



Helping Give Away Psychological Science (HGAPS)

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Executive Summary

Helping Give Away Psychological Science (HGAPS) is an organization dedicated to bridging the gap between psychological science and practical application for community well-being. Central to their mission is the Assessment Center, a platform offering free and confidential mental health assessments. However, the user journey through this center poses challenges, hindering accessibility and completion rates.

As HGAPS aims to expand its reach, optimizing the Assessment Center's usability becomes imperative. Currently, users must go through a multi-step process to access the Assessment Center. Once a user finds an assessment they are interested in, the multi-step process, involving introductory sections, demographic sections, questionnaires, and result presentations, creates a daunting journey for some users, leading to dissatisfaction and incomplete assessments.

In order to understand the current process of the user journey to the Assessment Center and identify where certain pain points may lie, we utilized several methods of data collection. We first met with several individuals from HGAPS and interviewed them to understand how the current process works, the reasoning behind their system, and any areas they would like to see improvement in. Once identifying that the client wanted us to investigate the college student population, we interviewed five students and learned how users unfamiliar to HGAPS navigated the website. These Zoom-recorded sessions documented user sequences and captured their feedback to comprehensively assess user experiences. In addition to this, we reviewed user feedback from an existing Qualtrics linked to the Assessment Center page.

We are proposing a few changes to this system that will enhance the user experience. Our interviews and interpretation sessions revealed that most of the user dissatisfaction stemmed from small design details or the way information was organized. However, we confidently believe that minimal changes to the system will drastically improve the user experience.

Section 1: Description of Current System

Part 1. Problem Definition

1.1. Setting

Helping Give Away Psychological Science (HGAPS) is a 501(c)(3) national service organization with the mission of bridging the science-practice gap through collecting, distilling, and sharing psychological science to promote well-being in the community. One of their main features is their Assessment Center, a collection of free and confidential mental health assessments that allows users to explore their mental health safely and access valuable resources. For users to utilize the Assessment Center, they must:

1. Visit hgaps.org, the site where the Assessment Center is located.
2. Navigate to the “Assessment Center” tab and review the “Introduction and Disclaimers” section.
3. Select which assessment battery that best suits their needs (“For Adults,” “For College Students,” etc.).
4. Complete the Qualtrics assessment.
5. Receive comprehensive results and available resources.

For a user who is interested in learning more about different psychological disorders and how they may potentially apply to them, the Assessment Center provides an ample amount of information and resources.

1.2. Stakeholders

The Client:

The Assessment Center is one of HGAPS’s ongoing projects titled “2006.” Leaders of this project include Ph.D. students Lizzie Wilson and Emma Choplin. The director/co-founder of HGAPS is Dr. Eric Youngstrom. Additional members involved in the project were HGAPS student leaders Aidan Spelbring (President), Julia Bondareva (Treasurer), and Phoebe Rodda (Past-President). HGAPS meets weekly on Thursday nights from 6-8 p.m.

The Users:

Any member interested in taking an assessment about their mental health. Our project’s users were specific to college students.

1.3. Problem

As HGAPS continues to expand its reach and impact, the Assessment Center serves as a vital tool in providing accessible mental health information. However, navigating each assessment within the Assessment Center requires several steps. Each assessment within the center comprises an introduction, instructions, a demographic section, questionnaires, and an end screen that provides a PDF printout of results, calculated scores, and resources, including tools for clinicians.

These steps may be daunting and pose a challenge for a user to navigate through all of them leading to dissatisfaction and incomplete responses.

1.4. Initial Client Description of Problem

The goal of the assessment center is to take assessments over time for a single patient. There are currently two systems in place to collect information, Qualtrics and RedCap. The plan is to fully transition to using RedCap. However, currently, RedCap is being used for clinician surveys while Qualtrics is used for the general population. The assessment center wants to differentiate between clinician access and general population access. All information is collected in OSF (Open Science Framework) which is not large enough and has a long loading time. Additionally, feedback has to be manually entered.

After discussing with the client, we decided to focus solely on college students for our analysis. We wanted to understand the thought process of college student's when they navigate the HGAPS website, specifically with the Assessment Center.

1.5. Scope

Assessment Center Focus: HGAPS has many components, including a number of Wikiversity and Wikipedia sites along with their website. This project will solely focus on the Assessment Center system. Project members will work closely with Dr. Eric Youngstrom and other HGAPS leaders during weekly meetings.

College Student Focus: Within the Assessment Center, there are several different user groups, including adults, college students, caregivers, and clinicians. Given the age group of our team members, we decided to solely focus on college students.

1.6. Importance

By focusing on the user experience, the project aims to make navigating the Assessment Center more intuitive and user-friendly. Improving the usability of the platform, such as simplifying access steps and enhancing clarity in information presentation, directly impacts how users engage with mental health assessments. This, in turn, encourages more individuals to explore the available resources and engage in the assessment process, thereby promoting mental health awareness and well-being.

Moreover, by actively engaging with user feedback and implementing changes accordingly, the project demonstrates a commitment to its users' well-being. This proactive approach not only enhances user satisfaction but also fosters trust and confidence in the Assessment Center as a reliable source of mental health information and support.

In essence, prioritizing the user experience and suggesting changes within the HGAPS Assessment Center isn't just about making surface-level improvements; it's about actively listening to users' needs, refining the platform to better serve them, and ultimately contributing to the promotion of mental health and well-being within the community.

1.7. Objectives

- **Improve Accessibility:** Simplify the user journey in the Assessment Center by reducing the amount of information that is mandatory to read by 25%.
- **Optimize Feedback Process:** Introduce an automatic system to inform the HGAPS team of feedback suggestions immediately.
- **Maximize Assessment Completions:** Revise the user interface to simplify the Assessment Center Experience by minimizing the interactions necessary to complete the assessments. Increase assessment completion rate from 100 users per month to 200 users per month (double rate).

Part 2. Investigation

2.1. Data Gathering

We gathered data from 3 different sources:

1. **Structured interviews** with a sample of five college students as they navigated the HGAPS website and took a mental health assessment. Sessions were recorded using Zoom. (See [Appendix 2d](#) for User Personas)

User interview questions were guided by a general outline as follows:

Observation and User Interaction:

- As you navigate through the website, please think aloud and share your thought process, actions, and any reactions you have to what you see or experience.

Specific Tasks:

- We'll start by asking you to navigate the website, find the assessment center, and take an assessment of your choosing. Please feel free to ask questions or seek assistance if needed.
- After completing the assigned tasks, please feel free to explore the website further and interact with any areas of interest. If you encounter any issues, challenges, or aspects of the website that stand out to you, please let us know.

Table 1

User Demographics

Demographics	User #1	User #2	User #3	User #4	User #5
School attending:	UNC Charlotte	Wake Forest University	UNC-Chapel Hill	UNC-Chapel Hill	UNC-Chapel Hill
Year in school:	Senior	2nd-year Law Student	Freshman	Senior	PhD
Age	21	23	18	21	28
Gender	Female	Male	Female	Male	Male
Major	Architecture	Undergrad in English Education	Business	Information Science	Biomedicine
Asking if they have ever heard of HGAPS prior to interview:	No	No	No	Yes	No

2. **Feedback forms** that have been collected by HGAPS over the years, based on 68 user responses. Our team read aloud each response to the feedback form and noted any that were relevant to our project. These were added to the Affinity Diagram.

Figure 2.1

Example Item from Assessment Center Feedback Qualtrics

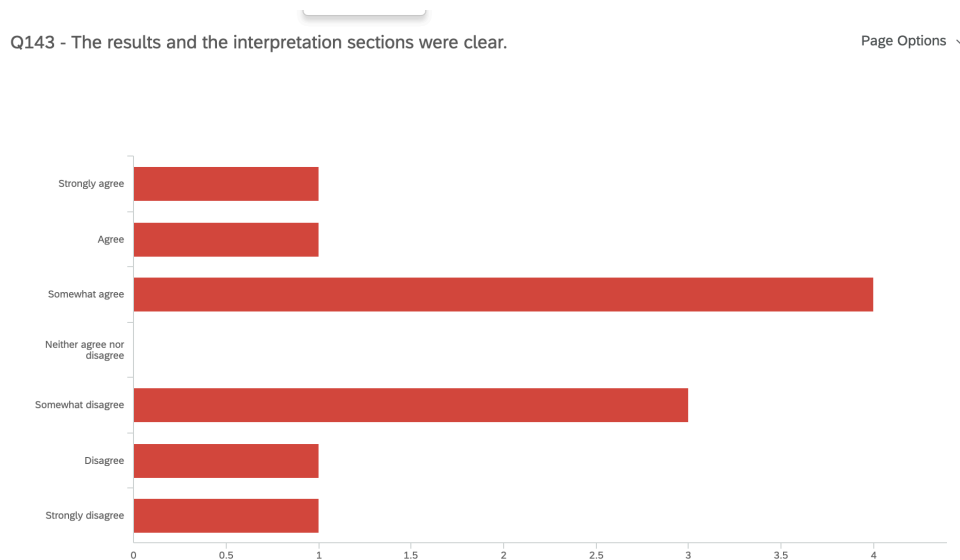
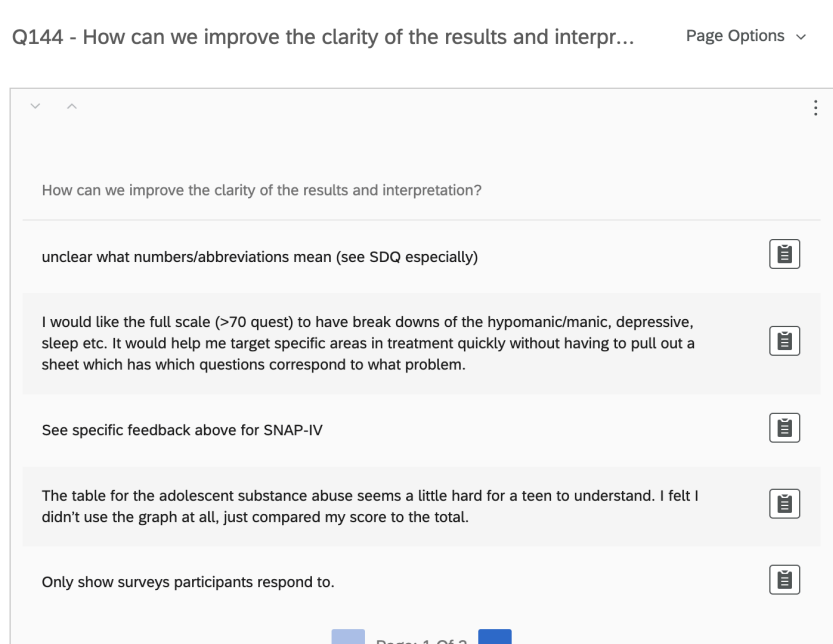


Figure 2.2

Example Item from Assessment Center Feedback Qualtrics



3. Seven different **online websites** that offer free mental health assessments.

**DBSA (Depression and Bipolar Support Alliance). Retrieved from
<https://www.dbsalliance.org/>**

Like HGAPS, the homepage of this website is quite extensive, offering a range of features for support and education. As you scroll down, you'll come across a Support tab that allows you to locate both online and local support groups by entering your Zip code. The page is designed for easy navigation, with a dedicated Education tab providing brief descriptions of various diseases and even offering screening tests, such as a depression screening test. If you're interested in staying informed, there's a newsletter sign-up option available. Unlike HGAPS that does not have any guide about crisis, In times of crisis, the CRISIS tab is readily accessible, providing a phone number for immediate assistance. Under the EDUCATION tab, a plethora of resources awaits, including podcasts and videos. Whether you're an adult, child, or adolescent, there are screening tests tailored to your specific needs, even including a version for parents or caregivers of children and adolescents.

They have a specific section with some attractive resources like coloring pdfs on the first page for children which is attractive.

They have a young adult council, they have an online support group for young adults, but they did not divide the information for example depression for young adults and adults. Under the young adult tab, they have resources related more to this age group like Sobriety and Bipolar Disorder

Similarities with HGAPS	Differences from HGAPS
-Homepage is extensive	-Introduce support groups
-Linked Resources	-More Organized
	-Signup option
	-Crisis option
	-Attractive resources for kids

Figure 2.3
Depression and Bipolar Support Alliance Homepage

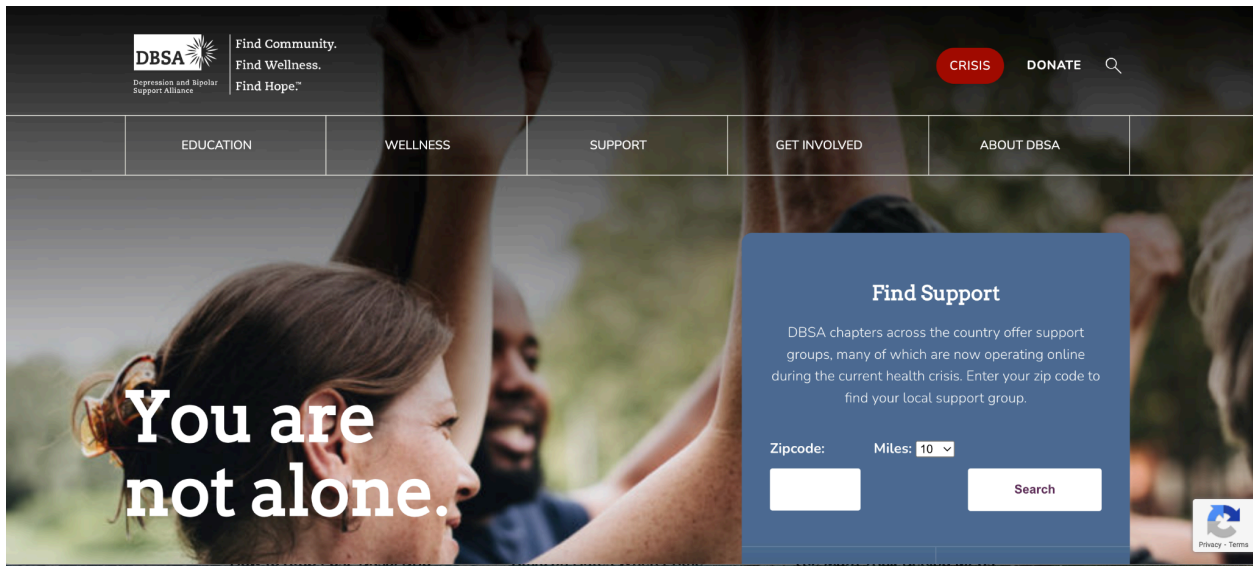


Figure 2.4
Depression and Bipolar Support Alliance Children's Page

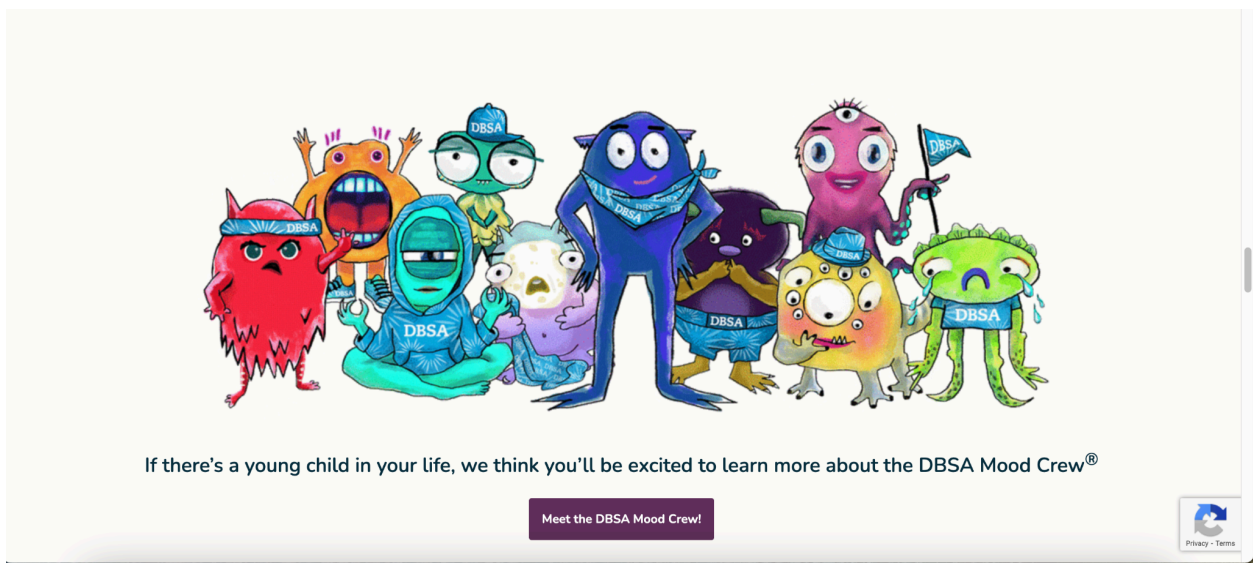
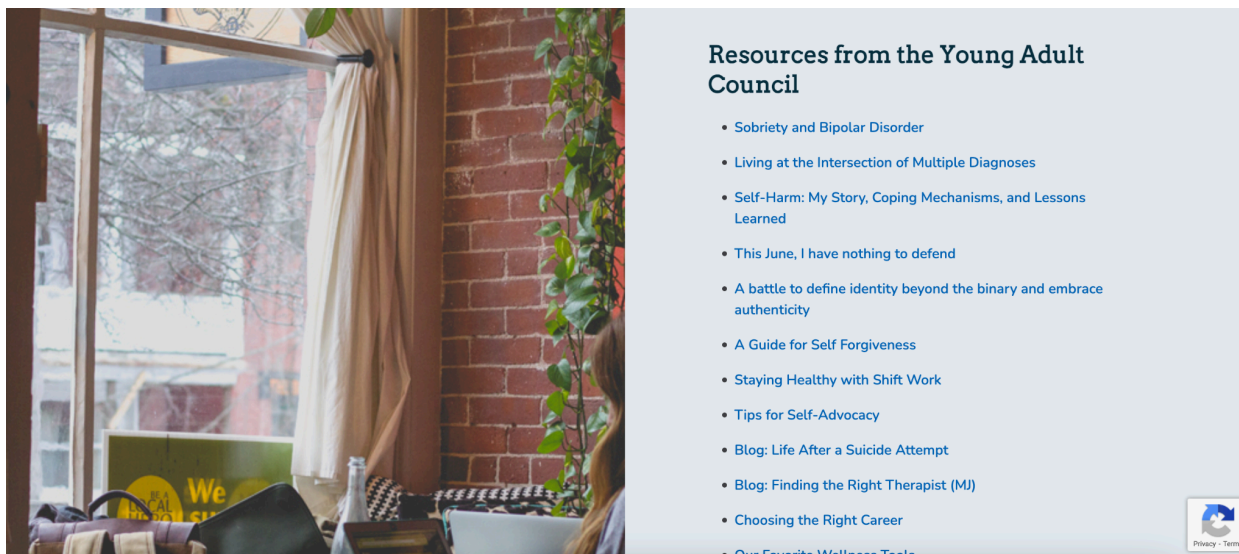


Figure 2.5
Depression and Bipolar Support Alliance Young Adult Council



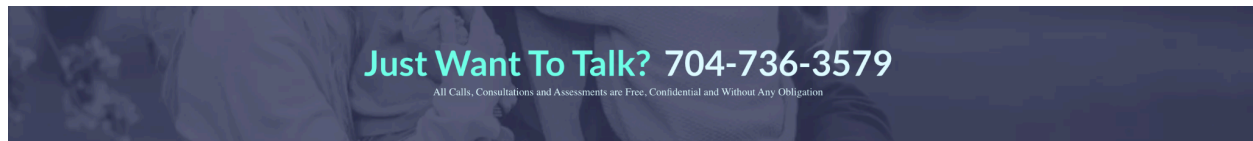
Resources from the Young Adult Council

- [Sobriety and Bipolar Disorder](#)
- [Living at the Intersection of Multiple Diagnoses](#)
- [Self-Harm: My Story, Coping Mechanisms, and Lessons Learned](#)
- [This June, I have nothing to defend](#)
- [A battle to define identity beyond the binary and embrace authenticity](#)
- [A Guide for Self Forgiveness](#)
- [Staying Healthy with Shift Work](#)
- [Tips for Self-Advocacy](#)
- [Blog: Life After a Suicide Attempt](#)
- [Blog: Finding the Right Therapist \(MJ\)](#)
- [Choosing the Right Career](#)
- [Our Favorite Wellness Tools](#)

Harmony Recovery. Retrieved from <https://go.harmonyrecoverync.com/>

On their introductory page, they offer a unique option that simply says, "JUST WANT TO TALK?" accompanied by a provided phone number. The statement assures that all calls, consultations, and assessments are not only free but also confidential, emphasizing a commitment to a judgment-free space. Specifically catering to adults, this center, based in Charlotte, aims to provide a supportive environment for individuals seeking assistance. While the webpage doesn't delve into extensive details, it hints at a focus on mental health treatment with a residential setting nestled in the scenic Smoky Mountains of Tennessee. The emphasis on confidentiality and the absence of any obligation reflects a dedication to creating a safe and accessible space for those in need. Unlike HGAPS they have a line for CRISIS.

Similarities with HGAPS	Differences from HGAPS
	-You can call and talk
	-CRISIS option
	-Specifically for adults

Figure 2.6*Harmony Recovery Crisis Line*

Mental Health America. Retrieved from <https://screening.mhanational.org/>

Mental Health America is a community-based non-profit dedicated to addressing the needs of those living with mental illness and to promoting mental health. This website appears to align with the goals of HGAPS, which aim for accessibility and inclusivity as it is freely available to the general public. Navigating the website is quite straightforward, with assessments easily accessible from the home page and an orange button prominently featured at the top of every page.

Furthermore, the website offers a plethora of resources and articles related to the assessments, with organized categories and filtering options for easy exploration. For those who create an account, past scores are stored, allowing for easy tracking of progress. Users also have the option to subscribe to a newsletter for ongoing engagement.

This website effectively presents a wealth of information without overwhelming the user. The primary focus is on the assessment, which is easy to locate and complete. Additional information, such as test details, results, and the site's history, is available for users who choose to explore further. This approach ensures a user-centric and accessible experience for all visitors.

Similarities with HGAPS	Differences from HGAPS
Aligns with the goals of HGAPS, which aim for accessibility and inclusivity as it is freely available to the general public	Contains a specific assessment designed for youth aged 11 to 17.
Contains an assessment specifically for parents along with informative articles tailored to their needs.	Each assessment can be expanded by clicking on the "+" icon to reveal a brief summary.

Empowers users with comprehensive information about mental health conditions and provides an extensive list of resources

There is no distinction between college students and adults.

Figure 2.7

Mental Health America Assessment

The screenshot shows the Mental Health America (MHA) website. At the top left is the MHA logo with the tagline 'Mental Health America'. To the right are navigation links: 'Learn about mental health', 'Resources', and 'About Us'. Further right is a search icon and a 'LOG IN' link. Below these is a prominent orange button that says 'TAKE A MENTAL HEALTH TEST'. The main content area features a large teal banner with the heading 'Take a Mental Health Test'. Below the heading, there is a short paragraph explaining that online screening is a quick and easy way to determine if one is experiencing symptoms of a mental health condition. Another paragraph states that mental health conditions like depression or anxiety are real, common, and treatable, and that recovery is possible. Below this text is a grid of 12 teal buttons, each with a white plus sign and a test name: 'DEPRESSION TEST', 'POSTPARTUM DEPRESSION TEST (NEW & EXPECTING PARENTS)', 'ANXIETY TEST', 'ADHD TEST', 'BIPOLAR TEST', 'PSYCHOSIS & SCHIZOPHRENIA TEST', 'PTSD TEST', 'EATING DISORDER TEST', 'ADDICTION TEST', 'PARENT TEST: YOUR CHILD'S MENTAL HEALTH', 'YOUTH MENTAL HEALTH TEST', and 'TEST DE DEPRESIÓN'.

**Penn State University. Wellness Services. Retrieved from
<https://studentaffairs.psu.edu/counseling/wellness-services>**

This mental health screening is designed specifically for Penn State students and can be easily located on the university's website as it is directly linked to the institution's counseling services. The questions within the assessment cover a range of mental illnesses, making it comprehensive in its approach. However, it lacks aesthetic appeal and does not offer a visual representation of progress. Demographic information is not requested during the assessment. The results categorize the individual's "level of distress" into low, moderate, or elevated for different areas of distress, including depression, generalized anxiety, social anxiety, academic distress, eating concerns, frustration, family distress, and alcohol use. At the end of the assessment, it offers access to local mental health resources. While it is user-friendly, its visual presentation could be improved for a more pleasant user experience.

Similarities with HGAPS	Differences from HGAPS
Offers mental health resources after assessment completion.	Specifically made for college students
Provides an interpretive guide to understand results.	The questionnaire employed in the assessment is not geared toward a single mental illness but is more broadly focused, encompassing various mental health conditions.

Figure 2.8
Penn State Wellness Service's Home Page

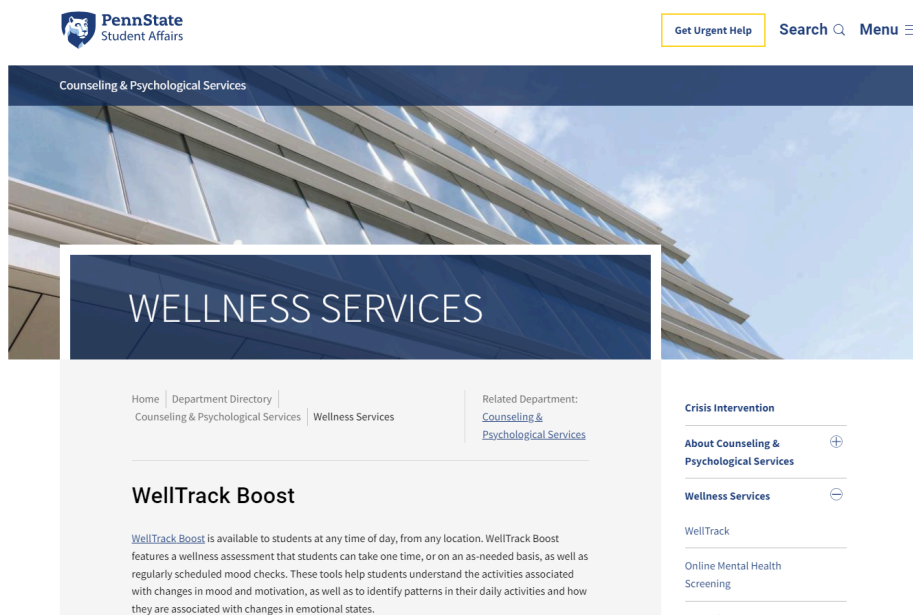


Figure 2.9
Penn State Center for Collegiate Mental Health (CCMH)

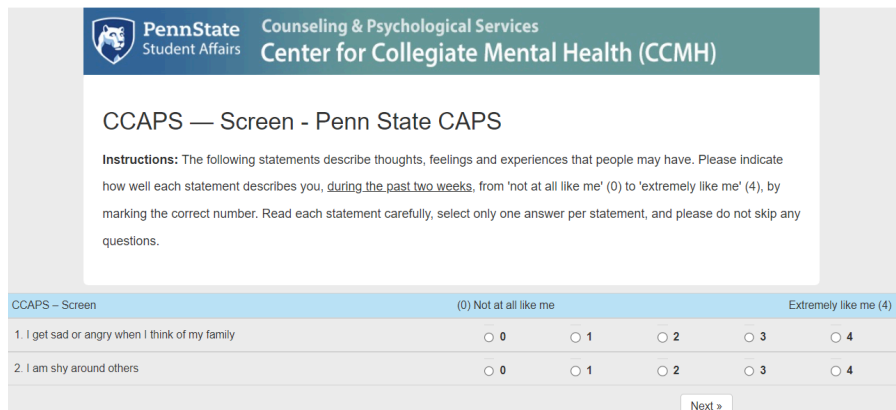


Figure 2.10
Penn State Results Page

Area of Distress	Level of Distress
Depression <i>(Feelings of isolation, apathy, worthlessness, sadness)</i>	Low
Generalized Anxiety <i>(Racing thoughts, tension, possible panic attacks)</i>	Low
Social Anxiety <i>(Feelings of shyness, self-consciousness, and social discomfort)</i>	Low
Academic Distress <i>(Lack of confidence in academics, concentration difficulties, problems completing school-work)</i>	Low
Eating Concerns <i>(Preoccupation with food, concern about overeating)</i>	Low
Frustration <i>(Problems with temper, anger, irritability)</i>	Low
Family Distress <i>(Stress in family relationships)</i>	Low
Alcohol Use <i>(Overuse of alcohol, negative consequences from drinking)</i>	Low
Thoughts of Ending My Life <i>(Ranges from benign passing thoughts to serious suicidal thoughts with intentions to act)</i>	No

Figure 2.11
Penn State Interpretive Guide

Interpretive Guide
<p>Based on your responses:</p> <ul style="list-style-type: none"> • Elevated: further evaluation is recommended. • Moderate: if these concerns are problematic, consider further evaluation. • Low: no action is needed at this time. <p>You did not report any thoughts of ending your life in the last two weeks. <i>This report is not a clinical diagnosis. Please contact a health professional for a complete assessment.</i></p>
Local Resources
<p>Counseling and Psychological Services: (814) 863-0395 Penn State Crisis Line: (877) 229-6400 National CrisisTextLine.org: Text "Lions" to 741741</p>

Yale University. Online Mental Health Screening. Retrieved from https://yalewell.yale.edu/mental-health/online-mental-health-screening
<p>The screening tests provided by Yale University are conveniently located on the university’s mental health website and easy to find, ensuring accessibility for users. The range of available screenings is limited compared to other screening websites.</p> <p>One notable feature is the wide-ranging screening process, which adapts based on the user's responses and the potential presence of a mental health disorder. For instance, if a user is deemed at risk for depression, they are directed to take a specific depression assessment, providing a personalized approach to mental health evaluation.</p> <p>Despite being designated for students, these assessments do not significantly differ from</p>

other generic assessments commonly found online. The assessments themselves are concise, and each question is presented on its individual tab. The interface is designed for efficiency, automatically advancing to the next question after each response, streamlining the assessment process for users.

Similarities with HGAPS	Differences from HGAPS
Offers a free, confidential, and anonymous online mental health assessment to all students.	Specifically for college students, and offers additional screenings for eating disorders and gambling addiction.
Contains a link to other general mental health resources after completion.	Demographic questions are required, as the assessment does not allow the user to proceed if left blank.

Figure 2.12

Yale University Online Mental Health Screening

Psychology Today. Tests. Retrieved from https://www.psychologytoday.com/us/tests	
<p>Psychology Today, through its website psychologytoday.com, provides a diverse array of psychological assessments catering to various aspects of users' lives. The homepage is well-organized, presenting users with the option to sort assessments by categories such as career, health, IQ, personality, and relationships. The assessments can be ordered by popularity, and the platform distinguishes which ones are entirely free. When users select a specific assessment, they are informed of the estimated completion time and receive a concise description before choosing to start the assessment. The actual assessment is presented in sections, allowing users to track their progress through a convenient "progress status" bar at the top of the page. The site design is simple and intuitive to navigate. While there are many different types of assessments available, they are organized so as to not be confusing or overwhelming to the user.</p>	
Similarities with HGAPS	Differences from HGAPS
Gives clear descriptions of each description upon selection.	Gives an estimated time for completion with each assessment description.
Has a progress bar at the top of each assessment to track completion progress.	Ability to sort the list of tests by various criteria.

Figure 2.13
Psychology Today Self Test Assessments List

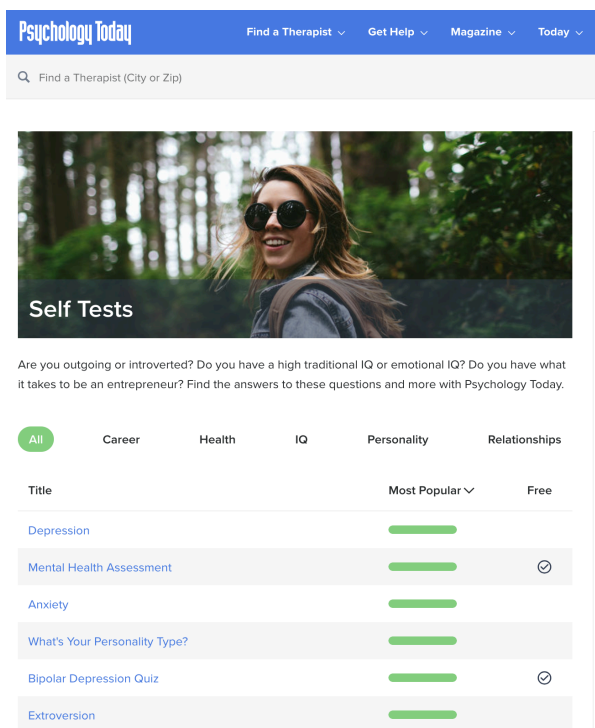


Figure 2.14
Psychology Today Test Description

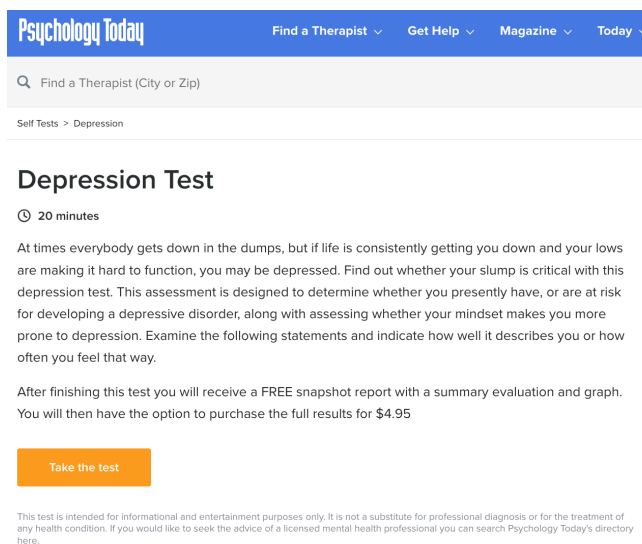


Figure 2.15
Psychology Today Assessment: Depression Test

Psychology Today Find a Therapist Get Help Magazine Today US

Find a Therapist (City or Postcode) GO Verified by Psychology Today

Depression Test
101 questions

PROGRESS STATUS:

	Most of the time	Often	Sometimes	Rarely	Almost never
1. I feel sad.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. I feel agitated or restless (I pace, am unable to stay calm, or need to move constantly).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I feel worn out.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. I feel so guilty that I can barely take it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. When I wake up in the morning, I feel like there is nothing to look forward to.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. I think about death.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. When needed, I can make up my mind quickly.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. I get mad at myself if I do not achieve the goals I have set out to reach.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. When something is bothering me, I cannot stop thinking about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

GO TO NEXT QUESTIONS

Psychology Tools. Download Scales and Measures. Retrieved from <https://www.psychologytools.com/download-scales-and-measures/>

Psychology Tools provides a comprehensive collection of psychological manuals and assessments, categorizing them by type and offering downloadable PDF versions instead of interactive quizzes. The platform is structured with a table of contents to facilitate easy navigation, allowing users to explore various assessments related to anxiety, depression, personality, and more. Each category often includes links to multiple different manuals, available for download in PDF format. This approach allows users to access and use the assessments at their convenience. The website prioritizes simplicity and clarity, offering a practical resource for mental health professionals and individuals seeking self-help tools. However, the manuals are often difficult for the layman to read and comprehend, and the lack of interactive assessments on the website make for a poorer user experience, and increased friction for the user to use the website to self-assess.

Similarities with HGAPS	Differences from HGAPS
Offers resources for different psychological conditions.	Resources sorted by different psychological conditions instead of by user demographics.
Offers descriptions of each psychological assessment upon selection.	Provides mostly pdf psychological manuals instead of qualtrics-style assessments.

2.2. Data Analysis

We highlight some key findings from our data gathered (2.1) below:

Wall Walk Data:

Agreements and Disagreements Data: This data illustrates the percentage of agreements vs. disagreements that the client had with aspects of various models. These were tallied and calculated using the colorful tabs that wall walk participants placed on the presented models.

Figure 2.1

Agreements and Disagreements Across All Models

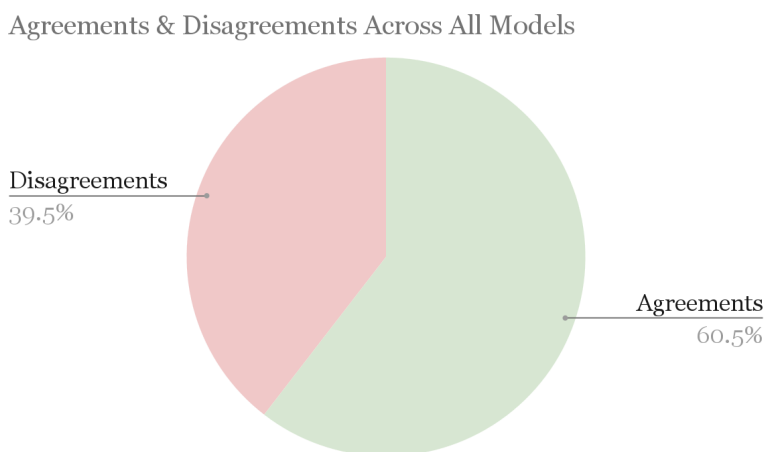


Figure 2.2

Agreements and Disagreements of Affinity Model

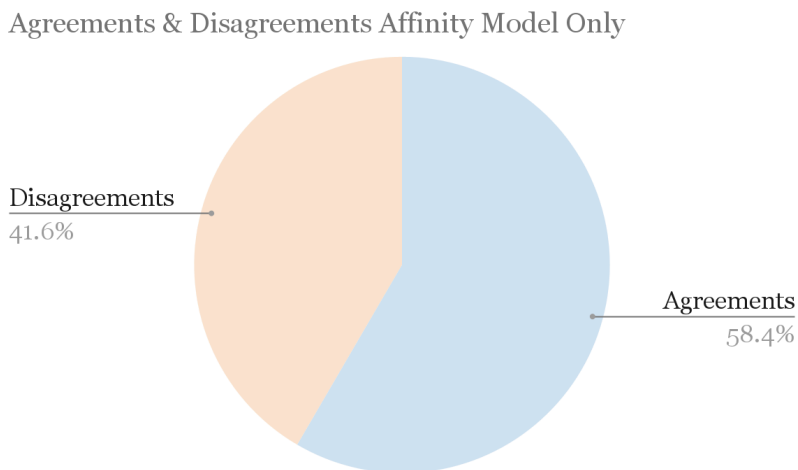
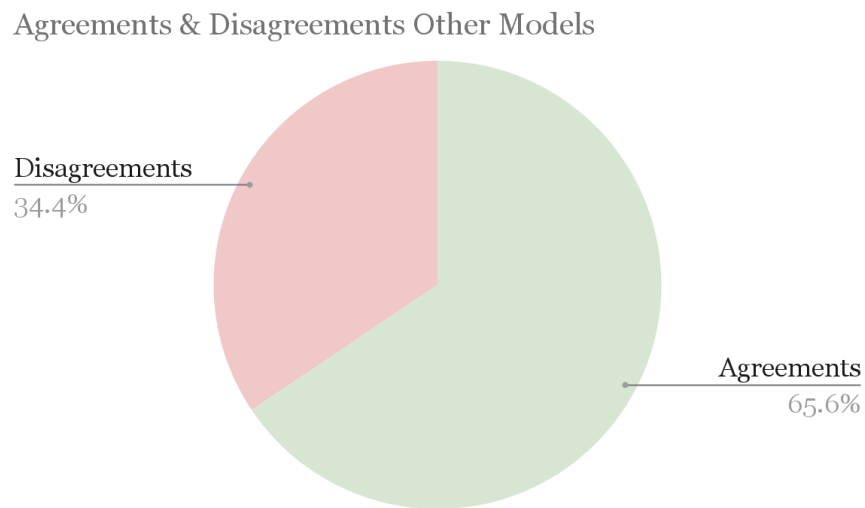


Figure 2.3
Agreements and Disagreements of Other Models



HGAPS Website Data: This data focuses on the HGAPS website and includes notes from the affinity model that wall walk participants either agreed with or disagreed with.

Figure 2.4
Overall Design Agreements (modified from physical affinity model; stars notate the number of tabs on that note)

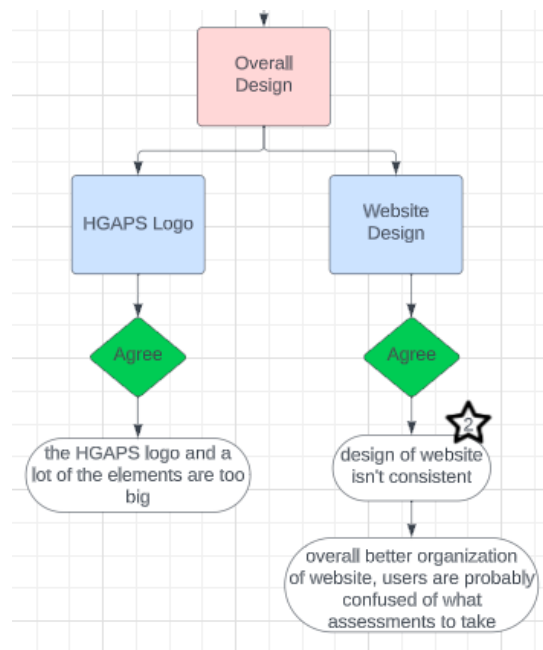


Figure 2.5
Interaction with Information Agreements and Disagreements (modified from physical affinity model; stars denote the number of tabs on that note)

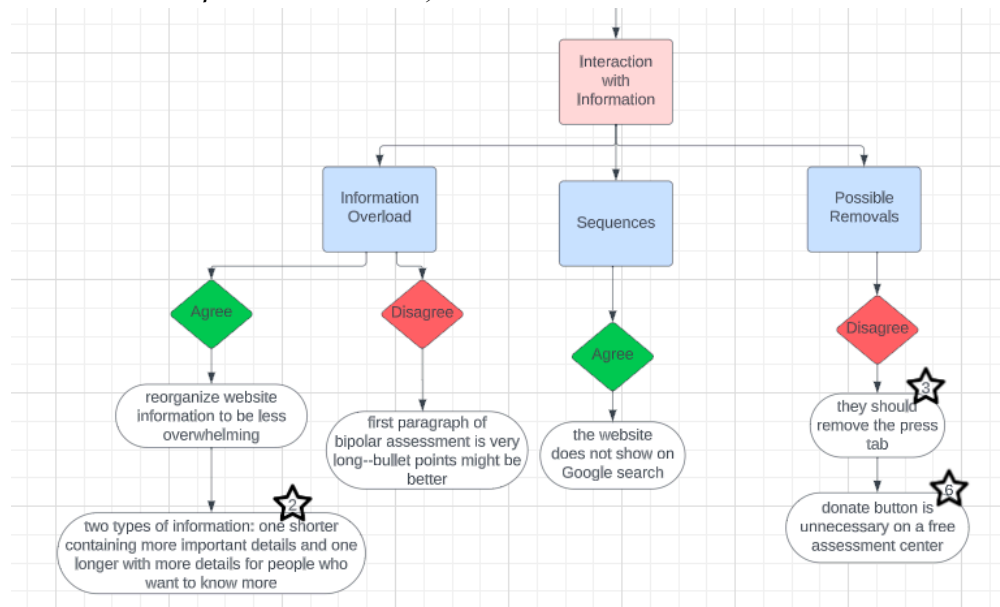
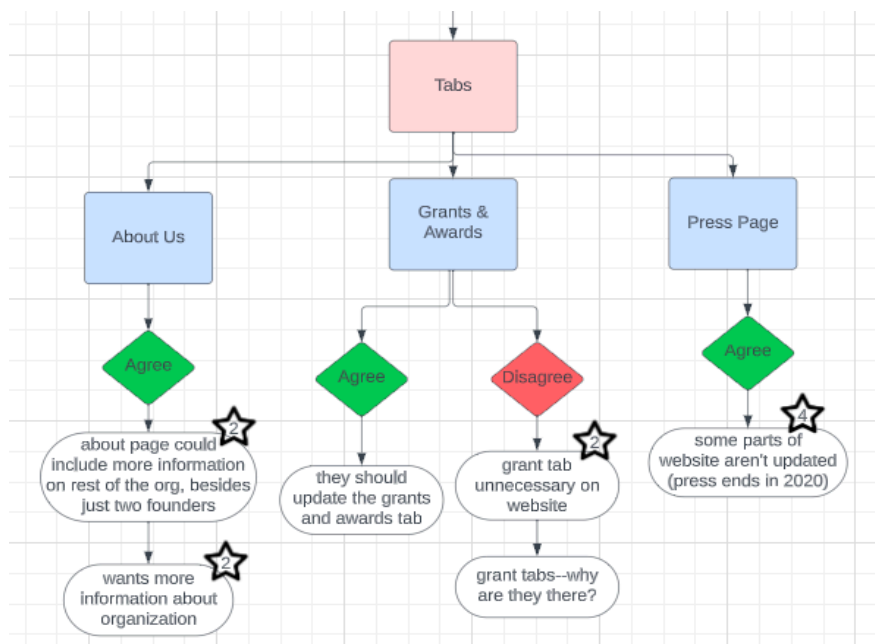


Figure 2.6
Tabs Agreements and Disagreements (modified from physical affinity model; stars denote the number of tabs on that note)



Assessment Center: This data focuses on the assessment center and includes notes from the affinity model that wall walk participants either agreed with or disagreed with.

Figure 2.7
Assessment Wording Agreements and Disagreements (modified from physical affinity model; stars denote the number of tabs on that note)

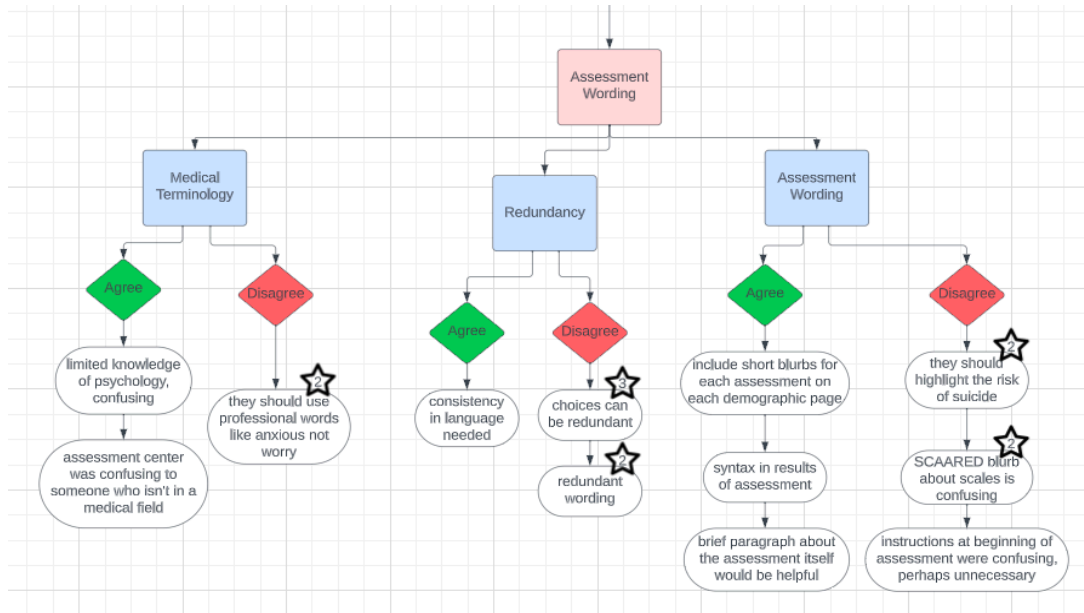


Figure 2.8
Accessibility and Design Agreements and Disagreements (modified from physical affinity model; stars denote the number of tabs on that note)

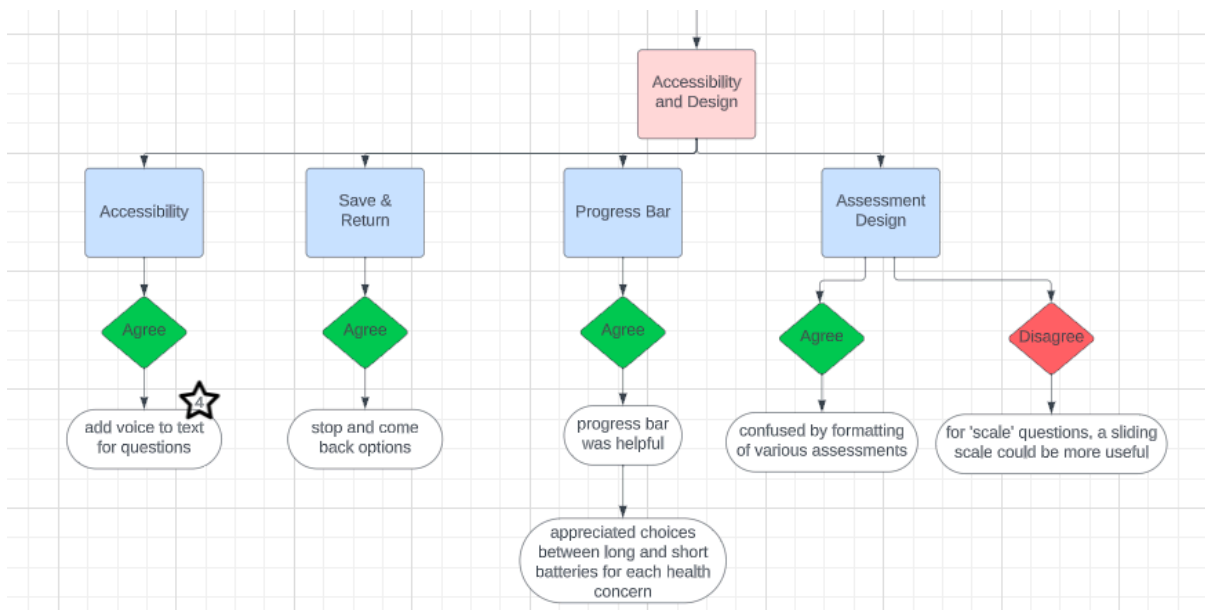
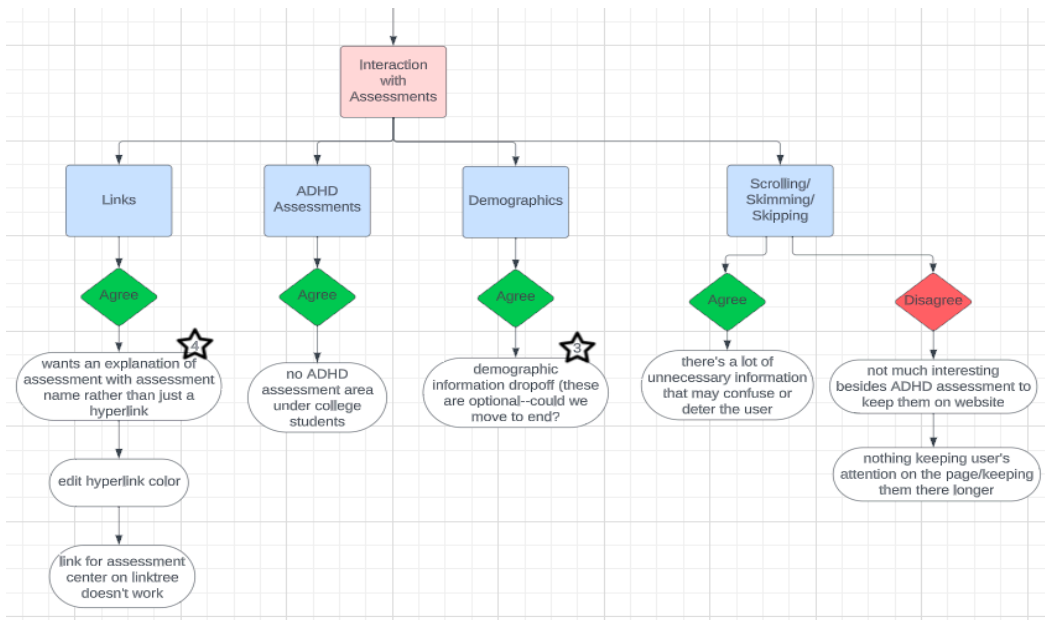


Figure 2.9

Interaction with Assessments Agreements and Disagreements (modified from physical affinity model; stars denote the number of tabs on that note)



Outside Resources: This data focuses on the outside resources that are listed on the HGAPS website and includes notes from the affinity model that wall walk participants either agreed with or disagreed with.

Figure 2.10

Content Agreements and Disagreements (modified from physical affinity model; stars denote the number of tabs on that note)

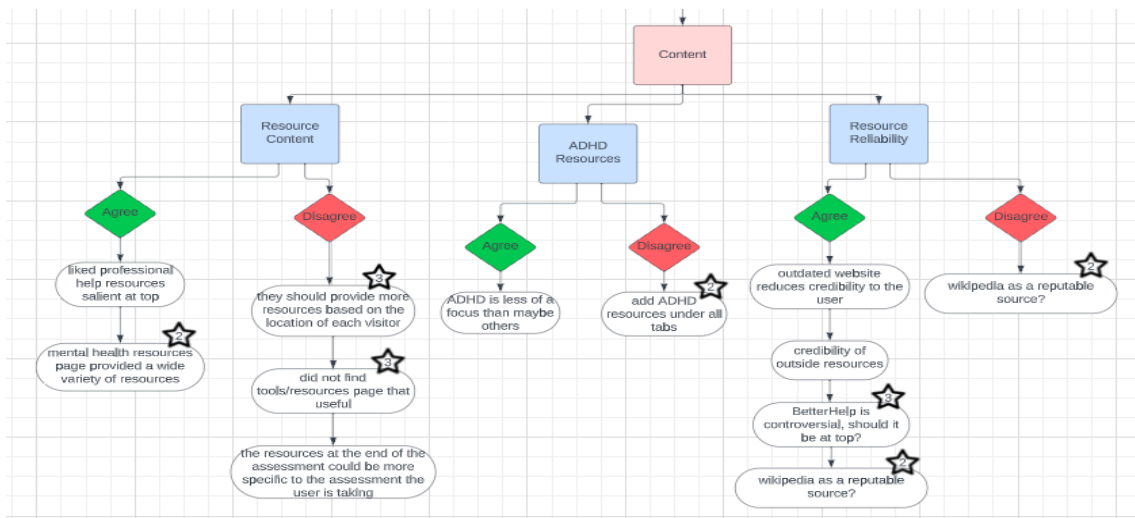
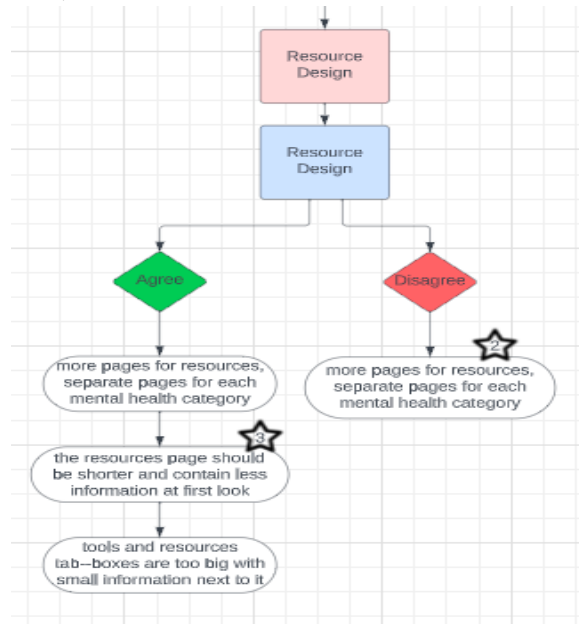


Figure 2.11

Resource Design Agreements and Disagreements (modified from physical affinity model; stars notate the number of tabs on that note)



Visioning Session:

Figure 2.12

Digital Version of Visioning Session Results



2.3. Data Interpretation

We developed several models to provide alternative perspectives to help interpret our findings.

Table 1

Interpretation Models and Key Learnings

Model	Key Findings from the Model	Reference
Artifact Models	The website exhibits inconsistencies and redundancies in its text, and certain sections appear overly wordy. An excessive use of clinical language is observed throughout the content.	Appendix 2a
Cultural Model	Overall, it is essential for users to navigate the assessment center effortlessly. Diverse user groups have distinct requirements; for instance, clinicians should have access to materials and processes to contribute to projects, while college students need a centralized and easily accessible location for mental health resources.	Appendix 2b
Affinity Model	One of the most important parts of an assessment center like HGAPS' is their user experience and interaction with the website itself. After conducting user interviews, a client interview, and interpretation sessions following those interviews, we created an affinity model as a group. Working to create our affinity model and completing our wall walk with the client informed many of our recommendations.	Appendix 2c
Personas	Our interviews revealed that the HGAPS website engages with two distinct college student user groups—undergraduate and graduate students. Both categories of users share an interest in readily available and free mental health resources. They seek comprehensive assessments presented in a user-friendly interface to fulfill their wellness needs	Appendix 2d
Sequence Models	We believed it was crucial to record the step-by-step path users follow while exploring the HGAPS website. To achieve this, we developed a sequence model for each user interview, outlining the significant interactions—such as clicks or scrolls—on the HGAPS	Appendix 2e

	<p>site. Throughout these interactions, we carefully observed any behaviors or remarks made by the users. Interestingly, we discovered that users often followed comparable sequences and provided similar feedback on various pages.</p>	
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2.4. Summary of Pain Points

1. **Clinical jargon and accessibility in Assessment Center:** The HGAPS Assessment Center utilizes clinical terminology and acronyms such as “assessment batteries” and “SCAARED,” for example, that may confuse users without a medical background.
2. **Inconsistencies in website design:** The Assessment Center utilizes different font colors, hyperlinks, backgrounds, and formatting standards inconsistently, leading to a more complicated user interface.
3. **Difficulties understanding results:** The results page and optional PDF list results utilizing clinical jargon and other standards that are not made clear to users, leading to a lack of understanding.
4. **Updating Resources:** Some resources provided by HGAPS are widely viewed as insufficient or controversial which could negatively impact the Assessment Center’s reputation with users. The Center also does not clearly explain its rationale and use of Wikiversity.

Section 2: Recommendations For New System

Table 1

Addressing a Lack of Understanding

Recommendation	Justification	Advantages	Disadvantages
<p>Introduce a disclaimer about standardized assessments</p>	<p>During user interviews, we found that users had suggestions regarding the assessments themselves (wording, response scale, etc.). However, users were unaware that these are all standardized, research-based, assessments that HGAPS does not create and therefore does not edit. Introducing a disclaimer would</p>	<p>Greater understanding to the user about the assessments</p>	<p>Any legal language that may need to be approved Potentially needs HGAPS board approval (could take some time)</p>

	give users the understanding of where the assessments come from.		
Explaining acronyms for disorders/assessments	Some users found difficulty understanding terms with an acronym (and also without an acronym). For example, many users understand ADHD but do not know that it stands for attention-deficit / hyperactivity disorder.	Greater understanding to the user	Includes more text - one of our other goals is to reduce text as users find the amount to be overwhelming
Editing clinical jargon	Overall, we found that some users had difficulty understanding certain terms, with the most common one being "batteries." Defining these terms or replacing them with different words would be beneficial.	Greater understanding to the user	Difficult to know what users know/don't know.
Explain the use of Wikipedia/Wikiversity	Many users questioned why Wikipedia was referenced so much, as many college-aged users were taught in school to not trust the source. Providing an explanation of the use of Wikipedia and its importance to HGAPS' mission would have a crucial impact. In our visioning session, we discussed potentially putting an explanation of Wiki use on the "About Us" page of the website.	More trust in HGAPS and their suggested resources Understand the benefits of Wikipedia/Wikiversity and why it can be deemed as reliable	Would users read an explanation about Wikipedia/Wikiversity or skip over it?
Describe difference between "For Adults" and "For College Students" pages	Several users found it difficult to understand how the "For Adults" and "For College Students" assessment pages were different, especially those who are in graduate school. An explanation that describes	Would limit confusion for user	What language should be used when describing these differences so that users can easily understand?

	<p>these differences would assist the user in deciding the page that is most helpful to them. Additionally, explaining that the “For Adults” page directs the user to a Qualtrics including all assessments vs. the “For College Students” page directing the user to another website page with separate Qualtrics links for the different assessments.</p>		
Getting rid of BetterHelp as resource	<p>In addition to Wikipedia (which we believe is critical to the HGAPS mission), users questioned the reliability of BetterHelp and why it was suggested as a top resource given its scandal in pushing users to hand over their health information. Simply removing this resource will eliminate this questioning of reliability.</p>	Would increase reliability of other resources	Getting rid of potentially a very useful resource for some users (potentially include HGAPS suggestion on how to specifically use the resource?)

Table 2*Addressing Design Inconsistencies*

Recommendation	Justification	Advantages	Disadvantages
Changing hyperlink color when hovering	<p>When it came to actually finding the assessments themselves, several users were confused on where exactly to go. This is because when hovering over a hyperlink, the underline is removed but the color is not changed (as is seen in typical hyperlink hovering). This one small design change would address this confusion.</p>	Improve accessibility to assessment center	May need HGAPS board approval before implementing

Reformatting Results	Once completing an assessment, users are given a page with their results. There were several design suggestions that came up when interviewing users. First of all, some of the margins were very small, making the results difficult to read. Additionally, there is some unnecessary information, especially when taking the “For Adults” assessment. For example, if a user chooses to not take an ADHD assessment, they are still given the results of the ADHD assessment, although it is blank.	Improve understanding of results	May be difficult to format in Qualtrics
Reformatting Resources	Although users liked the amount of resources provided, there were some suggestions regarding reformatting. One suggestion was to organize the resources based on age group.	Easier to access resources specific to user	A lot of possibilities on reformatting the resource page, but unsure what would benefit the <i>most</i> users

Table 3*Increasing Accessibility to Assessment Center*

Recommendation	Justification	Advantages	Disadvantages
Changing where Assessment Tab is located and/or changing color of tab	One of the most common user comments was difficulty in simply finding the Assessment Center was located. Although it may appear easy to find, users typically read tabs in order from left to right. Considering that the “Assessment Center” tab is the 5th tab to the left, it is understandable why some users may have trouble locating it. We suggest moving the “Assessment	Easier access to Assessment Center	Might need HGAPS board approval Could be difficult to find for those already familiar with Assessment Center

	Center” tab to either the 3rd tab (after the “About Us”) or to change the color of the tab (perhaps having it be a dark blue box) so that it is more salient to the user.		
Having separate tabs for clinicians and general public & making infographics smaller	Although this was not a specific concern, we found that many users were overwhelmed with the amount of information on a page. On the “Assessment Center” tab, it could be worth creating a separate locations for clinicians, as well as making the infographic on how to suggest a new measure, smaller. This would emphasize the assessment center based on the general population.	Less information for general population user to read	Finding location for clinicians tab
Create a standardized way of gathering feedback	We found the feedback from the user interviews to be incredibly helpful. Our team looked at current ways for members of the general public to offer feedback to HGAPS. One way is to fill out a Google Forms with information about any new measures that the user would like to see on the website. Additionally, there is a Qualtrics page to gather feedback on the assessment center. While both of these are valid forms of gathering feedback, they may be difficult to maintain. HGAPS members must constantly check the results of these questionnaires, which are in different locations. We would recommend having a standardized way of gathering	Easier for HGAPS to continuously improve system	Requires HGAPS team member to consistently check feedback

	feedback (e.g., all on Qualtrics) and have an assigned member regularly view these results.		
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1. Visioning Session

During our visioning session, we created a matrix of effort vs. impact with a few of our key stakeholders for our recommendations. Those in yellow indicate this was originally an agreement/idea and those in pink indicate it was originally a disagreement (but may now be a suggestion for that disagreement).

Figure 2.1
Digital Version of Visioning Session Results

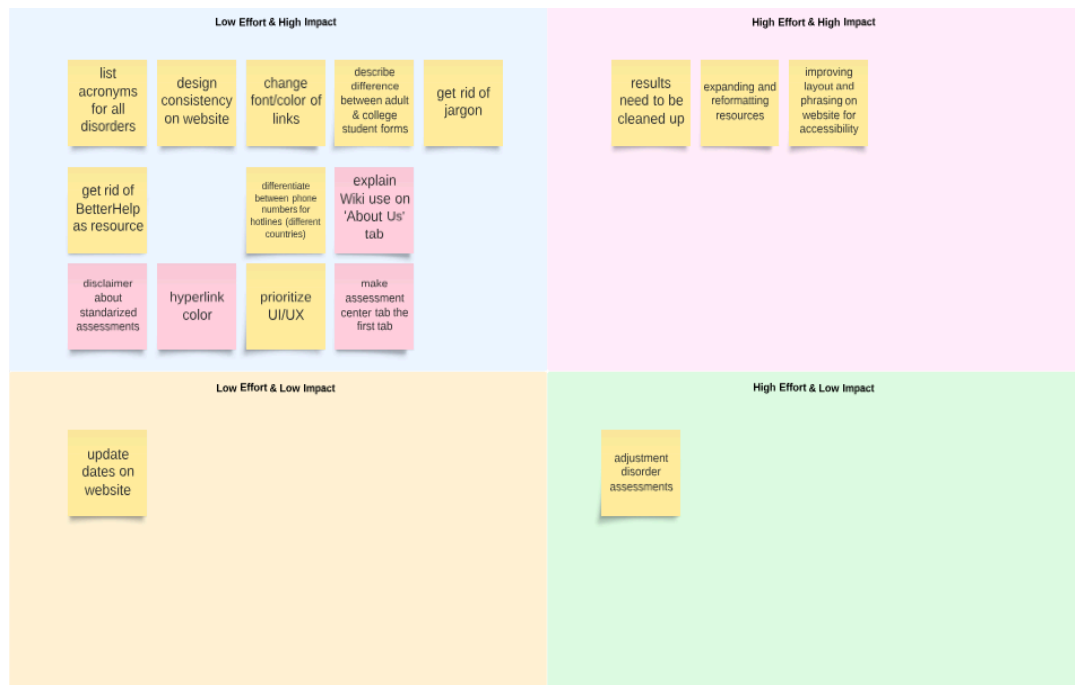
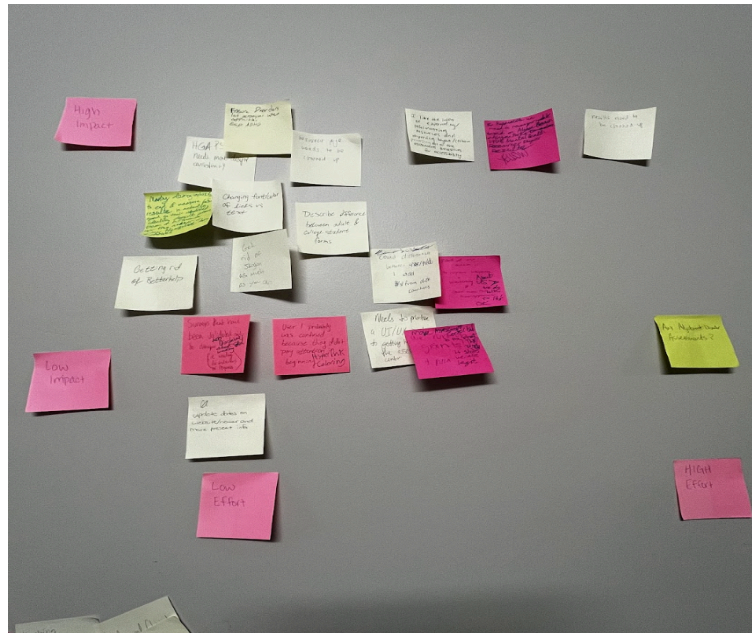


Figure 2.2*Physical Version of Visioning Session Results*

Section 3: Implementation Plan for New System

We implemented key recommendations for an improved HGAPS website with a working Figma prototype. Notably, we prioritized the Assessment Center tab by relocating it to the second position after the Home tab, as it is arguably the key feature of the website. To enhance user experience, we introduced the option to minimize text blocks, reducing visual clutter and highlighting essential information. Ensuring design consistency, all hyperlinks now share a uniform appearance – blue and underlined when hovered. In reorganizing content, we moved the "For College Students" link on the Assessment Center from the middle of the list to the bottom while bolding the keyword "page" (in contrast to "survey"). This is to distinguish this link from a page of assessments for college students from the "For Adults" link for a survey designed for adults. The mental health resources section on the Assessment Center was removed since it was redundant material found on the Resources page. We simplified the sections "Take Our Feedback Survey" and "How to Suggest a New Measure" to eliminate redundancy and minimize clutter. These refinements collectively contributed to a more user-friendly and coherent HGAPS platform.

Figure 3.1

Prioritized the Assessment Center tab by relocating it to the second position after the Home tab and introduced the option to minimize text blocks

HCAPS
Helping One Anxious Psychological Student

Home Assessment Center Resources About Us Donate More...

Assessment Center

DISCLAIMER [Hide](#)

These free mental health assessments are entirely **confidential**, allowing you to have a simple and anonymous way to explore your mental health safely and determine whether you should connect with a mental health professional.

These online screening tools are not a substitute for consultation with a mental health professional. Regardless of the results, if you have any concerns, **see a psychologist or mental health professional**.

When you are finished, you will be able to see **results and some recommended resources**. Only you receive the scores, and they cannot be reaccessed later.

If you or someone you know has thoughts of death or suicide, call **988 or 911 immediately**. Or contact a medical professional, clergy member, loved one, friend, or hospital emergency room.

ASSESSMENT BATTERIES

The free assessment batteries below ask questions about the **most common psychological disorders** (see below for information on which specific disorders each battery assesses). Upon the completion of the questionnaire, **you will get your results and additional resources**. You will also get the **option to download a PDF of your results**, which may help advocate for yourself, inform your clinician, or just for your documentation.

FOR ADULTS This survey contains assessments used by mental health professionals to measure **ADHD, depression, anxiety, PTSD, bipolar disorder, and substance use**.

It contains questionnaires designed to be taken by **an adult about themselves**.

FOR ADOLESCENTS This survey contains assessments used by mental health professionals to measure **depression, anxiety, PTSD, bipolar disorder, substance use, and oppositional defiant disorder/conduct disorder**.

It contains questionnaires designed to be taken by a **child or adolescent about themselves**.

Figure 3.2

The original Assessment Center for comparison

HCAPS
Helping One Anxious Psychological Student

Home About Us Donate Tools and Resources Assessment Center Grants and Awards Press

Assessment Center

INTRODUCTION AND DISCLAIMERS

These **free** mental health assessments are entirely **confidential**, allowing you to have a simple and anonymous way to explore your mental health safely and determine whether you should connect with a mental health professional.

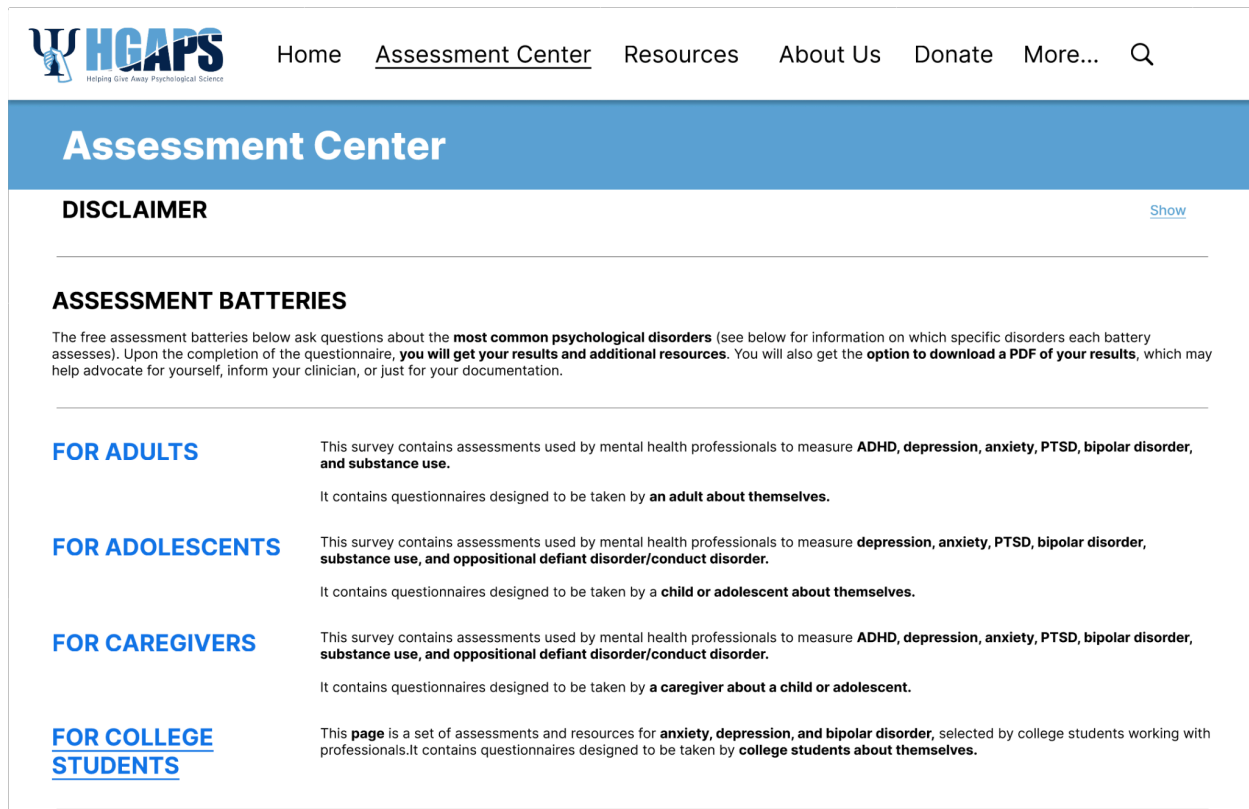
These online screening tools are not a substitute for consultation with a mental health professional. Regardless of the results, if you have any concerns, **see a psychologist or mental health professional**.

When you are finished, you will be able to see **results and some recommended resources**. Only you receive the scores, and they cannot be reaccessed later.

If you or someone you know has thoughts of death or suicide, call **988 or 911 immediately**. Or contact a medical professional, clergy member, loved one, friend, or hospital emergency room.

Figure 3.3

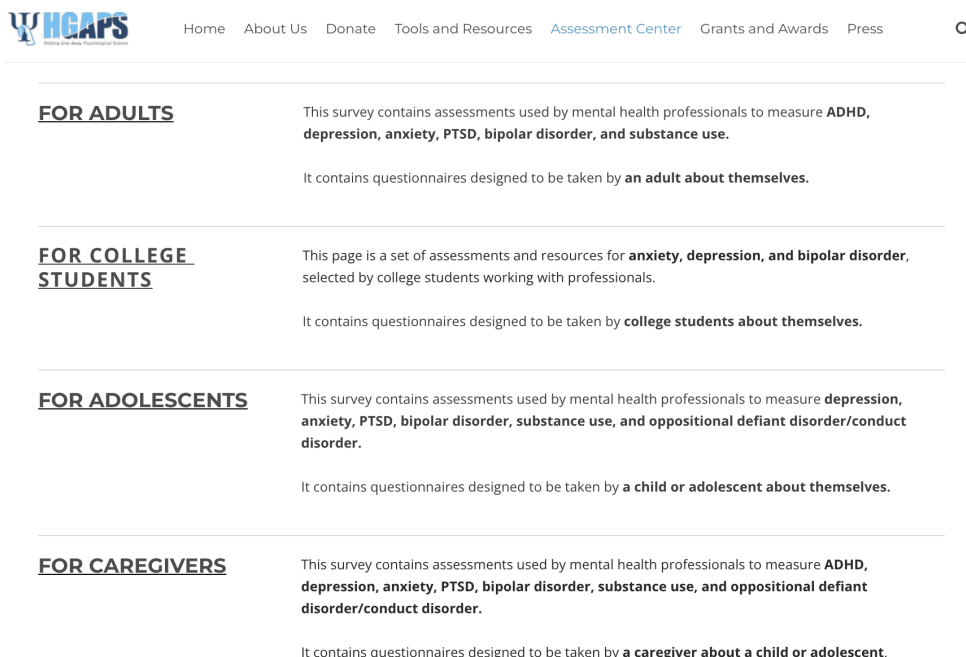
All hyperlinks now share a uniform appearance – blue and underlined when hovered, and moved the "For College Students" link on the Assessment Center from the middle of the list to the bottom while bolding the keyword "page" (in contrast to "survey").



The screenshot shows the top navigation bar with the HGAPS logo and links for Home, Assessment Center, Resources, About Us, Donate, and More... A search icon is also present. Below the navigation bar is a blue header with the text "Assessment Center". Underneath is a "DISCLAIMER" section with a "Show" link. The main content area is titled "ASSESSMENT BATTERIES" and includes a paragraph explaining the purpose of the assessments. Below this are four categories: "FOR ADULTS", "FOR ADOLESCENTS", "FOR CAREGIVERS", and "FOR COLLEGE STUDENTS". The "FOR COLLEGE STUDENTS" link is bolded and underlined, matching the style of the other links.

Figure 3.4

The original Assessment Center for comparison



The screenshot shows the original Assessment Center page. The navigation bar is similar but includes "Tools and Resources" and "Grants and Awards" in addition to "Home", "About Us", "Donate", "Assessment Center", and "Press". The main content area is titled "FOR ADULTS" and "FOR COLLEGE STUDENTS". The "FOR COLLEGE STUDENTS" link is underlined but not bolded, while the "FOR ADULTS" link is bolded but not underlined. The "FOR ADOLESCENTS" and "FOR CAREGIVERS" links are neither bolded nor underlined, showing inconsistent styling.

Figure 3.5

The mental health resources section on the Assessment Center was removed since it was redundant material found on the Resources page. We simplified the sections “Take Our Feedback Survey” and “How to Suggest a New Measure” to eliminate redundancy and minimize clutter.

The screenshot displays the HGAPS Assessment Center website. At the top, the HGAPS logo is on the left, and navigation links for Home, Assessment Center, Resources, About Us, Donate, and More... are on the right. A search icon is also present. Below the navigation is a blue header with the text "Assessment Center". Underneath, there is a section titled "FOR COLLEGE STUDENTS" with a description: "This page is a set of assessments and resources for anxiety, depression, and bipolar disorder, selected by college students working with professionals. It contains questionnaires designed to be taken by college students about themselves." A prominent button labeled "TAKE OUR FEEDBACK SURVEY" is centered below this. A note below the button asks users to consider filling out the survey to improve the center. Further down, a section titled "SUGGEST A NEW MEASURE" includes a link for users to provide suggestions. The bottom of the page features three columns: "Location" with a map of the Planetarium Science Center, "Helpful Links" listing HGAPS Linktree, Wikiversity, SCCAP, and Amazon Smile, and "Contact Us" with social media icons and a "Subscribe Today!" section with an email field.

Figure 3.6
The original Assessment Center for comparison



[Home](#) [About Us](#) [Donate](#) [Tools and Resources](#) [Assessment Center](#) [Grants and Awards](#) [Press](#)

MENTAL HEALTH RESOURCES

[CLICK HERE FOR RESOURCES ABOUT SPECIFIC MENTAL HEALTH CONCERNS](#)

The following are resources that may be helpful to you as you explore your mental health or the mental health of a loved one.

- [How to Find a Therapist](#)
- [Differences Between Mental Health Provider](#)
- [Learn About Getting Treatment](#)
- [NAMI Help Line](#): 1-800-950-NAMI (6264)
- [NAMI Crisis Text Line](#): Text NAMI to 741-741
- [Finding a Mental Health Professional](#)
- [How Family Members Can Be Supportive](#)
- [How to Help a Friend](#)

FOR CLINICIANS

[CLICK HERE FOR THE CLINICIAN VERSION OF THE ASSESSMENT CENTER](#)

TAKE OUR FEEDBACK SURVEY

Please consider filling out this survey about your experience with the assessment center so that we can make it better:

[CLICK HERE TO TAKE OUR ASSESSMENT CENTER FEEDBACK SURVEY](#)

HOW TO SUGGEST A NEW MEASURE

Do you want us to add a new assessment to the HGAPS Assessment Center?
Give us suggestions with [this link!](#)
(or you could mail acsuggest@hgaps.org, with the following below!)

CORE INFORMATION TO GIVE US	OTHER HELPFUL INFORMATION
1 Your name	1 Brief description of the assessment
2 Your contact information	2 Scoring: How is this assessment scored? Are there subscales? Is there a common way that the assessment is interpreted (ex. risk change ranges)?
3 The full name and common acronym of the assessment	3 Anchor publication: Is there a citation that accompanies the assessment?
4 The construct measured by the assessment	4 Manual: Is there a manual that goes with the assessment? Send it along!
5 A PDF or Word version of the assessment	5 Versions: Does the assessment have different versions (ex. short, long, parent, youth, adult)?
6 Is the assessment free to use?	6 Languages: Has the assessment been translated into other languages? We prioritize Spanish, Arabic, Mandarin, & Hindi, but other translations could also be helpful. Can you send copies of these to us? Or give us a URL, where we can find them?

The volunteers at HGAPS work hard to gather the above pieces of information about every assessment we create.

The more information you can give us, the faster we launch your suggestion!

Location



Helpful Links

[HGAPS Linktree - all of our links in one place](#)

Contact Us



Appendix 1: Client Interviews & Scrum Materials

Appendix 1A: Client Interviews

Client interview questions were guided by a general outline as follows:

Background and Business Goals:

- Can you provide some background information about your website? What inspired you to create it, and what are the primary goals and objectives for the site?
- What specific outcomes or achievements are you aiming for with this website?
- How do you envision the website contributing to the field of mental health and psychological assessment?
- On average, how many people completely fill out the surveys per month?

Demonstration of Website Use:

- Can you please walk us through how you intend for users to interact with the website? What are the key tasks or actions you expect users to perform?
- If possible, use the website to demonstrate the typical flow and interactions a user would have when seeking psychological assessments and resources.
- Highlight any specific features or functionalities that you believe are essential to the user experience.
- Is there any information that could be removed from the assessment center website in order to simplify the user journey?

Key User Scenarios:

- Could you provide examples of scenarios or use cases that you envision for users of the website? For instance, what would a typical user journey look like from their first visit to achieving their goals?
- Are there any particular user personas or audience segments you have in mind when envisioning website usage?

User Interface Preferences:

- Are there any specific design elements, visual styles, or user interface preferences that you believe align with your vision for the website?
- What kind of user interactions or engagement strategies do you think would be most effective in achieving the website's goals?

Functionality and Features:

- Are there any specific functionalities or features you believe should be emphasized or added to enhance the user experience?
- Can you demonstrate any unique or innovative aspects of the website's design or functionality that set it apart from other similar platforms?

User Engagement and Content:

- How do you intend to engage and retain users on the website? Are there any content strategies or types of resources you plan to incorporate to achieve this?
- Do you know how many people leave the assessment before completely filling it out?
- What do you think stops people from completely finishing the assessment?

Long-Term Vision:

- Can you share your long-term vision for the website's evolution? Are there any upcoming enhancements or features you have in mind to further improve the user experience?

During the Contextual Interview:

- Interviewer asked questions based on the aforementioned outline.
- Note-taker took verbatim notes to help with generating transcripts.
- Audio recorded the Contextual Interview to aid with generating transcripts.
- Took screenshots of any necessary artifacts.

Appendix 1B: Key Findings

Objectives:

The primary objective of HGAPS is to maintain a direct-to-consumer approach while increasing accessibility. HGAPS's key focus currently lies in transforming the clinician assessment, aspiring to create a distinct system with a registration link for clinicians. Their aim is to enhance accessibility for clinicians to the clinician assessment while simultaneously increasing the level of difficulty for the general population to access it. While the general population assessment is not a major concern, efforts to make it more accessible and user-friendly are encouraged.

Assessment Center and HGAPS Website:

The development of the HGAPS website involved collaboration from diverse professionals, including doctors and lawyers, resulting in a comprehensive platform with abundant information. Since they are currently working on the clinician assessment (transitioning from Qualtrics to Redcap), the client was mostly interested in focusing on the general population assessments, specifically college students, and finding ways to increase user engagement. Over the past 5 years, 8000 assessments have been filled out. However, within the assessments, there are several different drop off points that lead to incomplete surveys: 1) Stop at first question 2) Stop at demographics 3) Stop at list of countries.

Long-term Vision:

The HGAPS team aspires to provide free mental health resources in many different languages, making it accessible to people of all ages, across different countries.

phase	task	november											
		week 7			week 8			week 9					
		W 15	Th 16	F 17	M 20	T 21	W 22	Th 23	F 24	M 27	T 28	W 29	Th 30
1	-Establish team roles and expectations												
	-Delegate tasks for Information Gathering assignment												
	-Introduce project to client												
	-Information Gathering assignment <i>draft</i> DUE												
	-Adjust Information Gathering draft based on feedback												
	-Preliminary plan for contextual interviews with client												
	-Information Gathering assignment <i>final</i> DUE												
2	-Plan contextual interviews with client												
	-Contextual interview with client												
	-Interpretation sessions following client contextual int.												
	-Background research on assessment centers												
	-Plan contextual interviews with users												
	-Contextual interviews with users												
	-Interpretation sessions following user contextual int.												
3	-Draft models												
	-Affinity diagrams planning and creation												
	-Refine model												
	-Draft final presentation materials												
4	-Affinity modeling session									!!!			
	-Draft final materials (client pres. & findings paper/pres.)												
	-Present final materials to client												!!!
	-Finalize materials to turn in												
	-Final paper DUE												

phase	task	december		
		week 10		
		F 1	M 4	T 5
1	-Establish team roles and expectations			
	-Delegate tasks for Information Gathering assignment			
	-Introduce project to client			
	-Information Gathering assignment <i>draft</i> DUE			
	-Adjust Information Gathering draft based on feedback			
	-Preliminary plan for contextual interviews with client			
	-Information Gathering assignment <i>final</i> DUE			
2	-Plan contextual interviews with client			
	-Contextual interview with client			
	-Interpretation sessions following client contextual int.			
	-Background research on assessment centers			
	-Plan contextual interviews with users			
	-Contextual interviews with users			
	-Interpretation sessions following user contextual int.			
3	-Draft models			
	-Affinity diagrams planning and creation			
	-Refine model			
	-Draft final presentation materials			
4	-Affinity modeling session			
	-Draft final materials (client pres. & findings paper/pres.)			
	-Present final materials to client			
	-Finalize materials to turn in			
	-Final paper DUE			!!!

Stories and Hours Breakdown

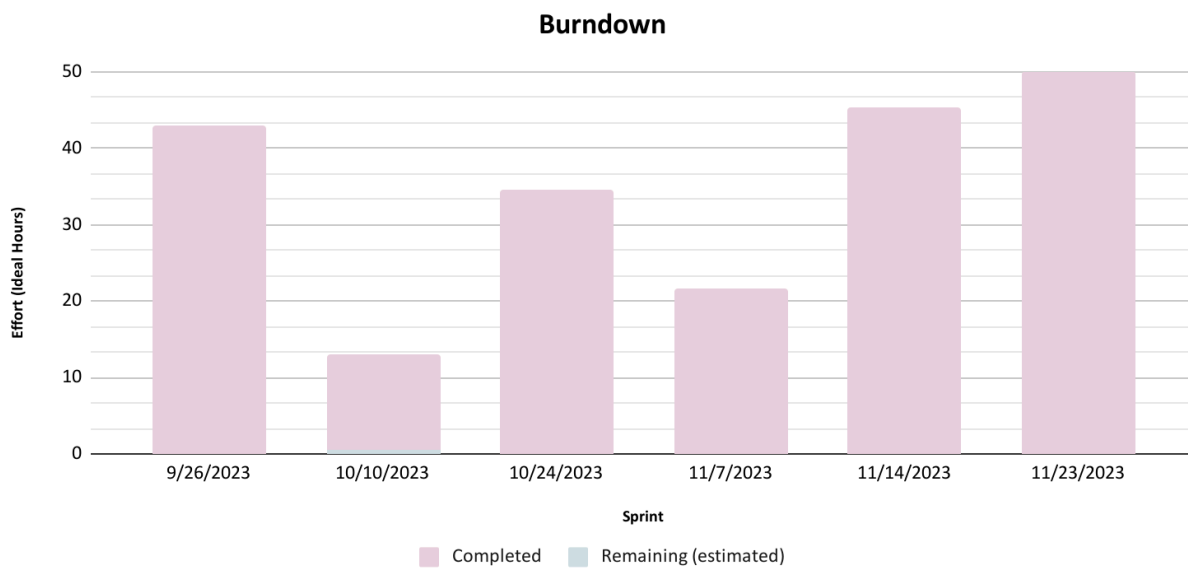
Sprint	Story	Estimate	actual hours per sprint	week by deadline
1	Sep-26		hours	
Information Gathering	-Establish team roles and expectations and delegate tasks for Information Gathering assignment	5		5 wko
	-Information Gathering assignment <i>draft</i>	10		10 wko
	-Information Gathering feedback implementation (group)	6		12 wk1
	-Introduce project & prep contextual interview with client	6		9 wk1/2
	-Information Gathering assignment <i>final</i>	5		7 wk2
		32	43	
2	Oct-10		hours	
Contextual Interview with Client	-Contextual Interview with Client	4		3.5 wk2
	-Prepare for contextual interviews with users	3		2 wk2
	-Interpretation sessions	6		7 wk4
		13	12.5	
3	Oct-24		hours	
Contextual Interview with Users	-Prepare for contextual interviews with users	8		8.5 wk4
	-Background research on assessment centers	6		8.5 wk4
	-Contextual interview with users	5		5 wk4/5
	-Interpretation sessions (prep and actual sessions)	13		12.5 wk4/5/6
		32	34.5	
4	Nov-7		hours	
Modeling	-Draft models	6		6 wk6/7
	-Affinity diagram planning and creation	3		5 wk6/7
	-Refine models and research	4		6.5 wk6/7
	-Draft final presentation materials	4		4.25 wk6/7

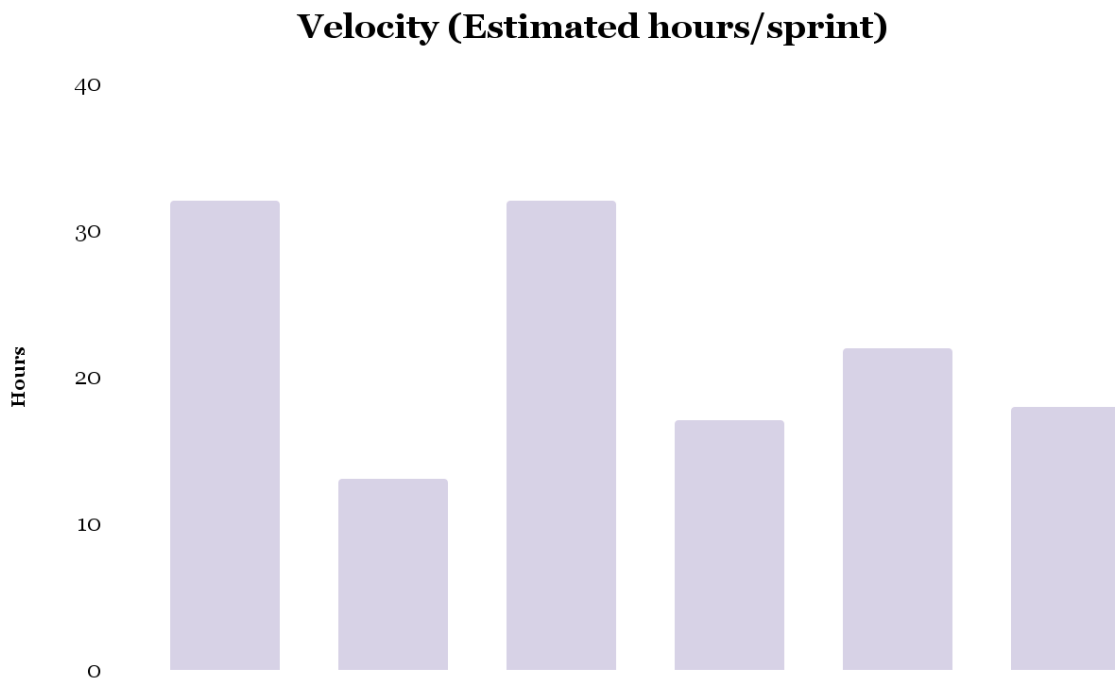
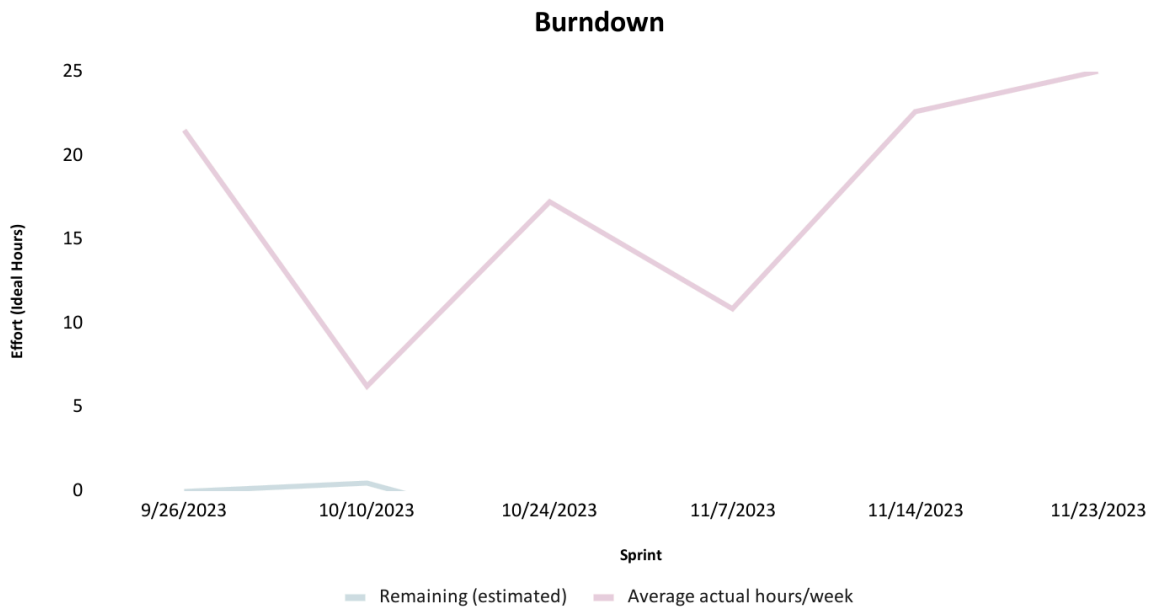
Sprint	Story	Estimate	actual hours per sprint	week by deadline
			17	21.75
5	Nov-14		hours	
Presentation with Client	-Affinity modeling session/Personas	8		21.5 wk7/9
	-Draft and finalize client materials	6		7.25 wk7/8/9
	-Present final materials to client (wall walk)	8		16.5 wk9
		22	45.25	
6	Nov-23		hours	
Final Presentation	-Draft final materials (findings paper/presentation)	12		19.5 wk9/10
	-Finalize materials to turn in	6		30.5 wk10
		18	50	
Release December 5				

Estimated Total	134
Completed	207
Remaining	-73
% Complete	154%
Avg Velocity	35
Estimated # Iterations Remaining	-2

Burndown Data & Charts and Velocity Chart

	9/26/2023	10/10/2023	10/24/2023	11/7/2023	11/14/2023	11/23/2023
Sprint Number	1	2	3	4	5	6
Total Estimated Hours	32	13	32	17	28	18
Velocity (estimated)	32	13	32	17	22	18
Remaining (estimated)	0	0.5	-2.5	-4.75	-17.25	-32
Completed	43	12.5	34.5	21.75	45.25	50
Average actual hours/week	21.5	6.25	17.25	10.875	22.625	25
% complete	134%	96%	108%	128%	162%	278%





Appendix 2: Models & Lessons Learned

Appendix 2a: Artifact Models

The screenshot shows the top portion of the HGAPS Assessment Center website. The header is a solid blue bar with the text "Assessment Center" in white. Below the header, the main content area has a white background. The title "INTRODUCTION AND DISCLAIMERS" is in bold black text. The text below the title is in a standard black font. Three red callout boxes with arrows point to specific elements: the first points to the blue header, the second points to the word "free" in the first paragraph, and the third points to the second paragraph.

General design of headers could be improved- really bulky

Great point of emphasis here!

Lots of text- bullet points or columns maybe?

Assessment Center

INTRODUCTION AND DISCLAIMERS

These **free** mental health assessments are entirely **confidential**, allowing you to have a simple and anonymous way to explore your mental health safely and determine whether you should connect with a mental health professional.

These online screening tools are not a substitute for consultation with a mental health professional. Regardless of the results, if you have any concerns, **see a psychologist or mental health professional**.

When you are finished, you will be able to see **results and some recommended resources**. Only you receive the scores, and they cannot be reaccessed later.

If you or someone you know has thoughts of death or suicide, call **988 or 911 immediately**. Or contact a medical professional, clergy member, loved one, friend, or hospital emergency room.

Artifact Model of Assessment Center Introduction and Disclaimers

This screenshot is identical to the one above but includes colored rectangular markers (wall walk data points) overlaid on the page. A green box is placed over the blue header, a blue box is placed over the word "free" in the first paragraph, and an orange box is placed over the second paragraph. The red callout boxes and arrows remain the same.

General design of headers could be improved- really bulky

Great point of emphasis here!

Lots of text- bullet points or columns maybe?

Assessment Center

INTRODUCTION AND DISCLAIMERS

These **free** mental health assessments are entirely **confidential**, allowing you to have a simple and anonymous way to explore your mental health safely and determine whether you should connect with a mental health professional.

These online screening tools are not a substitute for consultation with a mental health professional. Regardless of the results, if you have any concerns, **see a psychologist or mental health professional**.

When you are finished, you will be able to see **results and some recommended resources**. Only you receive the scores, and they cannot be reaccessed later.

If you or someone you know has thoughts of death or suicide, call **988 or 911 immediately**. Or contact a medical professional, clergy member, loved one, friend, or hospital emergency room.

Scan of Artifact Model of Assessment Center Introduction and Disclaimers with Wall Walk Data Points



ASSESSMENT BATTERIES

The free assessment batteries below ask questions about the **most common psychological disorders** (see below for information on which specific disorders each battery assesses). Upon the completion of the questionnaire, **you will get your results and additional resources**. You will also get the **option to download a PDF of your results**, which may help advocate for yourself, inform your clinician, or just for your documentation.

FOR ADULTS

This survey contains assessments used by mental health professionals to measure **ADHD, depression, anxiety, PTSD, bipolar disorder, and substance use**.

It contains questionnaires designed to be taken by **an adult about themselves**.

FOR COLLEGE STUDENTS

This page is a set of assessments and resources for **anxiety, depression, and bipolar disorder** selected by college students working with professionals.

It contains questionnaires designed to be taken by **college students about themselves**.

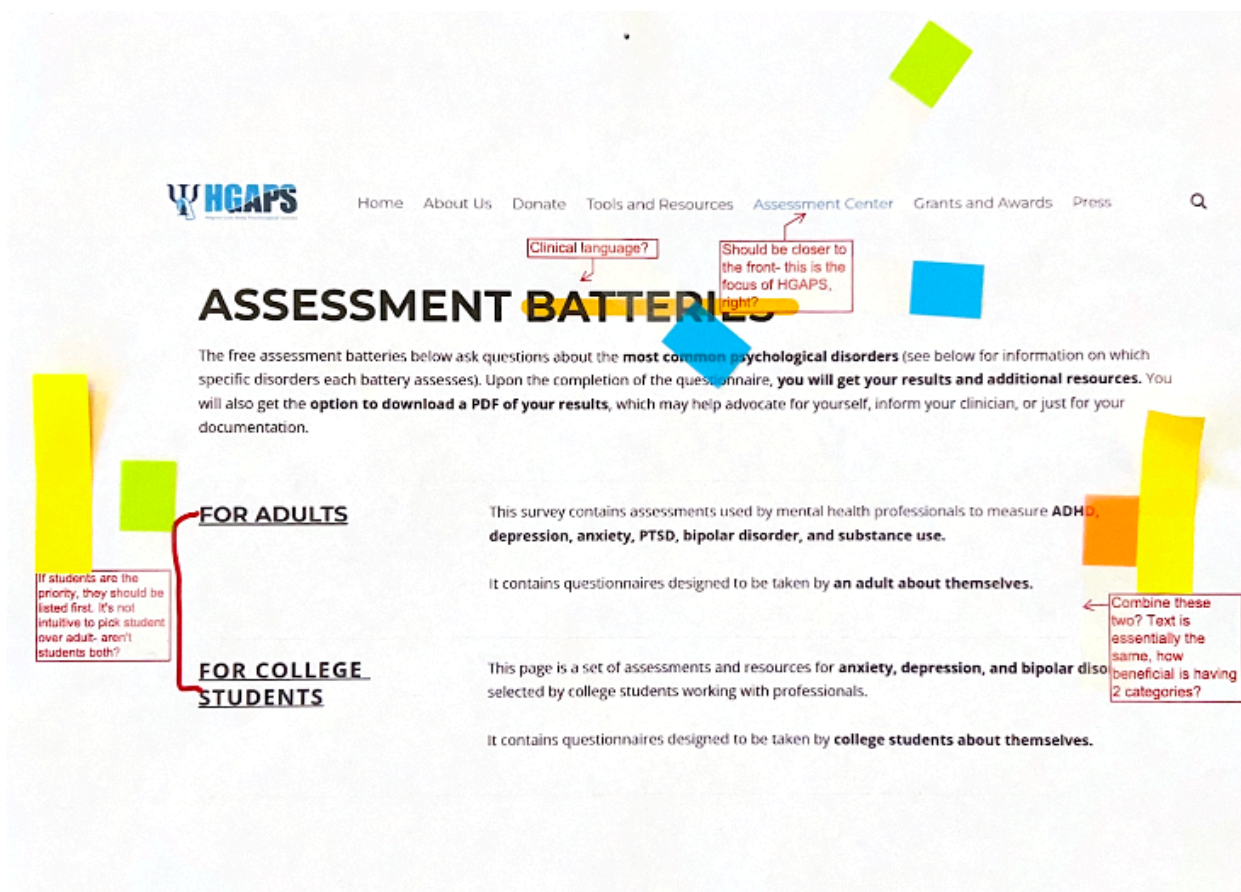
If students are the priority, they should be listed first. It's not intuitive to pick student over adult- aren't students both?

Clinical language?

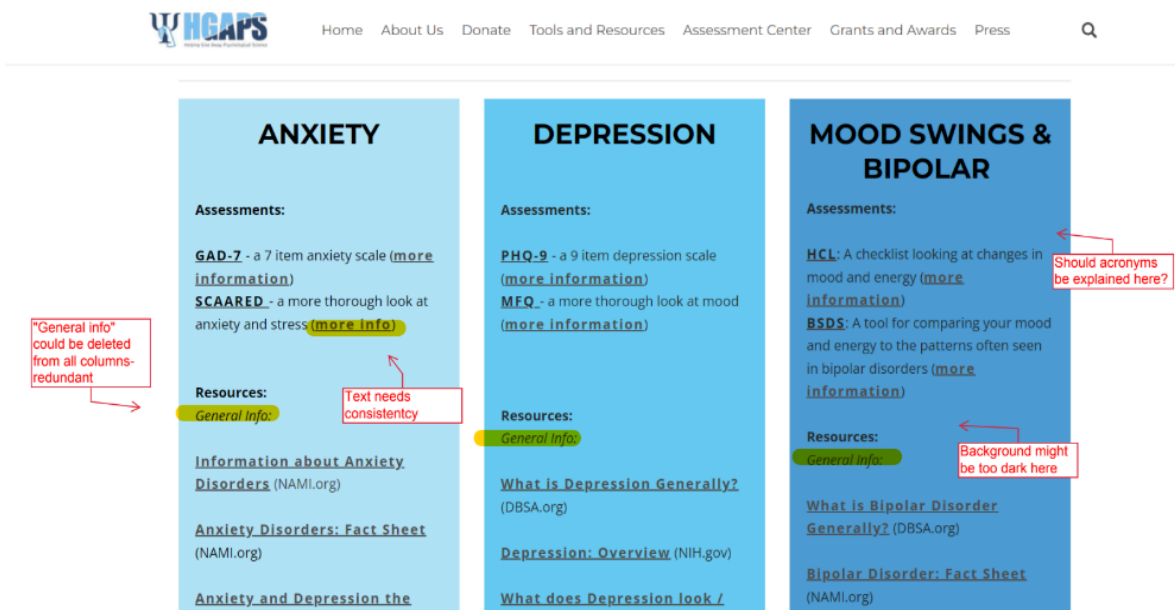
Should be closer to the front- this is the focus of HGAPS, right?

Combine these two? Text is essentially the same, how beneficial is having 2 categories?

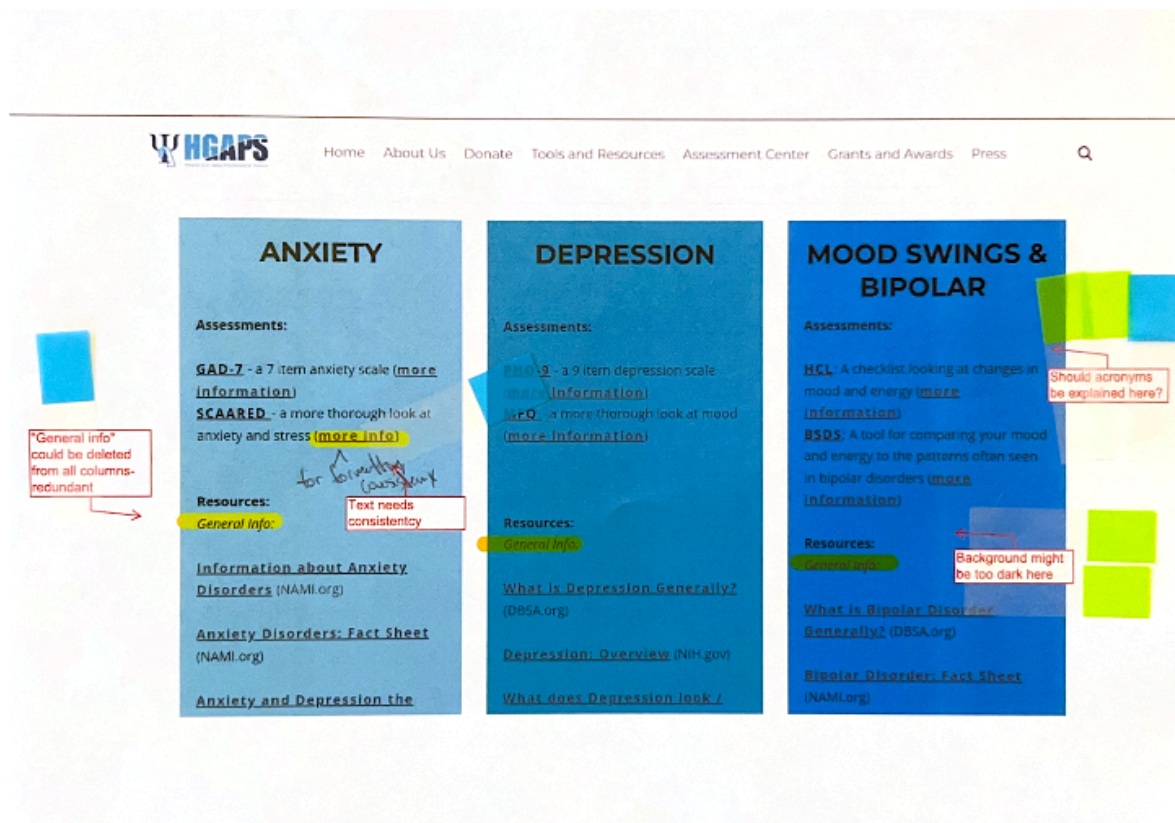
Artifact Model of Assessment Batteries



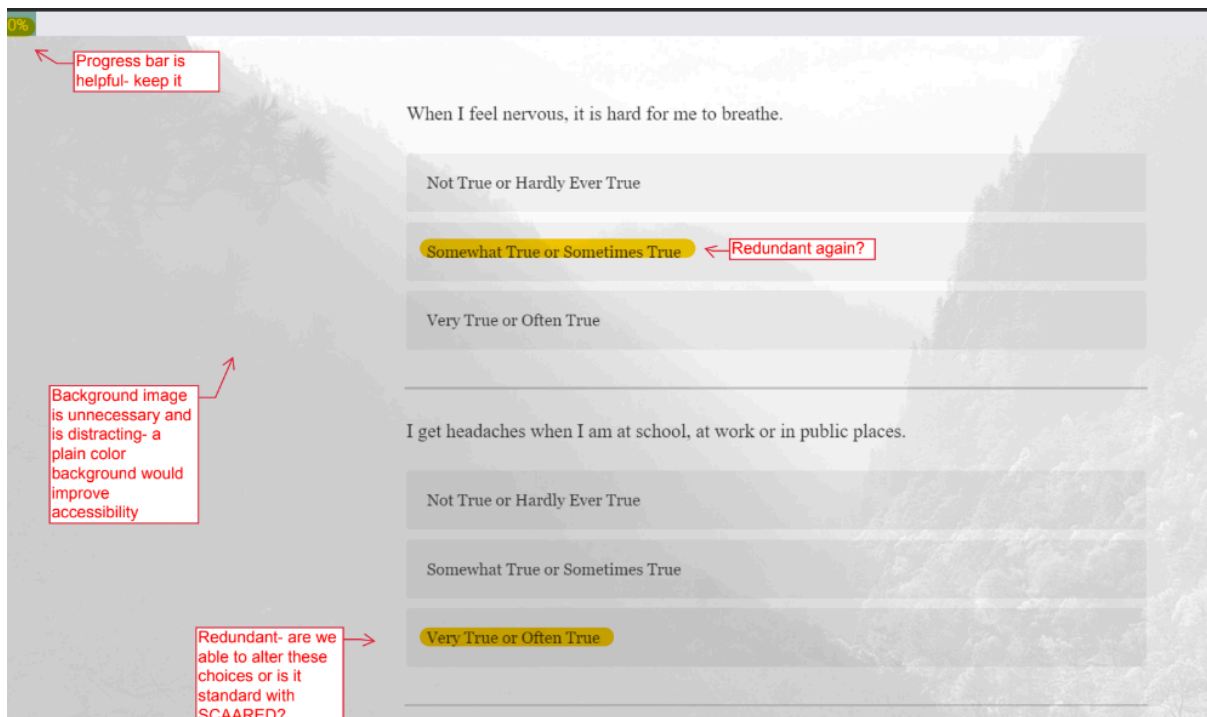
Scan of Artifact Model of Assessment Batteries with Wall Walk Data Points



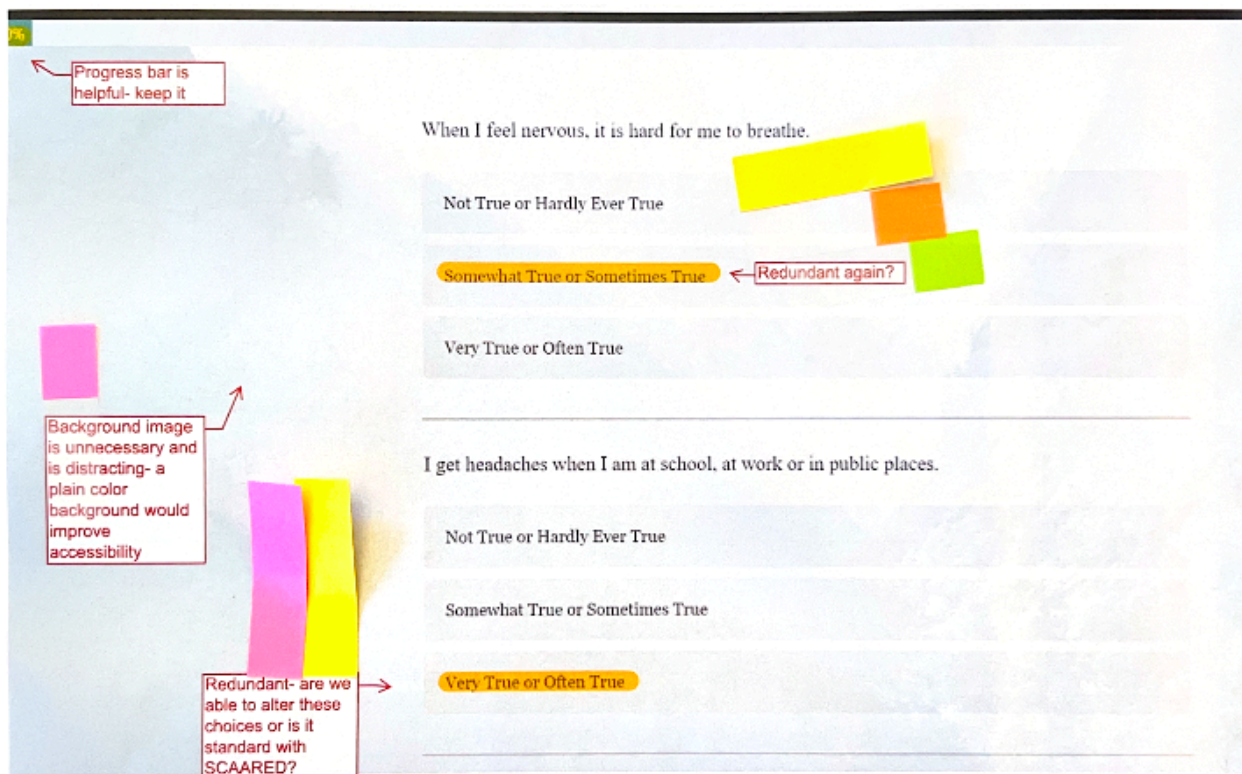
Artifact Model of "For College Students" Page



Scan of Artifact Model of "For College Students" Page with Wall Walk Data Points



Artifact Model for SCAARED Qualtrics



Scan of Artifact Model for SCAARED Qualtrics with Wall Walk Data Points

Awkward wording → **Here are Your Results**

This is only an assessment and not a diagnosis. If you feel like further examining your mental health, it is important that you make an appointment with a mental health professional. At the bottom of the report you will find an option to download a PDF summary of your scores. Giving this score summary to primary care provider or mental health professional provider may help them connect you to resources that could benefit you.

Total Score: 4
Suicide Item Score: Low ← **No explanation of what this is?**

How to Interpret Your Score ← **More info needed in this section**

Risk Change Label	Score Range
Minimal Depressive Symptoms	0 - 4
Mild Depressive Symptoms	5 - 9
Moderate Depressive Symptoms	10 - 14
Moderately-Severe Depressive Symptoms	15 - 19
Severe Depressive Symptoms	20 - 27

← **Are these standard or can they be altered?**

Mental Health Resources

The following is a [link to resources](#) that provide more information on depression, as well as many other concerns and resources for seeking help.

[Click Here for Resources for Clinicians](#)

Artifact Model for SCAARED Qualtrics Results

Awkward wording → **Here are Your Results**

This is only an assessment and not a diagnosis. If you feel like further examining your mental health, it is important that you make an appointment with a mental health professional. At the bottom of the report you will find an option to download a PDF summary of your scores. Giving this score summary to primary care provider or mental health professional provider may help them connect you to resources that could benefit you.

Total Score: 4
Suicide Item Score: Low ← **No explanation of what this is?**

How to Interpret Your Score ← **More info needed in this section**

Risk Change Label	Score Range
Minimal Depressive Symptoms	0 - 4
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Moderate Depressive Symptoms	10 - 14
Moderately-Severe Depressive Symptoms	15 - 19
Severe Depressive Symptoms	20 - 27

← **Are these standard or can they be altered?**

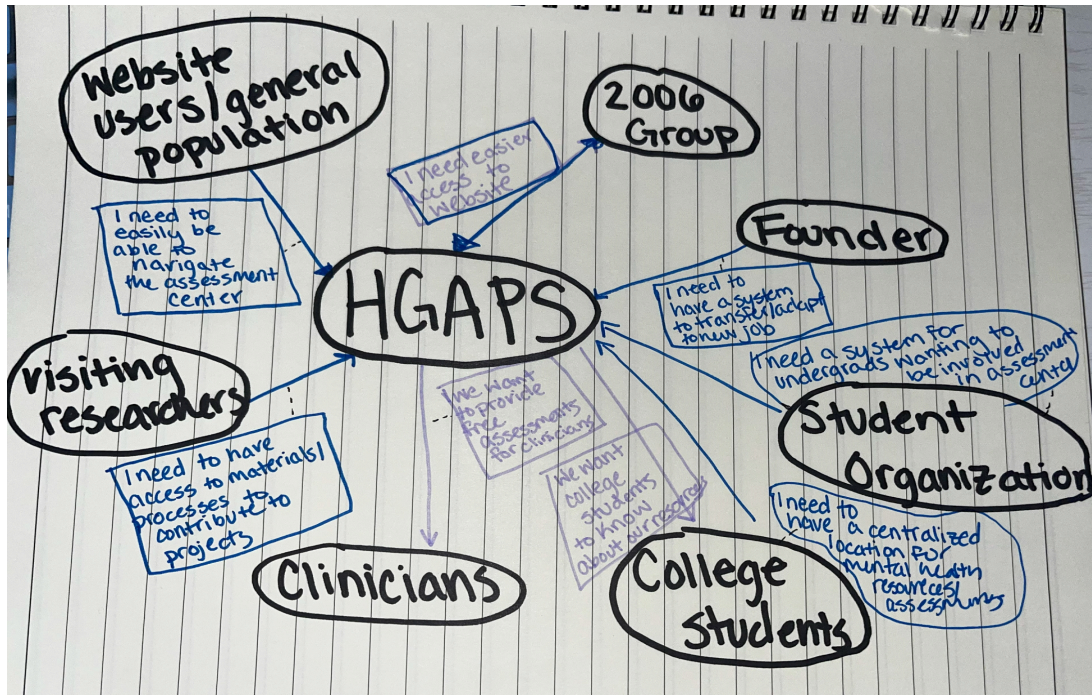
Mental Health Resources

The following is a [link to resources](#) that provide more information on depression, as well as many other concerns and resources for seeking help.

[Click Here for Resources for Clinicians](#)

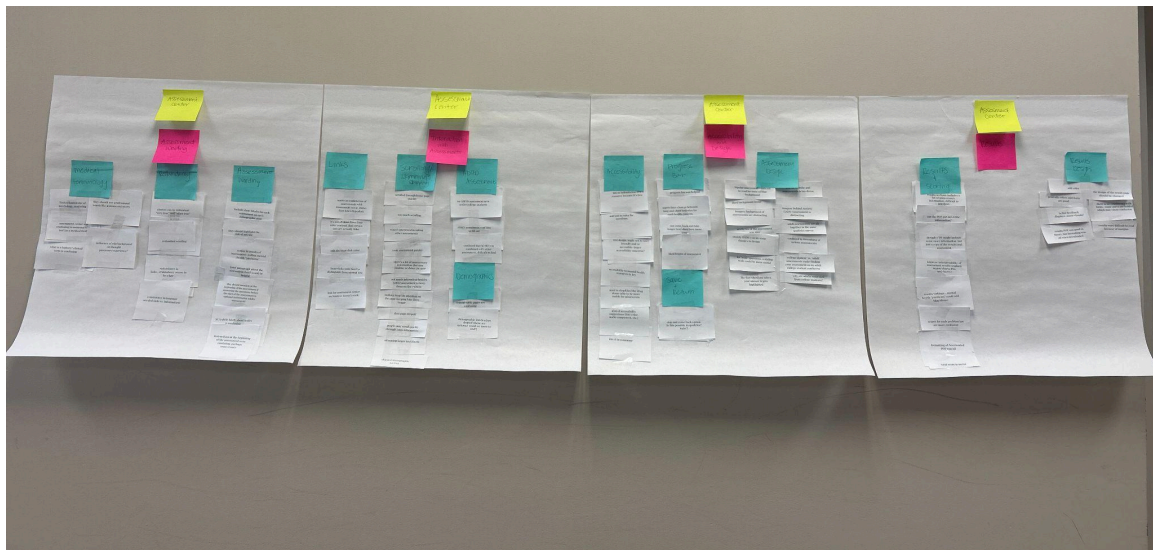
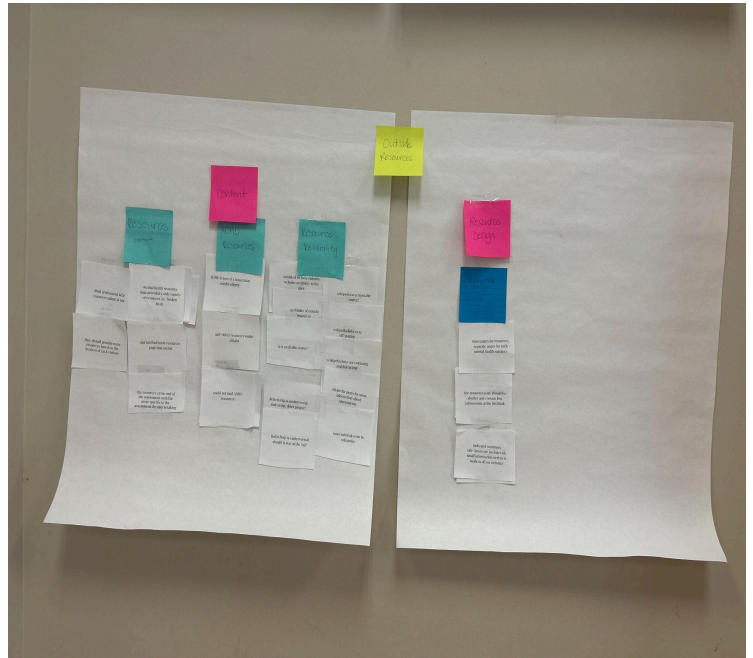
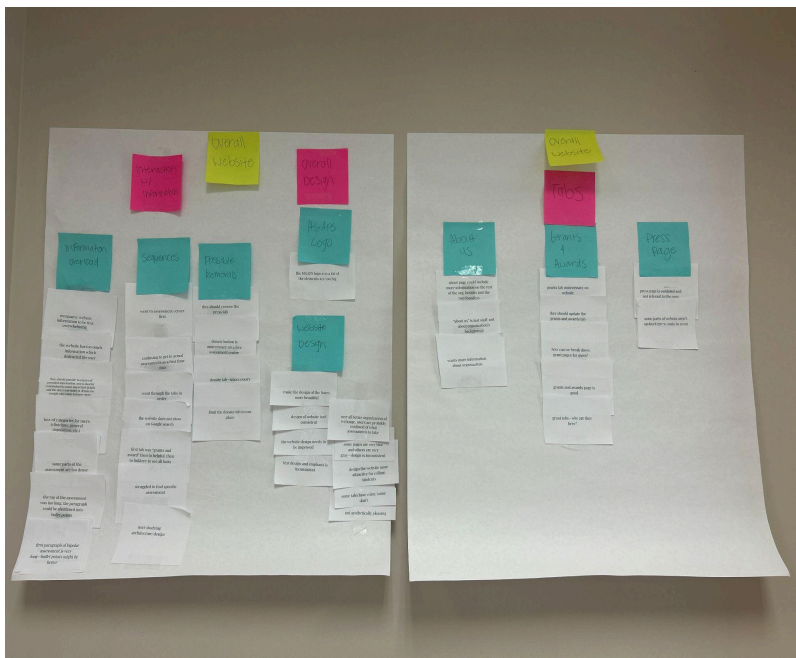
Scan of Artifact Model for SCAARED Qualtrics Results with Wall Walk Data Points

Appendix 2b: Cultural Model



Handwritten Cultural Model of HGAPS

Appendix 2c: Affinity Diagram



Photos of Affinity Diagram

Appendix 2d: Personas

Based on information retrieved from the contextual inquiries and interviews, our team curated the following user personas that captured two different types of college-aged users who interact with the Assessment Center.



Uma the Undergrad

Demographics	Age: 20	Gender: Female	Education: Undergraduate student majoring in Psychology	Background: Uma is a sophomore at a university, passionate about understanding mental health and psychology. She is tech-savvy and often explores online resources to enhance her knowledge.
Goals/Motivations	Understand Mental Health: Uma wants to deepen her understanding of mental health topics, especially as it relates to her academic studies.	Personal Growth: She is interested in self-reflection and personal growth, aiming to build resilience and emotional well-being.	Accessibility: Uma is looking for easily accessible and free resources that align with her busy student schedule.	
Challenges	Academic Stress: Balancing coursework, exams, and extracurricular activities can be overwhelming, leading to stress and anxiety.	Transition to University Life: Uma is navigating the challenges of adapting to university life and wants support in maintaining her mental well-being.		
Behavior and Preferences	Tech-Savvy: Uma is comfortable using online platforms and prefers resources that are easily accessible on her laptop or smartphone.	Curiosity: She enjoys exploring new concepts and is motivated to engage with psychological assessments to gain insights into her own mental well-being.	Social Connection: Uma values connections with peers who share similar interests in psychology and mental health.	
Needs on HGAPS Website:	Comprehensive Assessments: Access to a variety of free psychological assessments to explore different aspects of mental health.	Clear Information: User-friendly interface with clear instructions on how to take assessments and understand the results.	Resources for Students: Additional resources, articles, or forums where she can connect with other students interested in psychology.	

Gary the Grad



Demographics

Age:	Gender:	Education:	Background:
28	Non-Binary	Graduate student pursuing a Master's in Clinical Psychology	Gary is in the early stages of their graduate studies, balancing coursework, research, and clinical practice.

Goals/ Motivations

Professional Development:	Self-Reflection:	Accessibility and Affordability:
Professional Development: Gary is keen on enhancing their knowledge and skills in clinical psychology for future practice.	As a future mental health professional, Gary recognizes the importance of continuous self-reflection and self-awareness.	Being on a tight budget, Gary seeks free resources that align with their academic and financial constraints.

Challenges

Time Constraints:	Stress Management:
Juggling graduate studies, clinical placements, and part-time work leaves limited time for personal pursuits.	The demands of graduate studies and clinical work can be stressful, requiring effective stress management strategies.

Behavior and Preferences

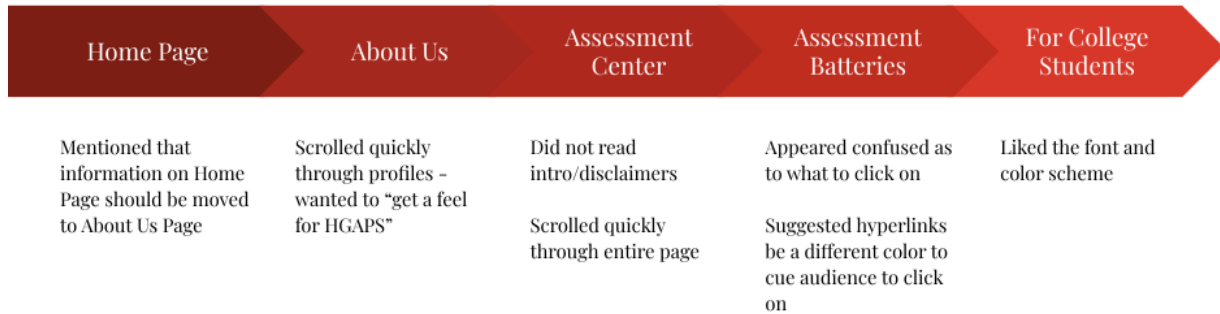
Task-Oriented:	Open-Minded:	Privacy Concerns:
Gary values efficient and focused resources that align with their academic and professional goals.	Willing to explore a variety of psychological assessments to gain a comprehensive understanding of their mental well-being.	Given their future profession, Gary values platforms that prioritize user privacy and confidentiality.

Needs on HGAPS Website:

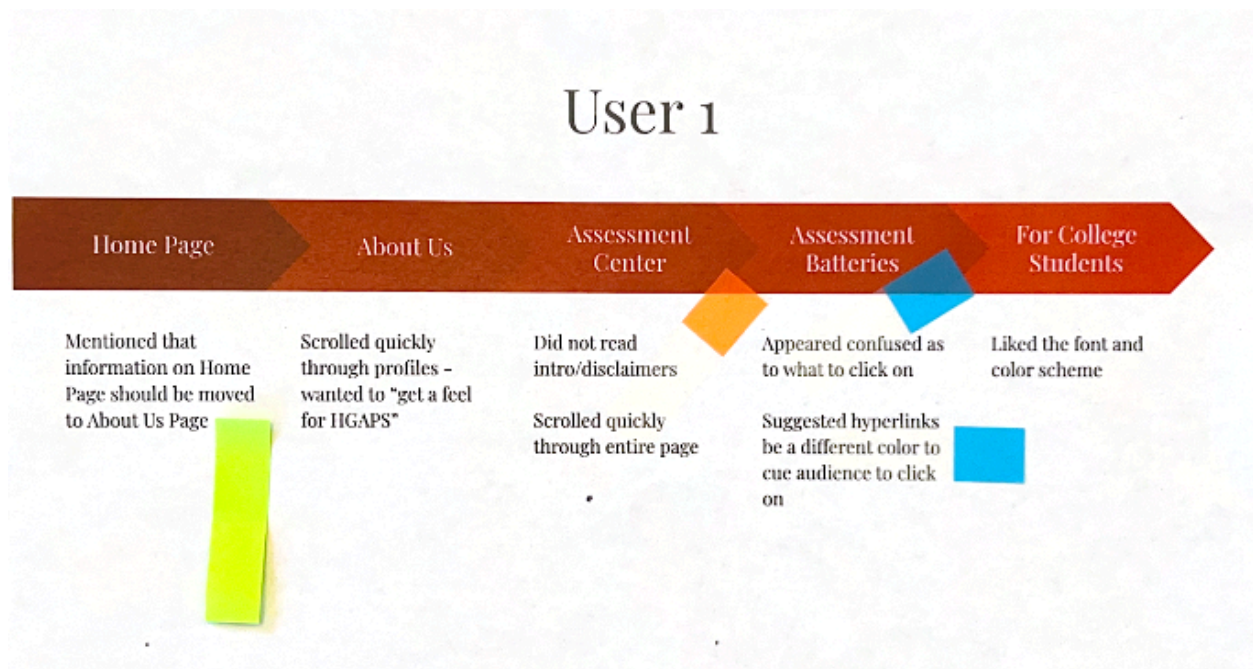
Relevant Assessments:	Professional Development:	Community Support:
Access to high-quality, clinically relevant psychological assessments to complement their academic and clinical training.	Resources on the website that cater to the specific needs and challenges faced by graduate students in clinical psychology.	A platform where Gary can connect with fellow graduate students, share experiences, and discuss strategies for managing the demands of their field.

Appendix 2e: Sequence Models

User 1

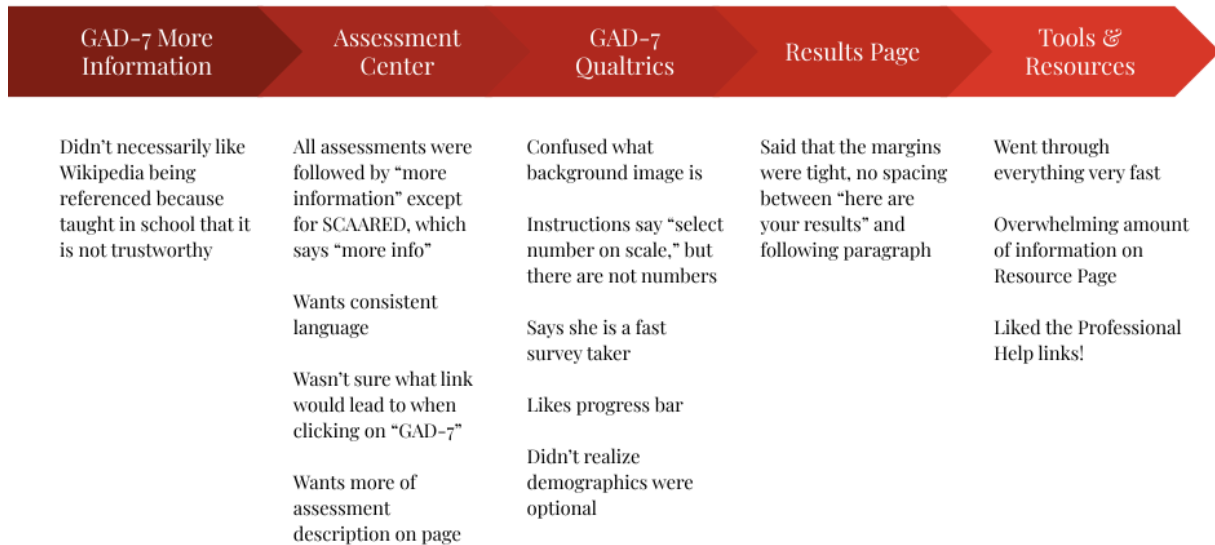


User 1 Sequence Model (1 of 2)

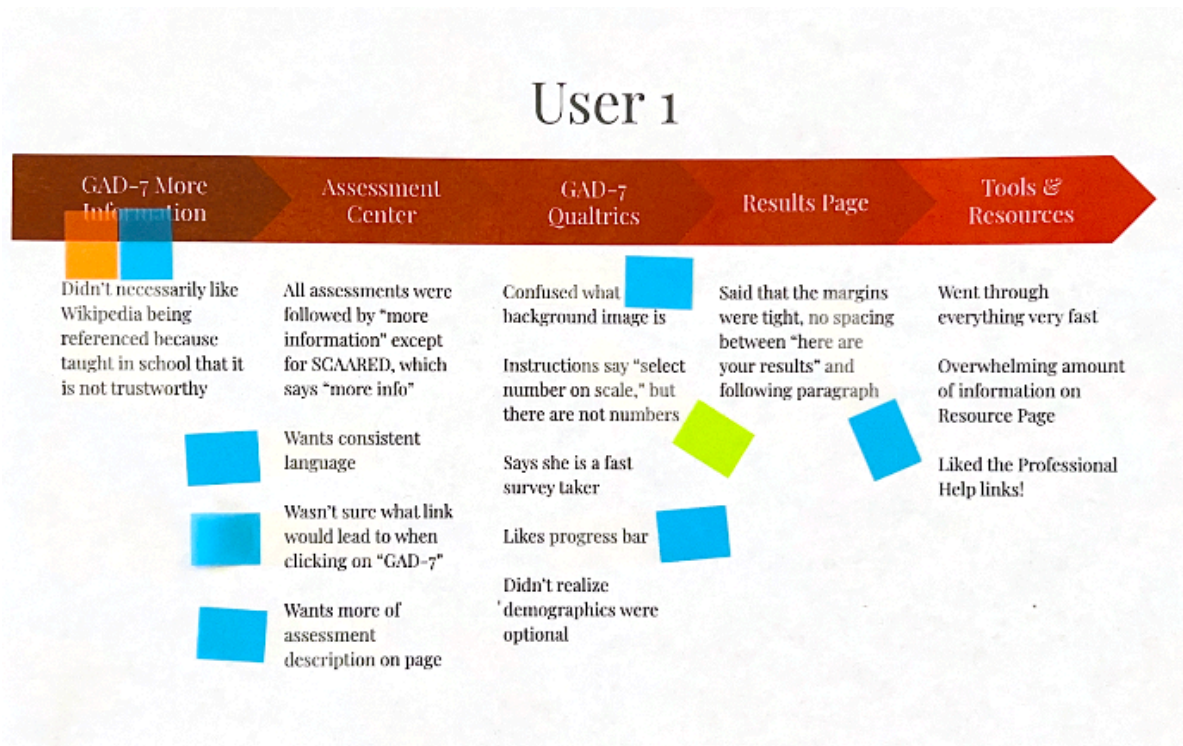


Scan of User 1 Sequence Model (1 of 2) with Wall Walk Data Points

User 1

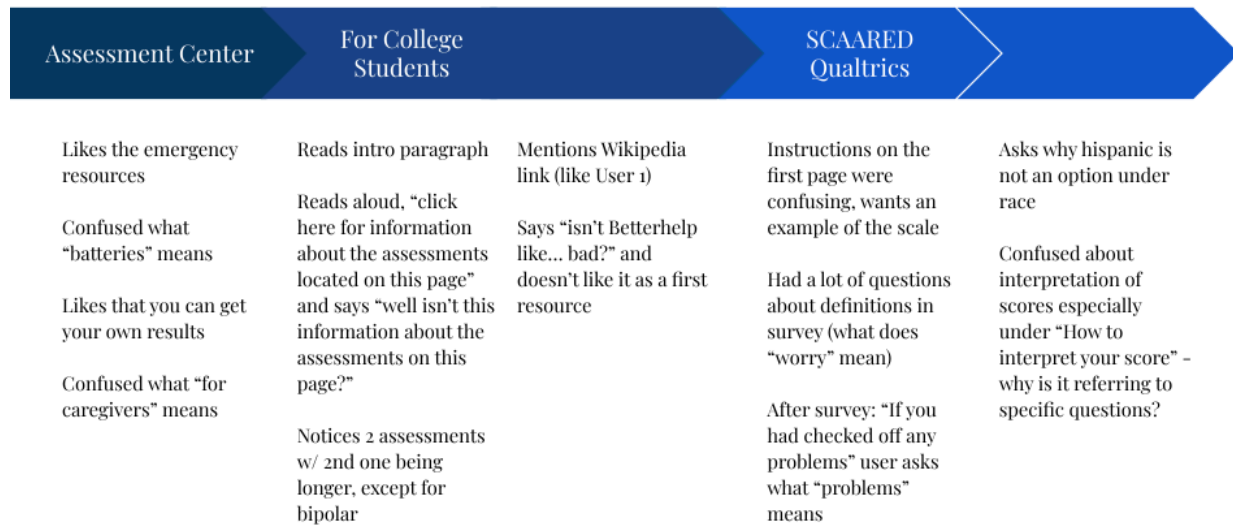


User 1 Sequence Model (2 of 2)

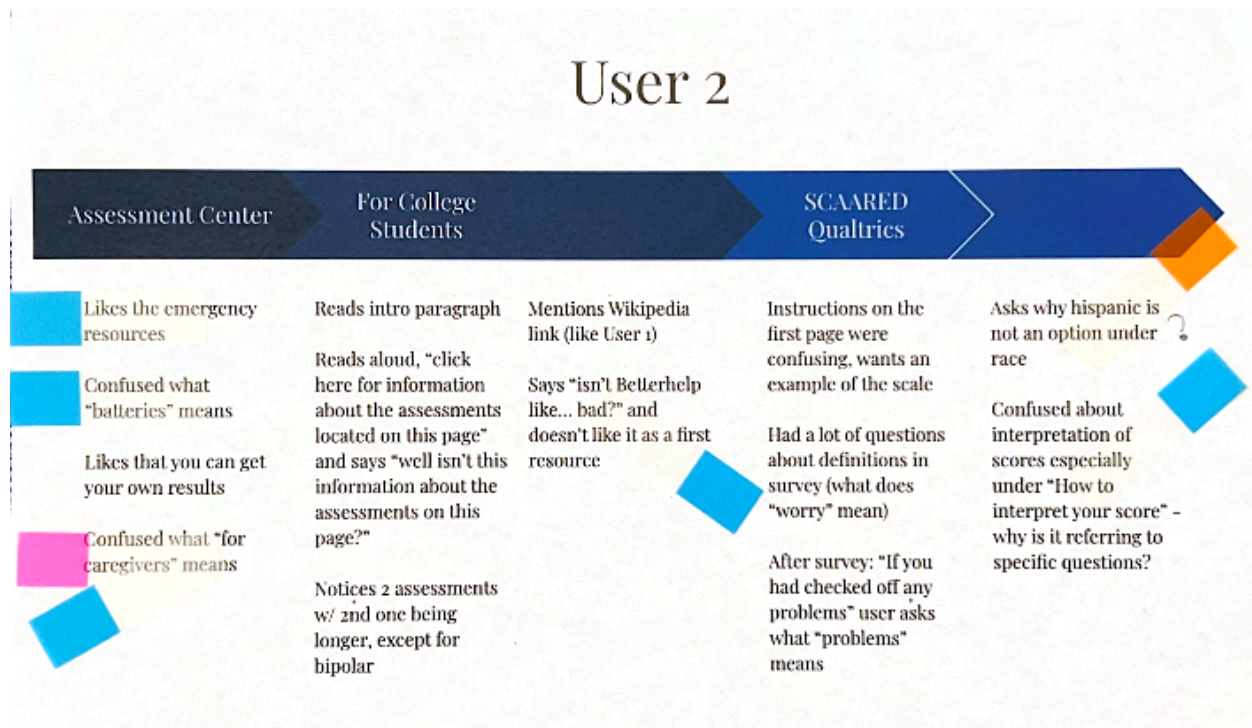


Scan of User 1 Sequence Model (2 of 2) with Wall Walk Data Points

User 2

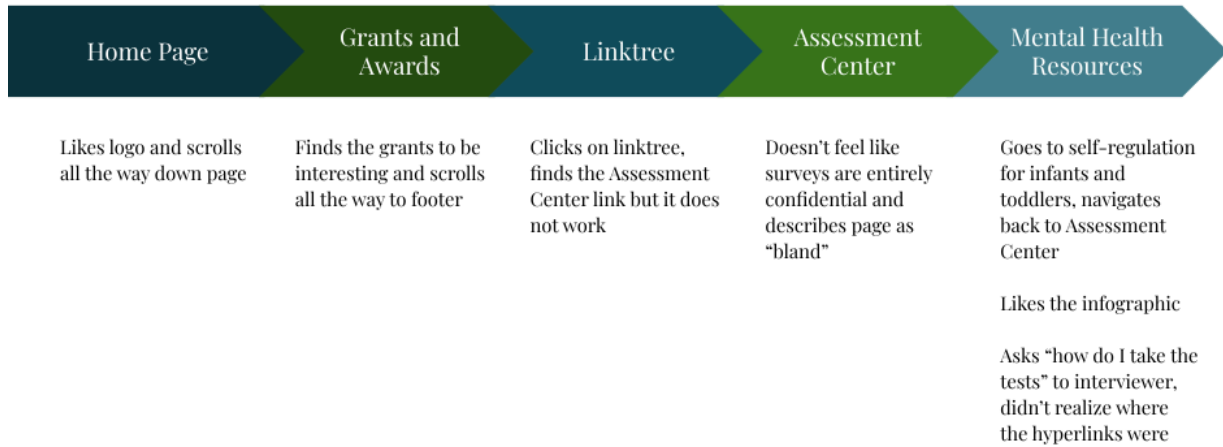


User 2 Sequence Model

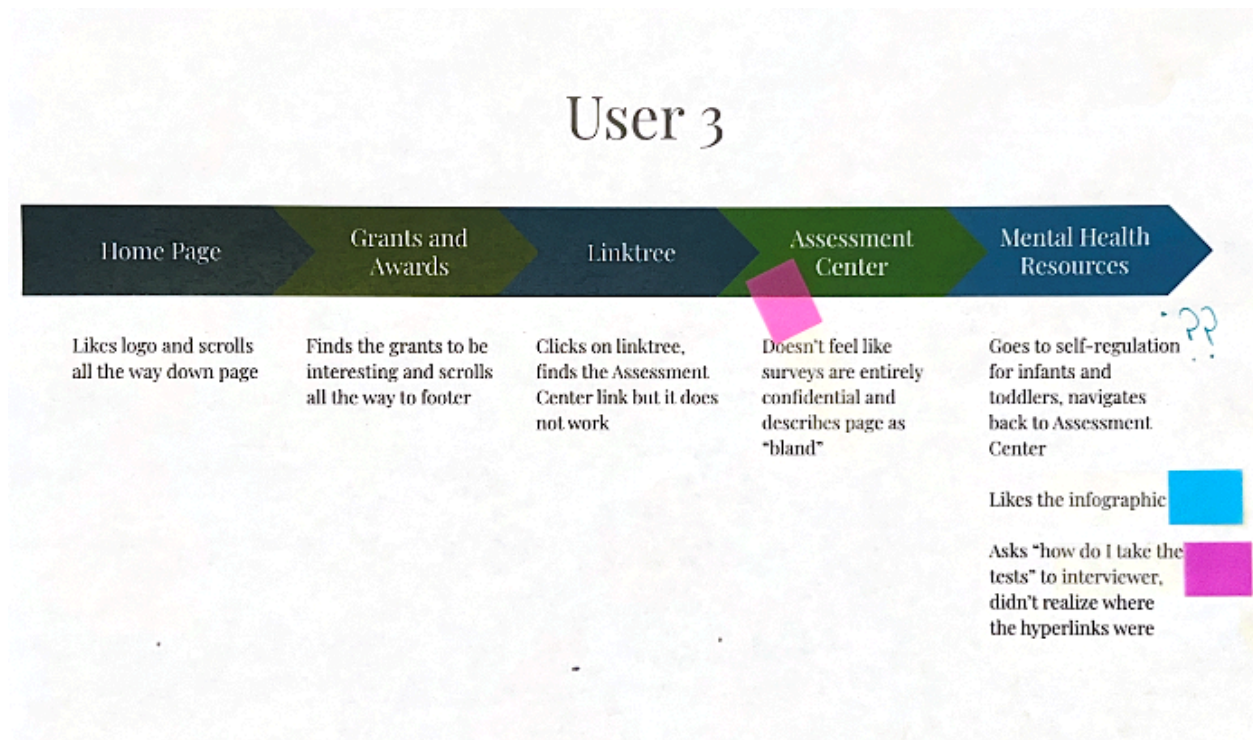


Scan of User 2 Sequence Model with Wall Walk Data Points

User 3

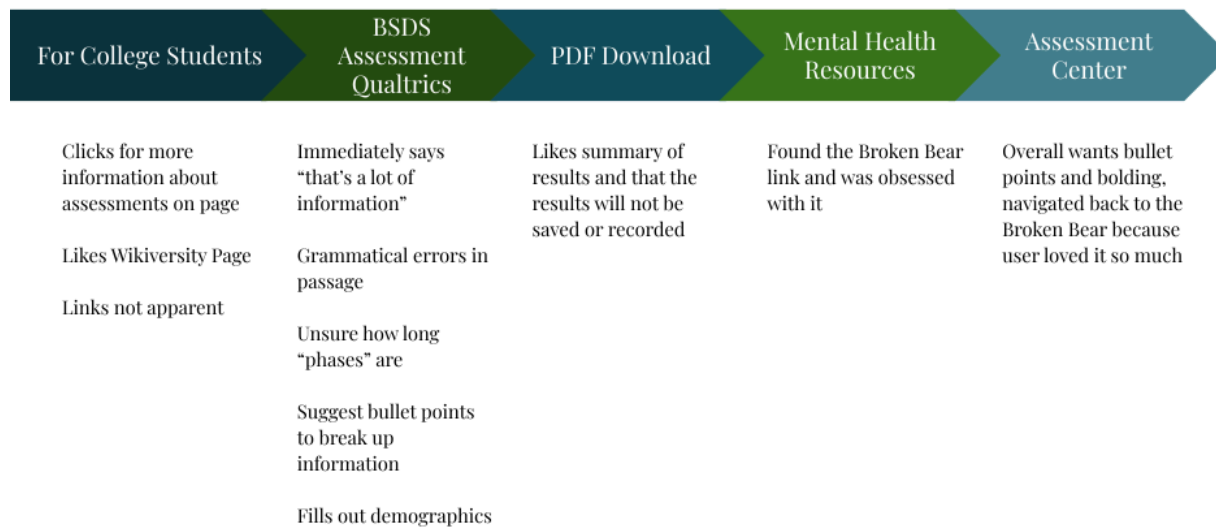


User 3 Sequence Model (1 of 2)

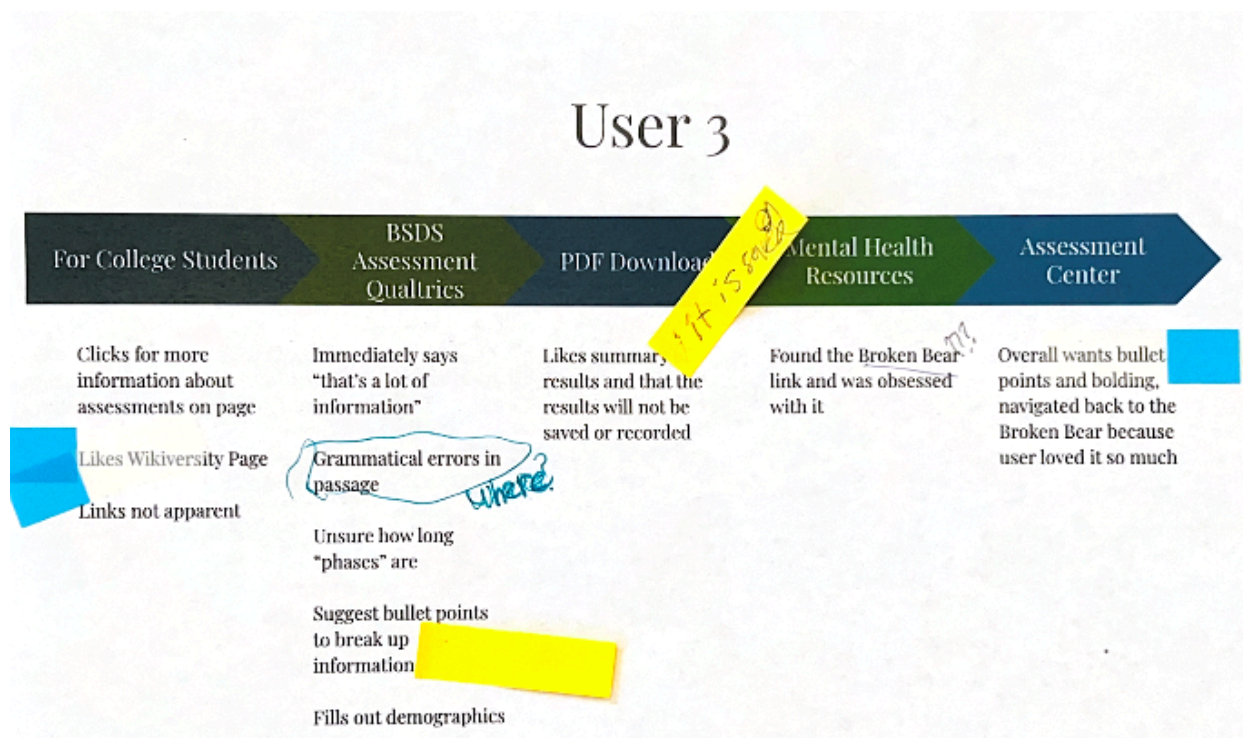


Scan of User 3 Sequence Model (1 of 2) with Wall Walk Data Points

User 3

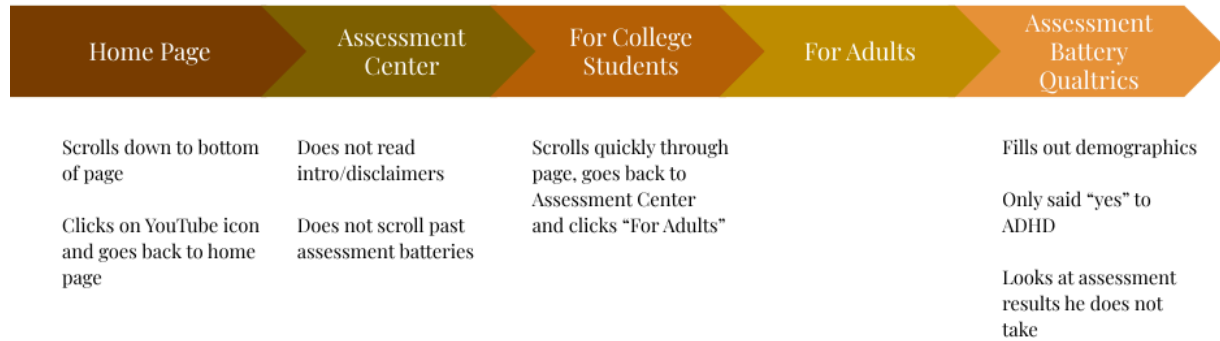


User 3 Sequence Model (2 of 2)



Scan of User 3 Sequence Model (2 of 2) with Wall Walk Data Points

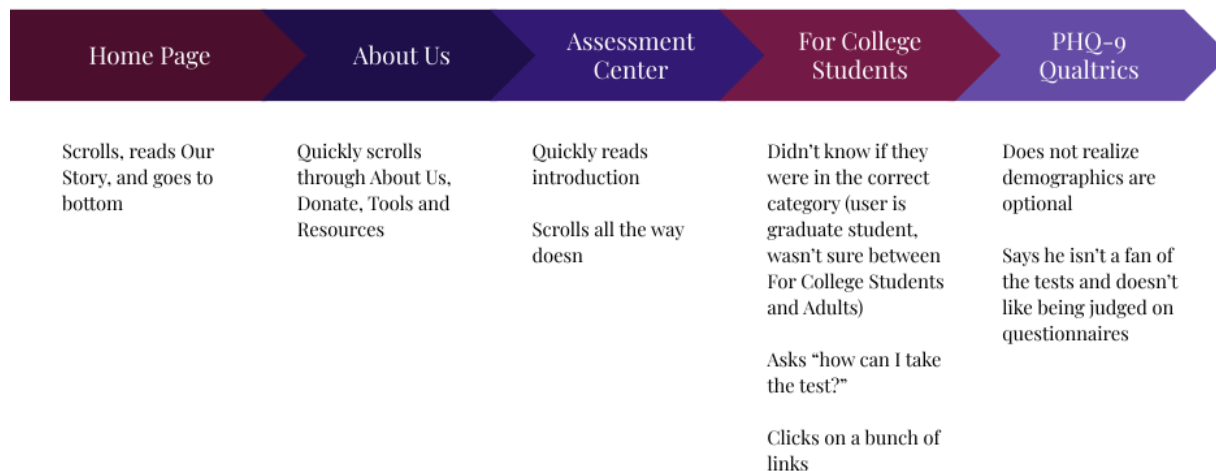
User 4 (no audio)



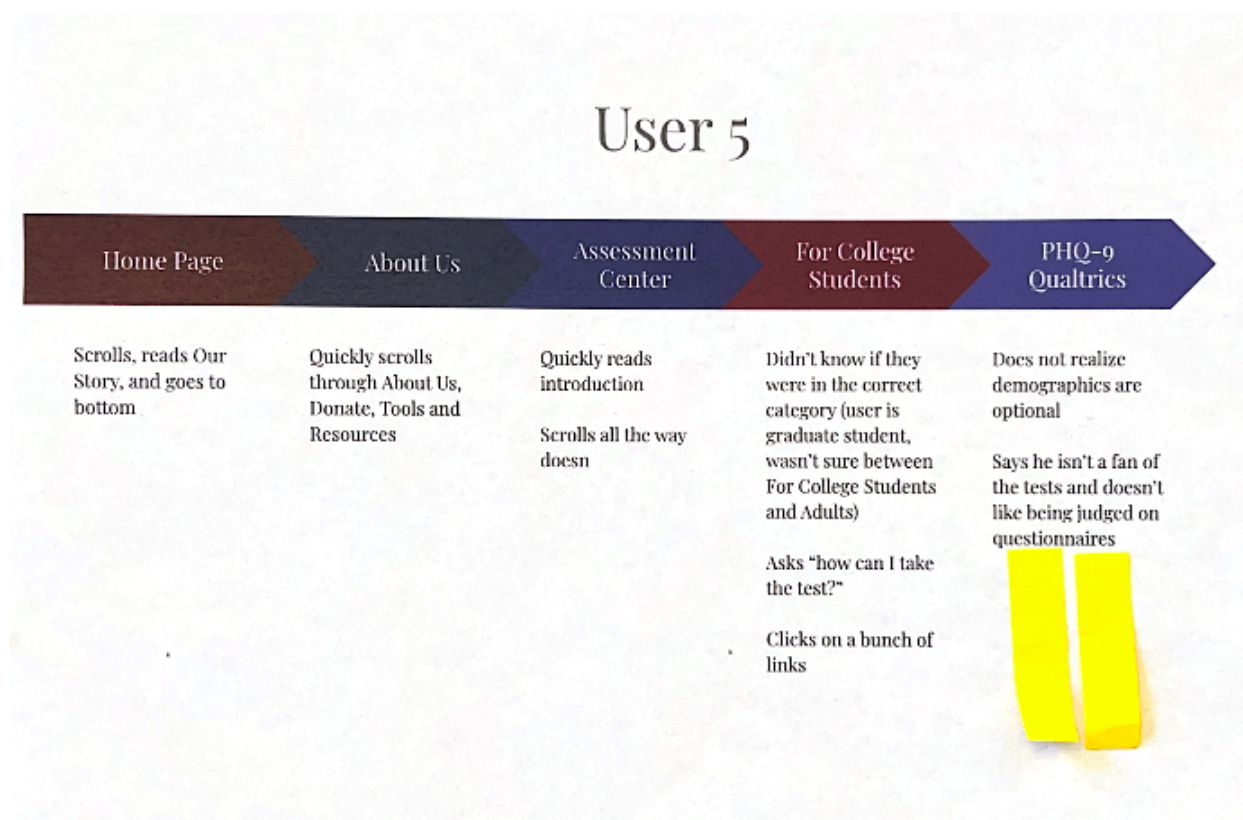
User 4 Sequence Model

Scan of User 4 Sequence Model from Wall Walk had no data points so wasn't included.

User 5



User 5 Sequence Model (1 of 2)

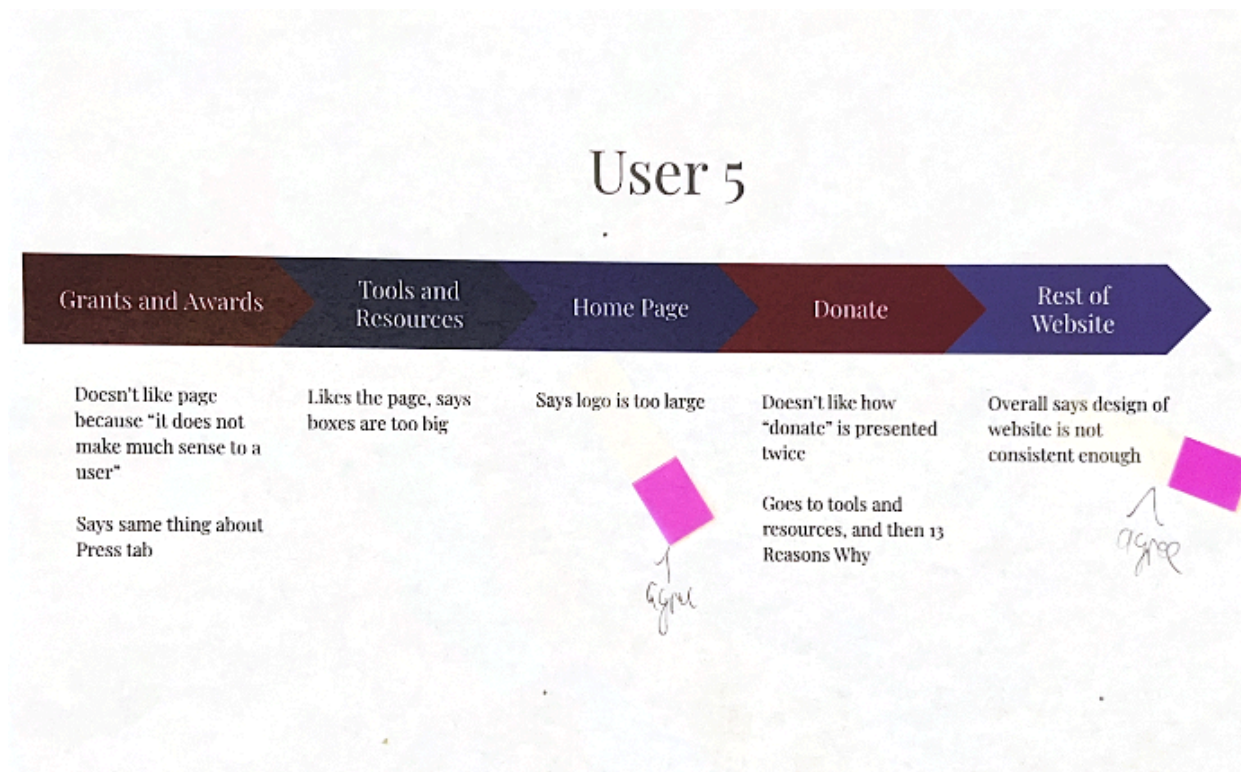


Scan of User 5 Sequence Model (1 of 2) with Wall Walk Data Points

User 5



User 5 Sequence Model (2 of 2)



Scan of User 5 Sequence Model (2 of 2) with Wall Walk Data Points

Appendix 2f: Lingerin Issues

Although our team feels that we made great progress toward system improvements this semester, there are some lingering issues that may need to be addressed in the future. First, due to the nature of our class, we will not be implementing our recommendations for the HGAPS team. If the HGAPS board approves our recommendations, it will be their responsibility to make any changes to the Assessment Center. To that extent, it is unclear if the changes would align with our vision for the Assessment Center.

More broadly, some potential changes in HGAPS leadership may affect the implementation of our project. Dr. Eric Youngstrom, a key founder and stakeholder of HGAPS, will be starting a new position in Ohio. Although the leadership will remain stable and Dr. Youngstrom will remain heavily involved in the organization, it is unclear if this project may be affected by this change.

Appendix 2g: Wall Walk

We held our wall walk on Thursday, November 30th, in Howell Hall. Although we did not officially count, there were approximately 10-15 HGAPS members at the event, including Dr. Eric Youngstrom. To prepare for the event, we created handouts for our agenda and rules of engagement that we gave to all attendees. Belle, our ScrumMaster, put a significant amount of work into developing these documents to streamline our event. They included a specific breakdown of timing as well as instructions defining which Post-It notes and pen colors were used for various types of note-taking on our models. Ultimately, we felt that these documents helped our attendees through some of the complicated technicalities of our wall walk. Although not everything went exactly as we planned, we felt the wall walk was a success overall.

To ensure our wall walk ran efficiently, we decided to take on individual roles. Jillian maintained our recording, Belle served as the timekeeper and explained the rules of engagement, Natalie explained our problem definition, answered any client questions throughout the walk, and managed the visioning. Shatha explained models, Norman demonstrated our personas, and Safoora aided with visioning. These roles were especially important during our visioning session, where Shatha and Natalie took the lead to help attendees understand how their ideas would be organized.

The visioning session was arguably the most successful portion of our wall walk because we got significant insight into the thoughts of our attendees that everyone can utilize for potential implementation. Additionally, our group felt that the event generally ran smoothly because of

our preemptive planning. Conversely, although we planned a schedule, the timing was much more in flux than we expected because rather than running each section of the wall walk in a sequence, we split up the attendees into two groups to not overcrowd the space. As a result, we essentially ran our wall walk twice. Despite small challenges, our wall walk provided us with valuable data that can be utilized for creating prototypes and sending recommendations to our client.

Upon the conclusion of our project, Natalie, our Product Owner, will share our final specifications and finalized models with HGAPS leadership.



Appendix 2h: Lessons Learned

Throughout the semester, our group learned valuable lessons about how to successfully run a long-term systems analysis project. First, we learned lessons surrounding team dynamics and group management. We learned that although Scrum/Agile scheduling processes are helpful, sprints may not always take the time you have allotted for them. On the other hand, things may take longer than you expect and it is important to be flexible with the overall schedule. When we planned our schedule at the beginning of the semester, we often over or underestimated our time and ended up moving hours to different sprints. To prevent conflict, it is important to understand each other's time and be willing to make changes to the schedule as needed. Additionally, we learned the value of assigning people roles that they have the skill sets to excel in. For example, Norman is interested in UI/UX design and had built personas in previous INLS classes, so he volunteered to draft personas and website prototypes. By allowing people to choose roles they will excel in, we ensured that all models and final products would be exceptionally completed.

We also learned valuable systems analysis lessons during our wall walk. During this event, we allowed attendees to review all our consolidated models featuring user data and we received

more pushback than some group members expected. We did not expect all attendees to agree with every user data point, but we now know it is important to be over-prepared for potential disagreements or pushback. Additionally, even with a strictly planned agenda, our schedule still changed during the actual event. Due to crowd size, we needed to alter our plan of having everyone view the models at once and instead run the wall walk in small groups. This ended up being the most efficient plan and the flexibility of our group members made it successful despite unexpected changes. Ultimately, despite ever-changing plans and frequent difficult scheduling, our group project was a success throughout the semester and we are extremely pleased with the materials we are submitting to HGAPS.