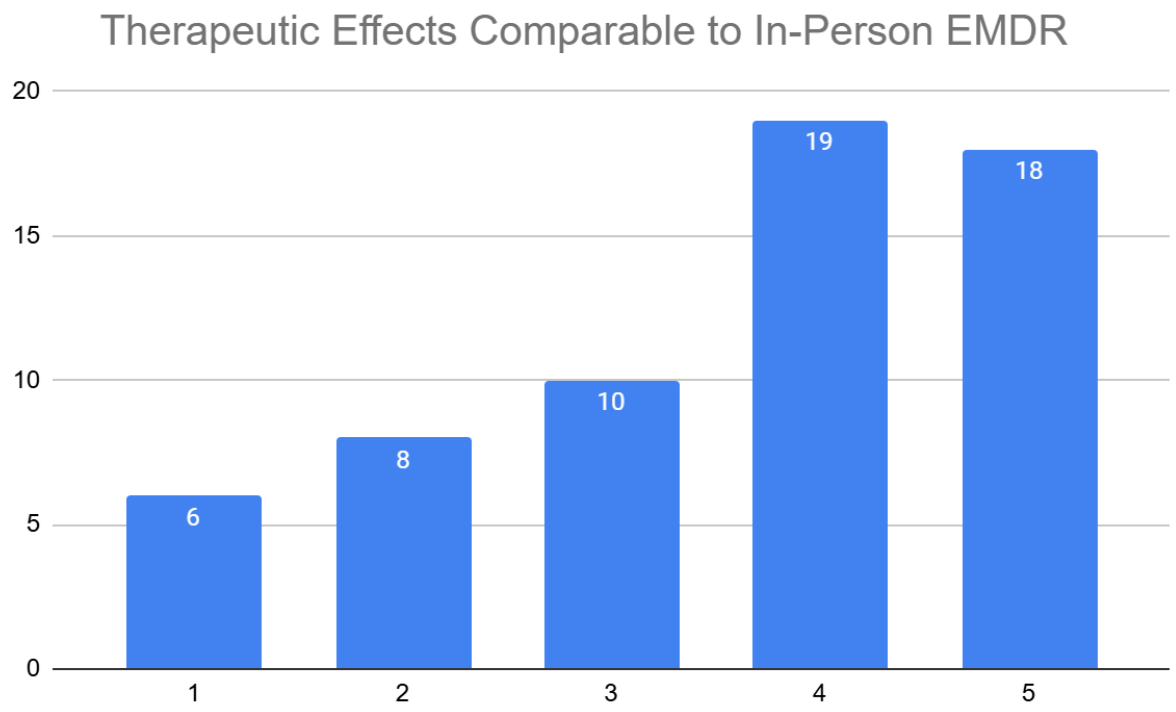
Comp2: Therapeutic Effects Comparable to In-Person EMDR

Participants with prior in-person EMDR experience were asked whether they found the therapeutic effects of the Virtual EMDR self-guided program to be comparable. This question is particularly important for evaluating the platform's clinical credibility and relevance as an alternative or supplement to traditional therapy. Rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree), the **mean score was 3.57**, with a **standard deviation of 1.30**, suggesting moderate agreement with notable variability.

The distribution of responses was as follows:

- **18 users (25%)** strongly agreed (score of 5)
- **19 users (26%)** agreed (score of 4)
- **10 users (14%)** responded neutrally (score of 3)
- **14 users (20%)** disagreed or strongly disagreed (scores of 1 or 2)

While a smaller subset of the overall sample, these results show that **just over half of users (51%)** felt the therapeutic impact of the virtual program was comparable to their prior in-person EMDR experience. The relatively wide spread in responses suggests that individual factors—such as symptom severity, engagement level, or therapy preferences—may influence perceived equivalence. These findings highlight the importance of continued personalization and user education, while also reinforcing that for many users, the Virtual EMDR platform delivers a meaningful therapeutic experience even outside of a clinical setting.



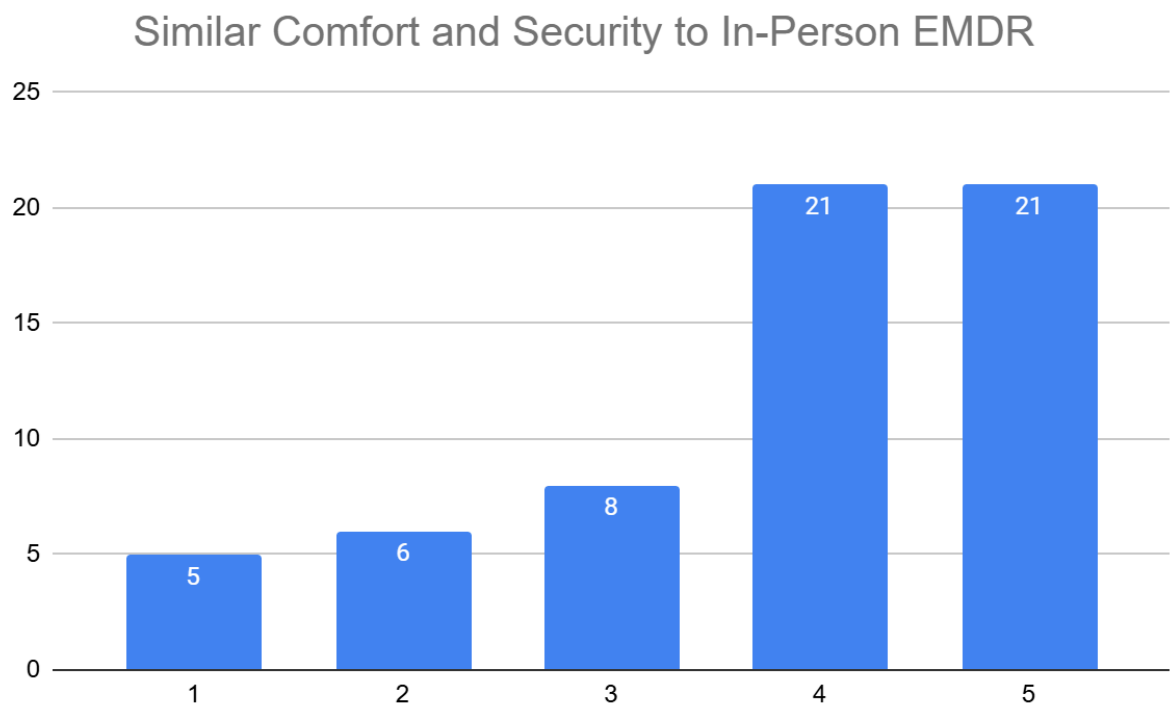
Comp3: Similar Comfort and Security to In-Person EMDR

Participants with prior in-person EMDR experience were asked whether the Virtual EMDR self-guided program provided a comparable sense of comfort and security. This item helps assess how well the digital platform replicates the emotional safety and therapeutic presence often associated with face-to-face sessions. Rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree), the **mean score was 3.77**, with a **standard deviation of 1.25**, reflecting generally favorable perceptions with some individual variation.

The distribution of responses was as follows:

- **21 users (30%)** strongly agreed (score of 5)
- **21 users (30%)** agreed (score of 4)
- **8 users (11%)** responded neutrally (score of 3)
- **11 users (16%)** disagreed or strongly disagreed (scores of 1 or 2)

These findings suggest that **60% of participants** felt the platform delivered a level of emotional safety and comfort on par with in-person sessions. Given the sensitive nature of trauma work, this is a meaningful endorsement of the platform's ability to create a secure environment for users. Future analyses may explore which features or usage patterns most influence this perception—and how the platform might further enhance psychological safety, especially for users transitioning from traditional EMDR settings.



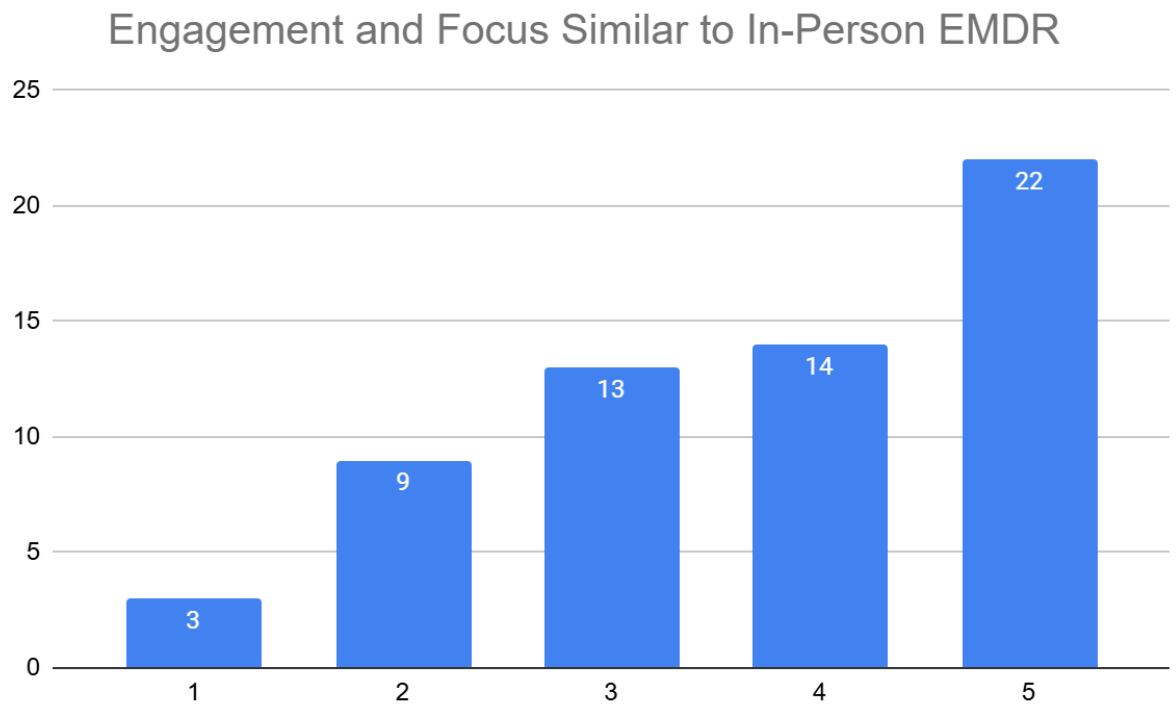
Comp4: Engagement and Focus Similar to In-Person EMDR

Users with prior in-person EMDR experience were asked whether they felt equally engaged and focused when using the Virtual EMDR self-guided program. This item provides valuable insight into the platform's ability to sustain attention and emotional presence—critical for therapeutic effectiveness, especially in self-directed formats. Rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree), the **mean score was 3.70**, with a **standard deviation of 1.23**, reflecting generally favorable impressions with some individual variation.

The response distribution was as follows:

- **22 users (31%)** strongly agreed (score of 5)
- **14 users (20%)** agreed (score of 4)
- **13 users (18%)** responded neutrally (score of 3)
- **12 users (17%)** disagreed or strongly disagreed (scores of 1 or 2)

Overall, **just over half of respondents (51%)** felt that the virtual platform matched in-person EMDR in maintaining focus and engagement. These results suggest that the self-guided format is effective for many users in creating a therapeutic experience comparable to traditional sessions. The presence of a neutral and mildly skeptical subset also signals potential areas for continued enhancement—particularly in interface features or session pacing—to further support immersive and focused engagement.



Comp5: Overall Outcomes are Comparable to In-Person EMDR

Participants who had previously engaged in in-person EMDR were asked whether the overall outcomes they experienced with the Virtual EMDR self-guided program were comparable or superior to those of traditional, clinician-guided sessions. This item reflects how users assess the total therapeutic impact of the digital platform relative to their past experience. Rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree), the **mean score was 3.54**, with a **standard deviation of 1.33**, indicating moderate agreement and a wider range of responses.

The distribution of responses was as follows:

- **17 users (24%)** strongly agreed (score of 5)
- **22 users (31%)** agreed (score of 4)
- **5 users (7%)** responded neutrally (score of 3)
- **17 users (24%)** disagreed or strongly disagreed (scores of 1 or 2)

With **55% of users reporting agreement or strong agreement**, the results suggest that over half of experienced EMDR users viewed the outcomes of the virtual program as comparable—or even superior—to those of in-person therapy. The relatively high standard deviation reflects the diversity of individual experiences, likely influenced by factors such as trauma complexity, session completion, or personal preferences for therapeutic interaction. Future subgroup analysis will help clarify which users are most likely to perceive virtual EMDR as equally (or more) effective than in-person sessions, providing critical insights for positioning the platform and refining targeted user support.

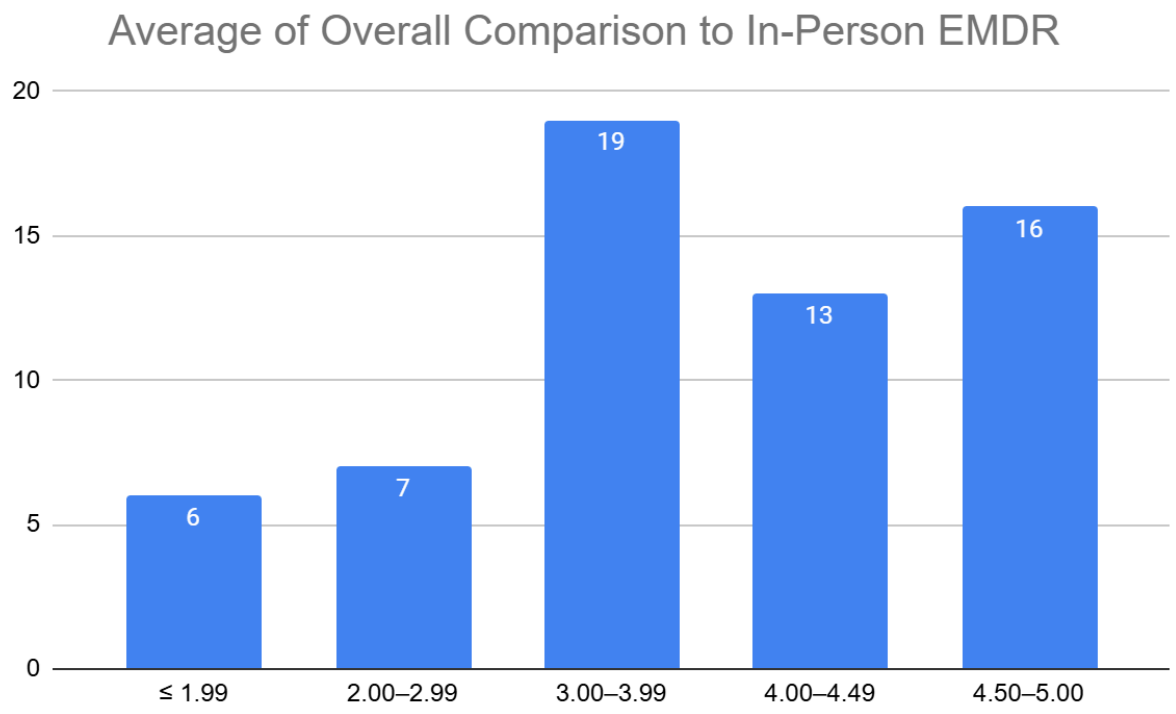
Comp_avg: Average of Overall Comparison to In-Person EMDR

To gauge how users with prior EMDR experience viewed the Virtual EMDR self-guided program as a whole, five comparative items were averaged to generate a single overall comparison score. These items covered key aspects such as ease of use, therapeutic impact, comfort, engagement, and perceived outcomes relative to in-person EMDR sessions. Rated on a 1–5 Likert scale, the **mean score was 3.68**, with a **standard deviation of 1.07**, indicating a generally favorable comparison with a moderate spread of responses.

The score distribution was as follows:

- **16 users (24%)** scored between 4.50–5.00, indicating strong endorsement
- **13 users (20%)** scored between 4.00–4.49
- **19 users (28%)** scored between 3.00–3.99
- **13 users (28%)** scored below 3.00

These findings suggest that **nearly half (44%) of experienced EMDR users** viewed the virtual program as closely comparable—or superior—to in-person therapy across multiple dimensions. At the same time, a sizable portion rated their experience more moderately or critically, highlighting meaningful variation. This variability underscores the importance of personalization and reinforces the opportunity for continued enhancements. Future analyses will examine what user characteristics (e.g., trauma type, technology comfort, support system) are associated with more favorable comparisons to in-person care—offering valuable guidance for tailoring the experience to different user profiles.



Section 12: Cognitive and Behavioral Changes

This section captures deeper shifts in mindset and coping behavior that users reported following their experience with the Virtual EMDR self-guided program. While symptom reduction reflects emotional relief, cognitive and behavioral changes signal more transformative therapeutic gains—such as reframing one's trauma, reducing self-blame, improving emotional self-management, and rebuilding a sense of safety in the world.

Users rated five items on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree), resulting in an **overall average score of 3.63** (SD = 0.92). The distribution of responses showed that **41% of users scored above 4.00**, reflecting strong or consistent gains, while **15% scored below 3.00**, indicating limited or slower change. The largest group (42%) fell in the 3.00–3.99 range, suggesting moderate but meaningful shifts.

Several key trends emerged:

- The most frequently endorsed improvement was a **positive shift in users' perspective on past traumatic events** (mean = 3.72), with nearly 70% of users agreeing or strongly agreeing that their outlook had changed—an essential step in trauma integration and emotional resolution.

- Users also reported high levels of agreement that they were better able to **challenge negative beliefs** (mean = 3.67) and had **adopted healthier coping strategies** (mean = 3.67). These two items stood out for both their high mean scores and relatively low levels of disagreement, indicating broad, consistent endorsement across the sample.

- Encouragingly, most users also reported **reduced self-blame** (mean = 3.60), a common and often persistent trauma-related cognitive distortion. This suggests that the platform may support greater self-compassion and internal emotional safety.

- Finally, while belief revision around **trust and perceived danger in the world** showed the greatest variability, nearly half of users reported a shift away from global mistrust—an important marker of cognitive recovery that often takes more time to fully consolidate.

These patterns demonstrate that the Virtual EMDR platform supports not only symptom relief, but also meaningful cognitive restructuring and behavioral growth. The broad consistency across items is promising, yet the variability in individual responses signals opportunities for further personalization. In future phases, subgroup analyses will examine how changes in cognition and coping vary by user characteristics—such as trauma type, prior therapy experience, and session frequency—allowing for even more targeted refinement of the user experience and therapeutic pathways.

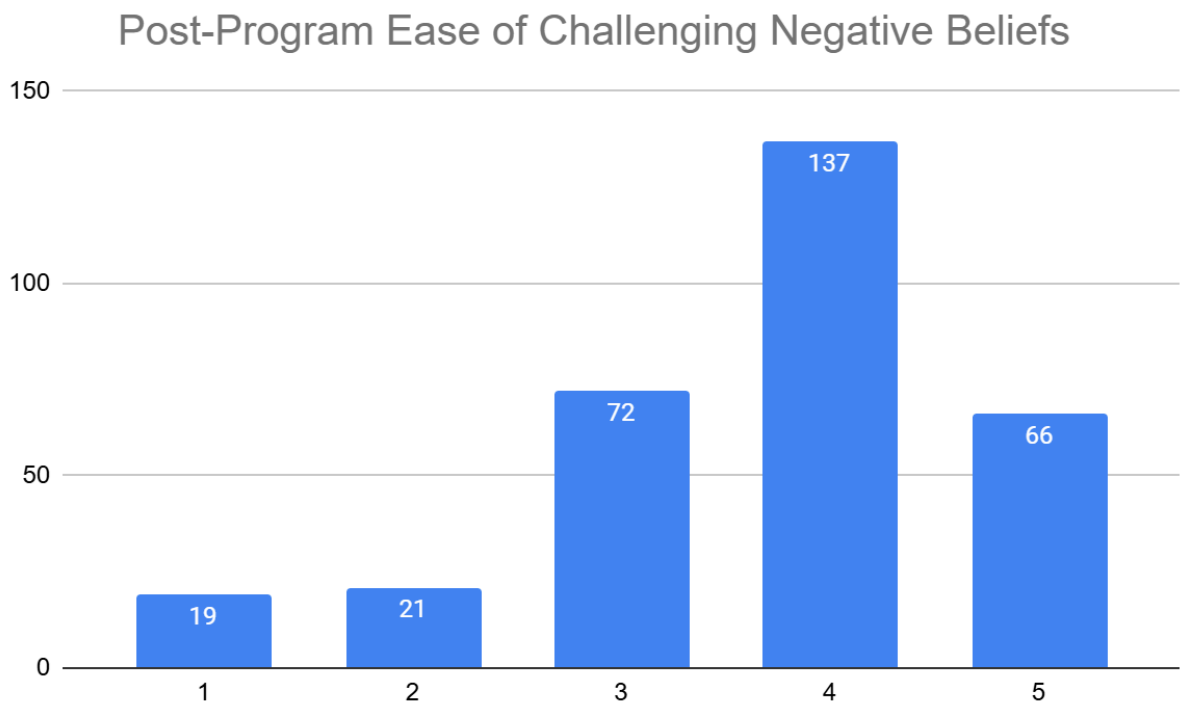
C&BC1: Post-Program Ease of Challenging Negative Beliefs

Users were asked whether they found it easier to challenge negative beliefs about themselves or the world after using the Virtual EMDR self-guided program. This item taps into cognitive flexibility and reframing—key components of trauma recovery and psychological resilience. Rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree), the **mean score was 3.67**, with a **standard deviation of 1.07**, indicating generally positive outcomes with some variability across users.

The response distribution was as follows:

- **66 users (21%)** strongly agreed (score of 5)
- **137 users (43%)** agreed (score of 4), the most common response
- **72 users (23%)** responded neutrally (score of 3)
- **40 users (13%)** disagreed or strongly disagreed (scores of 1 or 2)

These findings suggest that a substantial majority of users experienced greater cognitive flexibility following program use, with over 60% reporting improved ability to challenge distorted or self-limiting beliefs.



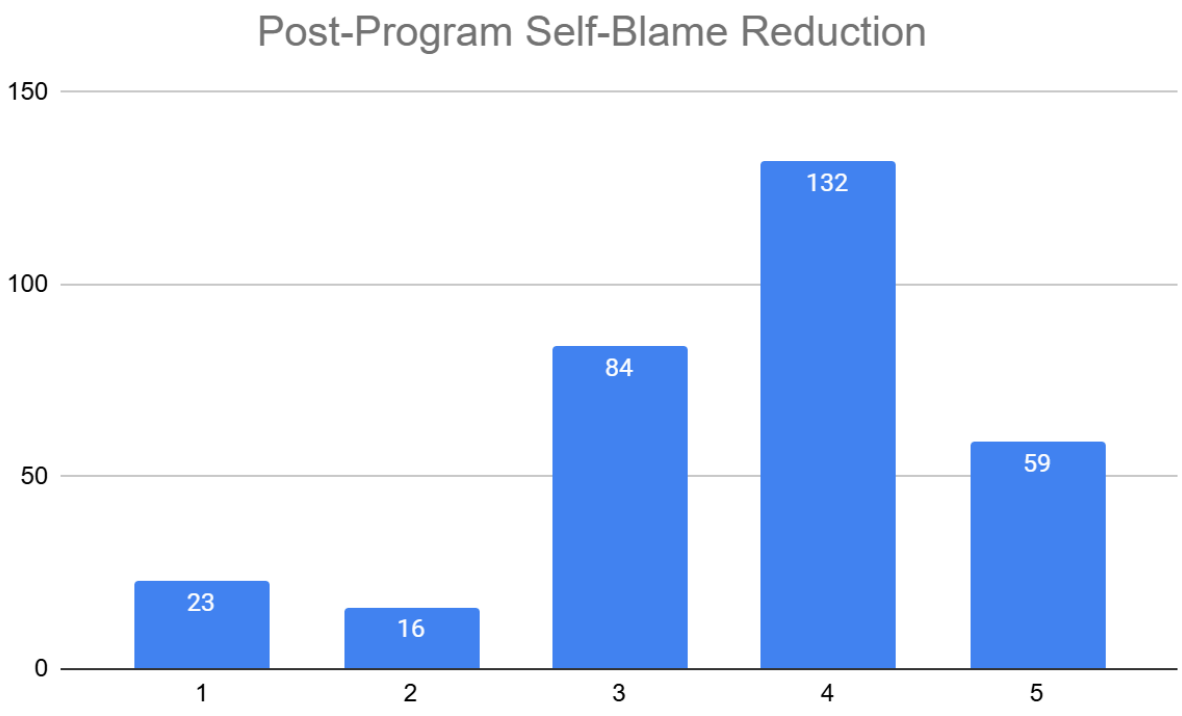
C&BC2: Post-Program Self-Blame Reduction

Users were asked whether they blamed themselves less for events related to their trauma after using the Virtual EMDR self-guided program. This item reflects a critical cognitive and emotional shift, as self-blame is a common and damaging outcome of trauma. Rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree), the **mean score was 3.60**, with a **standard deviation of 1.08**, indicating moderate overall improvement with a consistent spread of responses.

The response breakdown was as follows:

- **59 users (19%)** strongly agreed (score of 5)
- **132 users (42%)** agreed (score of 4)
- **84 users (27%)** responded neutrally (score of 3)
- **39 users (12%)** disagreed or strongly disagreed (scores of 1 or 2)

These results suggest that the majority of users experienced a reduction in self-blame following their use of the program—an important psychological step toward healing and self-compassion.



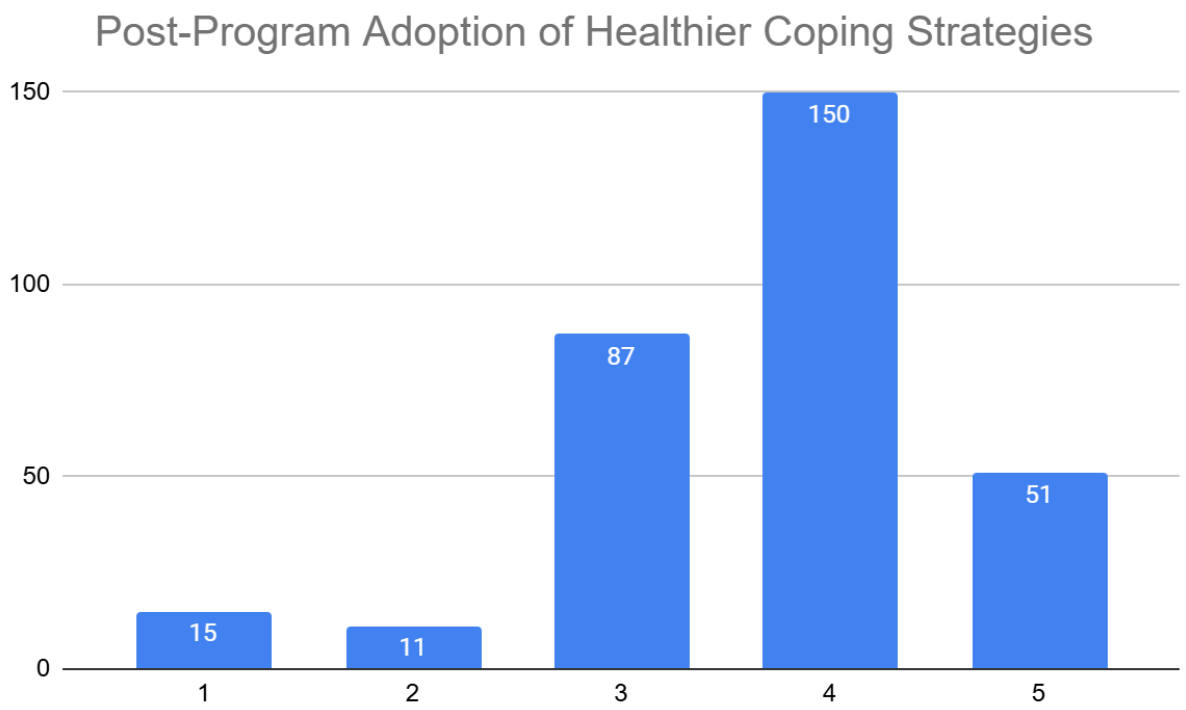
C&BC3: Post-Program Adoption of Healthier Coping Strategies

Users were asked whether they had adopted healthier coping strategies since using the Virtual EMDR self-guided program. This item reflects positive behavioral change—an essential marker of trauma recovery and emotional self-management. Responses were rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree). The **mean score was 3.67**, with a **standard deviation of 0.95**, indicating a strong overall trend toward improved coping, with relatively less variability than seen in other items.

The response distribution was as follows:

- **51 users (16%)** strongly agreed (score of 5)
- **150 users (47%)** agreed (score of 4), the most common response
- **87 users (27%)** responded neutrally (score of 3)
- **26 users (8%)** disagreed or strongly disagreed (scores of 1 or 2)

These findings suggest that the majority of users reported making positive shifts in how they manage stress and emotional challenges—an encouraging signal of sustainable behavioral progress beyond symptom relief. The relatively low proportion of disagreement, paired with strong agreement levels, highlights this item as one of the more consistently endorsed areas of improvement.



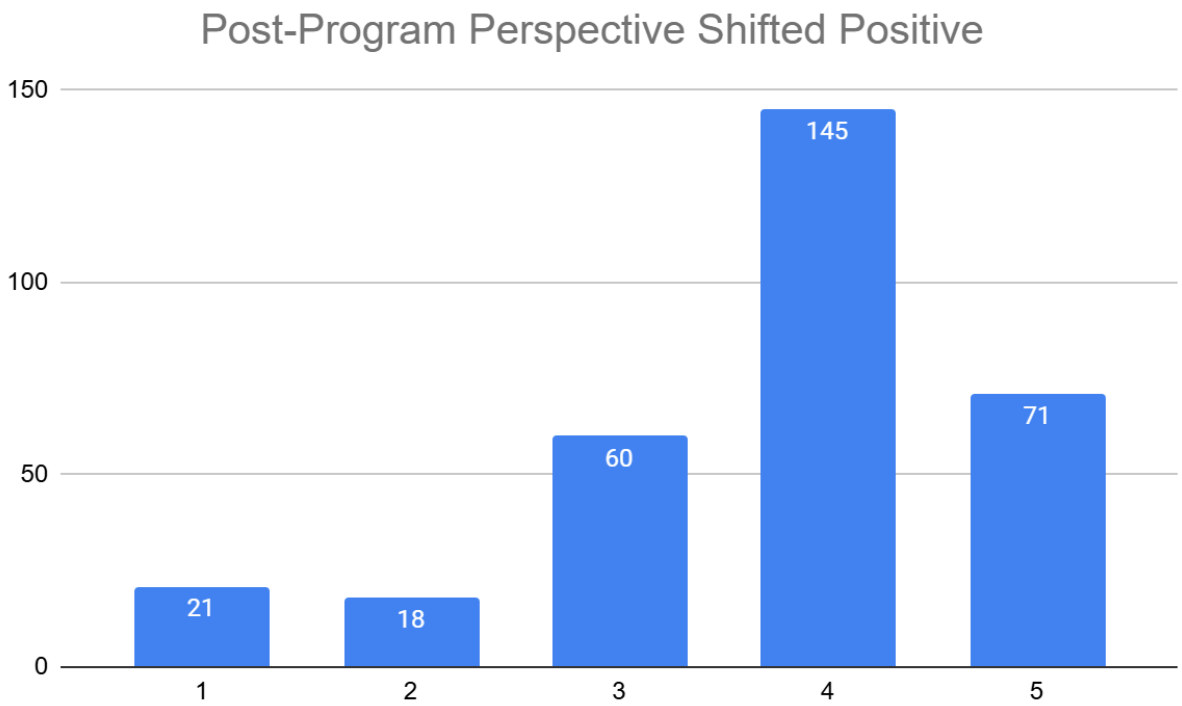
C&BC4: Post-Program Perspective Shifted Positive

Users were asked whether their perspective on past traumatic events had shifted in a positive way after using the Virtual EMDR self-guided program. This item captures a deeper cognitive transformation that reflects meaning-making and emotional integration—key indicators of progress in trauma recovery. Responses were rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree). The **mean score was 3.72**, with a **standard deviation of 1.08**, suggesting a generally favorable response with a moderately wide range of experiences.

The distribution of responses was as follows:

- **71 users (23%)** strongly agreed (score of 5)
- **145 users (46%)** agreed (score of 4), the most common response
- **60 users (19%)** responded neutrally (score of 3)
- **39 users (12%)** disagreed or strongly disagreed (scores of 1 or 2)

These results indicate that nearly 70% of users experienced a meaningful cognitive shift in how they view their trauma—suggesting the program not only reduces symptoms but may also promote deeper healing and reframing. This is particularly promising, as changes in perspective often correlate with long-term recovery and resilience.



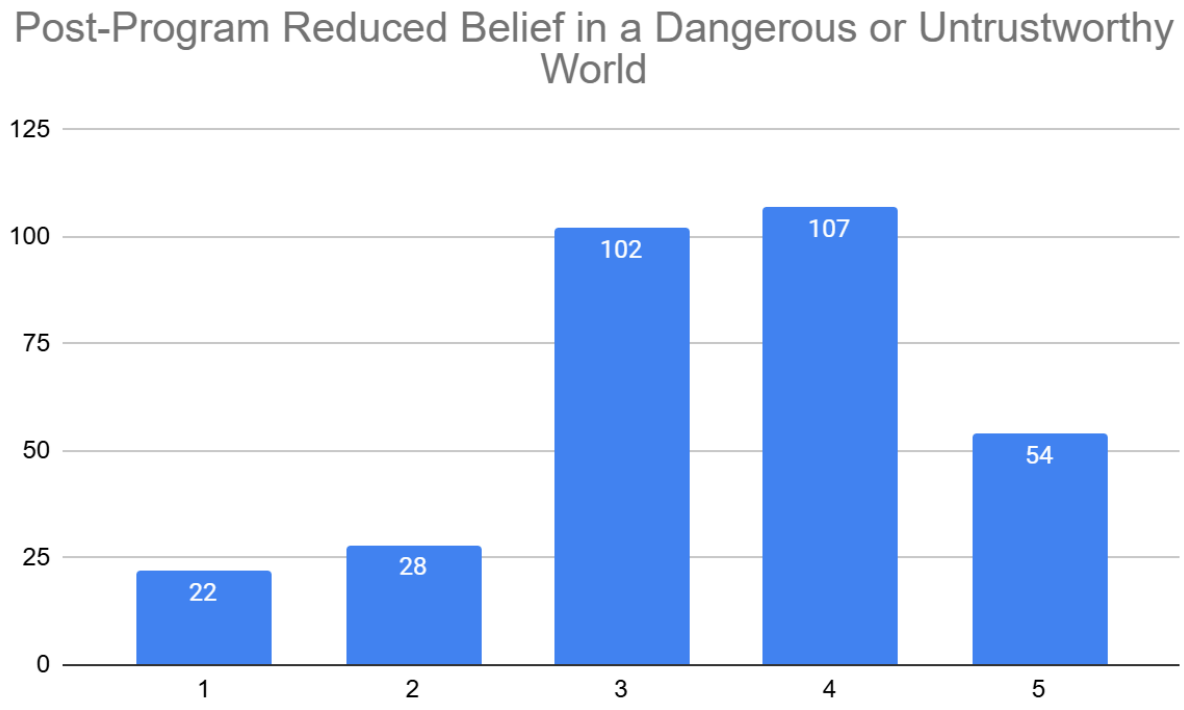
C&BC5: Post-Program Reduced Belief in a Dangerous or Untrustworthy World

Users were asked whether they were less likely to believe that the world is entirely dangerous or that people cannot be trusted after using the Virtual EMDR self-guided program. This item reflects a shift in worldview often impacted by trauma—where safety, trust, and security may feel fundamentally compromised. Addressing these beliefs is essential to reestablishing a sense of connection and psychological safety. Responses were recorded on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree). While a mean and standard deviation were not provided, the response pattern suggests a moderate overall shift with substantial variability.

The response distribution was as follows:

- **54 users (17%)** strongly agreed (score of 5)
- **107 users (34%)** agreed (score of 4)
- **102 users (32%)** responded neutrally (score of 3)
- **50 users (16%)** disagreed or strongly disagreed (scores of 1 or 2)

These results indicate that nearly half of users endorsed a shift away from seeing the world as wholly dangerous or untrustworthy—an encouraging sign of progress in rebuilding trust and psychological flexibility. The sizable neutral group may reflect lingering caution, gradual cognitive change, or external factors that influence one's perception of safety.



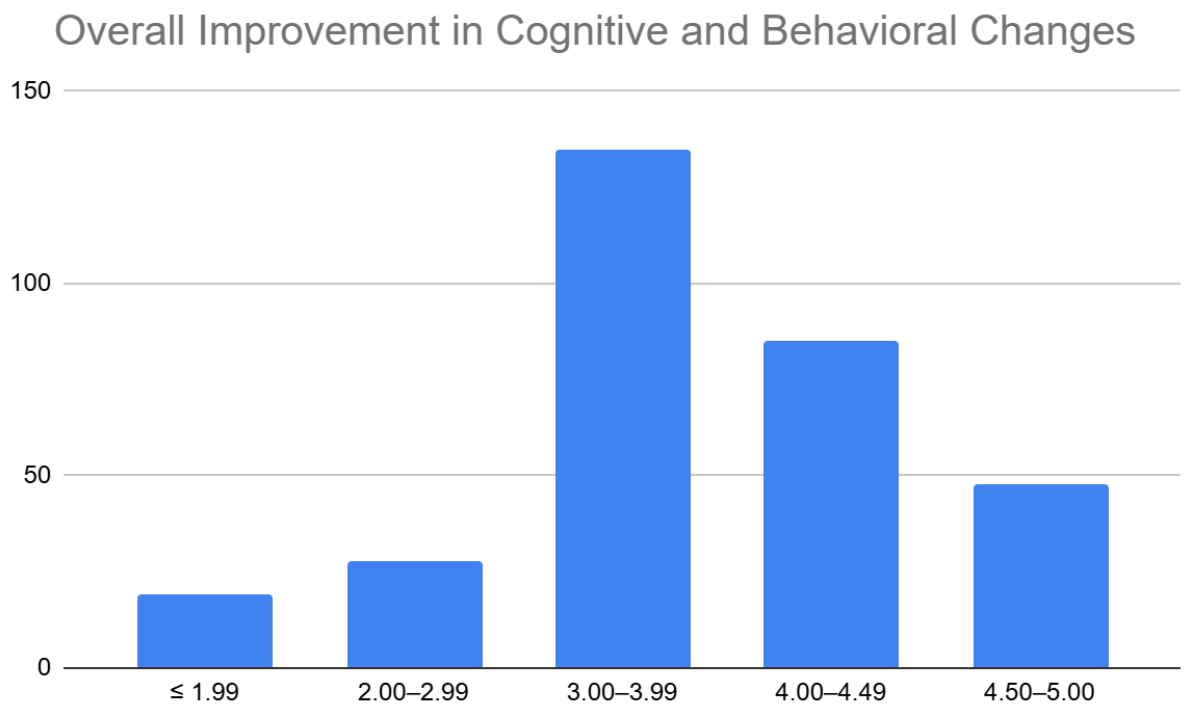
C&BC_avg: Overall Improvement in Cognitive and Behavioral Changes

To assess deeper therapeutic outcomes beyond symptom relief, users rated five items related to cognitive shifts and behavioral changes following use of the Virtual EMDR self-guided program. These included their ability to challenge negative beliefs, reduce self-blame, adopt healthier coping strategies, reframe past trauma, and trust others again. Individual responses were averaged to generate an overall cognitive and behavioral change score on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree). The **mean score was 3.63**, with a **standard deviation of 0.92**, indicating a broadly positive shift with relatively consistent responses across users.

The distribution of scores reflects a strong leaning toward improvement:

- **48 users (15%)** reported high levels of positive change (4.50–5.00)
- **85 users (26%)** scored between 4.00–4.49, indicating consistent gains
- **135 users (42%)** fell between 3.00–3.99, reflecting moderate improvement
- **47 users (15%)** scored below 3.00, suggesting limited or slower change

These findings suggest that the majority of users experienced meaningful shifts in how they think, feel, and respond following program use—key outcomes that are foundational to long-term recovery. Future subgroup analyses will explore which users are most likely to experience these cognitive and behavioral gains, providing insight into how individual characteristics, trauma histories, and engagement patterns influence therapeutic transformation.



Section 13: Self-Efficacy and Empowerment

This section explores how users' confidence in managing their emotional world shifted after completing the Virtual EMDR self-guided program. While symptom reduction speaks to short-term relief, self-efficacy reflects users' belief in their ability to navigate future challenges—a crucial marker of lasting impact and psychological growth. Five items assessed users' perceived capability in handling difficult emotions, managing thoughts independently, preventing emotional setbacks, and approaching problems without feeling overwhelmed.

The **overall average self-efficacy and empowerment score was 3.67** (SD = 1.02), making this one of the most positively rated sections of the program. Nearly **half of users (49%)** scored above 4.0, suggesting strong personal gains, while **only 16%** of users scored below 3.0—indicating that relatively few participants felt no improvement in this area.

Key findings include:

- The most strongly endorsed item was a **greater sense of inner strength and resilience** (mean = 3.74), with over **two-thirds of users** agreeing that the program helped them build a stronger internal foundation.
- Users also reported high agreement that they were better able to **handle difficult emotions** (mean = 3.69) and **manage their thoughts and feelings independently** (mean = 3.68)—critical outcomes for a self-guided therapy platform.
- Confidence in **preventing future emotional setbacks** and **addressing problems without overwhelm** (means = 3.57 and 3.65, respectively) rounded out the scale, still showing strong endorsement but with slightly more variation across users.

These findings suggest that the program not only helps reduce distress but also fosters personal empowerment—building the psychological tools users need to manage themselves independently. The consistency of positive responses across all five items reinforces that the platform delivers a sense of control, capability, and emotional readiness that many users are seeking.

Future subgroup analysis will explore which users experience the greatest self-efficacy gains based on factors such as trauma type, prior therapy history, platform usage, or support system strength. These insights will help tailor future content and user journeys, ensuring that empowerment outcomes are not just common, but accessible to a wider range of users with differing needs and starting points.

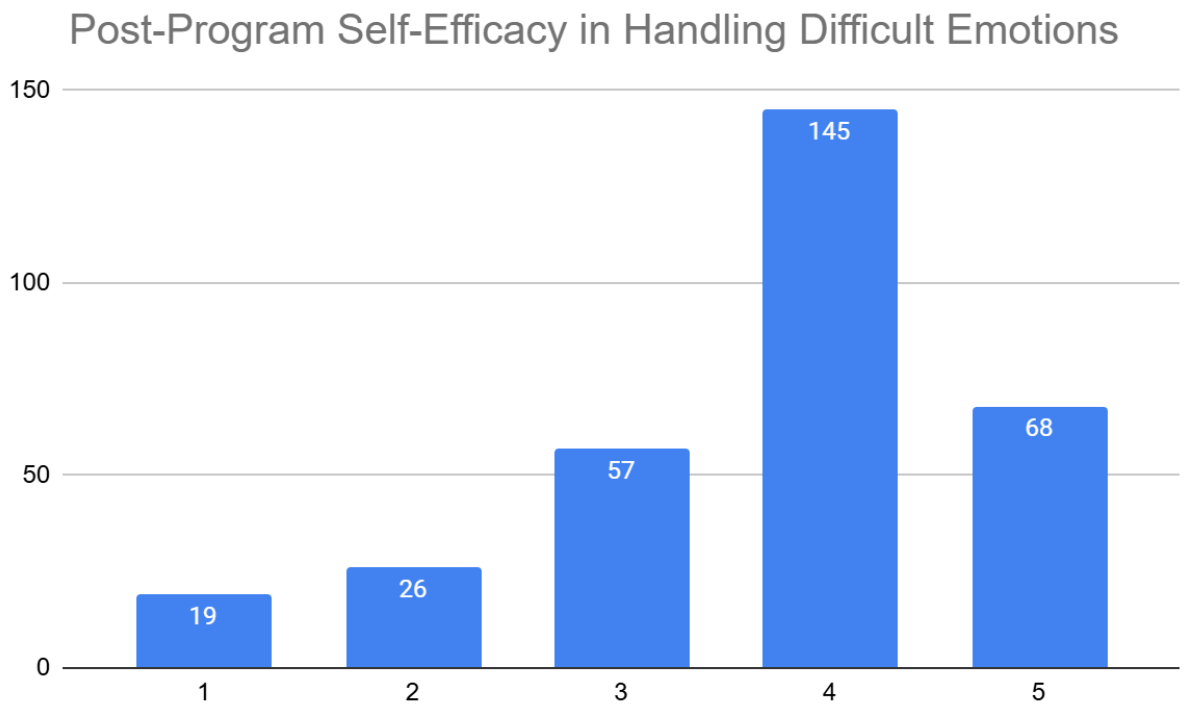
SE&E1: Post-Program Self-Efficacy in Handling Difficult Emotions

Users were asked whether they felt more confident in their ability to handle difficult emotions independently after using the Virtual EMDR self-guided program. This item reflects gains in self-efficacy—an essential component of long-term emotional resilience and a critical outcome for any self-guided therapeutic approach. Responses were recorded on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree). The **mean score was 3.69**, with a **standard deviation of 1.08**, indicating a generally strong sense of post-program emotional self-confidence, with some variability in individual responses.

The distribution of responses was as follows:

- **68 users (22%)** strongly agreed (score of 5)
- **145 users (46%)** agreed (score of 4), the most common response
- **57 users (18%)** responded neutrally (score of 3)
- **45 users (14%)** disagreed or strongly disagreed (scores of 1 or 2)

These findings suggest that a majority of users felt better equipped to navigate emotional challenges on their own after using the program. With nearly 70% of users reporting increased emotional self-efficacy, this outcome supports the program's potential to empower individuals with tools for independent emotional regulation—especially important in a self-guided format.



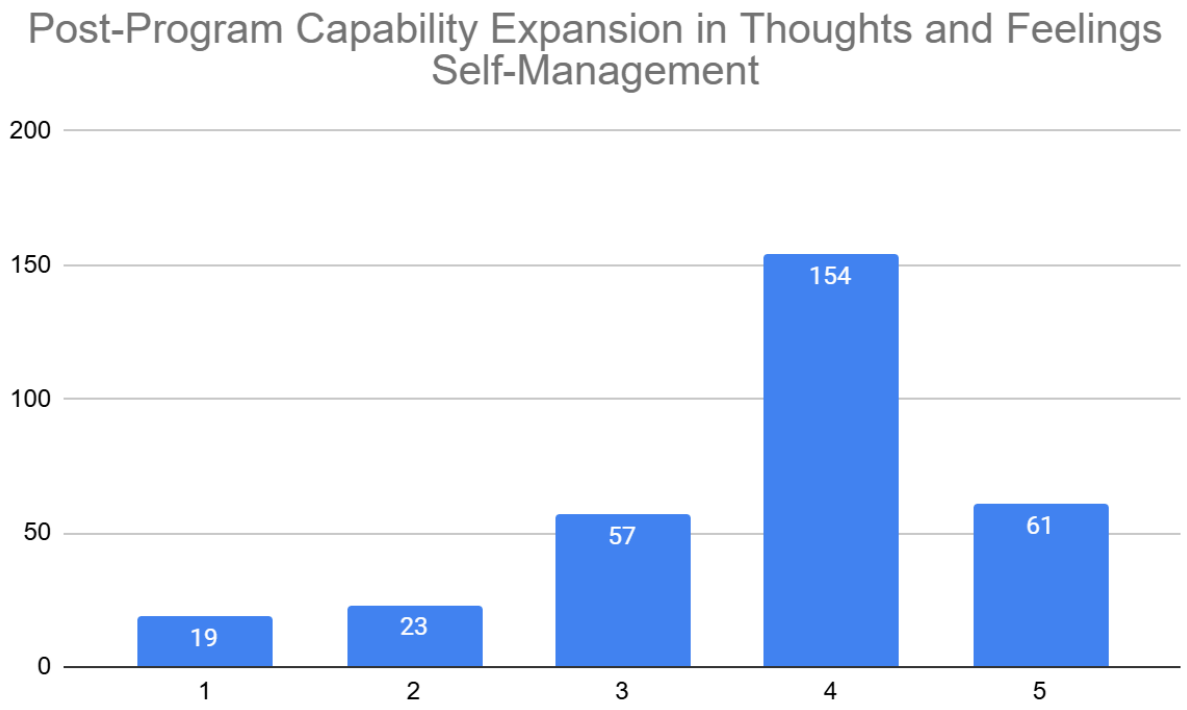
SE&E2: Post-Program Capability Expansion in Thoughts and Feelings Self-Management

Users were asked whether they felt more capable of managing their thoughts and emotions on their own after completing the Virtual EMDR self-guided program. This item measures perceived growth in emotional autonomy—an important indicator of internal resilience and the long-term applicability of program tools. Responses were recorded on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree). The **mean score was 3.68**, with a **standard deviation of 1.06**, reflecting a strong trend toward increased self-management with relatively consistent agreement among users.

The distribution of responses was as follows:

- **61 users (19%)** strongly agreed (score of 5)
- **154 users (49%)** agreed (score of 4), the most frequently selected response
- **57 users (18%)** responded neutrally (score of 3)
- **42 users (13%)** disagreed or strongly disagreed (scores of 1 or 2)

These results suggest that a clear majority of users experienced enhanced confidence in their ability to manage internal experiences independently—underscoring the potential of the Virtual EMDR platform to support lasting emotional regulation skills. This item also emerged as one of the more consistently endorsed self-efficacy outcomes, which will be examined further in future analyses comparing outcomes by trauma history, prior therapeutic experience, and engagement levels. Understanding these patterns will help identify which users benefit most from the self-guided format and where additional scaffolding may be helpful.



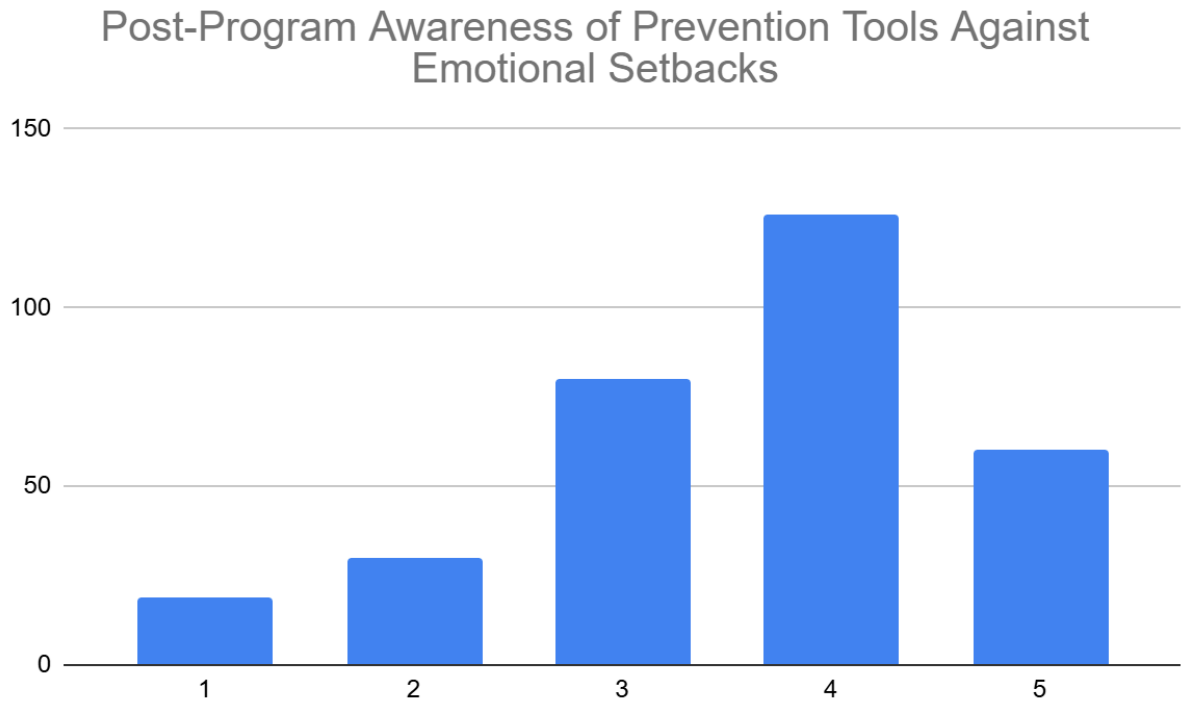
SE&E3: Post-Program Awareness of Prevention Tools Against Emotional Setbacks

Users were asked whether they believed they had the tools to prevent future emotional setbacks after completing the Virtual EMDR self-guided program. This item reflects perceived preparedness for sustained emotional well-being—an important indicator of long-term program effectiveness. Responses were rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree). The **mean score was 3.57**, with a **standard deviation of 1.09**, indicating a moderately strong sense of emotional preparedness with some variability across users.

The response distribution was as follows:

- **60 users (19%)** strongly agreed (score of 5)
- **126 users (40%)** agreed (score of 4)
- **80 users (25%)** responded neutrally (score of 3)
- **49 users (16%)** disagreed or strongly disagreed (scores of 1 or 2)

These results suggest that a significant majority of users left the program feeling equipped to navigate future emotional challenges, with nearly 60% expressing confidence in the tools they acquired. The presence of a substantial neutral group may point to users who are still integrating these skills or who may benefit from reinforcement over time.



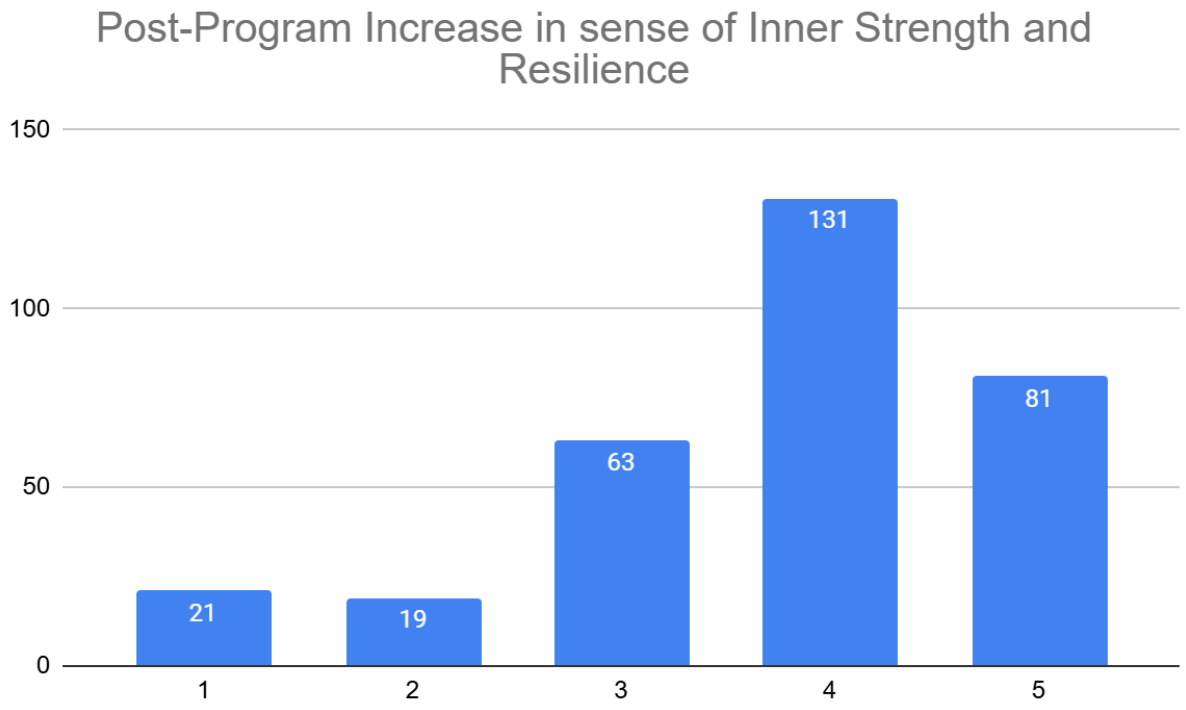
SE&E4: Post-Program Increase in sense of Inner Strength and Resilience

Users were asked whether using the Virtual EMDR self-guided program increased their sense of inner strength and resilience—key markers of post-traumatic growth and long-term emotional recovery. This item captures a deeper internal transformation: a shift from coping to empowerment. Rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree), the **mean score was 3.74**, with a **standard deviation of 1.11**, indicating a strong overall perception of growth, with some variation across individual experiences.

The response distribution was as follows:

- **81 users (26%)** strongly agreed (score of 5)
- **131 users (42%)** agreed (score of 4), the most common response
- **63 users (20%)** responded neutrally (score of 3)
- **40 users (13%)** disagreed or strongly disagreed (scores of 1 or 2)

These results suggest that a majority of users experienced an increase in their personal sense of resilience after completing the program, with over two-thirds reporting agreement or strong agreement. Among the most positively rated items in the self-efficacy domain, this outcome highlights the program's potential not just to alleviate symptoms, but to foster lasting personal growth.



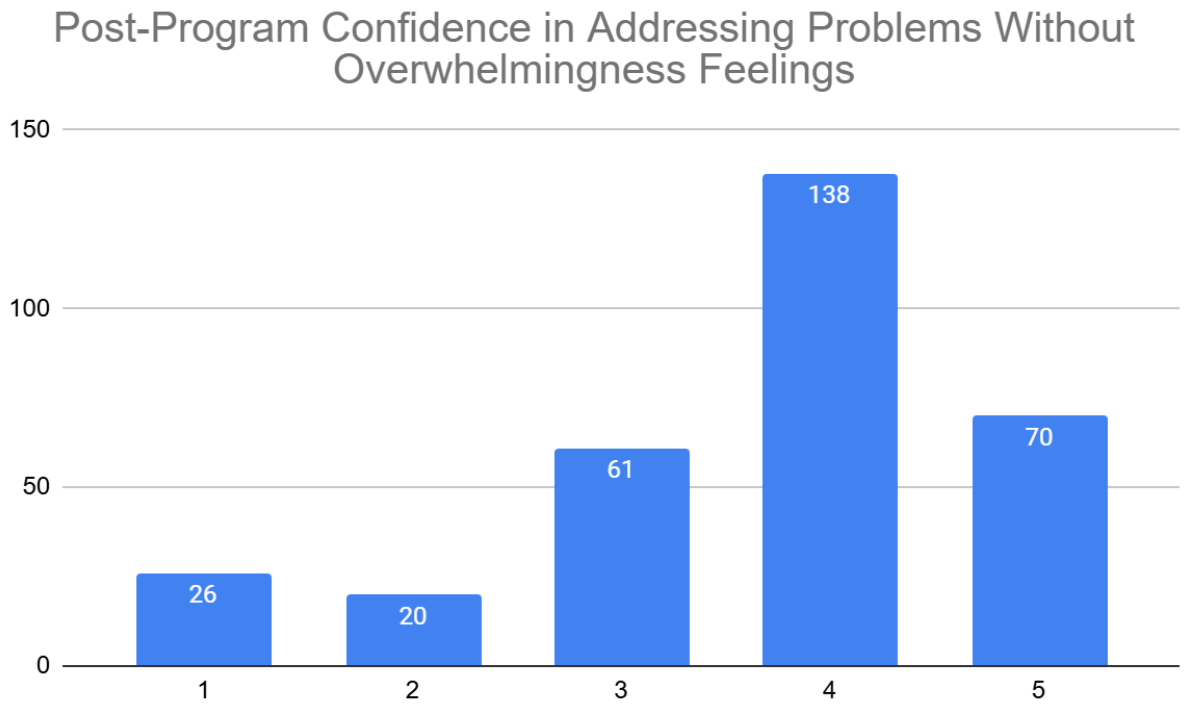
SE&E5: Post-Program Confidence in Addressing Problems Without Overwhelmingness Feelings

Users were asked whether they felt more confident in addressing problems without becoming overwhelmed after using the Virtual EMDR self-guided program. This item reflects gains in both emotional regulation and problem-solving self-efficacy—two critical abilities for sustaining progress beyond therapy. Responses were captured on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree). The **mean score was 3.65**, with a **standard deviation of 1.14**, indicating a generally strong sense of increased capability, alongside some individual variability.

The response distribution was as follows:

- **70 users (22%)** strongly agreed (score of 5)
- **138 users (44%)** agreed (score of 4), the most common response
- **61 users (19%)** responded neutrally (score of 3)
- **46 users (15%)** disagreed or strongly disagreed (scores of 1 or 2)

These results show that nearly two-thirds of users left the program feeling more capable of tackling challenges without becoming emotionally flooded—an important outcome, especially for individuals with trauma histories who may struggle with overwhelm in daily life. This strong trend toward enhanced confidence suggests the program's tools may support both immediate relief and transferable skills.



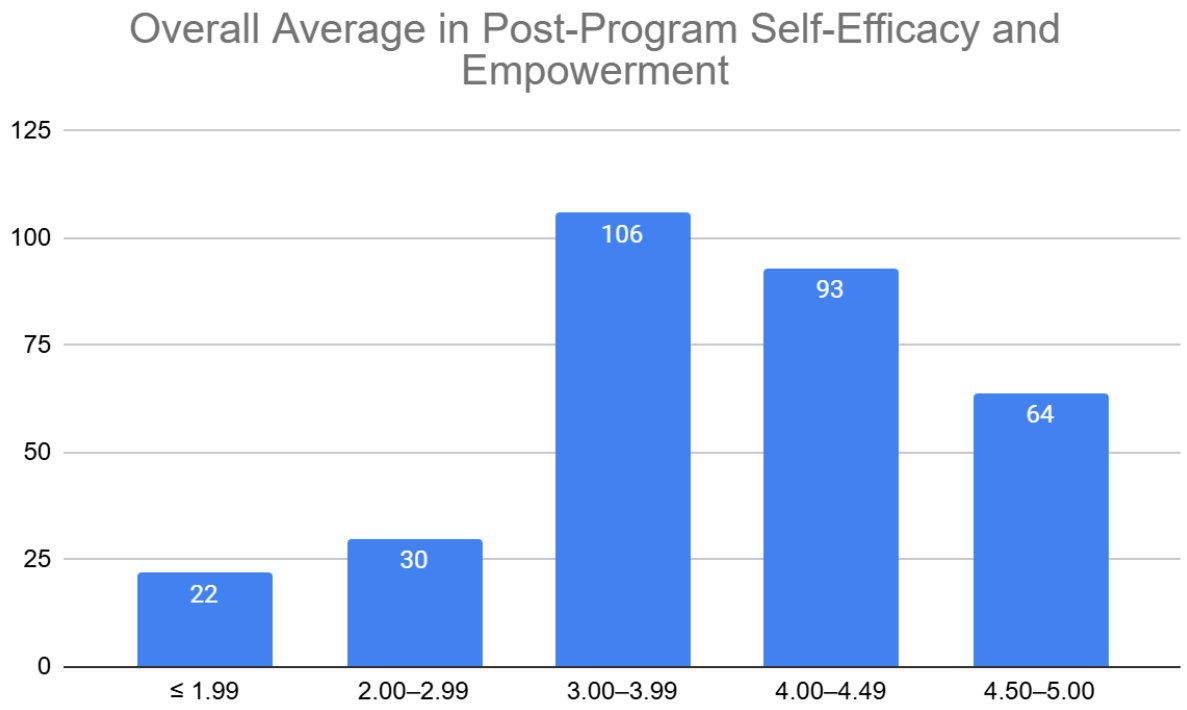
SE&E_avg: Overall Average in Post-Program Self-Efficacy and Empowerment

To assess how the Virtual EMDR self-guided program impacted users' sense of personal capability and resilience, five items were averaged to generate a composite score reflecting post-program self-efficacy and empowerment. These items captured users' confidence in handling emotions, managing thoughts, addressing problems without overwhelm, and preventing future emotional setbacks—key markers of sustainable psychological growth. Responses were rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree). The **mean score was 3.67**, with a **standard deviation of 1.02**, indicating a strong overall sense of increased self-efficacy and inner strength.

The distribution of scores reveals:

- **64 users (20%)** scored between 4.50–5.00, indicating high personal empowerment
- **93 users (29%)** fell between 4.00–4.49, suggesting consistent, meaningful gains
- **106 users (33%)** scored between 3.00–3.99, reflecting moderate improvement
- **52 users (16%)** scored below 3.00, indicating limited or slower growth

These findings highlight that a majority of users reported substantial improvements in their ability to manage emotions and navigate life's challenges independently. With nearly half of the sample scoring above 4.0, self-efficacy emerged as one of the most strongly endorsed outcome areas across the program. Future analyses will investigate how these outcomes differ by user characteristics—such as trauma type, support system, or prior therapy experience—to inform platform enhancements and support more personalized growth trajectories.



Section 14: Overall Satisfaction

The final section of the evaluation focuses on overall satisfaction—how users assess the value, relevance, and personal benefit of their experience with the Virtual EMDR self-guided platform. Five items were used to measure this construct, encompassing satisfaction with progress, alignment with mental health goals, perceived trauma symptom relief, confidence in recommending the platform, and whether the effort invested felt worthwhile. Together, these items offer a comprehensive view of user sentiment and perceived program effectiveness.

Across all five items, satisfaction scores were notably strong. The **overall average satisfaction score was 3.91** (SD = 1.05), with **63% of users scoring above 4.0**, indicating that the vast majority of users left the program with a highly positive impression. This section yielded some of the **highest-rated items** in the entire evaluation—particularly users' **willingness to recommend the platform (mean = 4.08)** and the belief that the **program was worth the time and effort (mean = 4.03)**.

Other key takeaways include:

- **74% of users** reported satisfaction with the personal progress they made through the program (mean = 3.89).
- **73% agreed** that the platform effectively addressed trauma and PTSD symptoms (mean = 3.85), a strong endorsement of its clinical relevance.
- **65% of users** believed the program helped them achieve their mental health goals (mean = 3.69), while 19% responded neutrally—suggesting that for some, therapeutic goals may take longer to realize or extend beyond the program's focus.

Importantly, these satisfaction ratings align closely with other outcome domains, such as symptom reduction and self-efficacy, reinforcing that users who experienced emotional or cognitive improvement were also more likely to view the program favorably.

Still, variability in responses highlights meaningful opportunities for refinement. A subset of users—approximately 14%—scored below 3.0, indicating that expectations may not have been fully met or that individual barriers influenced perceived outcomes. These findings underscore the need for **deeper subgroup analysis** to identify patterns tied to trauma type, usage frequency, prior therapy exposure, or support system strength.

Looking ahead, understanding **who is most likely to report high satisfaction—and why—will guide enhancements to the user experience**, improve personalization strategies, and ensure that more users feel the platform delivers lasting value aligned with their mental health goals.

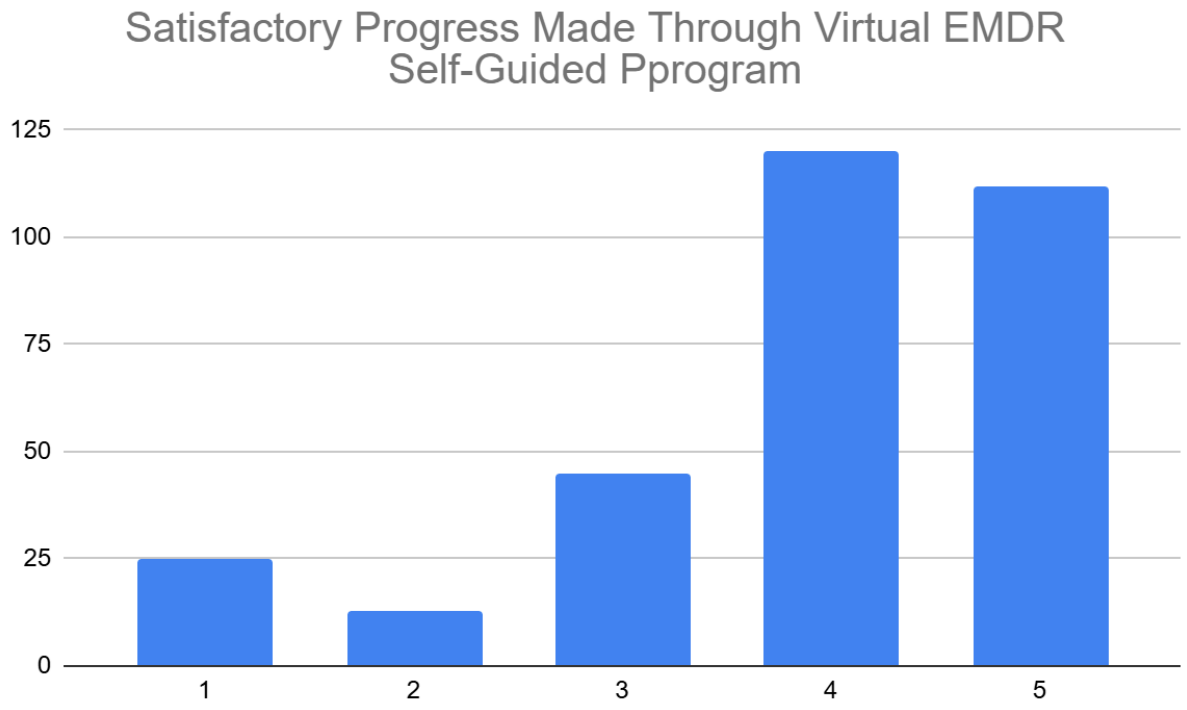
OS1: Satisfactory Progress Made Through Virtual EMDR Self-Guided Pprogram

Users were asked whether they were satisfied with the progress they made through the Virtual EMDR self-guided program—a key outcome measure reflecting perceived value and personal benefit from the platform. This item provides insight into how users evaluate their own growth, healing, and effectiveness of the self-guided approach. Responses were collected on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree). The **mean score was 3.89**, with a **standard deviation of 1.17**, indicating generally high satisfaction with some variation across users.

The distribution of responses reflects a strong trend toward positive sentiment:

- **112 users (36%)** strongly agreed (score of 5)
- **120 users (38%)** agreed (score of 4)
- **45 users (14%)** responded neutrally (score of 3)
- **38 users (12%)** disagreed or strongly disagreed (scores of 1 or 2)

These results suggest that nearly **three-quarters of users (74%)** were satisfied with their progress—making this one of the most positively rated items in the overall evaluation. The high level of endorsement for personal progress highlights the program's potential to deliver meaningful outcomes in a self-guided format.



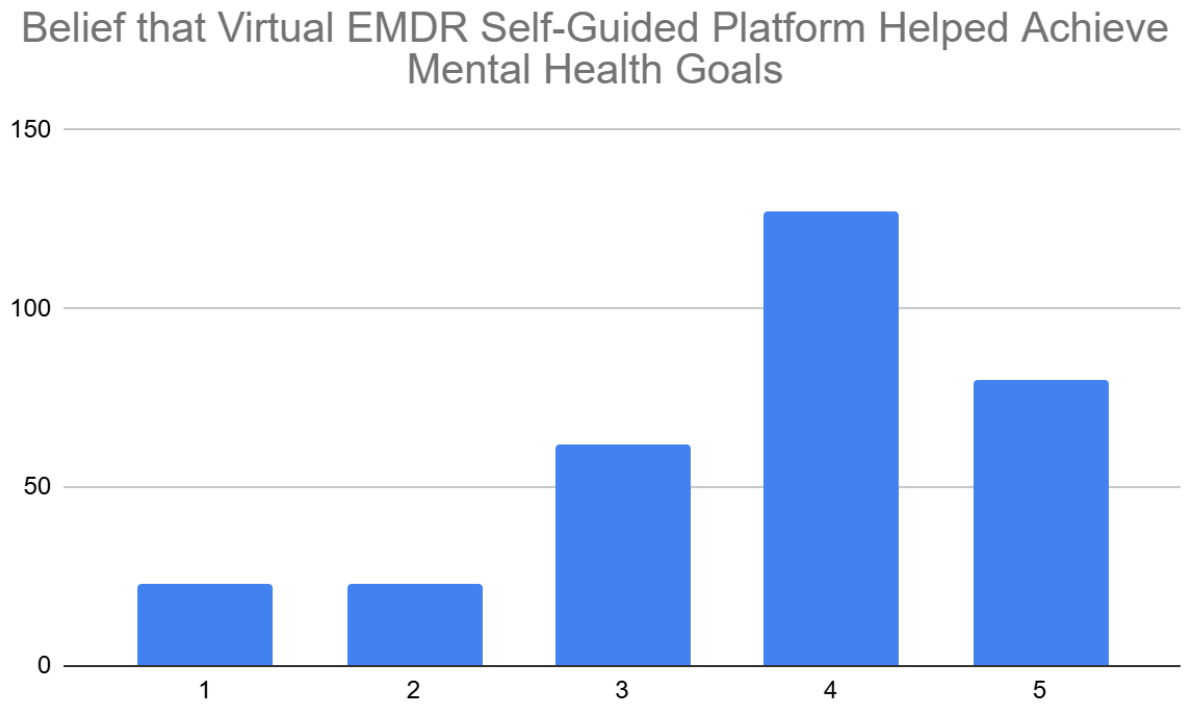
OS2: Belief that Virtual EMDR Self-Guided Platform Helped Achieve Mental Health Goals

Users were asked whether they believed the Virtual EMDR self-guided program helped them achieve their mental health goals—a critical indicator of perceived therapeutic value and alignment with personal outcomes. Rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree), this item helps capture users' sense of whether the program made meaningful progress toward their emotional and psychological objectives. The **mean score was 3.69**, with a **standard deviation of 1.14**, reflecting broadly positive impressions with some variation in individual experiences.

The response distribution was as follows:

- **80 users (25%)** strongly agreed (score of 5)
- **127 users (40%)** agreed (score of 4)
- **62 users (19%)** responded neutrally (score of 3)
- **46 users (15%)** disagreed or strongly disagreed (scores of 1 or 2)

With **65% of users agreeing or strongly agreeing**, the majority felt that the platform meaningfully contributed to their mental health progress. The presence of a substantial neutral group suggests that for some, results may still be unfolding or goals may have been broader than what was addressed through the program.



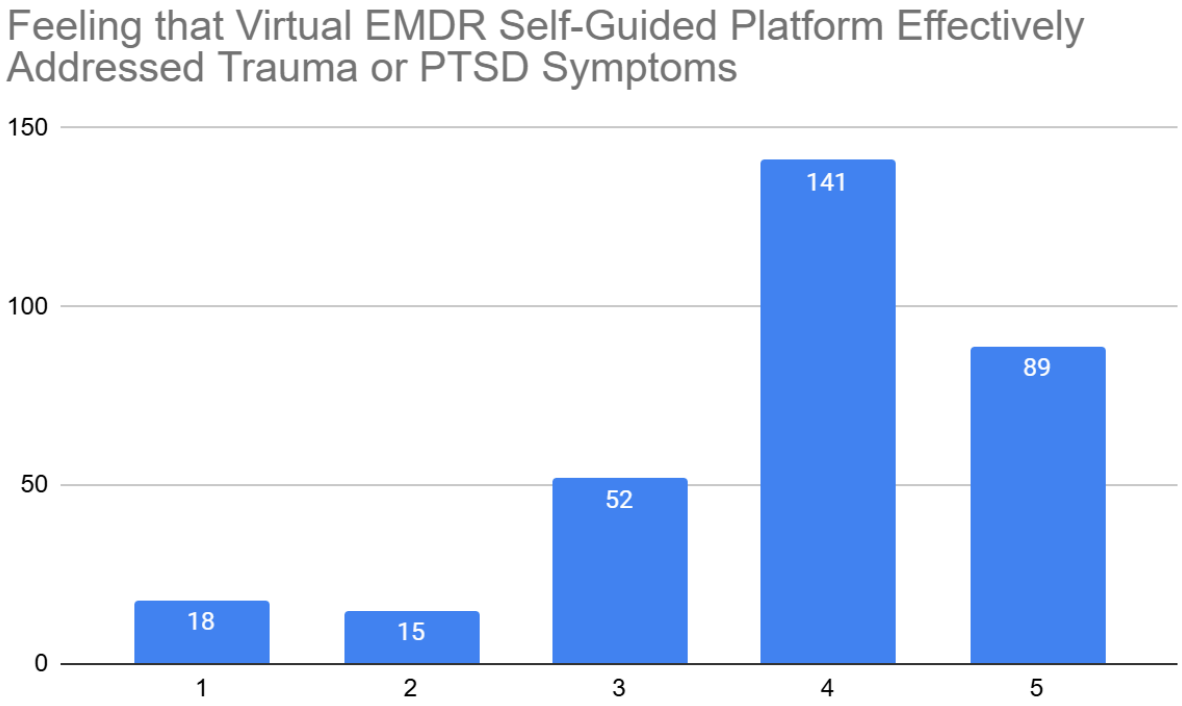
OS3: Feeling that Virtual EMDR Self-Guided Platform Effectively Addressed Trauma or PTSD Symptoms

Users were asked whether they felt the Virtual EMDR self-guided program effectively addressed symptoms related to trauma or PTSD. This item is a direct measure of perceived clinical relevance and therapeutic impact—central to the program's purpose. Responses were rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree). The **mean score was 3.85**, with a **standard deviation of 1.06**, indicating a high level of agreement with relatively low variability.

The distribution of responses was as follows:

- **89 users (28%)** strongly agreed (score of 5)
- **141 users (45%)** agreed (score of 4), the most common response
- **52 users (17%)** responded neutrally (score of 3)
- **33 users (10%)** disagreed or strongly disagreed (scores of 1 or 2)

These results show that nearly **three-quarters of users (73%)** believed the program effectively helped with trauma- or PTSD-related symptoms. This makes it one of the most strongly endorsed indicators of clinical impact in the dataset. The modest proportion of neutral and negative responses provides an opportunity to explore how user-specific factors—such as symptom severity, prior EMDR experience, or session count—may shape perceptions of therapeutic effectiveness.



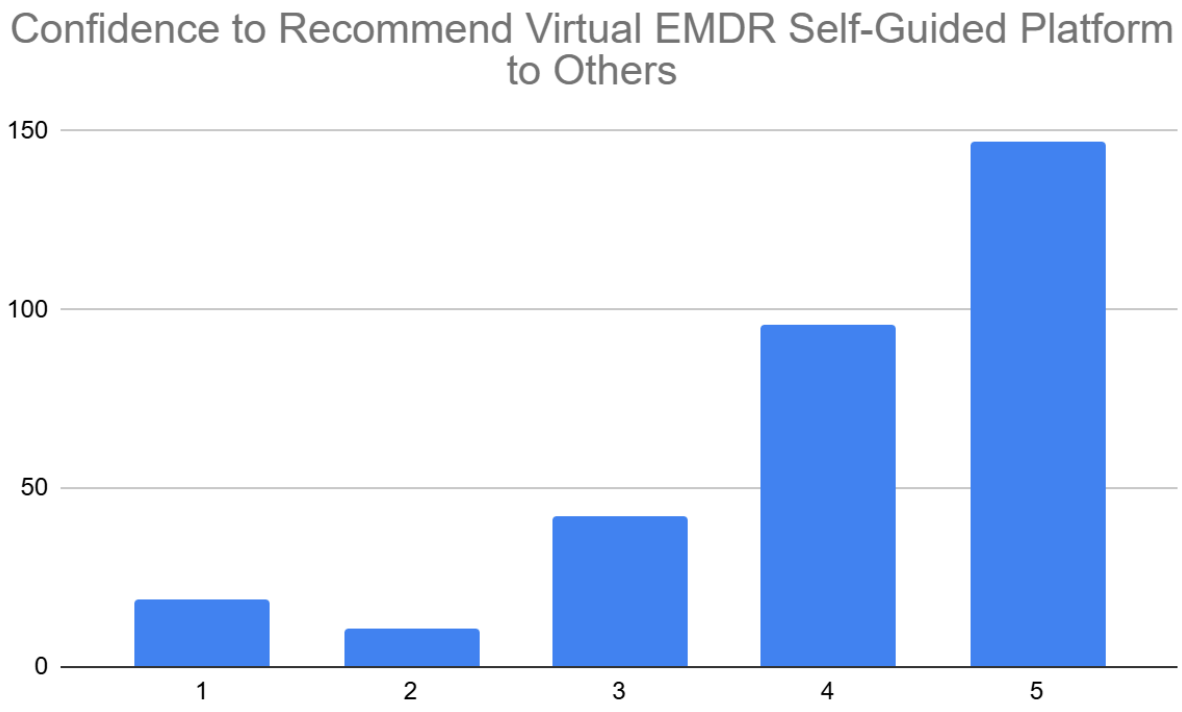
OS4: Confidence to Recommend Virtual EMDR Self-Guided Platform to Others

Users were asked whether they would recommend the Virtual EMDR self-guided program to others experiencing similar challenges. This item serves as a strong indicator of overall satisfaction, perceived effectiveness, and user trust in the platform. Responses were rated on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree). The **mean score was 4.08**, with a **standard deviation of 1.13**, making this one of the highest-rated items across the entire survey.

The response distribution shows a clear positive trend:

- **147 users (47%)** strongly agreed (score of 5)
- **96 users (31%)** agreed (score of 4)
- **42 users (13%)** responded neutrally (score of 3)
- **30 users (10%)** disagreed or strongly disagreed (scores of 1 or 2)

These results indicate that nearly **80% of users would recommend the program**, underscoring both the personal value they experienced and their confidence in its relevance for others. High recommendation scores suggest a strong level of user trust and perceived credibility—essential indicators for scalability and adoption.



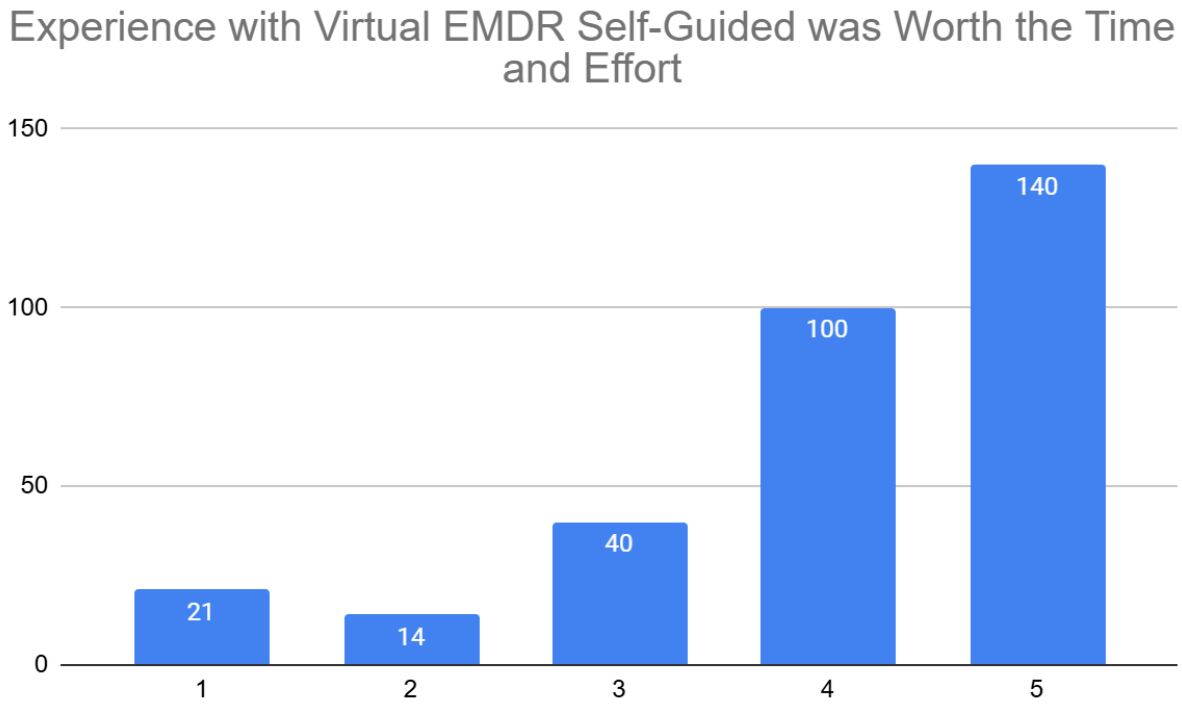
OS5: Experience with Virtual EMDR Self-Guided was Worth the Time and Effort

Users were asked whether the time and effort they invested in the Virtual EMDR self-guided program felt worthwhile—a key indicator of perceived return on investment and overall user satisfaction. Responses were measured on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree). The **mean score was 4.03**, with a **standard deviation of 1.16**, reflecting a strong positive consensus among users.

The response distribution showed:

- **140 users (44%)** strongly agreed (score of 5)
- **100 users (32%)** agreed (score of 4)
- **40 users (13%)** responded neutrally (score of 3)
- **35 users (11%)** disagreed or strongly disagreed (scores of 1 or 2)

These findings indicate that **76% of users** felt the experience was worth their effort—underscoring the program's ability to deliver meaningful, time-efficient results in a self-guided format. As one of the highest-rated satisfaction items, this metric affirms user trust in the process and perceived value from participation.



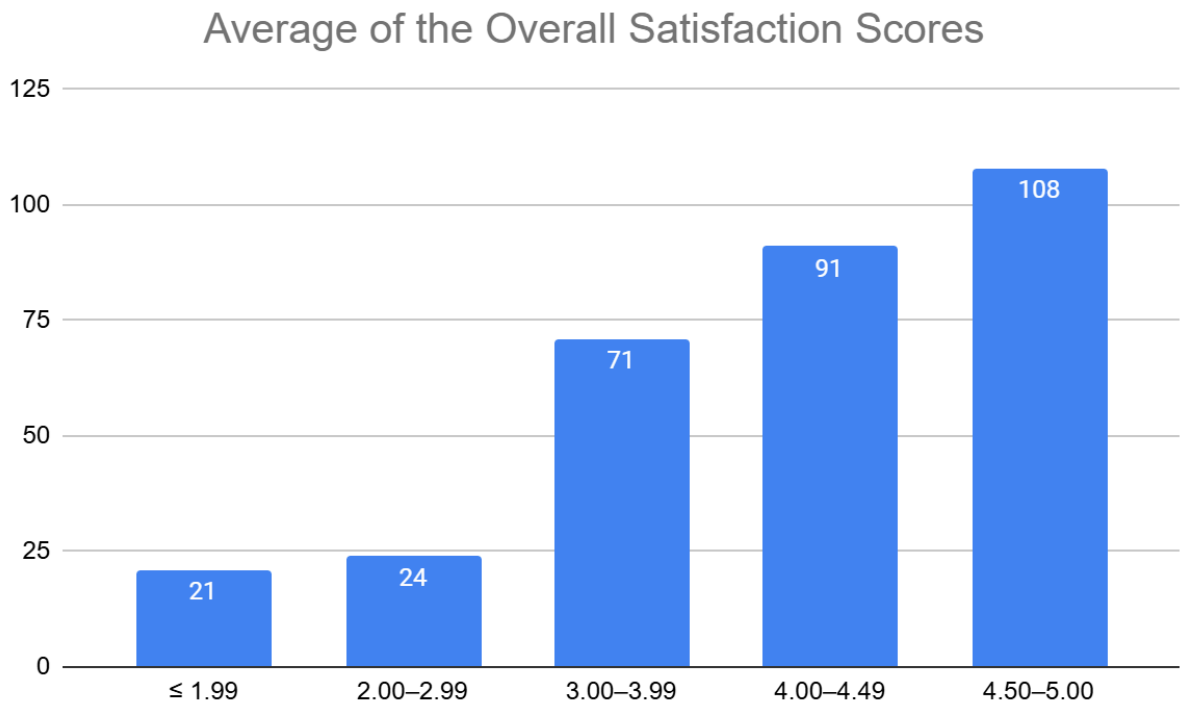
OS_avg: Average of the Overall Satisfaction Scores

To assess broad user sentiment, five satisfaction items were averaged to create an overall satisfaction score. These items included satisfaction with personal progress, goal attainment, trauma symptom relief, willingness to recommend the program, and whether the experience felt worth the time and effort. This composite score offers a comprehensive view of how users evaluated their overall experience. Responses were recorded on a 1–5 Likert scale (1 = completely disagree, 5 = completely agree). The **mean overall satisfaction score was 3.91**, with a **standard deviation of 1.05**, indicating high levels of satisfaction across the user base.

The score distribution was as follows:

- **108 users (34%)** scored between 4.50–5.00, reflecting strong satisfaction
- **91 users (29%)** scored between 4.00–4.49, indicating consistent, positive experience
- **71 users (23%)** scored between 3.00–3.99, suggesting moderate satisfaction
- **45 users (14%)** scored below 3.00, indicating limited satisfaction or unmet expectations

These results reveal that **63% of users rated their overall satisfaction above 4.0**, highlighting the Virtual EMDR program's ability to deliver a highly positive and valuable experience for most participants. The relatively small proportion of users reporting lower satisfaction offers an opportunity to explore where additional support, platform enhancements, or more tailored guidance could further boost outcomes. Future subgroup analyses will examine how satisfaction correlates with symptom reduction, self-efficacy, trauma type, and usage patterns to help optimize the platform for an even broader spectrum of users.



Looking Ahead

As we move into the next stage of our engagement, this phase will focus on validating the structure and reliability of the survey instrument, along with key statistical insights. Specifically, you can expect a set of deliverables that include:

- A data-driven grouping of related survey items, based on statistical analysis of response patterns
- Reliability scores (e.g., internal consistency) for each identified group or scale
- A concise, APA-formatted summary of key findings, including any significant differences or relationships observed in the data

This analysis will help ensure that the question set is measuring what it's intended to measure and will lay the groundwork for future comparisons, outcomes modeling, and potential clinical insights. This is forthcoming and should be completed in the next three to four weeks.

Following that stage of our engagement, we've discussed a potential Phase 3 analysis will allow us to:

- Identify core predictors of high satisfaction and sustained engagement
- Segment user profiles based on who benefits most and under what conditions
- Surface data-driven insights that can guide marketing messaging (e.g., "most users feel significant emotional relief within 3 months")
- Lay the groundwork for future whitepaper or publication content—especially focused on outcome comparability, digital therapy efficacy, and usage-behavioral trends

I've also begun considering how exploring these pathways could inform potential UX/product enhancements based on real-world dropout reasons or feedback from lower-satisfaction groups

Would like to leave the door open for continued refinement and further collaboration as we consider future research directions and generate outputs aligned with both marketing and scientific use cases.

Sincerely,

Matt Wilhelmi, MSIOP