We need more coverage, stat! Classroom experience with the Software ICU

Philip Johnson
Shaoxuan Zhang
Collaborative Software Development Laboratory
Department of Information and Computer Sciences
University of Hawaii

Abstract

For empirical software engineering to reach its fullest potential, we must develop effective, experiential approaches to learning about it in a classroom setting. In this paper, we report on a case study involving a new approach to classroom-based empirical software engineering called the "Software ICU". In this approach, students learn about nine empirical project "vital signs" and use the Hackystat Framework to put their projects into a virtual "intensive care unit" where these vital signs can be assessed and monitored. We used both questionnaire and log data to gain insight into the strengths and weaknesses of this approach. Our evaluation provides both quantitative and qualitative evidence concerning the overhead of the system; the relative utility of different vital signs; the frequency of use; and the perceived appropriateness outside of the classroom setting. In addition to benefits, we found evidence of measurement dysfunction induced directly by the presence of the Software ICU. We compare these results to case studies we performed in 2003 and 2006 using the Hackystat Framework but not the Software ICU. We use these findings to orient future research on empirical software engineering both inside and outside of the classroom.

1. Introduction

Introducing students to software measurement in particular and empirical software engineering in general is a challenging task.

On the one hand, if one merely lectures about the literature, much of the subtleties involved in the practice of collecting and analyzing process and product data are lost. An overly superficial presentation can lead students to believe that empirical software engineering is "easy". For example, simply (1) collect complexity; (2) set a threshold using

a published reference such as [4], and (3) require developers to "fix" any classes that exceed the established threshold. The problem is that individual metrics never capture the spectrum of trade-offs implicit in a design. For example, a natural result of performance optimization on a section of code is an increase in complexity (and coupling). Measurements on such classes might exceed thresholds for important reasons. Without such real world grounding, such students could grow up to be the stereotypical process improvement managers who impose "best practices" for measurement and analysis without understanding the potential for misinterpretation and, ultimately, measurement dysfunction [1].

On the other hand, requiring students to gather and analyze measurements themselves can potentially lead students to believe that empirical software engineering is too "hard". For example, while the Personal Software Process [7] provides a well structured approach to data gathering and analysis by students, independent research reveals a number of problems including high overhead [9], data quality [11], and low adoption [3]. Students introduced to metrics via the PSP (or its successor, the Team Software Process) can easily form the impression that empirical approaches impose too much overhead for (at the very least) "agile" software development situations.

For the past five years, one research thrust of the Hack-ystat Framework has been to explore the issues involved in teaching empirical software engineering in a classroom setting [12, 10]. Hackystat provides a pedagogical middle ground between excessively high overhead approaches like the PSP/TSP and excessively low overhead approaches like literature review. Extensive automation of both data collection and analysis lowers the overhead required to give students practical experience with measurement, while creating opportunities to understand some of the nuances involved with analysis, presentation, and interpretation.

In this paper, we present the results of a case study ex-

periment we performed in the Fall of 2008 in which we used the metaphor of a medical intensive care unit (ICU) to explain and motivate the use of empirical software engineering. We built a new user interface for empirical data called the "Software ICU" that is similar in many ways to a medical ICU monitoring device. Just as a medical ICU automatically gathers vital signs of patients such as heart rate and respiration in order to detect changes in health, our software ICU automatically monitors the process and product "vital signs" of its software "patients"—in this case, the student teams and the projects they were developing. Just as a medical ICU generates alarms when a vital sign falls outside a established range for normalcy, the software ICU can color metrics as red, yellow, or green to indicate problematic, unstable, or healthy software vital signs.

We collected two types of data: an on-line questionnaire that the students filled out at the end of the study, and system-generated log data that collected all student interactions with the Software ICU. Our results provide evidence that, in general, the Software ICU is the most effective Hackystat-based approach to teaching students about process and product measurement. Student feedback indicates that the overhead involved in data collection and analysis was acceptably low, and almost all of the students found the data to be useful, although students found some "vital signs" to be more useful than others. Most students believed that the Software ICU would be feasible for use in professional situations. The log data provided independent confirmation of the usage of the system, as the majority of students invoked the Software ICU from 20 to 40 times per week during the course of the study. On the negative side, we found direct evidence of measurement dysfunction in one student, who was motivated by the system to engage in behavior counter-productive to the team.

The remainder of the paper is organized as follows. Section 2 presents related work. Section 3 provides a brief overview of the system. Section 4 presents the case study design and its results, followed by a discussion of these results in Section 5. Section 6 summarizes the contributions of this research and some proposed future directions.

2. Related Work

Perhaps the most extensively studied curriculum for measurement-based software engineering is the Personal Software Process [7] and the Team Software Process [8]. Both of these approaches require students to develop a series of software projects, typically six to eight during a single semester. Both process and product measures are gathered about each project, and the measurements become increasingly detailed as the semester proceeds. After the first three projects are completed, the students can use the completed projects as historical data to support quality improve-

ment (by identifying repeated types of defects) and estimation (through simple linear regression). The PSP/TSP methods enjoy strong support from the Software Engineering Institute, and they have a published a number of case studies indicating success in a classroom setting.

Conn developed a metrics-based software engineering course called the IS Integrated Capstone Project [5]. The metrics were closely aligned with the PSP/TSP format, though some of the process constraints were relaxed.

PSP/TSP approaches require a significant amount of manual data collection and analysis due to the nature of the analyses of interest. In prior research [13], we implemented extensive tool support for PSP/TSP style of data collection and analysis, but still found the overhead to be substantial [9]. In contrast, the Software ICU provides significantly more automation of data collection and analysis, but focuses on different kinds of data collection and analyses than the TSP/PSP.

Robillard designed a project-based course in which students were required to fill out logs that specified the time spent on various activities [17]. However, no automation of data collection was supported in this approach.

Two recent research efforts focus on automated data collection to support introductory programming courses. Project ClockIt provides automated facilities for collection of time, compilation attempts and successes, and size in lines of code based upon a custom plug-in to the BlueJ IDE [16, 2]. Retina collects similar data on beginning programmers, although it is enhanced with recommendation and suggestion features [15]. Retina can notice, for example, when a student is getting many more errors per compilation than other students in the class, and recommend that the student might want to break the work down into smaller pieces.

Project ClockIt and Retina are designed around the needs of introductory programming classes, where students typically work alone, do not use a wide range of development tools, and a significant amount of energy is devoted to obtaining a syntactically correct program. The Software ICU is oriented to the needs of advanced undergraduate and graduate level software engineering courses, where team dynamics become significant, compilation is no longer a significant issue, and a much wider range of tools are employed during the course of development.

There are a great number of commercial toolkits that provide "dashboards" for software project data, such as the the LightHouse project management system, the ProjectManager.com dashboard, the SPMN Project Control Panel, and so forth. The Software ICU is, of course, one example of a project dashboard. However, it tends to differ from commercial approaches with respect to its metrics, user interface, adherence to the medical ICU metaphor, application to a classroom setting, automated data collection, and

open source development and distribution. Most importantly, commercial dashboard organizations have not, to our knowledge, published negative results regarding their use. Our research contributes new understanding by providing evidence not only regarding the benefits, but also regarding the potential negative impact of this class of systems.

The metaphor of "software health" is not unique to this research. Organizations concerned with expensive, life-critical hardware-software systems have long been concerned with assessing their health at run-time and potentially recovering from unhealthy states [6, 18]. Our approach focuses on the health of the system during development, not execution.

The research presented in this paper is the third case study we have performed on measurement collection and analysis in a classroom setting using Hackystat. In 2003, we performed our first case study in which we used an early version of Hackystat to automate data collection and analysis and used a survey to assess student reactions [12]. In this study, we found that students encountered significant problems during the installation of the system, that analyses were somewhat useful, and that privacy and platform issues were thought to be significant issues in a professional setting.

In 2006, we performed a partial replication of the first case study [10]. It was a partial replication because the Hackystat system had significantly evolved since 2003 and so we changed some of the evaluation questions to better suit the current needs. On the positive side, students reported less problems during installation, reflecting the work we had done since 2003 on a client-side installer. On the negative side, the much larger set of analyses available in 2006 impacted on the usability of the system: students were more confused about which analyses to use and how to interpret the results.

For these and other reasons, we decided in 2007 to begin a major re-implementation of Hackystat as a service-oriented architecture [14]. The new system provided us with the ability to redesign the user interface to Hackystat. Instead of a single, monolithic user interface with a predefined look and feel, the new architecture allowed us to implement multiple, special purpose interfaces using a wide variety of UI technologies.

In 2008, we finished the re-implementation of the basic facilities as well as a new approach to multi-project metrics visualization called Portfolio Analysis. In Fall of 2008, we performed a third case study. This time, we used the metaphor of the "Software ICU", as discussed next.

3. From Medical to Software ICU

Medical intensive care units feature automatic and continuous monitoring of patient vital signs. The four funda-

mental medical vital signs are temperature, heart rate, blood pressure and respiration. Other vital signs may be monitored depending upon the particulars of a patient condition.



Figure 1. An example Medical ICU monitoring device

Figure 1 illustrates a sample medical ICU display unit. For each of the four fundamental vital signs, the interface shows both its current numeric value as well as a graph showing its recent history.

Each of these vital signs has a "normal range of behavior", and the monitoring unit can raise an alarm when any of the patient's vital signs departs from its normal range of behavior.

Vital signs are interesting because: (a) in a healthy patient, they are normal or improving; (b) change in one vital sign may or may not be significant; (c) change in multiple vital signs is almost certainly significant, particularly if more than one are outside their normal range.

Translating medical ICU practices to the context of a software engineering class required us to redefine health, vital signs, normal range and the ICU monitoring user interface into terms useful to students and their software development projects.

We defined a healthy development project as satisfying three high-level characteristics: high efficiency (software development proceeds "as fast as possible, but no faster"); high effectiveness (effort is focused on the most important issues, with minimal rework); and high quality (software satisfies user needs; software can be easily installed, adapted, and maintained).

We then presented a set of simple practices that, if followed, we claimed would improve the health of their projects. These included: everyone works consistently; everyone contributes equally; code is committed consistently; progress is regular; quality remains high; no last minute rush to finish. These development practices are analogous to life-style behaviors like "eat right", "get enough sleep"

and "exercise regularly" that generally facilitate (but, of course, do not guarantee) good health in a patient.

Next, we presented nine software vital signs: coverage, complexity, coupling, churn, builds, commits, unit tests, size, and dev time. Through a combination of Hackystat sensors and the Hudson continuous integration system, these nine vital signs could be automatically and continuously collected for their projects.

For each software vital sign, we then presented its normal range of behavior. For example, for the coupling vital sign to be considered healthy, its current value should be above 90% and the trend in coverage over time should be stable or increasing. For the commit vital sign to be considered normal, at least 50% of the team members should have committed, and there should be commits on at least 50% of the days in the project interval. For one of the vital signs, size, we stated that there is no simple way of assessing its normal range of behavior, though it still provides some value in understanding project health.

Unlike a medical ICU, where there is literally hundreds of years of medical research establishing both the importance of the four fundamental vital signs and their normal range of behaviors, no such consensus exists in software engineering on what would constitute "fundamental" software vital signs or their normal range of behavior. Thus, our selection of software vital signs and their normal range of behaviors are actually research hypotheses. We designed the case study to elicit evidence regarding the appropriateness of these vital signs and our proposed normal range of behaviors.

Finally, we presented the user interface to the Software ICU. A portion of this user interface appears in Figure 2.

Each row in the Software ICU interface provides information about one software project. Each column presents information about one vital sign. Similar to the medical ICU, the software ICU presents both the most recent numeric value as well as the recent trend in value for each vital sign.

We decided to represent normal range in behavior by independently coloring the trend line and the most recent value as green, yellow, or red depending upon whether the value was healthy, unstable, or unhealthy. We did not implement alarms, such as emails or text messages to team members if a vital sign turns red, although this is a possible future extension. Instead, it was the responsibility of the students to invoke the software ICU regularly in order to monitor the health of their project. During the case study, we collected log data to gather evidence about whether they in fact did this monitoring.

To help make the vital sign actionable, the Software ICU supports drill down for trend data. Figure 3 shows one such drill-down that reveals that only one of the four members of the project was doing the vast majority of commits.

The measurements underlying the Software ICU were collected automatically through two mechanisms. First, the students installed Hackystat sensors into their IDE (Eclipse) and build system (Ant) which sent process metrics regarding their development activities. Second, their projects used the Hudson system to perform continuous integration, which meant that after each commit of their code, the system would be automatically built and tested. The Hudson system was also configured to automatically gather certain product metrics such as coverage, coupling, and complexity.

4. Evaluation

Our case study was focused on addressing the following research questions:

- What are the strengths and weaknesses of the medical ICU metaphor for teaching software measurement in a classroom setting?
- How appropriate were our choices of "vital signs"?
- How effective were our algorithms for coloring the vital signs?
- How does this approach compare to previous uses of Hackystat to teach software metrics in a classroom setting?

The study involved 18 students from a senior-level undergraduate software engineering course at the University of Hawaii from Fall, 2008. This course teaches software engineering in the context of open source development using the Java programming language. The first several weeks are concerned with basic tools and technologies, including interactive development environments, coding standards, static analysis tools for quality assurance, build systems, configuration management, and software review. The course taught these concepts in the context of a semester project, which in this semester was a web application for automated tracking and notification of library book due dates. We introduced the Software ICU during the final four weeks of the semester, and the students used it for two increments of development.

During the final week of the semester, we made available to them an on-line survey containing 17 questions. These questions asked the students their opinions regarding the overhead involved with installing sensors, problems they encountered, frequency of use of the system, the vital signs they found useful, and the utility of the system and its appropriateness for an industrial setting. A companion technical report to this paper provides the full text of the survey [19].

Project (Members)	Coverage	Complexity	Coupling	Churn	Size(LOC)	DevTime	Commit	Build	Test
DueDates-Polu (5)	63.0	1.6	6.9	835.0	3497.0		21.0	42.0	
duedates-ahinahina (5)	III	1111111 1.5	7.9	1321.0	3252.0	25.2	59.0	194.0	274.0
duedates-akala (5)		1.4	8.2	48.0	4616.0	1111 1.9			40.0
duedates-omaomao (5)	111111 64.1	1.2	6.2	1 1566.0	5597.0	22.3	L.I 59.0	230.0	507.0
duedates-ulaula (4)	1111111 9 0.1	1.5	7.8	1071.0	5416.0	 18.5	100-100 47.0	116.0	_li il_ 475.0

Figure 2. An example Software ICU display

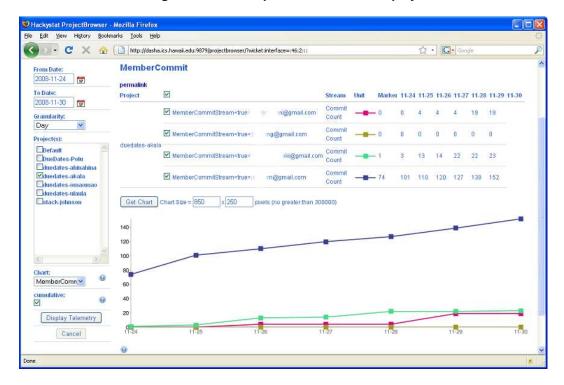


Figure 3. A drill-down showing commit telemetry

Students picked a piece of paper from a hat which contained a random six character ID string. They provided their chosen ID string and their name to a graduate student researcher while the instructor was out of the room. Students used this ID to identify themselves when filling out the on-line questionnaire. They were told that the instructor for the class would not know their responses, but that the graduate student would use the ID on the completed questionnaires to provide the instructor with a list of students who had completed the questionnaire. All students completing the questionnaire would receive extra credit for participation. This approach incentivized participation, provided some level of anonymity to the students, prevented non-students from completing the survey, prevented multiple responses by a single student, and allowed the graduate student to compare the log data for that student to their survey responses in order to cross-validate some of their answers. All but one of the students in the class completed the questionnaire.

For complete details on the responses and our analysis of the results, we refer you to the companion technical report [19]. Space limitations require us to present only selected findings.

4.1. Overhead of installation and use

Automated collection of process and product data cannot be totally free: there is some effort required to download, install, and configure the sensors responsible for monitoring developer behavior and the state of the system. The first seven questions gathered data about the perceived overhead of sensor installation and use, as well as requests for details on problems experienced. The data indicates that Eclipse sensor installation was very easy for almost all of the students, while installation of sensors based on the Ant build tool were somewhat more complicated. The most problem-

atic sensor for students to use successfully was the sensor for Subversion. Overhead of use was mixed: one response was "The sensors ran automatically and it was fast with sending the data," while another was "Sending sensor data was often quite slow."

4.2. Privacy

One important impact of the Software ICU is an increase in transparency: the Software ICU makes it very clear when one or more members of a team are not contributing. To find out their views on this issue, we asked the students how they felt about sharing their software development data with other members of the class. Fifteen out of eighteen responses were generally positive about this aspect, with comments such as, "I had no problem with this, and it encouraged me to be aware of my time management and coding style". One student responded somewhat ironically: "Did not really like it because it is showing my programming habits, like starting on a project in the last couple of days." The most positive response included the following: "All group projects in all schools (e.g. Architecture) should be required to use such a system." On the other hand, the most negative response included this disturbing commentary: "Actually Hackystat (or hacky-stalk as what my teammates and I called it) caused a lot of arguments and trash talk. Some guys were more concerned about collecting stats on Hackystat than actually finishing the project."

4.3. Frequency of use

Two questions asked students to provide a rough sense for how frequently they used the Software ICU analysis as well as the associated Telemetry drill-down. One student said they used it only once a week, while the remainder were split roughly evenly between "2-3 times a week" and "every day or more". We were able to corroborate the students self-reported frequency of use by examining the log data. The log data also revealed that Telemetry was primarily used to look at member-level data; in other words, while the Software ICU chart would show only aggregate levels, the Telemetry would show trends on a per-member basis.

4.4. Vital signs

The Software ICU provided data on nine vital signs, and one question listed them and requested that students check all of them that they found useful. The DevTime vital sign was checked by every single respondent, and the Coverage vital sign was checked by all but one. The remaining vital signs that more than half of the students found useful were: Commit, Test, Build, Churn, and Complexity. Two vital

signs were found useful by less than half of the respondents: Coupling and Size.

One of our central research questions concerned the effectiveness of our colorization scheme for vital signs, so we asked students whether they felt the coloring of vital signs accurately reflected their project's health. Ten of the students responded affirmatively, four of the students responded negatively, and four effectively responded with "it depends". Some of the responses revealed insight into the limitations of metrics, such as "I felt most of the colors accurately represented the health of the project. For the coverage data, since we can write test cases just to increase the [percentage], we cannot assume that the project is in a healthy condition even if [coverage is green]. However, I think this is not a problem of Hackystat." Another respondent wrote: "The ICU was accurate with our project because it showed drastic spikes in all signs. This reflects our project in poor health." One of the negative responses included comments on how pursuing high coverage as an end in itself could be a waste of time, that DevTime does not measure the time spent reading a book, and that complexity and coupling are hard to evaluate.

Even if the vital sign colors were accurate, there is still the question of whether the Software ICU provides actionable information. To assess this, we asked the students if they were able to use the Software ICU to improve their software's quality and/or their team's process. 14 students responded affirmatively, 2 students said it did not, and 1 student was not sure. Many of the responses indicated that the member-level drill downs helped in project management, such as "We can check how other members are doing for the project through the Software ICU and this helps a lot especially when we are working on the team project.". Another student wrote, "I think for sure the Software ICU improves team process. More than just keeping people 'in check' when grades are at stake, it provides an accurate way to assess what's being done and by whom. Our team got a lot out of checking up on the software ICU and assessing our team process. It seemed to get better over time.". Another related response was "The amount of activity helped us identify who was falling behind. Without offending our members by outrageously claiming their not working, we could tell by the sensors. Members can be more self-critical by looking at their individual data compared to the groups."

There were also responses that indicated that other, product-focused vital signs were helpful, such as, "By targeting coverage, dev time, coupling, and complexity, my team was able to improve all these into areas that were acceptable to us." Another student wrote, "Our project ICU definitely described our lacking and late attempt to improve coverage. Due to the ICU, we were able to distinguish this fact quick and easy."

On the other hand, a few students did not find the Soft-

ware ICU to be helpful. One student wrote, "Coverage: already aware from Emma. DevTime, Commit, Build, Test: either team members did not look at the statistics, or they didn't care, because their habits did not change much. Others: not much we could do about the other statistics", and another wrote, "I feel that the data for Hackystat is more something to look at out of curiosity rather than something to determine how well a project's status is because it's hard to base a project's health based on numbers alone and it might put unrealistic pressures on the team to make the project healthy for Hackystat when they can better spend their time developing instead."

4.5. Professional settings

The final two questions asked students whether they thought this system would be feasible in a professional setting. While students are clearly not the ideal demographic to query about professional environments, we believe the question provides an additional triangulation point regarding their views about the kinds of data collected and analyzed by the system. Fourteen out of the eighteen students responded that they felt Hackystat was either "very" or "somewhat" feasible, with the remaining four having a neutral or negative view.

Several of the replies focused on how it could be useful as a management tool: "I think it's good to have this in a professional environment, cause the employer or client can check on how the progress of the program is going. With out having to make so much visits or hovering over workers." Another wrote, "I could see project managers wanting to have Hackystat data to evaluate everyone's input into the project, as well as the health of the project. Hackystat, I think, is perfect for new open source projects if releases are made early and often. It could be essential to seeing the overall health of the project."

On the other hand, one student cautioned, "Overall, I feel like Hackystat would be an interesting tool to gather data to look at for curiosity's sake from time to time, but it should not be used as a basis for determining a project's health or to determine something such as member contribution. The sensors can only gather information from a few sources and these readings cannot account for a person's full contributions to a project. As for determining a project's health, I do not believe the sensor readings can provide an accurate measurement because the sensors can only measure numbers based on algorithms, but it takes a person to really determine how good the code is."

5. Discussion

The preceding section presented our results; we now provide our interpretation, beginning with the limitations of

this study.

5.1. Limitations

Clearly, an important limitation of this study involves the small sample size (18), relatively homogeneous population (University of Hawaii seniors in Computer Science), short duration (four weeks), and small project size (around 3,000 LOC). This severely limits the external validity of this study; we would not expect a replication of this study in a different site and/or with different size teams or projects to generate the same results.

Fortunately, the goals of this case study are not compromised by these limitations. As the Software ICU is a new approach to introducing empirical software engineering in a classroom setting, the small scale nature of this study is a research strength: it allowed us to gather a significant amount of useful data in a short period of time regarding our research questions that provide useful direction for our future research efforts in this area.

Some readers may be surprised that we did not make more use of statistics in our presentation of the results. For example, we could have truthfully stated, "94% of the students found Coverage to be a useful vital sign", or "Installation of the Eclipse sensor was found to be easy, with an average score of 4.1 on a scale of 1 to 5". While correct, we do not believe such statements are useful. Instead, we provide the numerical counts for the various responses along with informative student comments that we hope will provide useful insight into the underlying classes of issues that must be addressed further in this area of research.

5.2. Usability issues

This study, like the two that preceded it, revealed insights into how to improve the usability of the system. Students encountered difficulties installing the sensors; indeed, they appear to have had more difficulties this year than they did in the 2006 case study. This is almost certainly due to the fact that in 2006, Hackystat provided a client-side installer package for sensors which is not yet available in the current version of the system.

A second usability problem for students concerned the documentation. The current version of Hackystat is a service-oriented architecture, which results in reduced coupling among components. This is generally a good thing with respect to system structure, but as we have discovered, it is not good with respect to documentation! Students found it troublesome that the documentation regarding the use of the system is spread out among multiple sites, and that there is no consolidated location containing all of the relevant documentation on the use of the system.

The Software ICU appears to overcome a significant usability issue present in prior versions of the system. Previously, the principal measurement interface was telemetry. Fluctuations in metric levels revealed by telemetry could confuse students, leading them to question how to usefully interpret product and process data. In the 2006 evaluation, one student wrote, "It's very difficult to tell what is going on from the data. [...] Basically we just look at the pretty squiggles and say, 'Gee, wow. Uh, this looks like we're doing a bang-up job on unit-test driven design.' Given the wild variation in coding styles and tools, one person may look dreadful on one graph, but may appear to be the group leader on another graph." The Software ICU adds an interpretive layer on top of telemetry in which the trends are "smoothed out" using sparklines and colored red, yellow, or green in order to help focus student attention on a subset of measures. With the Software ICU, students could effectively "ignore" the trends colored green and only drill down to the telemetry for vital signs colored yellow or red. Of course, a resulting danger is an overly lenient interpretation scheme that colors a measure green when it should be yellow or red.

5.3. Vital sign configuration

As indicated above, a key issue for the usability and effectiveness of the Software ICU is correct configuration, such that measures are green if and only if they are "healthy", and red if and only if they are "unhealthy". If a measure is configured too leniently, such that it is green "too often", then project members will tend to miss opportunities to use this measure to improve their development processes and products. On the other hand, if a measure is configured to be "red" too often, then students will likely view the measure as nothing more than "pretty squiggles", as so eloquently characterized by the student from 2006.

In general, we do not believe that any of our vital signs have some "absolute" correct configuration that is completely independent of the project and team structure. To support customization, the Software ICU interface has a configuration panel, a portion of which is illustrated in Figure 4. First, each vital sign can be enabled or disabled, controlling its appearance in the Software ICU analysis. If a project does not collect Complexity data, for example, they can remove this vital sign from view. Second, even if a vital sign is displayed, it is possible to disable the application of an interpretation rule. Figure 4 shows this for the Size vital sign: it will appear in the Software ICU but the data will be colored white. Finally, configuration panel allows the user to choose which interpretation rule, such as "StreamTrend" and "Participation", to use to apply to a vital sign. Once selected, each interpretation rule can be individually parameterized to control how the system selects red, yellow, or green for the vital sign's current value and its trend.

Although students gave generally high marks to the accuracy of the Software ICU colors, we have higher standards and remain unsatisfied. For example, we are concerned with the configuration of the coupling and complexity vital signs: although we believe these have the potential to provide important insight, the threshold values for these vital signs were picked arbitrarily. We are not even sure if the StreamTrend configuration approach is adequate; perhaps the appropriate threshold for coupling is a function of the current size. We return to this issue of "vital sign validation" in the future directions section.

5.4. Measurement dysfunction

Austin's Measuring and Managing Performance in Organizations [1] provides an excellent introduction to the risks involved with the use of quantitative metrics to affect behavior. He notes that "[measurement] dysfunction's defining characteristic is that the actions leading to it fulfill the letter but not the spirit of the stated intentions."

For at least one team in the case study, measurement dysfunction was the clear outcome of the introduction of the Software ICU. The questionnaire response regarding "hacky-stalk" that was referenced previously continues this way: "Some members would start competing on who had more commits or more development time. The project turned out to be more of a competition of stats, which wasn't healthy for the team at all." In response to another question, this student wrote, "It [was] supposed to show us how healthy individuals are in the group. So if one person is slacking, the members need to tell him to step it up. It wasn't used that way in our group. One person really wanted a good grade for the class so he just used the telemetry to watch himself; making sure no one gets more builds/devTime/commits than him (yes he said "i need more dev time because i need an A"). I remember we had dinner as a group and one of our group members didn't go to dinner. Another group member then said, 'oh if he ups his stats more than mine, tomorrow I'm gonna hack all day."'

Further evidence of measurement dysfunction is that although every participant but one filled out the questionnaire, and although the teams contained four members, only a single student revealed this issue in the questionnaire. Clearly, the other team members chose to hide this issue from the researchers.

The occurrence of measurement dysfunction in this study has a number of interesting implications given that the experimental design contained explicit procedures designed to prevent it. First, the students were told explicitly and repeatedly that their grades for the class would not be based on having the "best" metrics; but would be based rather on the quality and capability of their project. Second, the stu-

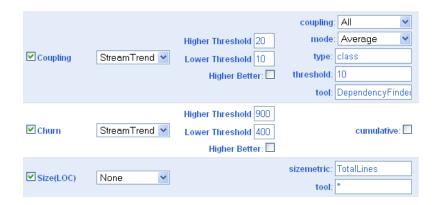


Figure 4. A portion of the Software ICU configuration screen.

dents were assured that their responses were anonymous, and that the professor for the course would not even see the results until after the semester was over.

Despite these two facts, at least one student came to opposite conclusions: first, that "winning" with respect to Commits and DevTime would positively affect his grade, and second, that revealing his approach in the questionnaire might compromise him in some fashion.

Austin provides insight into a possible explanation for why this student behaved that way. He says that measurement dysfunction can occur whenever there is the *possibility* of using metrics in an inappropriate manner to evaluate performance, regardless of the *stated intent* of management. As an example, even if an employee is assured by his current manager regarding limitations on the use of measures, he cannot be assured that he will have the same manager in six months, or that his future manager will continue to observe the restrictions placed by the current manager.

Perhaps this explains this student's behavior: he was behaving in response to a potential application of the Software ICU data during the class, and his lack of candor in the questionnaire reflected a potential application of the results.

In future research, we intend to modify our questionnaire to more explicitly look for indications of measurement dysfunction. For example, we could ask questions such as, "Did you feel that getting the 'best' measures would positively influence your grade?"

5.5. Research questions revisited

We conclude this discussion with a return to the major research questions of this study.

What are the strengths and weaknesses of the medical ICU metaphor for teaching software measurement in a classroom setting? One clear strength of the metaphor and resulting user interface is a simple, easy to understand way of thinking about metrics as a way to guide software development. The questionnaire responses do not indicate any of the confusion regarding metrics that was present in our prior case studies. Furthermore, the colored interpretation of the vital signs helped students to think about validity by asking themselves a simple question: do I believe that this vital sign should be its current color?

Clearly, the most significant weakness of this approach that is revealed by our data is the occurrence of measurement dysfunction. However, the data does not provide clear evidence that the Software ICU approach itself is to blame as opposed to the more general approach of collecting and analyzing process and product metrics. It would be useful to see if, for example, the Team Software Process is as susceptible to such dysfunctional behavior as the Software ICU.

How appropriate were our choices of "vital signs"? Our choices had mixed results. A few, such as DevTime and Coverage, were viewed as helpful by almost all of the students. Other, such as size, were found by very few to be helpful. We are not confident that these results would generalize to other settings. The current results provide a kind of initial baseline that future studies using similar techniques can compare themselves against.

How effective were our algorithms for coloring the vital signs? Although the students were generally positive regarding our interpretation, we believe that vital sign validation is an important area for future research. It may be that the positive student response was due primarily to their lack of sophistication regarding software measurement at the time of the study.

How does this approach compare to previous uses of Hackystat to teach software metrics in a classroom setting? Our initial experiences leave us unambiguously enthusiastic about the Software ICU metaphor for teaching software measurement. While significant research and improvements need to be made, even our initial implementation of the approach appeared to provide improved understanding and discussion about software metrics for project management.

6. Conclusions

6.1. Contributions

In general, this research contributes to the understanding of how to introduce experiential learning about empirical software engineering in a classroom setting. We believe that this area deserves more active research, and we hope that this paper catalyzes new discussion and work.

We have been teaching about empirical software engineering in an experiential manner for over five years, and the current research is our third case study. By comparing our current results to previous instances, we have gained some insight into the relative impact of the Software ICU paradigm as opposed to the general introduction of measurements into the classroom, which was a component of all three studies. Another contribution is the evidence that the Software ICU metaphor and interface lowers the overhead to student understanding, application, and critical interpretation of metrics.

A third contribution of this research is the technical infrastructure and teaching materials, which are open source and freely available. Others who wish to build upon this research can use the technical, educational, and evaluation frameworks we developed for this study and modify any or all of them to suit their needs. To our knowledge, the Software ICU supports collection and analysis of more kinds of software engineering process and product measures than any technology currently available for the the classroom setting.

A fourth contribution is the evidence we gathered not just of the positive impact of metric collection and analysis, but of measurement dysfunction as well. This is rarely discussed and little concrete evidence of its manifestation appears in empirical studies. We were lucky in this study that a student saw fit to discuss the issue openly. Future work can build upon our experience by developing better evaluation mechanisms for detection of dysfunction, and thus contribute to our understanding of this important phenomenon.

6.2. Future directions

This case study provides evidence that the medical ICU terminology and technology can provide a powerful metaphor for teaching about and interacting with software process and product metrics. However, it also provides evidence that the utility of the metaphor can be quickly undermined by inappropriate configuration of the vital sign interpretation mechanisms. We believe there are at least two promising approaches to vital sign validation.

The first, more traditional approach to validation, is to conduct more research in which we compare changes in the vital sign color to changes in outcome measures of interest. For example, we could compare values of coupling and complexity to post-release defect reports, and look for threshold values of these vital signs that correlate with increased defects.

A second approach is to effectively "crowd-source" the validation process. In this approach, developers would be able to "vote" either positively or negatively about the accuracy of a vital sign color when viewing it, and attach a textual rationale for their vote. Over time, the accumulated votes could provide a sense for whether there is a consensus regarding the validity of the vital sign and how to improve it, or whether there are conflicting opinions, indicating that more contextual information must be taken into account. A third outcome, that no one votes at all, indicates that the vital sign might not be of use regardless of its accuracy.

A second important future direction is to evaluate the Software ICU in other settings, both classroom and professional, and we hope that one outcome of this report will be such collaborations. There are many interesting issues involved in using the Software ICU in other classroom settings. For example, we anticipate that other classroom settings will use different tools and projects, leading to different vital signs of interests, and perhaps different configurations. We expect that questionnaire responses would differ significantly from those we obtained in Fall of 2008, though in what way we do not know.

We are also interested in exploring the use of the Software ICU in industrial settings. A focus of effort in Version 8 of the Hackystat framework is support for high volume metric data collection and analysis. Over the past year, we have been collaborating with Expedia, Inc. on a joint project to explore issues that arise in Hackystat when hundreds of projects are of interest and hundreds of thousands of metric data points are collected on a regular basis. We believe that the Software ICU can provide a powerful metaphor for organizing data in industrial settings, though we are convinced that industrial settings will typically require both different sets of vital signs and more sophisticated ways to interpret them.

A final future direction is to use the Software ICU as a stepping stone to a game-based approach to teaching software metrics. Imagine that instead of coloring a sparkline green in order to indicate that a team has been keeping the coverage above a threshold value, the team is instead awarded a certain number of "points" for accomplishing this goal. Furthermore, a set of teams could "compete" against each other in a specified set of "events". Each event provides an empirical representation for a development behavior, such as "Commit early and often", "Don't fail the build", "Use Issue Driven Design practices", etc. We are currently prototyping such an environment which we call "Devcathlon" and that we hope to use in conjunction with

the Software ICU in future semesters.

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