

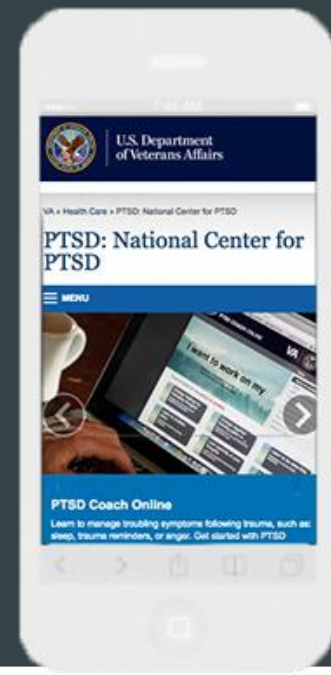
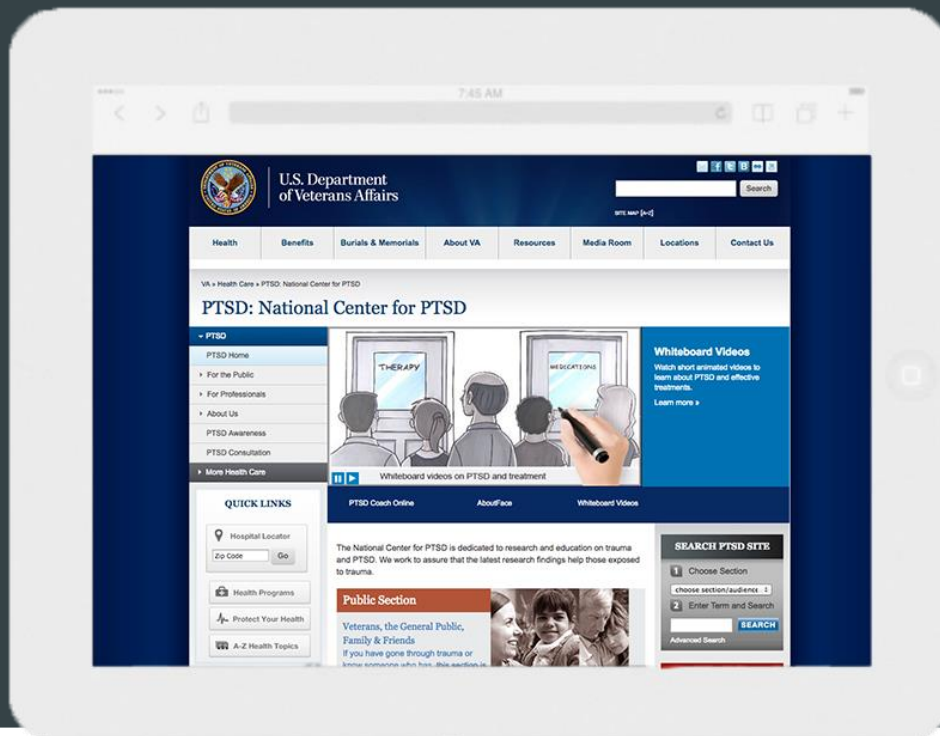
# – NCPTSD – INFORMATION ARCHITECTURE & STRATEGY

Mike Satzinger and Emily Salinas

# – SUMMARY – & FINDINGS

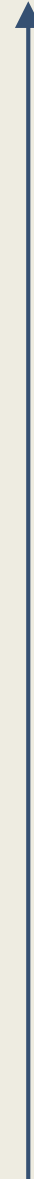
# NCPTSD GOALS

- Expand audience by making the NCPTSD website appealing to people outside of the VA ecosystem.
- Create endpoint for all users by making the wealth of information on the NCPTSD website easier to find and access.



- **Comprehensive** amount of information about PTSD.
- **Information pertains to a broad scope of people** including military personnel, clinicians, and the general public.
- Information **represents best practices** in the industry and gets updated with the latest research based findings.
- Content devoted to **personalizing the experience** of dealing with PTSD through the aboutFace and whiteboard videos.
- Keyboard reader **accessibility is in good shape** overall, and aligns with the VA's mission.

# STRENGTHS



# WEAKNESSES



- Expansive content makes it **difficult to locate specific pieces** of information.
- Information gets **compartmentalized** into artificial sections (for the public, for professionals, etc.) making it even more difficult for the average.
- Structure causes **redundancy** in the content.
- **Search mechanism** forces artificial categories.
- Navigation menu does not represent all levels of content making it **difficult to see where the user is** and return to the most useful pages.
- **Strong VA branding** deters users outside of the military.
- **Cluttered margins** and overall busyness causes sensory overload.

– CONTENT –  
INVENTORY

# Content Inventory

- Provides insight into the breadth and depth of information
- First step to understanding the organization of the website
- Findings:
  - X Inconsistent design and layout between sections.
  - X Content tends to be very text heavy, lacks images.
  - X Wayfinding hindered by VA menu and incomplete bread crumbs.
  - X Navigation menu items represent different levels of granularity.
  - X Excessive duplication between professional and public sections.
  - X Massive amount of cross site and external links which hurt navigation.

# PERSONAS



**Eric Thomas**

Psychotherapy Clinician

36/ Male/ Married/ Columbus, OH



**Chrissy Roskos**

Unemployed Volunteer

25/ Female/ Spokane, WA



**Ryan Morris**

Senior Airman currently stationed in  
Afghanistan

27/ Male/ Single/ Lakeland, GA



**Allen Batz**

Vietnam veteran retiring after years  
of civilian life

67/ Male/ Married/ Norwalk, CT



“People are not inherently damaged, broken, or defined by their trauma even though it might shake their world.”



# Eric Thomas

Psychotherapy Clinician

36/ Male/ Married/ Columbus, OH

## Background:

Eric has some personal experience with PTSD, after living through Hurricanes in Florida that displaced him and his family when he was a kid. Watching his two younger brothers go through this experience is what especially made him want to be a practicing clinician by the time he finished his Bachelor's degree in Psychology. Eric now works at an independent practice, but he finds that treating PTSD can be vast and complex in a way that his partners don't experience with their patients. Sometimes client experiences can be intense, or even dangerous. Additionally, Eric and his partners have been approached about selling the practice, but they prefer to remain independent and 'do things their own way.'

## Goals:

Eric believes that for patients with PTSD, **resilience is the key factor in therapy, but sometimes recognizes a limit for what's beyond his skills.**

“People are not inherently damaged, broken, or defined by their trauma even though it might shake their world.”



# Eric Thomas

Psychotherapy Clinician

36/ Male/ Married/ Columbus, OH

## Scenarios:

After a particularly emotionally exhausting session with a client, Eric realizes that he needs to brush up on research that will benefit a diverse range of PTSD sufferers which he encounters on a regular basis. First of all, he wants to get a better handle on how other clinicians specifically diagnose PTSD, along with co-occurring conditions with as head injuries, and how this differentiates from other diagnoses such as phobias. **He begins by comparing screeners for patient evaluations. Further, he wants to make stronger personal connections in the medical community,** so that he know when it is appropriate to refer a patient to a doctor who can provide more specialized treatment.

"We're running up a mountain as hard as we can, and sometimes it's hard to tell if we're making any progress."



# Chrissy Roskos

Unemployed Volunteer

25/ Female/ Spokane, WA

## Background:

Growing up as an only child, Chrissy always considered herself to be 'tough', whether she's working on moped maintenance, or letting other people's criticism roll off her back. Eighteen months ago she met and fell in love with her current domestic partner, an Iraq vet. After they moved in together, **she started noticing more recurring patterns of behavior, such as binge drinking, and anger triggered by high stress.** She knows that he is by nature a gentle person, and hasn't had success turning to friends about it because they don't understand.

## Goals:

Chrissy just wants to help him and get their lives back on track. She has openly discussed her feelings and asked how she can be supportive, and knows that his mental wellness is a process. But she is thinking more seriously about getting professional help, for him and herself.

"We're running up a mountain as hard as we can, and sometimes it's hard to tell if we're making any progress."



## Chrissy Roskos

Unemployed Volunteer

25/ Female/ Spokane, WA

### Scenarios:

It's Sunday evening after spending dinnertime with her partner's parents and siblings, who live outside of the city. Once he gets home, the high stress from the work week combined with family obligations send him off and he is slamming doors and is in a mood where he does not want to be touched. She knows that deep down he is willing to get the help he needs, and Chrissy uses her mobile phone to find the VA crisis hotline number. **It's critical for her to quickly pull up information during moments when she needs it the most.**

On 'good days' when her partner is not suffering from panic attacks, Chrissy still needs to access information, and has the ability to take more time looking up specifics such as co-pay costs, local clinics, and which SSRI's which might be helpful for therapy. She also wants to browse resources specifically for family members and advocacy.

“Is it possible to get PTSD just from operating drones?””



## Ryan Morris

Senior Airman currently stationed in Afghanistan

27/ Male/ Single/ Lakeland, GA

### Background:

Grew up the eldest of three. He wanted to be in the Air Force as long as he can remember growing up just outside of Moody Air Force Base. He enlisted as soon as he could and became a drone pilot to help stop terrorism. He thought using drones would minimize the number of casualties and only kill the real “bad guys”.

### Goals:

He has now seen so many people die on a screen he feels numb throughout the whole process and drinks a bottle of whiskey after every successful mission. He wants to know if his feelings are normal and **how he will be able to go back to “normal life” after his deployment is over**. He knows a little about PTSD but assumes that only people on the combat field can get it.

“Is it possible to get PTSD just from operating drones?”



## Ryan Morris

Senior Airman currently stationed in Afghanistan

27/ Male/ Single/ Lakeland, GA

### Scenarios:

Ryan searches the internet during some free time to find out if his general state of mind is normal; something that is never talked about among his squad members. He looks on forums for service members and finds people who talk about similar feelings and the difficulties they have when they come home. Some of them talk about PTSD and he goes to the national PTSD website looking to see what people with PTSD are like.

After finding out about the symptoms of PTSD and thinking he might have it, he has even more questions about how to get diagnosed and go through treatment.

**Should he just talk to a regular doctor or does he need to go to a psychologist?**

What will he be like when he gets home? He wants to have a better picture in his mind about what PTSD looks like before he starts wasting anyone's time talking about it.

“The memories started coming back after so many years”



# Allen Batz

Vietnam veteran retiring after years of civilian life

67/ Male/ Married/ Norwalk, CT

## Background:

Allen grew up in Connecticut and served in the Marines as a helicopter gunner in Vietnam. After his deployment, he struggled with alcohol and substance abuse. The VA helped him transition to civilian life with counseling and Psychological therapy. He retired recently after 20 years at his job at UPS and has had difficulty adjusting to the change in pace. The additional free time has allowed memories from his service to come back. His wife has been awoken to bouts of shouting and clenching his pillow while he is sleeping. He has started isolating himself from his friends and family with long rides on his boat. **He doesn't consider himself tech savvy and only browses the web on a desktop computer.**

## Goals:

Allen seeks to find ways to cope with his new lifestyle. He would like to get stop the memories from coming back or at least be able to deal with the anxiety they produce.

“The memories started coming back after so many years”



# Allen Batz

Vietnam veteran retiring after years of civilian life

67/ Male/ Married/ Norwalk, CT

## Scenarios:

Allen has received help from the VA before so he looks into going back for help. He looks for stories of other vets dealing with retirement and resources to cope with lifestyle changes. He looks at some aboutFace videos and then more into PTSD. It wasn't called PTSD when he was getting help previously but he thinks that it probably would be today.

He looks for more information about how to tell if he has PTSD and all of the symptoms. **He wants to schedule an appointment** to get assessed and started down a better path.



# COMPETITIVE -ANALYSIS-

# Summary

	ptsd.va.gov	nimh.nih.gov	mayoclinic.org	webmd.com
<b>Mission</b>	<b>Assist people dealing with PTSD</b>	<b>Assist people with mental illness</b>	<b>Provide care and education in all areas of healthcare.</b>	<b>Be the reliable source for healthcare information.</b>
<b>Funding</b>	Government	Government	Hospital/school activities and contributions	Advertisers, paid services, and sponsors
<b>Audience</b>	Anyone involved with all aspects of PTSD	General public	General public, some specific to those affected by PTSD	General public, more specific material with search
<b>Navigation</b>	Inconsistent categories, up to 4 levels deep	Simple, easy to understand categories very broad	vertical & horizontal navigation, too many options	Sticky PTSD navigation gets lost in clutter
<b>Search</b>	3 search mechanism hard to filter refine	1 search for whole NIMH domain	1 search uses google results	1 search can be filtered
<b>Mobile</b>	Good, responsive design.	Good, responsive design.	Good, responsive for mobile.	Separate mobile site, does not maintain navigation menus.

ACCESSIBILITY

# Checklist

- ✓ Uses good tagging and semantic markup.
- ✓ Keyboard accessible.
- ✓ Most videos provide a pdf description.
- ✗ Each item in the navigation and margins adds to the amount of time it takes the user to get to what they need on the page.
- ✗ Some videos do not have audio descriptions.
- ✗ Some html errors.
- ✗ Most forms/search box requires data entry do not have form labels.
- ✗ Homepage buttons have redundant linking.
- ✗ Needs better visual contrast on the page (sometimes blue text looks like links).
- ✗ Pop up exit survey is not predictable behavior and appears to be too long.

# SEARCH ENGINE OPTIMIZATION

(different from classmates' search engine research)

# SEO Checklist

- ✓ Consistent keywords on the homepage.
- ✓ **Large number of webpages contribute to many keywords.**
- ✓ **Uses descriptive tags for visually impaired people, uses heading and <title> tags.**
- ✓ Excellent level of trust and authority.
- ✓ **Has robots.txt file -> <http://www.ptsd.va.gov/robots.txt>**
- ✓ URLs are clean, and not just a string of letters and numbers.
- ✓ Is responsive and mobile-friendly, mobile font is legible.
- ✓ Has their own 404 page.
- ✓ Multiple variations of a URL resolve to the same page.
- ✓ Uses cache for faster display.

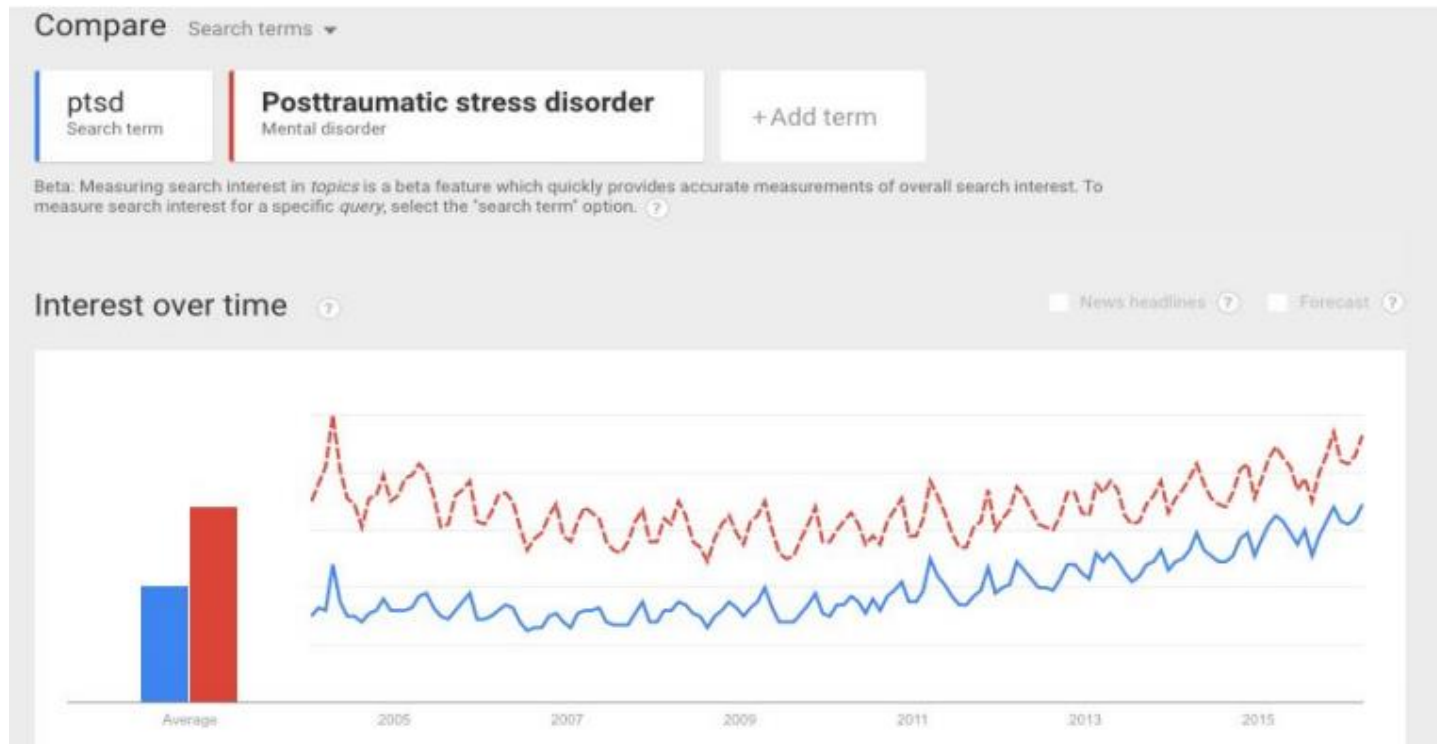
# SEO Checklist

- X **Missing XML sitemap for search bot**, though there is a sitemap for users.
- X **Site is not SSL secure** - HTTP pages are not as secure as HTTPS.
- X 322 in-page links on the homepage. **Unnecessary links can dilute content**, and may risk being viewed as spam.
- X Load time is relatively slow due to inline styles, has too many CSS and JavaScript files
- X **Better navigation and a flattened hierarchy will keep content from being buried.**
- X Too many broken links can hurt your reputation (108 broken links).
- X Orphaned pages can't be indexed by search crawlers.
- X No structured markup. This is what google uses to create '**rich snippets**'.
- X The small links on the mobile site may be difficult to click with touch screen devices.

# SEO Keywords

Current top keywords for the ptsd.va.gov homepage. ➡

ptsd	47	veterans	25
health	23	trauma	15
care	15	research	15
center	14	benefits	14
search	14	national	11



Google Trends shows that the homepage could benefit from including the keywords 'posttraumatic stress disorder'.



– CARD –  
SORTING  
RESULTS

# Goals

- Normalizing the menu categories across user groups through a wide array of participants
- Develop categories at same level of granularity, sorting the content by topic/purpose
- Create navigation titles that makes sense to all users

# Method

- Attempt to **flatten hierarchy** by removing 'Public' and 'Professionals' categories
- Develop stage one IA card sort using **simple natural language**
- Conduct hybrid card sort where users could use proposed categories or create their own
- Do internal sort and revise IA (stage 1)
- Analyze results and revise categories (stage 2)
- Conduct second closed card sort
- Make final revisions

# Stage I: IA

## **What is PTSD?**

- PTSD Basics
- Criteria for professionals

## **Who has PTSD?**

- The faces of PTSD
- PTSD in Women
- PTSD in Seniors
- PTSD in Children

## **How do you get PTSD?**

- Types of trauma

## **How do you know it's PTSD?**

- Symptoms
- Assessment for professionals

## **How might PTSD affect you?**

- Effects of PTSD
- Other reactions
- Sleep problems
- Substance abuse
- Mental health issues
- Suicide and self-harm
- Physical problems

## **How do you get help?**

- Treatment
- Self help
- Where to get help

## **Who else is affected by PTSD?**

- In the Community
- Relief workers

## **How else can I get involved with PTSD?**

- PTSD Awareness

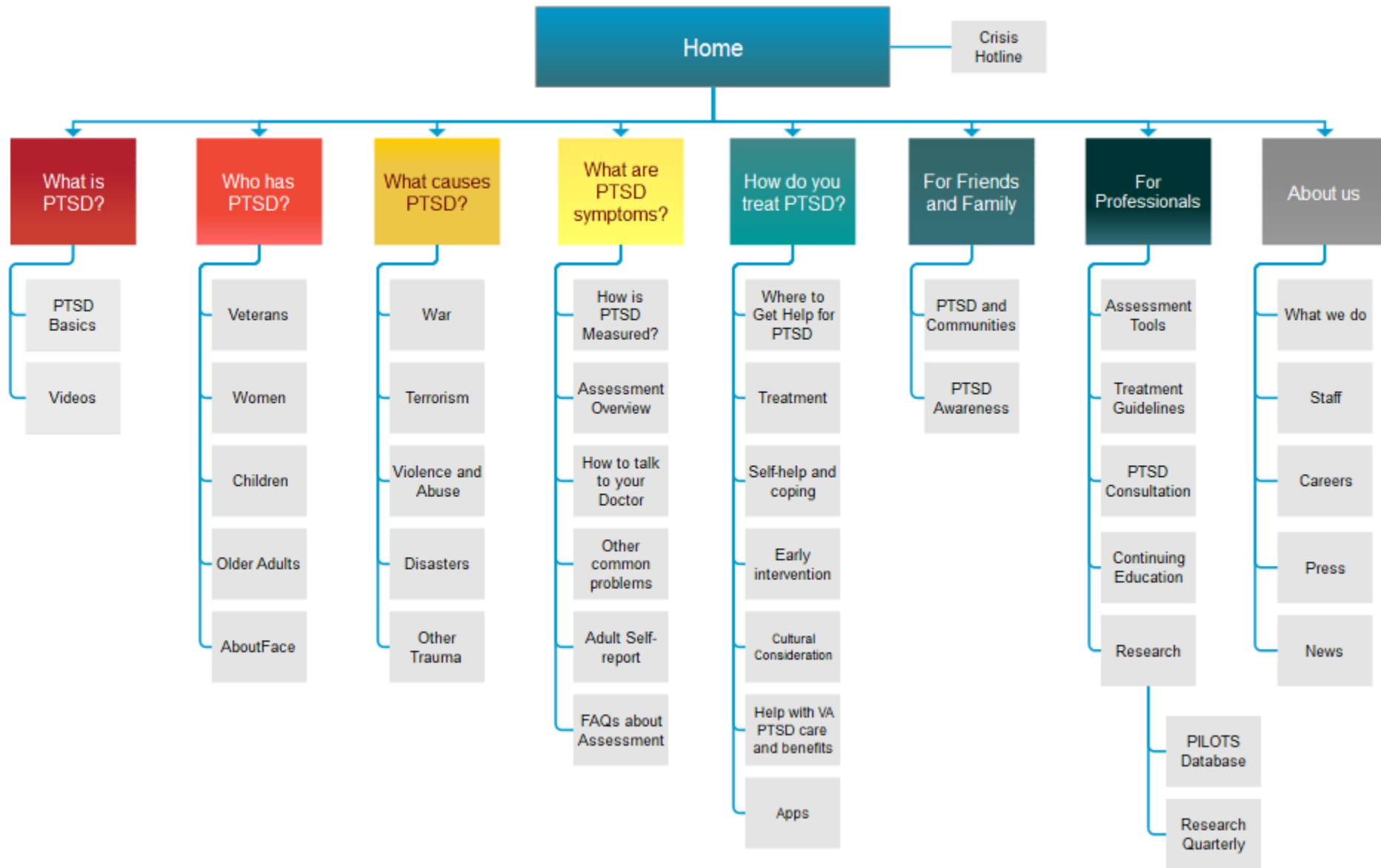
## **Research and resources**

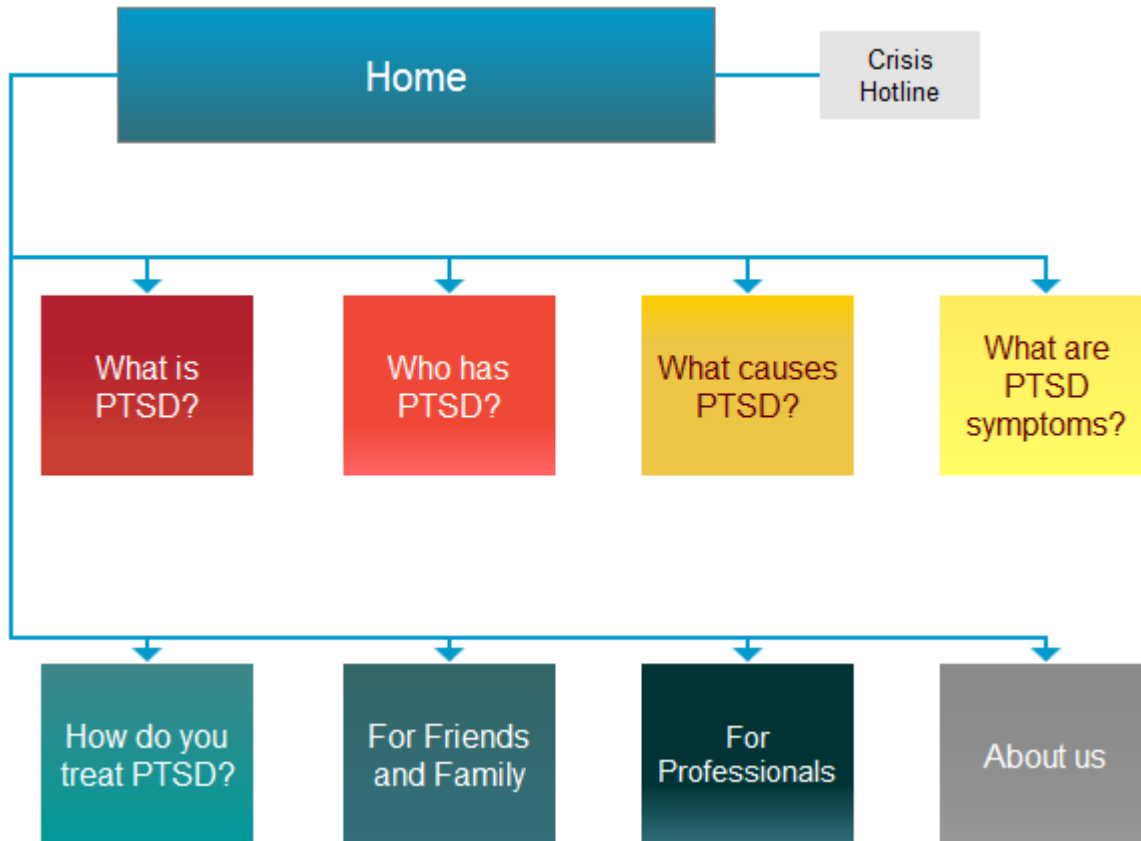
## **About us**

### **Main Objectives:**

- Integrating Professional/Public sections
- Reducing need for cross-referencing
- Creating a flow of deeper information down the hierarchy

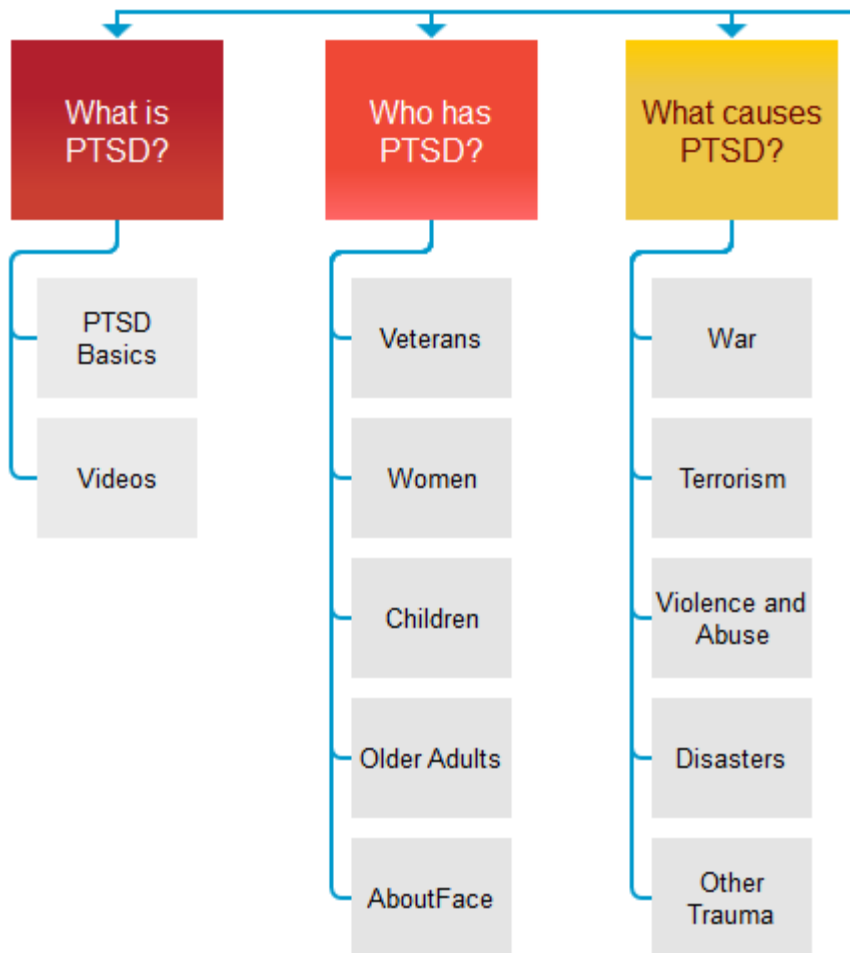
# Final IA

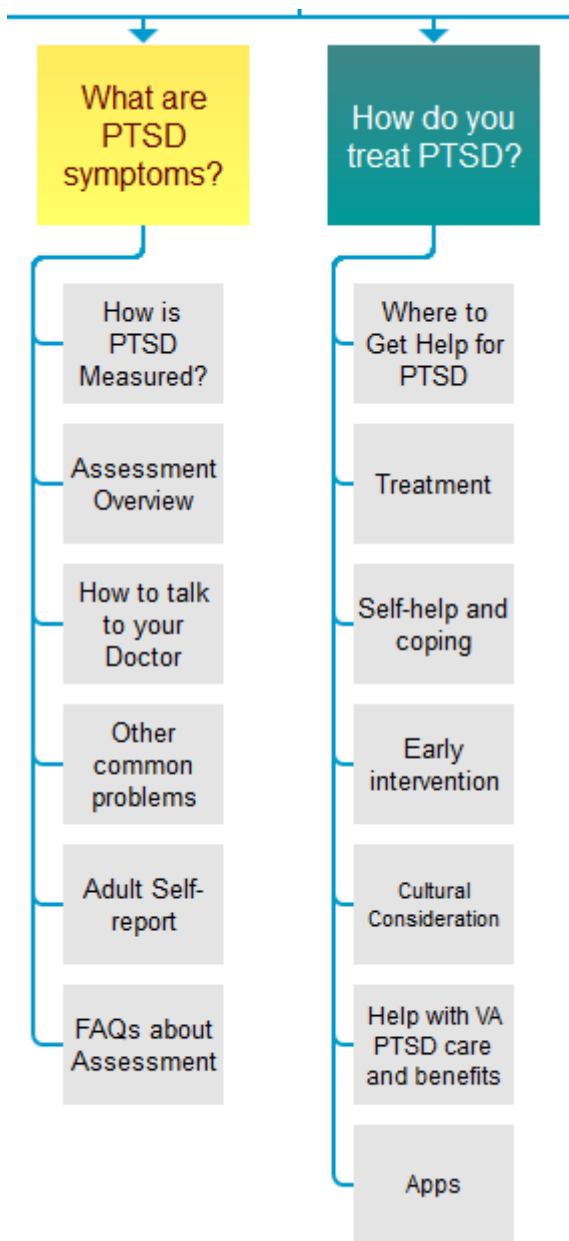




# FINAL IA

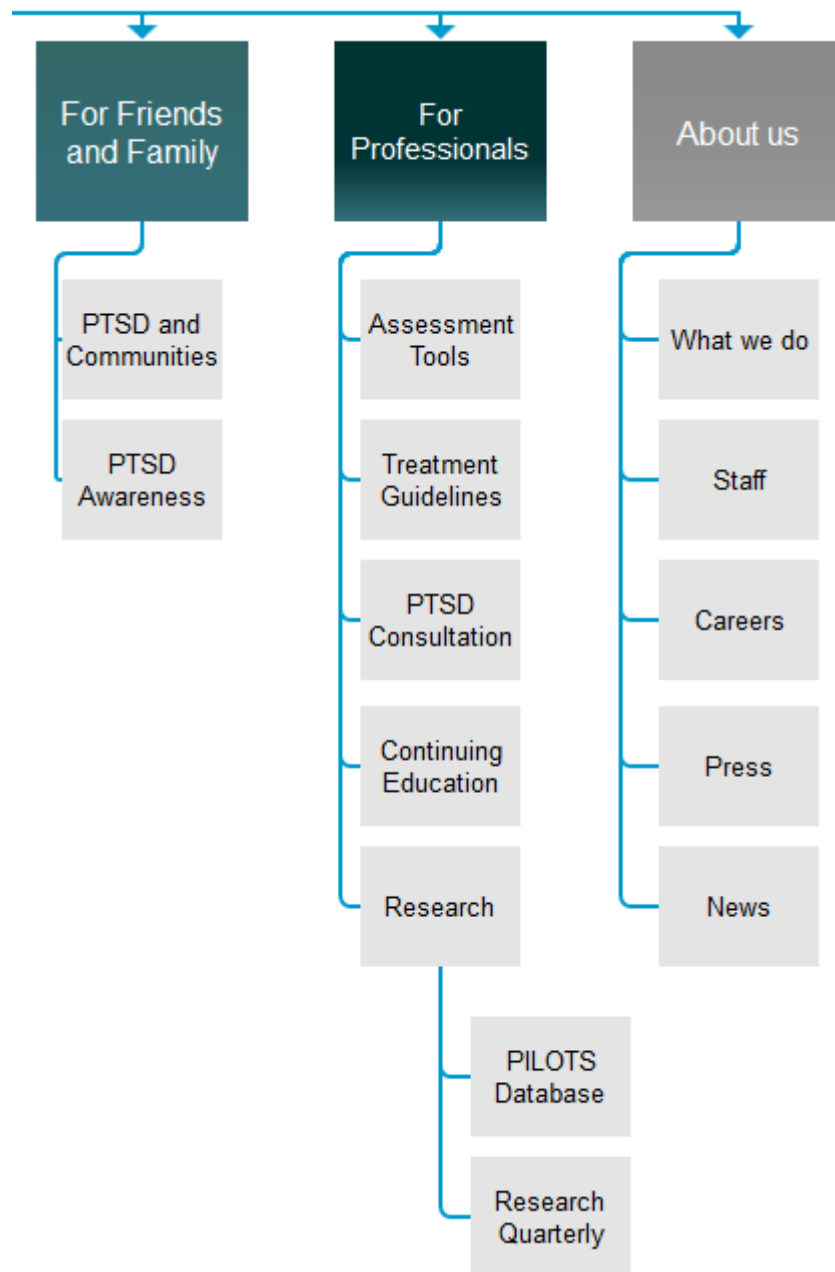
# FINAL IA





FINALIA





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# FINALIA

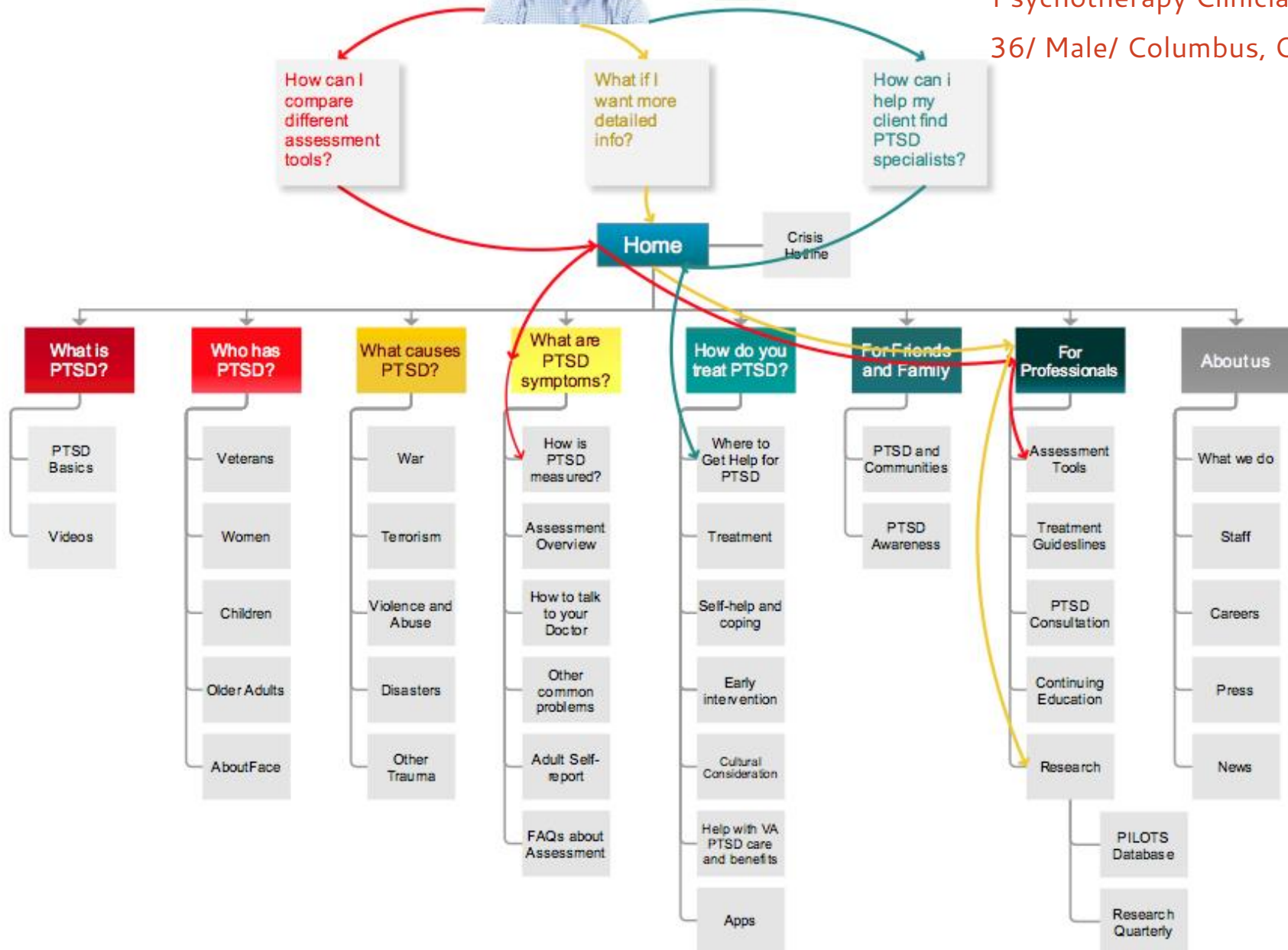
# –USER– JOURNEY



# Eric Thomas

Psychotherapy Clinician

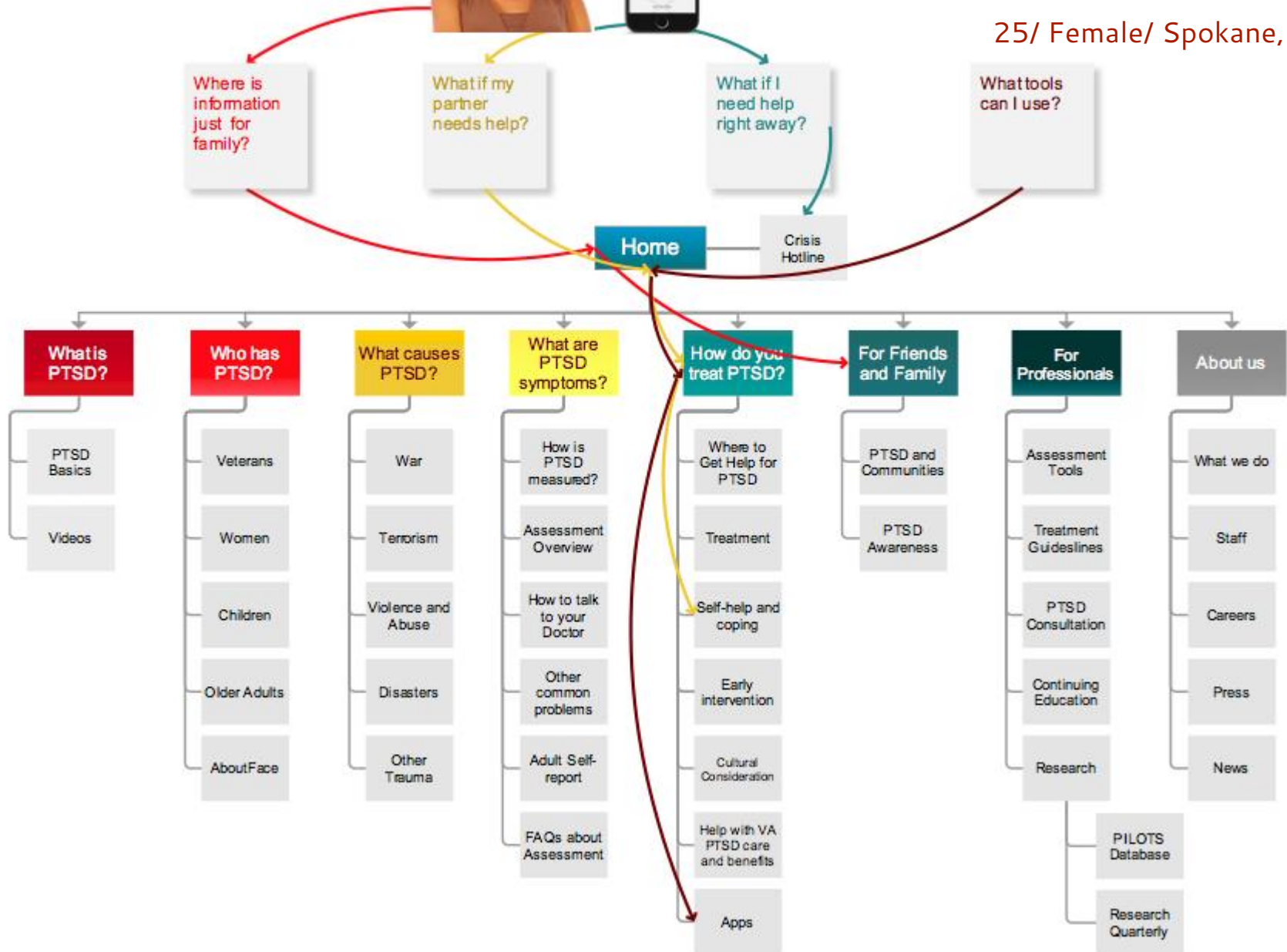
36/ Male/ Columbus, OH



# Chrissy Roskos

Unemployed Volunteer

25/ Female/ Spokane, WA

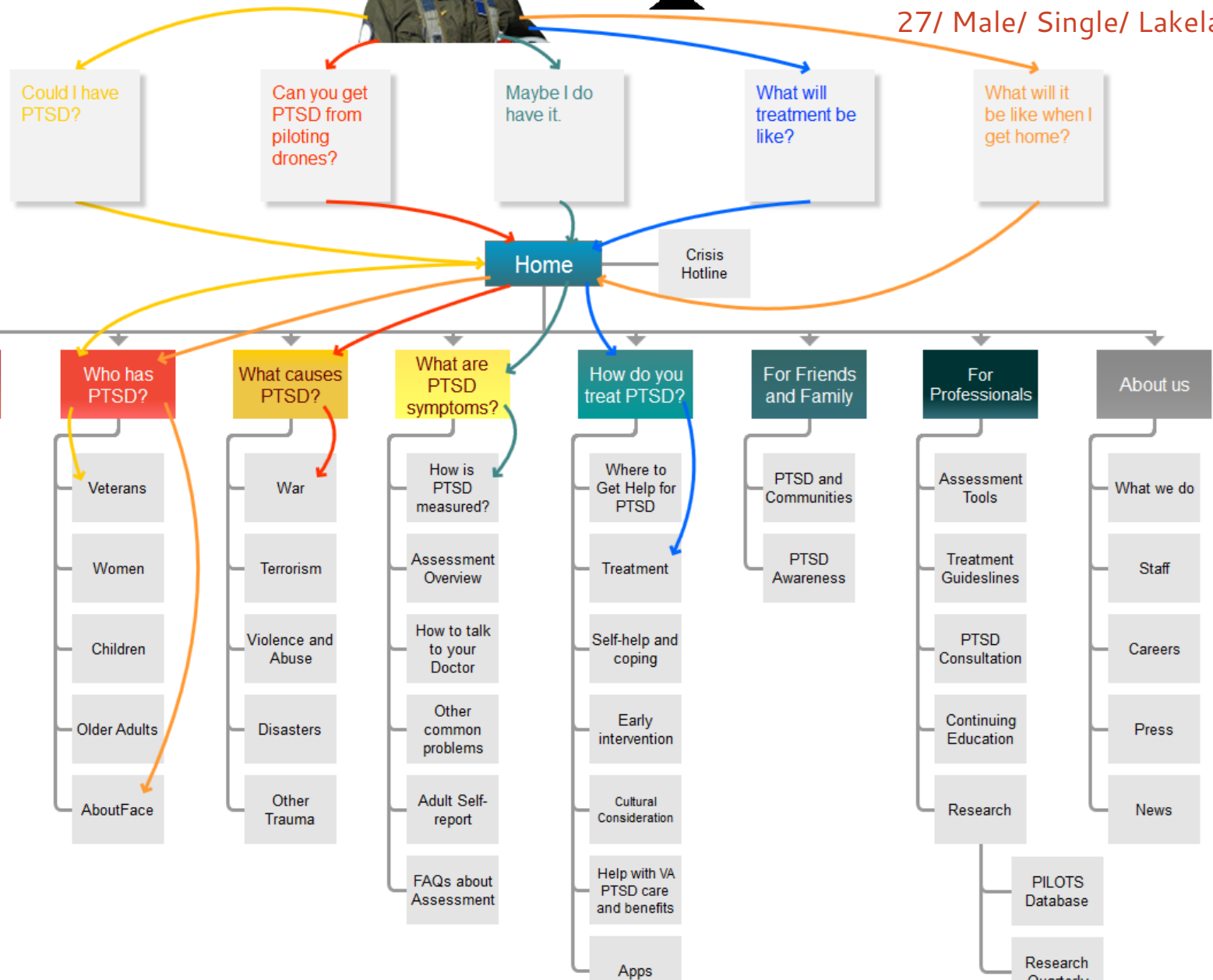




# Ryan Morris

Senior Airman in Afghanistan

27/ Male/ Single/ Lakeland, GA

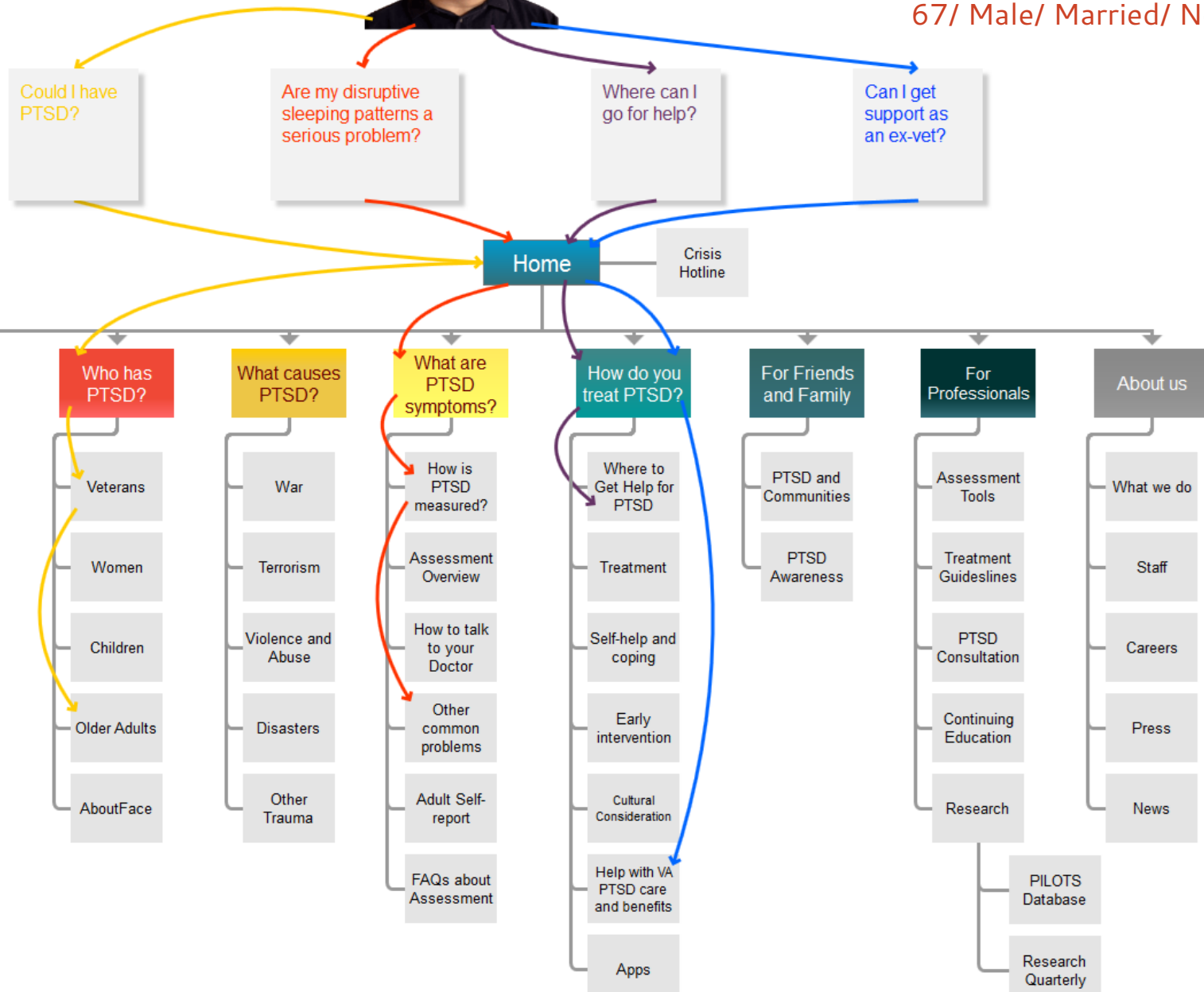




# Allen Batz

Retiring Vietnam veteran

67/ Male/ Married/ Norwalk, CT



WIREFRAMES

# BIG PICTURE

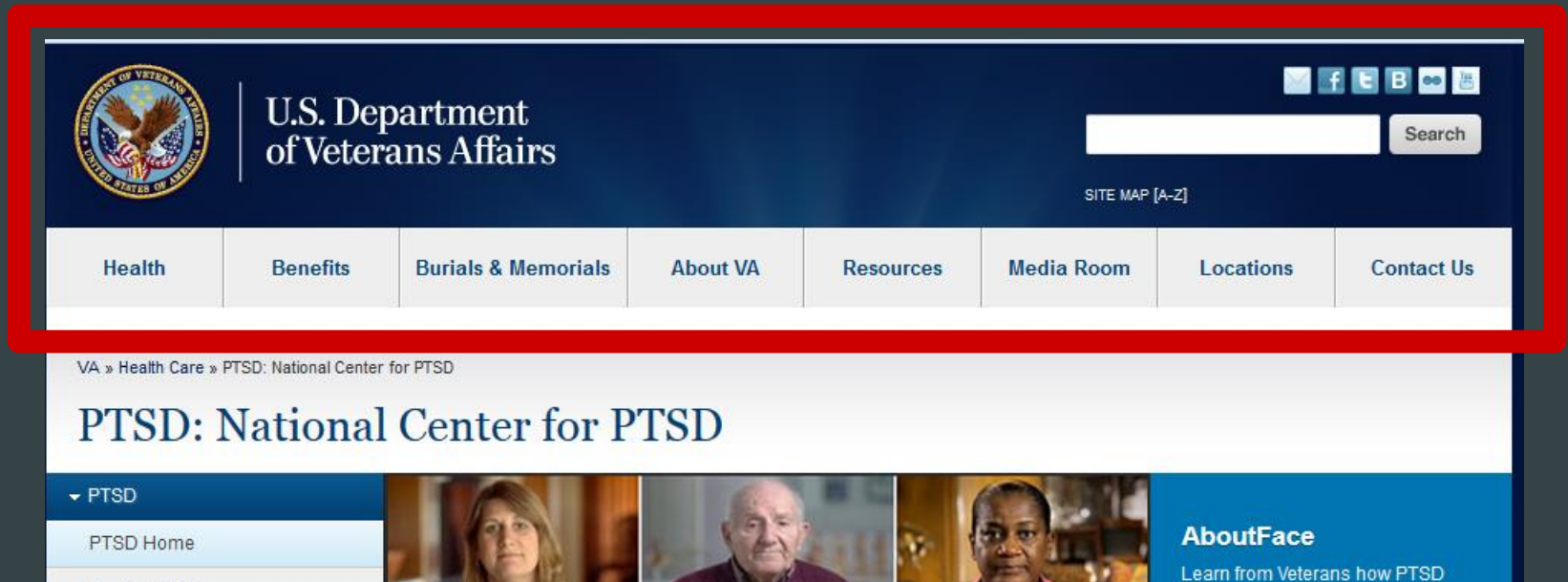


- **Simplify** language
- **Reduce** clutter
- **Flatten** hierarchy
- Push more content **above the fold**
- Provide **clear click locations**



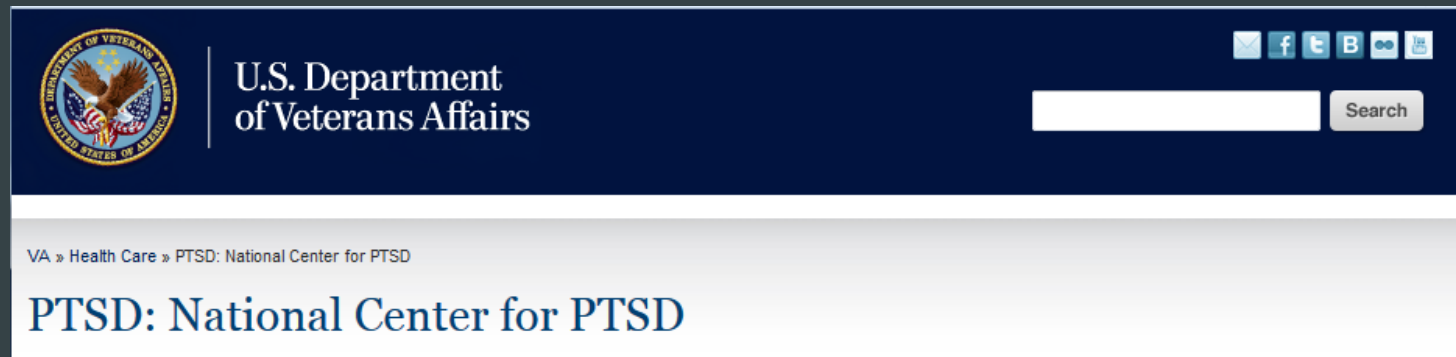
# Problem

VA branding and menus draw attention away from PTSD navigation.

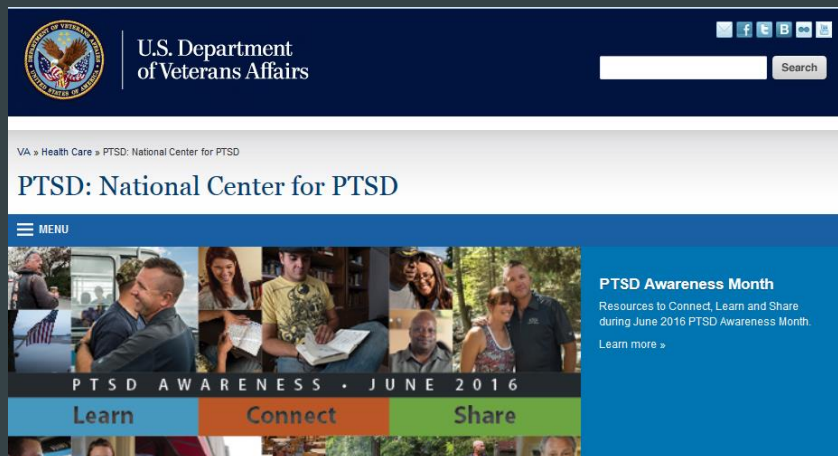


# Solution

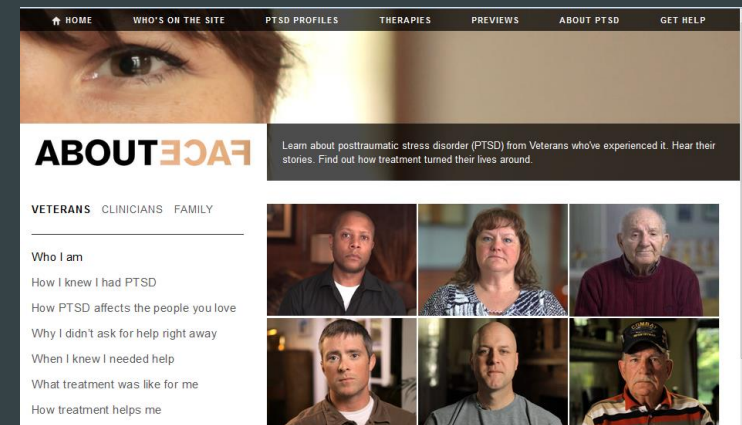
Used collapsed VA header as seen with responsive website.



This layout already seen  
in responsive design.



VA branding completely  
lost in aboutFace.



# Problem

Margins are busy, too many options, takes up vital screen space, hurts accessibility.

The image shows a website layout with a central content area and two sidebars. The left sidebar, highlighted by a red box, contains a 'QUICK LINKS' section with buttons for 'Hospital Locator' (with a location pin icon), 'Health Programs' (with a medical cross icon), 'Protect Your Health' (with a heart rate icon), and 'A-Z Health Topics' (with a book icon). Below these are three large promotional banners: 'Veterans Crisis Line' with the phone number 1-800-273-8255 and 'PRESS 1', 'My healthvet Online' with the tagline 'My Health, My Care: 24/7 Access to VA', and 'eBenefits' with the tagline 'My Gateway to Benefit Information'. The right sidebar, also highlighted by a red box, contains a 'SEARCH PTSD SITE' section with a two-step process: '1 Choose Section' with a dropdown menu and '2 Enter Term and Search' with a text input and a 'SEARCH' button. Below this is a 'WHERE TO GET HELP' section, followed by a 'SEARCH PILOTS' section describing a citation database, and a 'SUBSCRIBE' section for a monthly update.

**QUICK LINKS**

Hospital Locator

Zip Code

Health Programs

Protect Your Health

A-Z Health Topics

**Veterans Crisis Line**  
1-800-273-8255 **PRESS 1**

**My healthvet**  
Online  
My Health, My Care: 24/7 Access to VA

**eBenefits**  
My Gateway to Benefit Information

**SEARCH PTSD SITE**

1 Choose Section  
choose section/audience ▼

2 Enter Term and Search

Advanced Search

**WHERE TO GET HELP**

**SEARCH PILOTS**

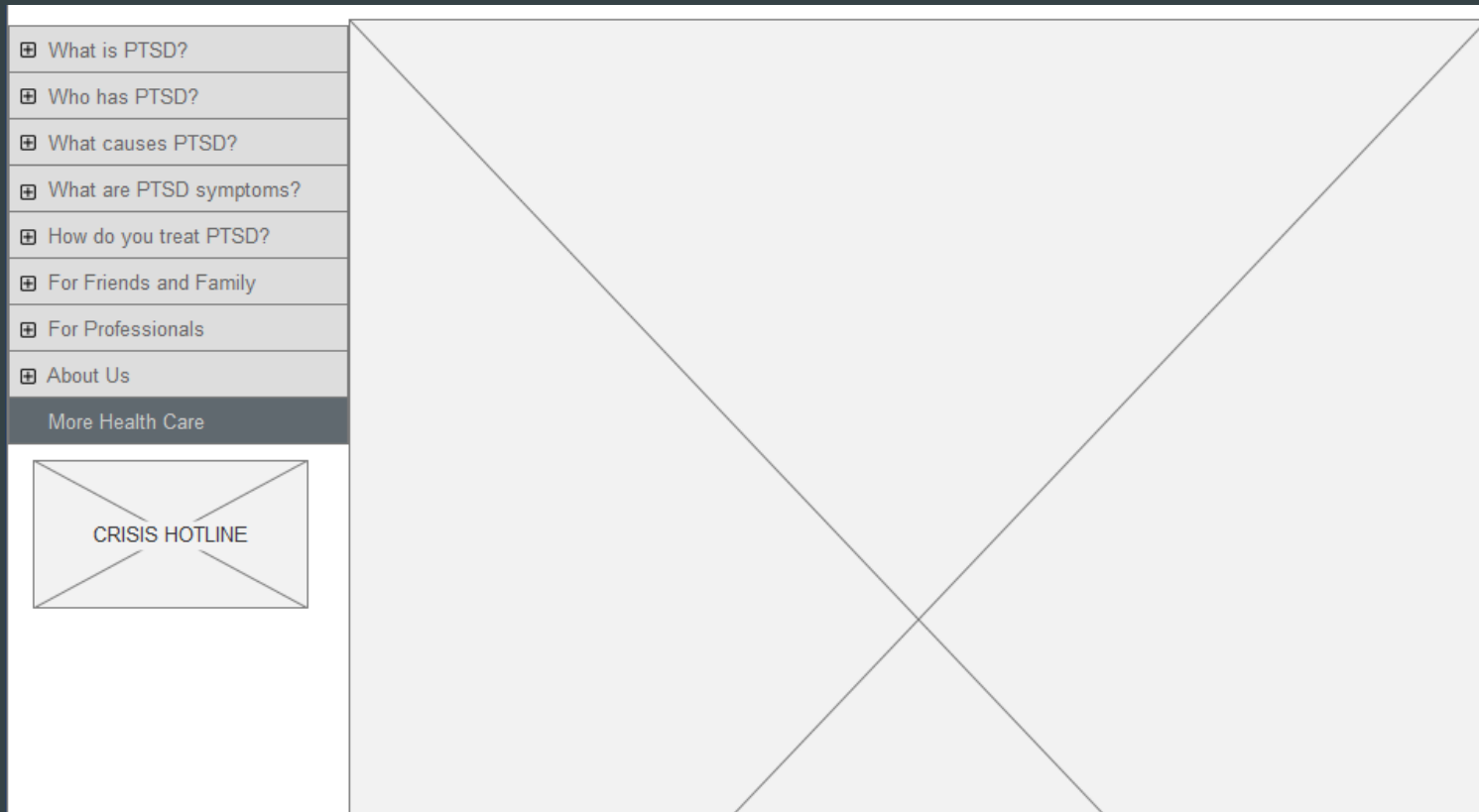
Search **PILOTS\***, the largest citation database on PTSD.  
What is PILOTS?

**SUBSCRIBE**

Receive the PTSD Monthly Update, the PTSD Research Quarterly, or Clinician's Trauma Update-Online.

# Solution

**Cut down excessive options. Eliminate right margin. Keep Crisis hotline.**



**Increasing overall ease of use will make anything removed still readily available.**

# Problem

Highlight banner too big, pushes content off screen.

The screenshot displays the U.S. Department of Veterans Affairs website. The header includes the VA seal, the department name, social media icons, a search bar, and a site map link. A navigation bar lists various services. The main content area is titled "PTSD: National Center for PTSD". A large video banner, outlined in red, features a grid of six video thumbnails and a blue sidebar with the text "AboutFace" and "Learn from Veterans how PTSD treatment can turn your life around. Learn more »". Below the video grid are links for "PTSD Coach Online", "AboutFace", and "Whiteboard Videos". To the left of the banner is a "QUICK LINKS" section with a "Hospital Locator" and a "Zip Code" field. At the bottom, a paragraph states: "The National Center for PTSD is dedicated to research and education on trauma and PTSD. We work to assure that the latest research findings help those exposed to trauma."

U.S. Department of Veterans Affairs

Health Benefits Burials & Memorials About VA Resources Media Room Locations Contact Us

VA » Health Care » PTSD: National Center for PTSD

PTSD: National Center for PTSD

PTSD

PTSD Home

For the Public

For Professionals

About Us

PTSD Awareness

PTSD Consultation

More Health Care

QUICK LINKS

Hospital Locator

Zip Code Go

PTSD Coach Online AboutFace Whiteboard Videos

ABOUTFACE

AboutFace

Learn from Veterans how PTSD treatment can turn your life around. Learn more »

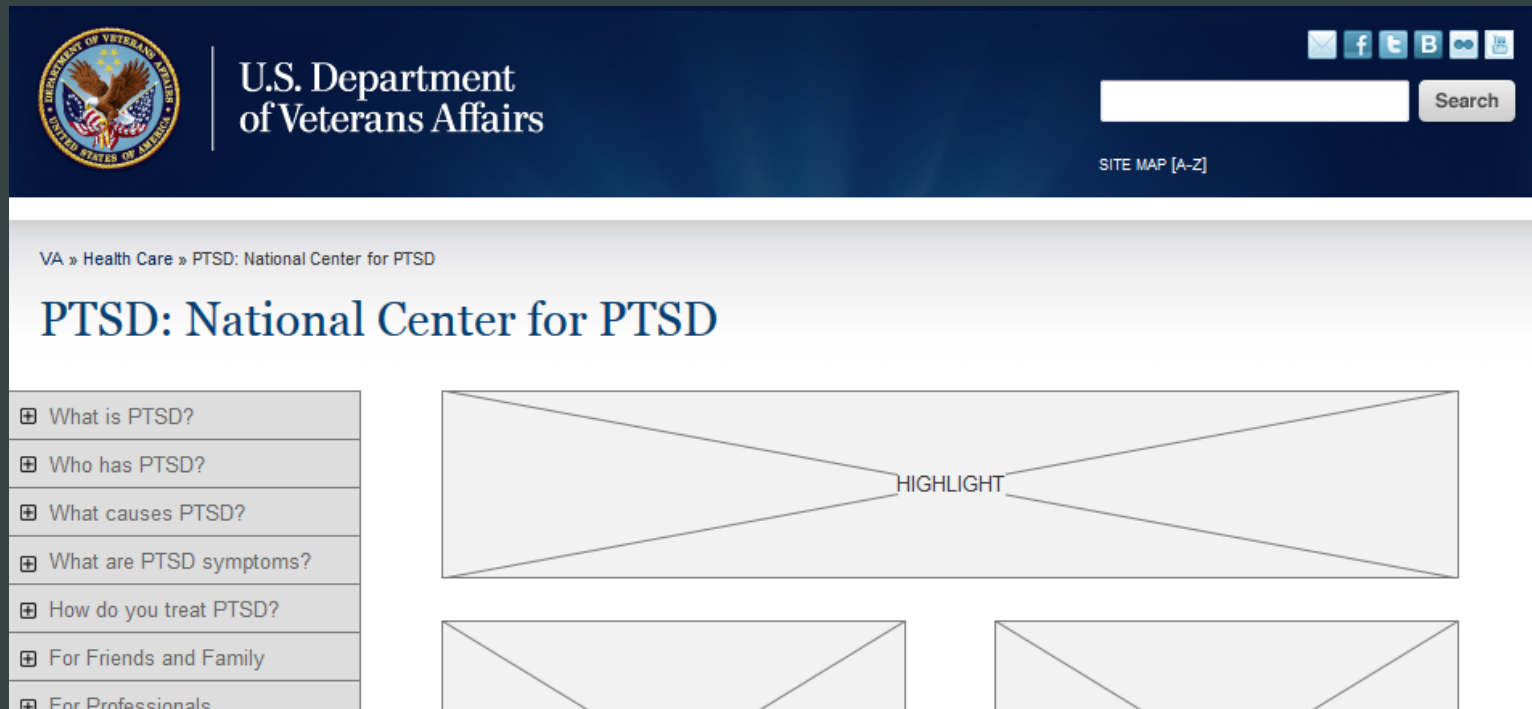
The National Center for PTSD is dedicated to research and education on trauma and PTSD. We work to assure that the latest research findings help those exposed to trauma.

SEARCH PTSD SITE

1 Choose Section

# Solution

Redesign to reduce height of banner.



# Problem

Landing pages too text heavy, images are not links.

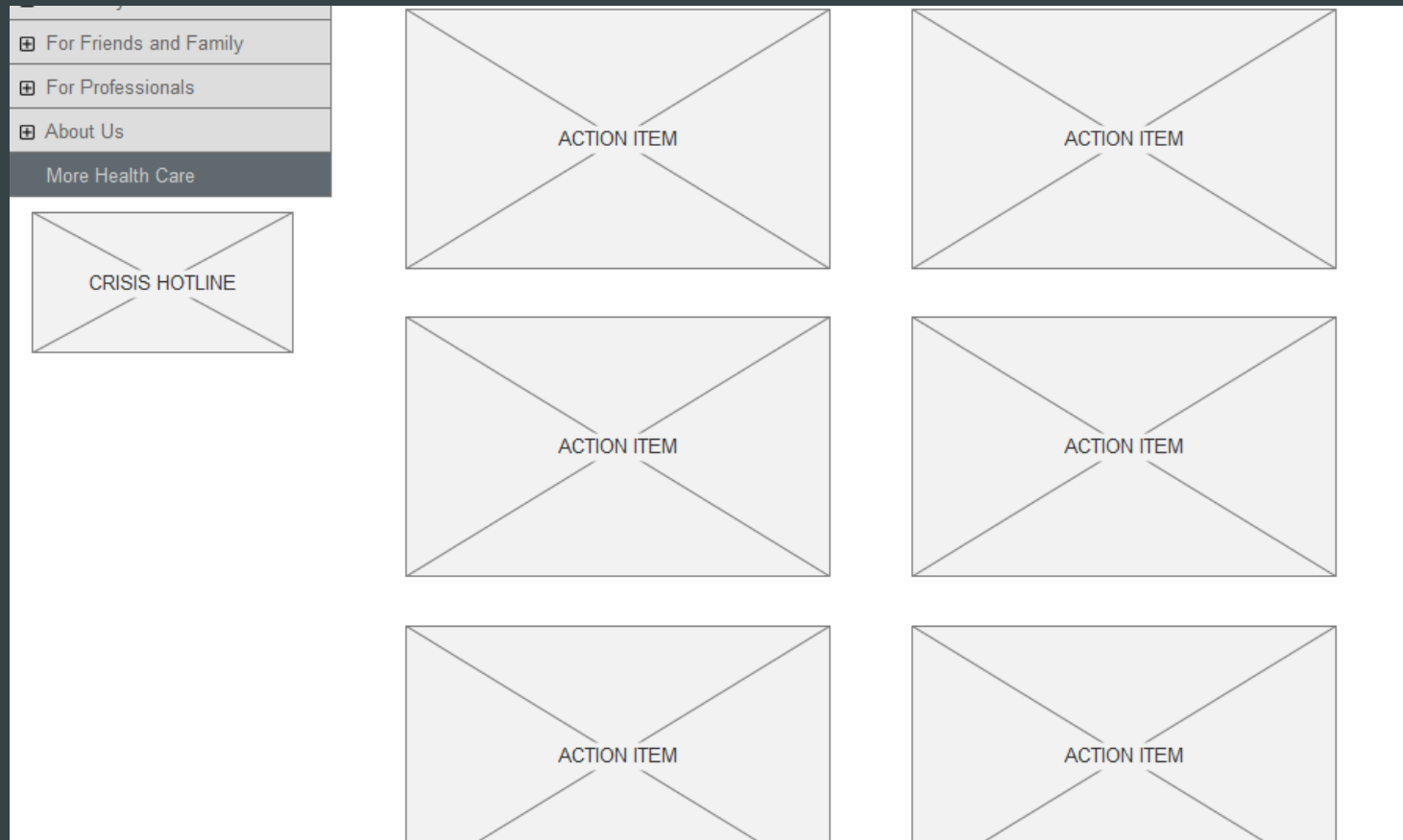
The screenshot shows the National Center for PTSD website. A red rectangular box highlights the main content area, which includes the following sections:

- Hospital Locator**: A form with a "Zip Code" input field and a "Go" button.
- Health Programs**: A link with a medical icon.
- Protect Your Health**: A link with a heart rate icon.
- A-Z Health Topics**: A link with a book icon.
- Veterans Crisis Line**: A link with a star icon and the number 1-800-273-8255.
- My healthvet**: A link with a bird icon and the text "My Health, My Care: 24/7 Access to VA".
- eBenefits**: A link with the text "My Gateway to Benefit Information".
- Main Content Area**:
  - The National Center for PTSD**: A paragraph stating the center's dedication to research and education on trauma and PTSD.
  - Public Section**: A section with a red header, a link "Veterans, the General Public, Family & Friends", and a paragraph: "If you have gone through trauma or know someone who has, this section is for you." It includes a photo of a woman and a child.
  - Professional Section**: A section with a blue header, a link "Researchers, Providers & Professional Helpers", and a paragraph: "If you work with people who have experienced trauma or have PTSD, start here." It includes a photo of a woman and a child.
  - About Us Section**: A section with a brown header.
- Search PTSD Site**: A search bar with a "SEARCH" button and a "Choose Section" dropdown menu.
- WHERE TO GET HELP**: A red button.
- SEARCH PILOTS**: A link with the text "Search PILOTS\*, the largest citation database on PTSD. What is PILOTS?"
- SUBSCRIBE**: A link with the text "Receive the PTSD Monthly Update, the PTSD Research Quarterly, or Clinician's Trauma Update-Online."



# Solution

Revise for new IA using simple, more actionable language with clickable images.





# Problem

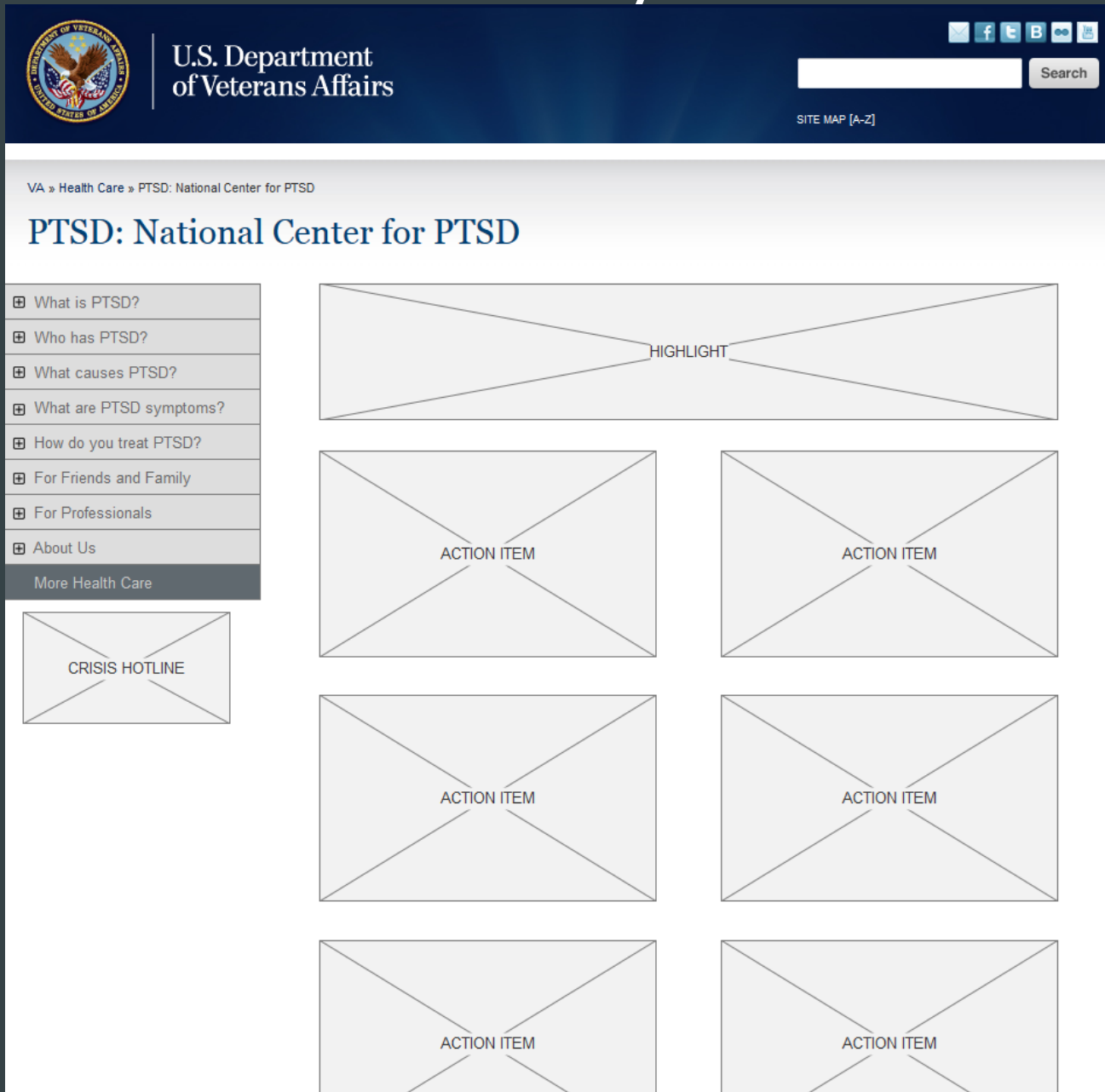
Too many search options, VA search has limited functionality.

## Solution

Use only VA search at top of screen, advocate for improvements and modernization in functionality.



# Final Layout



# Content Page



U.S. Department  
of Veterans Affairs



[SITE MAP \[A-Z\]](#)

[VA > Health Care > PTSD: National Center for PTSD > What causes PTSD? > Violence and Abuse](#)

## PTSD: National Center for PTSD

☐ What is PTSD?

☐ Who has PTSD?

☒ What causes PTSD?

War

Terrorism

Violence and Abuse

Disasters

Other Trauma

☐ What are PTSD symptoms?

☐ How do you treat PTSD?

☐ For Friends and Family

☐ For Professionals

☐ About Us

[More Health Care](#)

< PREVIOUS PAGE

CURRENT PAGE

NEXT PAGE >

### CONTENT PAGE

Lorem ipsum dolor sit amet, consectetur adipiscing elit. Aenean euismod bibendum laoreet. Proin gravida dolor sit amet lacus accumsan et viverra justo commodo. Proin sodales pulvinar tempor. Cum sociis natoque penatibus et magnis dis parturient montes, nascetur ridiculus mus. Nam fermentum, nulla luctus pharetra vulputate, felis tellus mollis orci, sed rhoncus sapien nunc eget.

PHOTO

CRISIS HOTLINE

NEXT STEPS

# IMMEDIATELY



- Do prototyping to **test IA**.
- Use **SSL** security.
- Create a **sitemap** for search crawlers.
- Include the terms '**Posttraumatic Stress Disorder**' in your page content and description.
- **Analyze search logs** to test common user language.

# MID TERM

- **Eliminate duplicate content** and streamline pages.
- Eliminate the **exit survey** pop-up.
- Reduce load times: **use web compression**, reduce number of CSS/Javascript references.
- **Consolidate the description tags** on all pages to 160 characters.
- Check content for accessibility problem areas such as **video descriptions** and **form entry tagging**.
- **Revise search behavior** allow filtering, suggestions on no results.
- Incorporate **natural language** into search functionality.

# LONG TERM



- **Avoid compartmentalization** of categories in the future.
- Integrate new content areas into existing structure.
- Keep **flattened hierarchy**.
- Reduce redundant linking within the site, instead **focus on natural and relevant links**.
- **Refine content** (with keyword density in mind).
- Build and maintain **social network presence**.
- Periodically check **search ranking**
- Adjust for current best **SEO practices**, such as using an application to check broken links and using a code validator to check for HTML errors.
- Work on **adding relevant tags** to AboutFace.

# – Q & A –

(Thank you from [emily.salinas@ubalt.edu](mailto:emily.salinas@ubalt.edu)  
and [michael.satzinger@ubalt.edu](mailto:michael.satzinger@ubalt.edu))



–APPENDIX–

# Initial IA

## **What is PTSD?**

- PTSD Basics
- Criteria for professionals

## **Who has PTSD?**

- The faces of PTSD
- PTSD in Women
- PTSD in Seniors
- PTSD in Children

## **How do you get PTSD?**

- Types of trauma

## **How do you know it's PTSD?**

- Symptoms
- Assessment for professionals

## **How might PTSD affect you?**

- Effects of PTSD
- Other reactions
- Sleep problems
- Substance abuse
- Mental health issues
- Suicide and self-harm
- Physical problems

## **How do you get help?**

- Treatment
- Self help
- Where to get help

## **Who else is affected by PTSD?**

- In the Community
- Relief workers

## **How else can I get involved with PTSD?**

- PTSD Awareness

## **Research and resources**

## **About us**

### **Main Objectives:**

- Integrating Professional/Public sections
- Reducing need for cross-referencing
- Creating a flow of deeper information down the hierarchy

# SURVEY DATA: STAGE 1

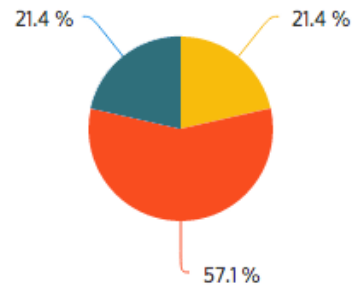
Participants: 14

## Gender



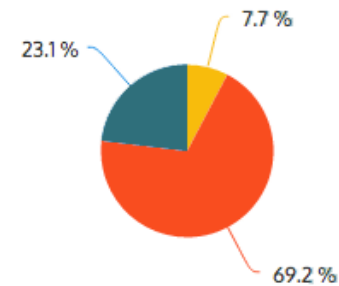
female male

## Age



18-30 31-45 46-65

## Education



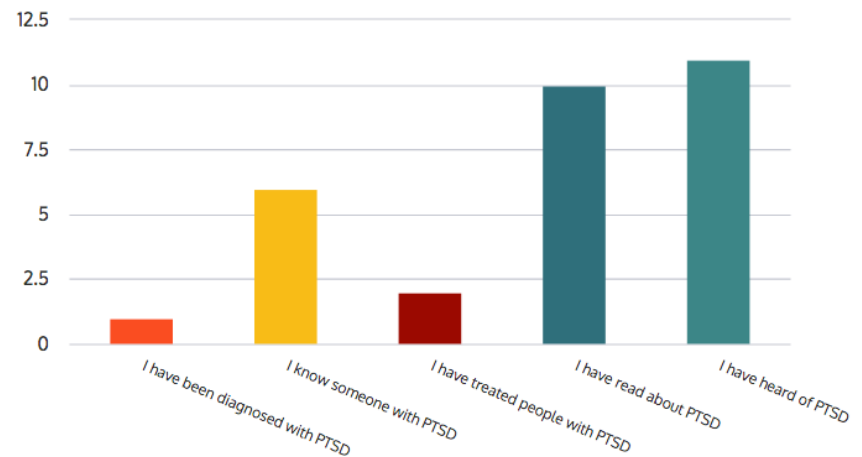
Associate's Bachelor's Graduate

## Medical Background

28.6% stated that they work in Psychology or another medical field



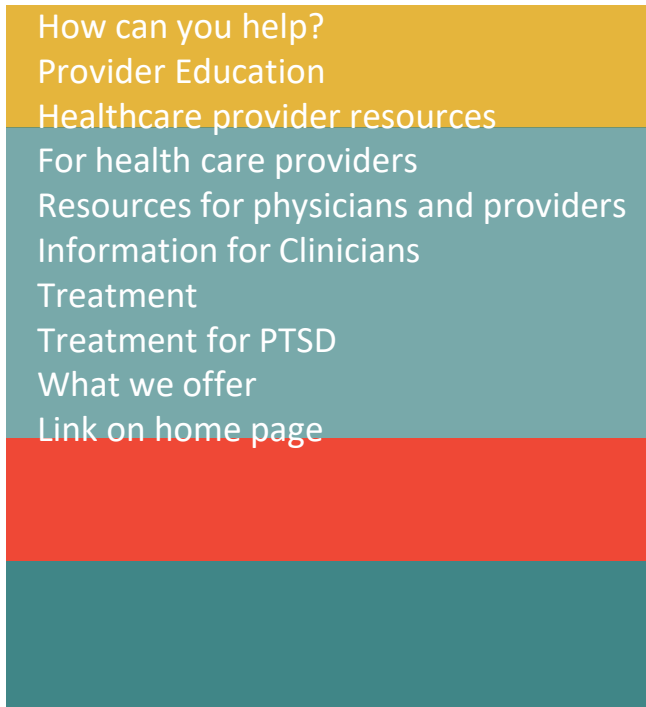
## Knowledge of PTSD



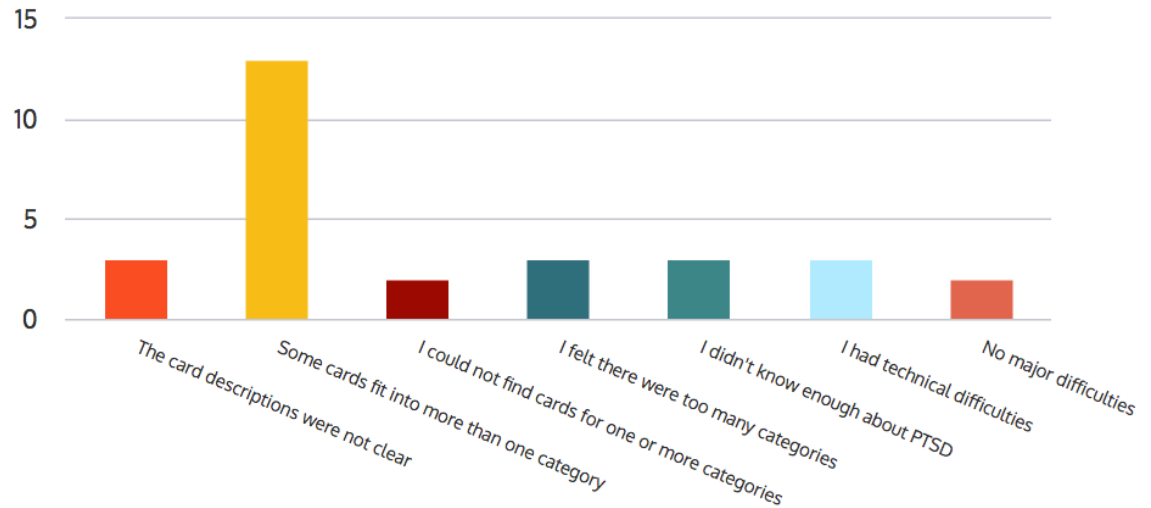
# SURVEY DATA: STAGE 1

Participants: 14

## Cards added in:



## Any difficulties with the card sorting?



# Similarity Matrix

## PTSD Basics

86 PTSD History and Overview

What is PTSD?

13 13 PTSD 101 course: Aging and PTSD

13 13 73 PTSD 101 course: Traumatic Brain Injury

6 6 66 60 PTSD 101 course: Hispanic Veterans

0 0 40 26 66 PTSD in Children and Adolescents

0 0 33 26 46 66 PTSD in Refugees

0 0 33 33 40 66 66 Traumatic Stress in Female Veterans

0 0 40 46 40 40 60 46 Journalists and PTSD

0 0 40 33 33 33 53 40 66 Aging Veterans and Posttraumatic Stress Symptoms

0 0 40 40 46 40 33 33 53 66 War on Many Fronts: African American Veterans with PTSD: for Veterans and Family (video)

0 0 40 33 53 46 26 20 33 13 33 Very Young Trauma Survivors: The Role of Attachment

0 0 20 13 26 20 20 6 33 20 26 40 Community Violence: Effects on Children and Teens

0 6 6 13 13 13 13 13 13 33 26 20 Effects of Disasters: Risk and Resilience Factors

0 0 13 26 20 6 13 20 20 20 26 26 6 46 The September 1999 Earthquake in Taiwan and Posttraumatic Stress

6 6 13 26 13 20 20 33 20 20 13 13 20 40 46 Military Sexual Trauma

0 6 20 20 20 26 26 26 13 20 33 13 13 46 26 40 Deployment Factors: Aftermath of Battle

6 6 13 13 6 20 20 26 13 6 6 20 6 46 20 40 40 Effects of Traumatic Stress after Mass Violence, Terror, or Disaster

6 6 13 6 6 6 0 13 0 6 6 20 13 6 26 6 0 20 The Relationship Between PTSD and Suicide

0 0 13 13 13 20 6 13 6 13 0 6 6 0 13 6 6 6 53 Sleep and PTSD

6 6 26 20 33 33 20 33 13 20 33 26 6 20 46 33 26 13 33 13 Mental Health Effects of Serving in Afghanistan and Iraq

6 6 6 20 13 13 20 13 13 26 33 13 0 6 26 20 20 0 13 0 33 Treatment of the Returning Iraq War Veteran

0 0 6 6 6 6 13 6 6 13 13 20 6 33 20 6 20 20 6 6 6 33 Self-Care After Disasters

0 0 0 0 6 6 0 0 0 6 6 0 0 13 6 0 6 0 0 6 0 13 20 How does the Program help providers who have treated PTSD?

6 6 0 0 0 0 0 0 0 0 0 0 0 0 6 6 0 0 0 0 6 6 0 40 Mission and Overview

0 0 0 6 0 0 0 0 6 6 6 0 0 0 13 6 0 0 0 0 6 6 0 40 80 About The National Center for PTSD

0 0 6 6 6 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 6 26 73 66 Accessibility and our Website

0 0 6 6 0 0 0 0 6 0 0 0 0 0 0 0 0 0 6 6 0 0 26 60 60 60 Contacts for the Media

Who has PTSD?

How do you get PTSD?

About us

# Similarity Matrix

PILOTS Database: Published International Literature on PTSD

Media Coverage of Traumatic Events: Research on Effects									
80	73	Treatment of Comorbid Traumatic Brain Injury and PTSD: What Have We Learned From Recent Studies? (lecture)							
73	66	66	Partners of Veterans with PTSD: Research Findings						
73	66	60	66	PTSD Research Quarterly (RQ) Newsletter					
46	40	40	46	60	Why PTSD Research Is Important				
60	53	66	46	40	40	Resources for Survivors and the Public			
66	60	60	60	46	26	53	Research Findings on PTSD and Violence		
46	40	40	53	46	33	33	66	Help Raise PTSD Awareness (PDF)	
60	53	53	46	46	26	46	46	40	Provider Education

## Research

46	46	46	40	33	13	40	40	33	86	Clinician's Guide to Medications for PTSD							
33	33	40	26	26	13	33	26	20	73	80	Sexual Trauma: Information for Women's Medical Providers						
53	53	46	53	40	13	40	46	40	73	73	60	Clinician's Guide to Medications for PTSD					
46	46	33	33	40	20	26	40	40	73	66	60	66	Working with Trauma Survivors: What Workers Need to Know				
26	26	26	13	20	13	13	13	6	53	46	53	40	53	PTSD Screening and Referral: For Health Care Providers			
33	33	40	26	26	20	20	20	13	40	40	46	46	46	53	Psychological First Aid: Field Operations Guide		
33	26	40	33	33	20	40	26	26	33	26	33	33	26	40	40	Early Mental Health Intervention for Disasters	

## Research (clinical)

6	0	13	6	13	6	20	13	6	13	6	13	13	6	13	20	40	Prolonged Exposure Therapy									
6	6	0	13	13	0	20	13	13	20	20	20	26	13	13	13	26	66	Finding a Therapist								
0	0	6	6	6	0	20	6	6	13	13	20	20	6	13	20	20	66	86	How to Talk to Your Doctor about Trauma and PTSD							
6	6	13	0	0	0	26	6	0	20	20	26	20	13	20	33	26	66	80	80	What treatment can do for you (video)						
33	33	20	20	26	13	40	26	20	33	26	13	26	20	13	6	13	53	73	66	60	VA Health Benefits					
33	33	26	33	33	6	26	40	33	33	40	40	33	26	20	20	26	40	60	53	40	60	VA PTSD Consultation Program (PDF)				

## How can I get help?

46	46	33	53	46	26	33	40	33	33	33	33	26	33	20	20	26	6	13	6	6	20	46	Handouts for Survivors (PDF)														
40	40	33	40	33	26	40	40	26	26	26	26	33	26	33	33	33	20	46	40	40	33	33	40	PTSD Coach: Mobile Self-help App													
0	0	0	6	0	0	6	6	6	0	0	13	6	0	20	26	20	40	60	66	53	40	33	6	46	Why I didn't ask for help right away (video)												
6	6	0	0	6	6	0	0	0	6	0	0	0	6	26	13	13	0	0	0	0	6	0	13	6	26	Short Form of the PTSD Checklist - Civilian Version											
6	6	6	0	0	0	6	6	0	6	13	20	6	6	40	26	26	13	6	6	13	0	13	20	26	20	66	Assessment Chart - Adult PTSD Self-Report Measures										
0	0	0	0	0	0	0	0	0	0	0	0	6	0	26	20	26	0	0	0	6	0	0	6	13	13	53	60	Symptoms of PTSD									

How do I know if I have PTSD?

## How do you know it's PTSD?

# Stage I: IA

**What is PTSD?**

**Who has PTSD?**

**How do you get PTSD?**

**How do you know it's PTSD?**

**How might PTSD affect you?**

**How do you get help?**

**Who else is affected by PTSD?**

**How else can I get involved with PTSD?**

**Research and resources**

**About us**

## **Major Findings:**

- Too much possible overlap and similarity
- People used "Research and resources" as a catch all
- Some wording needed revision for clarity
- Clinical research should have it's own place, it was very popular as a written in category

## **Decisions:**

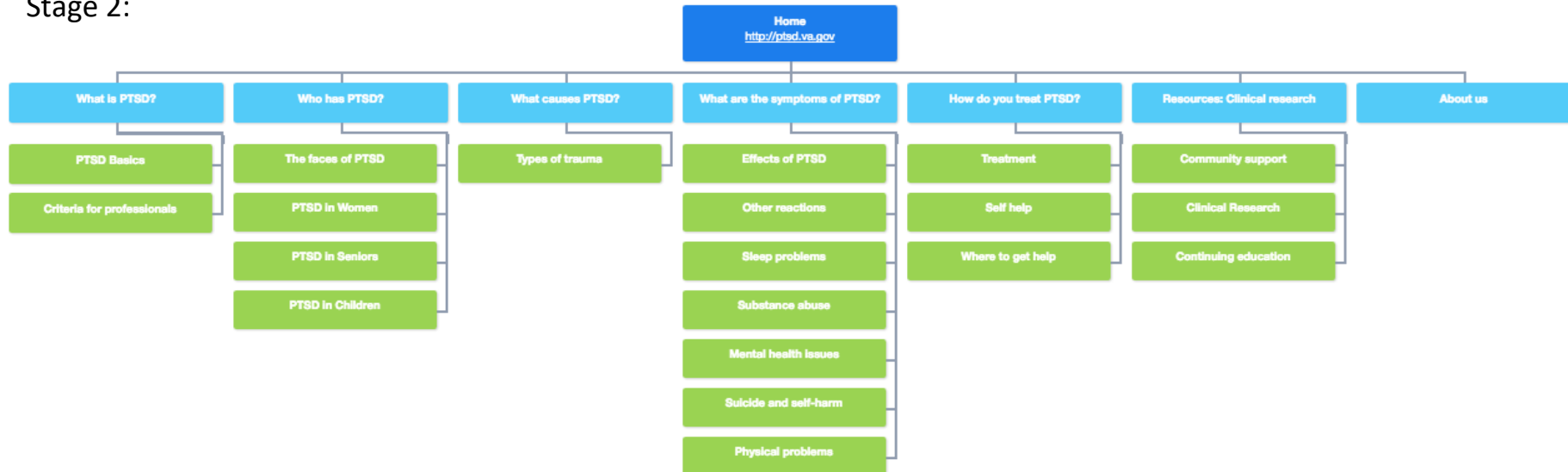
- Reduce number of categories
- Eliminate "Who else", this caused confusion
- Break out "Research and Resources" into different categories to be more specific
- All PTSD 101 Courses should be grouped together
- Change "How might you be affected?" to "what are the symptoms?"

# Sitemap Revisions

## Stage 1:



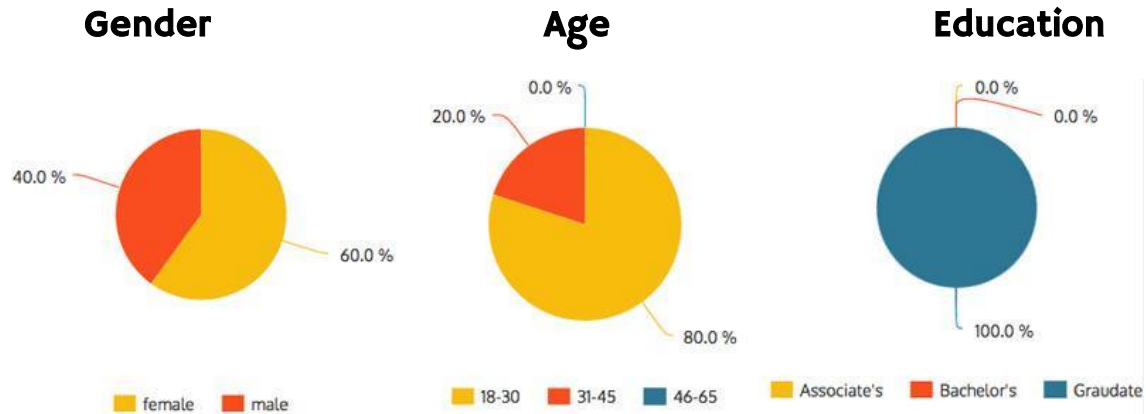
## Stage 2:



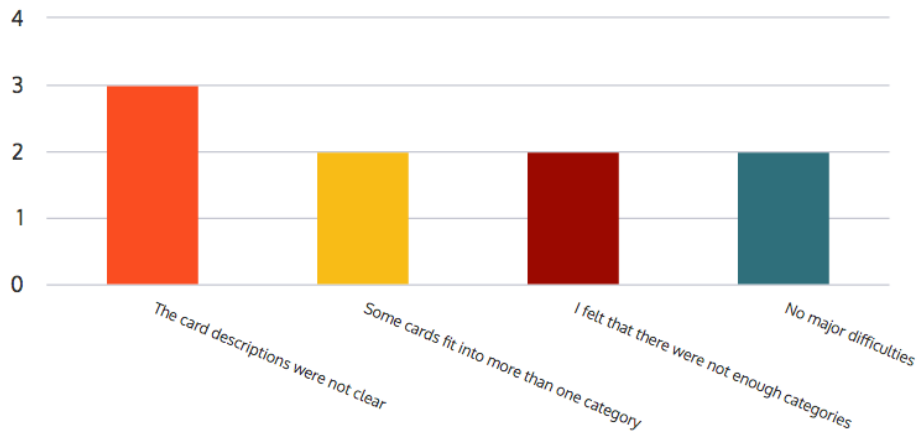


# SURVEY DATA: STAGE 2

Participants: 5



## Any difficulties with the card sorting?



# Popular Placements Matrix

Participants: 5

	What is PTSD?	What causes PTS...	What are the sym...	Who has PTSD?	How do you treat...	Resources - clinic...	Resources - com...	About us	unsorted
PTSD Basics	100%								
PTSD History and Overview	100%								
Why I didn't ask for help right awa...	40%				20%		40%		
Military Sexual Trauma		80%		20%					
Mental Health Effects of Serving in...		60%				40%			
Effects of Traumatic Stress after M...		40%				40%	20%		
Very Young Trauma Survivors: The...		40%		20%		40%			
Community Violence: Effects on C...		40%		20%		20%	20%		
Symptoms of PTSD			100%						
Short Form of the PTSD Checklist ...			80%				20%		
Sleep and PTSD		20%	60%			20%			
The Relationship Between PTSD a...	20%	20%	60%						
Assessment Chart - Adult PTSD Se...			40%	20%			40%		
PTSD Screening and Referral: For ...			40%			40%	20%		
Journalists and PTSD				100%					
PTSD in Refugees				100%					
PTSD in Children and Adolescents				100%					
War on Many Fronts: African Amer...				60%		20%	20%		
Aging Veterans and Posttraumatic...			40%	40%			20%		
Traumatic Stress in Female Vetera...		40%	20%	40%					
What treatment can do for you (vid...					100%				
Early Mental Health Intervention fo...					80%	20%			
Treatment of the Returning Iraq W...				20%	80%				
Prolonged Exposure Therapy					80%	20%			
How to Talk to Your Doctor about ...					60%		40%		
Partners of Veterans with PTSD: R...						100%			
PILOTS Database: Published Inter...						100%			

# Popular Placements Matrix

Participants: 5

Research Findings on PTSD and V...					100%			
The September 1999 Earthquake ...			20%		80%			
Why PTSD Research Is Important	20%				80%			
Treatment of Comorbid Traumatic ...				20%	80%			
PTSD Research Quarterly (RQ) Ne...					80%	20%		
Clinician's Guide to Medications fo...				20%	80%			
Clinician's Guide to Medications fo...				40%	60%			
Media Coverage of Traumatic Eve...		20%			60%		20%	
Sexual Trauma: Information for Wo...				20%	60%	20%		
Working with Trauma Survivors: W...				20%	60%	20%		
Provider Education				20%	40%	20%	20%	
Effects of Disasters: Risk and Resil...		20%	20%	20%	40%			
Psychological First Aid: Field Oper...				20%	40%	40%		
Deployment Factors: Aftermath of ...		20%	20%	20%	40%			
Resources for Survivors and the P...						100%		
Handouts for Survivors (PDF)				20%		80%		
Help Raise PTSD Awareness (PDF)				20%		80%		
VA PTSD Consultation Program (P...					20%	80%		
VA Health Benefits				20%		80%		
Finding a Therapist				20%		80%		
Self-Care After Disasters				20%		80%		
PTSD Coach: Mobile Self-help App				40%		60%		
Accessibility and our Website							100%	
About The National Center for PTS...							100%	
Contacts for the Media							100%	
Mission and Overview							100%	
How does the Program help provi...				20%			80%	

# Stage 2: IA

**What is PTSD?**

**Who has PTSD?**

**What causes PTSD?**

**What are the symptoms of PTSD?**

**How do you treat PTSD?**

**Resources**

**Clinical Research**

**Continuing Education**

**Community Support**

**About us**

## **Major Findings:**

- Overall, more of a consensus
- Less categories works better
- Continuing Education doesn't belong with the others
- Resources may not be a descriptive title

## **Decisions:**

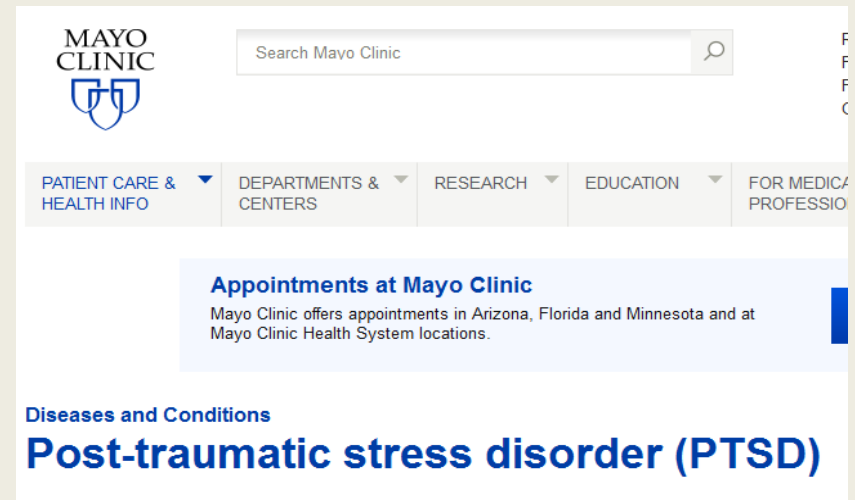
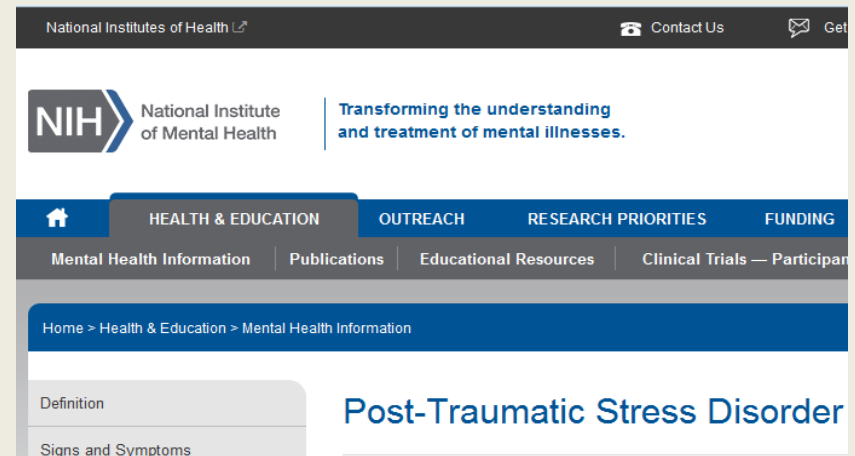
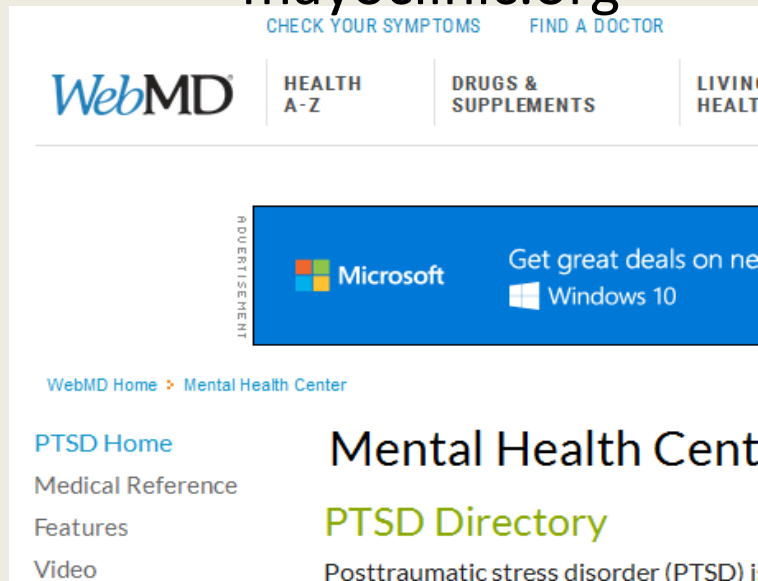
- Bring back the 'For Professionals' section
- Create a section for Friends and Family

ptsd.va.gov



webmd.com





mayoclinic.org



# Business Strategy

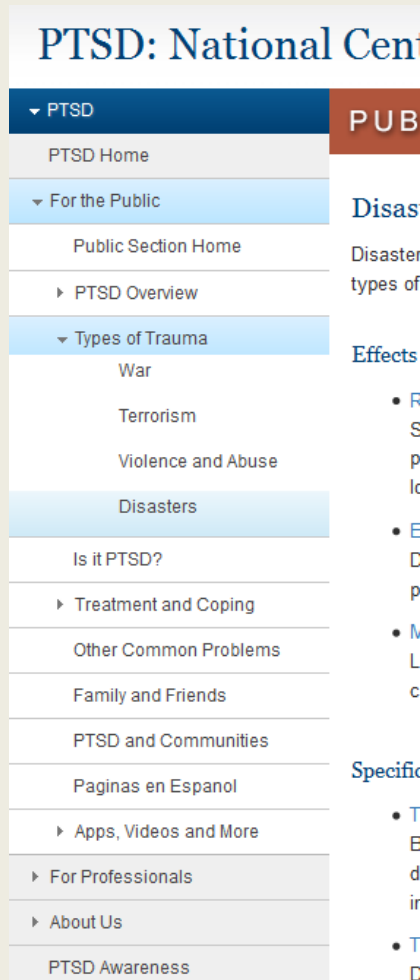
	ptsd.va.gov	nimh.nih.gov	mayoclinic.org	webmd.com
<b>Mission</b>	The mission of the National Center for PTSD is to <b>advance the clinical care and social welfare of America's Veterans and others</b> who have experienced trauma, or who suffer from PTSD, through research, education, and training in the science, diagnosis, and treatment of PTSD and stress-related disorders.	The mission of NIMH is to <b>transform the understanding and treatment of mental illnesses</b> through basic and clinical research, paving the way for prevention, recovery, and cure.	To inspire hope and contribute to health and well-being by <b>providing the best care to every patient</b> through integrated clinical practice, education and research.	WebMD has created an organization that we believe fulfills the promise of health information on the Internet. <b>We provide credible information, supportive communities, and in-depth reference material about health subjects that matter to you.</b> We are a source for original and timely health information as well as material from well known content providers.
<b>Funding</b>	Government funded	Government funded	Funded by hospital and school activities as well as contributions	Funded by advertisers, paid services, third-party contribution, and sponsors

# Audience

		ptsd.va.gov	nimh.nih.gov	mayoclinic.org	webmd.com
	Has pages for general public	Yes	Yes	Yes	Yes
	Has pages for people with PTSD	Yes	No has off site links	Yes	Only accessible through search
	Has pages for professionals treating PTSD	Yes	No has off site links	No	Only accessible through search
	Has pages for people supporting others with PTSD	Yes	Yes	Yes	Only accessible through search
	Has pages for military personnel	Yes	No	One blog post	Only accessible through search

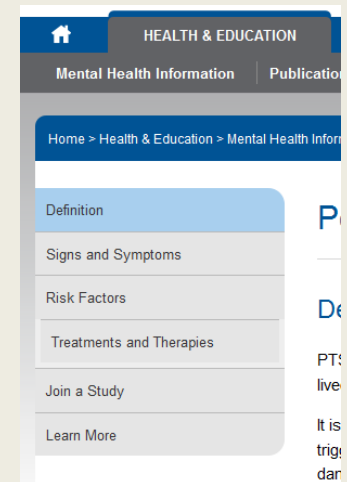
# Information Architecture

ptsd.va.gov



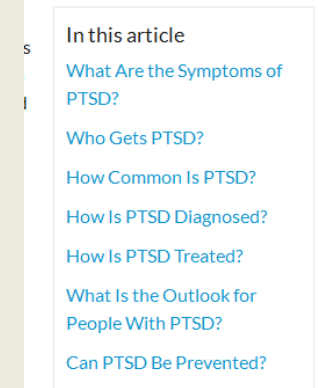
mayoclinic.org

nimh.nih.gov



webmd.com

Post-Traumatic Stress Disorder





# Information Architecture

	ptsd.va.gov	nimh.nih.gov	mayoclinic.org	webmd.com
<b>Highest levels of hierarchy</b>	PTSD Home For the Public For Professionals About Us PTSD Awareness PTSD Consultation More Health Care	Definition Signs and Symptoms Risk Factors Treatments and Therapies Join a Study Learn More	Definition Symptoms Causes Risk factors Complications Preparing for your appointment Tests and diagnosis Treatments and drugs Coping and support Prevention	What Is Post-Traumatic Stress Disorder? Causes of Post-Traumatic Stress Disorder Symptoms of Post-Traumatic Stress Disorder When to Seek Medical Care for PTSD Children and PTSD Medical Care for PTSD Prevention of PTSD For More Information
<b>Notes</b>	Navigation is simple but lacks a consistent categorization.	Simple categories Very broad	Medical-focused, treats PTSD like any medical illness or condition.	Seems redundant to have 2 'Medical Care' labels

# Navigation

	ptsd.va.gov	nimh.nih.gov	mayoclinic.org	webmd.com
<b>Levels of content</b>	Up to 4 levels of hierarchy	Simple, one page scroll represents limited content.	Dual navigation.  Secondary tabs offer limited content.	Sticky navigation for PTSD section located in non-typical area of web page.  Gets lost in clutter.
<b>Breadcrumbs?</b>	Yes	Incomplete, but uses 'sticky' navigation	Incomplete, uses anchor links for sections	Incomplete, shows general category
<b>Clarity and user friendliness</b>	Categories are not consistent groupings.  Overshadowed by main VA navigation.	Clear consistent categories, but uses external links for content beyond a basic synopsis.	Main navigation clear, represents specific order for viewing content.  Secondary navigation gets lost to main navigation.	Confusing. Does have extra targeted links at the bottom of the page, yet links are missing from PTSD link directory. Uses ads.

# Features

	ptsd.va.gov	nimh.nih.gov	mayoclinic.org	webmd.com
<b>Internal Search</b>	<p>Two for NCPTSD</p> <p>One for VA domain</p> <p>NCPTSD forces sectional search</p> <p>Has advanced search</p>	<p>One search for entire NIMH domain</p> <p>Has advanced search</p>	<p>One search for entire mayo clinic domain</p> <p>No advanced search</p>	<p>One search for entire webMD domain</p> <p>No advanced search</p>
<b>Search results</b>	Single list of results for selected category.	Single list of all results.	Search results in google format.	Search results can be filtered by topic.
<b>Mobile Responsiveness</b>	Good, responsive design.	Good, responsive design.	Good, responsive for mobile.	Separate mobile site, does not maintain navigation menus.