

CS1060 hw2-design

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Product and Service Explanation

The proposed product is a personalized health meal planning app that integrates directly with wearable devices (e.g., Fitbit, Apple Watch, Oura Ring) and health data platforms (e.g., Apple Health, Google Fit).

How it works:

- Pulls biometric and lifestyle data from wearables: heart rate, steps, calories burned, sleep patterns, glucose levels (if available), and activity history.
- Combines this with user inputs: dietary preferences, allergies, cultural food restrictions, and health goals (e.g., weight loss, muscle gain, diabetes management).
- Generates dynamic daily and weekly meal plans, grocery lists, and recipes aligned with the user's data.
- Adapts over time as wearable data changes (e.g., more activity = higher calorie meal plan, poor sleep = adjusted nutrient focus).
- Optional features: grocery delivery integration, community recipe sharing, telehealth nutritionist add-ons.

This creates a closed-loop system: activity → data collection → adaptive meal plan → feedback → refined plan.

Similar Existing Services & Differentiation

1. MyFitnessPal, Noom, Loselt
 - a. Focus: calorie counting, weight loss coaching.
 - b. Gap: Heavy manual entry, limited automation, not dynamically updated with wearable streams.
2. Cronometer, Lifesum
 - a. Focus: nutrition logging and some goal-based suggestions.
 - b. Gap: High reliance on user discipline; limited real-time adjustments.
3. Nutrino (acquired by Medtronic)
 - a. Focus: personalized meal planning for diabetes patients.
 - b. Gap: Specialized medical use case, not broad consumer health.
4. HelloFresh, Blue Apron (meal kits)
 - a. Focus: convenience and cooking, not health personalization.

Differentiation:

- Fully automated personalization via real-time wearable integration.
- Adjusts nutrition plans daily (not static templates).
- Targets both general wellness and specific conditions (weight management, diabetes, heart health).
- Bridges consumer health + healthcare ecosystems (potential use by dietitians/doctors).

Stakeholders

Customers/Users

- Who: Health-conscious individuals, patients managing conditions, athletes, busy professionals.
- Values: Convenience, personalization, health outcomes, trusted recommendations.
- Motivations: Want to improve diet without the burden of constant tracking.
- Behavior: Regular app usage, syncing wearables, providing feedback on preferences.

Healthcare Providers (Doctors, Nutritionists)

- Values: Evidence-based recommendations, improved patient compliance.
- Motivations: Reduce time spent on diet counseling, improve patient outcomes.
- Behavior: Recommend the app, review patient progress reports, use in chronic disease management.

Regulators

- Who: FDA (U.S.), EMA (Europe), HIPAA/GDPR regulators.
- Values: Protect consumer safety, ensure accurate health/nutrition claims, safeguard data privacy.
- Motivations: Prevent misuse of health apps, ensure compliance with food labeling laws and medical device rules (if expanded to clinical use).
- Behavior: Audit app claims, enforce data privacy rules.

Investors

- Who: Health tech venture capital, strategic partners (Fitbit, Apple, insurance companies).
- Values: ROI, user growth, scalability, potential healthcare partnerships.
- Motivations: Back a scalable, data-driven subscription product.
- Behavior: Provide funding, push for growth metrics and integrations.

Owners/Founders

- Values: Innovation, market differentiation, user trust.
- Motivations: Build a profitable and impactful company.
- Behavior: Drive product development, secure partnerships, ensure compliance.

Employees

- Who: Engineers, data scientists, nutritionists, UX designers, compliance officers.
- Values: Technical excellence, career growth, mission-driven work.
- Motivations: Contribute to a meaningful product in the health/wellness space.
- Behavior: Build features, maintain data pipelines, create recipes/nutrition plans, ensure app reliability.

Others

- Retailers & Grocery Delivery Services: Potential partners for “1-click” ingredient purchases.
- Insurance Companies/Employers: Could subsidize app access for preventative health benefits.
- Why they matter: Secondary stakeholders who influence adoption scale.

User Journey – User

Persona

- **Name:** Alex Martinez
- **Role:** 29-year-old software engineer, health-conscious but busy lifestyle
- **Motivations:** Wants to eat healthier, lose 10 pounds, and improve energy without spending hours tracking calories
- **Values:** Convenience, personalization, cultural food fit, privacy of health data

1. Awareness & Initial Interest

- Alex sees an Instagram ad and also hears from a colleague who's trying the app.
- He's intrigued because other apps like MyFitnessPal felt tedious with too much manual logging.
- Expectation: Easy onboarding, real-time personalization without daily data entry.

Values Tension:

- With investors: Alex wants affordable pricing, while investors may push for upsells/premium tiers.
- With regulators: Alex expects quick signup, but compliance requirements may require lengthy consent steps.

2. Onboarding & Setup

- Alex downloads the app, links his Apple Watch and Apple Health data.
- He inputs allergies (peanuts), dietary preferences (Mediterranean style), and goal (lose 10 lbs in 3 months).
- The app generates a personalized weekly meal plan and grocery list.
- Expectation: Smooth wearable sync, culturally appropriate food recommendations, no "weird diet hacks."

Values Tension:

- With engineers/employees: Alex wants instant results, but developers may struggle to integrate data streams consistently.
- With healthcare providers: Alex wants flexibility, while doctors may want evidence-based, stricter nutrition rules.

3. Daily Usage

- Each morning Alex gets a notification with daily meals and nutrient targets.
- After a tough week with little sleep, the app adjusts to recommend higher-protein, lower-carb meals.
- Alex uses the grocery delivery integration for a few items.
- Expectation: Minimal manual input, dynamic adaptation, trustworthy recommendations.

Values Tension:

- With retailers/partners: Alex expects unbiased grocery suggestions, but commercial partners may push sponsored items.
- With employees: Alex expects stability, but feature experiments may cause bugs or confusing UI changes.

4. Mid-Term Engagement

- After 6 weeks, Alex sees progress: down 6 pounds, feels more energetic.

- He gets an in-app offer to connect with a tele-nutritionist for \$25/month.
- Expectation: Optional but not intrusive upsells, clear privacy policies on how data is used.

Values Tension:

- With investors: Alex values data privacy, while investors may push for data monetization partnerships.
- With regulators: Alex wants quick features, but regulators may delay rollouts until compliance is clear.

5. Long-Term Outcomes

- If successful: Alex maintains healthier eating habits, reaches goal weight, and keeps the subscription.
- If not: He churns, complaining that the app feels like “just another subscription” without sustained value.

Values Tension:

- With owners: Alex values long-term user support, while owners may prioritize short-term growth.
- With insurance/employers: Alex might benefit from subsidies, but worries about data being shared with his employer.

Key Value Tensions Recap

- User vs. Investors: Affordability & privacy vs. monetization & upsells.
- User vs. Regulators: Smooth onboarding vs. compliance-heavy processes.
- User vs. Retailers/Partners: Neutral food recommendations vs. commercial bias.
- User vs. Employees: Stable, reliable experience vs. rapid experimentation and rollout.
- User vs. Healthcare Providers: Personalized flexibility vs. evidence-based guardrails.

User Journey – Doctor

Persona

Name: Dr. Maya Chen

Role: Primary care physician in an integrated health system

Motivations: Improve outcomes efficiently; reduce counseling time; maintain patient trust

Values: Evidence-based care, privacy, workflow fit, clinical accountability

1. Awareness & Initial Interest

- Dr. Chen hears about the app at grand rounds and from a cardiology colleague.
- She's intrigued by real-time meal personalization from wearables and its potential for diabetes/weight management.
- Expectation: Clear claims, guideline alignment, and proof it won't create medico-legal risk.

Values Tension:

- With regulators: Interest in impactful claims vs. avoiding "medical device" territory without proper oversight.
- With founders/owners: Clinically cautious framing vs. growth-oriented marketing.
- With data science: Desire for explainable logic vs. complex optimization models.

2. Clinical Due Diligence

- She requests a live demo, sample patient flows, validation summaries, and privacy/security documentation (HIPAA, BAA).
- IT evaluates SMART-on-FHIR connectivity; she consults a clinic nutritionist about scope and handoffs.
- Expectation: Transparent rationale for recommendations and minimal integration burden.

Values Tension:

- With EHR vendors/IT: Fast plug-in vs. rigorous security reviews and API limits.
- With nutritionists: Physician oversight vs. appropriate autonomy for dietary counseling.
- With data science/legal: Full transparency vs. IP protection and liability posture.

3. Adoption Decision

- Dr. Chen selects target cohorts (prediabetes, obesity, HTN), sets consent language, and defines guardrails (sodium/protein/carb windows, allergy and culture fit).
- She pilots with a small panel and agrees on escalation rules to tele-nutrition.
- Expectation: Patient-friendly consent, tight safety rails, and quick clinician edits.

Values Tension:

- With patients: Rich data sharing and nudges vs. privacy/autonomy and notification fatigue.
- With payers/employers: Subsidies/outcomes reporting vs. PHI boundaries and purpose-limited use.
- With investors: Gated clinical claims and phased rollout vs. pressure for faster monetization.

4. Clinical Integration & Early Use

- She enrolls patients, tunes alert thresholds, and monitors an exceptions-first dashboard; notes auto-generate to her EHR.
- Alerts route to nutritionists when adherence dips; device gaps trigger confidence flags or self-report fallbacks.
- Expectation: Only actionable alerts, <10-minute reviews, and bias-free grocery integrations

Values Tension:

- With time/workflow: Safety-driven alerts vs. cognitive overload and burnout.
- With device ecosystems: Dependence on passive data vs. drift, missingness, and accuracy variance.
- With retail partners: 1-click convenience vs. commercial bias or sponsored substitutions.

5. Ongoing Care & Outcomes

- Quarterly, Dr. Chen reviews cohort outcomes (weight trend, A1c/BP proxies), refines thresholds, and decides whether to scale to the full panel.
- Reports are de-identified for population insight; individual changes are documented with provenance.
- Expectation: Demonstrable, risk-adjusted improvements and equitable access for diverse patients.

Values Tension:

- With equity/access: Personalization benefits vs. food deserts, budget limits, and language barriers.
- With owners/employees: Feature velocity and experiments vs. stability, QA, and clinician trust.
- With regulators: Expanding indications and bolder claims vs. evidence thresholds and audit readiness.

6. Long-Term Outcomes

- If successful: Embedded pathway for metabolic health; fewer diet counseling minutes; higher patient satisfaction and referrals.
- If not: She reverts to manual counseling or narrows use to a specialty clinic; trust becomes harder to regain.

Values Tension:

- With investors: Push to broaden use cases vs. ensuring condition-specific validation first.
- With patients: Long-term engagement strategies vs. avoiding manipulative gamification.

Key Value Tensions Recap

- Doctor vs Regulators: Actionable guidance vs. medical-device claims and audit demands.
- Doctor vs Patients: Personalized nudges and data use vs. privacy, autonomy, and cultural fit.
- Doctor vs Investors/Owners: Careful evidence gates vs. speed to market and revenue.
- Doctor vs Workflow/IT/EHR: Seamless integration vs. security, standards, and vendor limits.
- Doctor vs Nutritionists/Retail/Devices: Clear roles and unbiased recommendations vs. commercialization and data quality variability.

User Journey - Investor

Persona

Name: Sarah Lee

Role: Health-tech venture capitalist, partner at a growth fund

Motivations: ROI, market share, scalability, long-term adoption in consumer + healthcare markets

Values: Profitability, innovation, market differentiation, compliance risk management

Journey Map

1. Awareness & Initial Interest

- Sarah learns about the app at a health-tech pitch competition.
- She's intrigued by the convergence of wearable data + personalized nutrition, which feels timely given consumer demand for wellness and preventative healthcare.
- Expectation: Evidence that the market is growing and that existing players haven't solved this problem fully.

Values Tension:

- With founders/owners: Founders may emphasize mission ("improving health outcomes"), while Sarah emphasizes monetization and scalability. This tension could affect product design priorities (e.g., free tier vs. premium subscription).

2. Due Diligence

- Sarah requests demos, user metrics, and compliance documentation.
- She's concerned about data privacy (HIPAA/GDPR) and regulatory hurdles if marketed as a medical device.
- She interviews early adopters and healthcare advisors to gauge feasibility.

Values Tension:

- With regulators: Sarah sees regulations as barriers to rapid scaling, while regulators prioritize data protection and safe health claims.
- With users: Users want free or affordable access, but Sarah needs a business model that sustains high growth and investor returns.

3. Investment Decision

- Sarah agrees to lead a \$5M seed round, conditional on clear revenue streams (subscriptions, B2B partnerships, grocery delivery integrations).
- She insists on strong data governance policies to reassure both users and regulators.
- Her fund also wants a 5-year exit strategy (acquisition by Fitbit, Apple, or a major insurer).

Values Tension:

- With employees: Sarah pressures for rapid feature rollouts to increase adoption, while employees may prioritize product stability and user trust.
- With owners: Founders might resist giving up equity or shifting vision toward a more investor-driven roadmap.

4. Scaling & Growth Phase

- Sarah sits on the board and pushes for strategic partnerships:
 - With wearable companies to secure exclusive integrations.
 - With grocery/meal kit services to diversify revenue.
 - With insurance companies to subsidize user subscriptions.
- She tracks metrics: monthly active users, churn rate, CAC vs. LTV.

Values Tension:

- With customers/users: Sarah pushes for upsells and data monetization partnerships, but users expect data privacy and non-exploitative pricing.
- With regulators: Faster scaling may risk compliance gaps if privacy/security audits are rushed.

5. Long-Term Outcomes

- If the product succeeds: Sarah secures a profitable exit via acquisition or IPO.
- If the product struggles: Sarah pressures leadership to pivot toward a narrower market (e.g., diabetes management only), which may alienate general users.

Values Tension:

- With healthcare providers: Sarah prioritizes broad marketability, while doctors may want evidence-based, clinically validated features before recommending to patients.

Key Value Tensions Recap

- Investor vs. Founders: Mission vs. monetization priorities.
- Investor vs. Users: Profit maximization vs. affordability & privacy.
- Investor vs. Regulators: Speed of scaling vs. compliance requirements.
- Investor vs. Employees: Pressure for rapid rollout vs. sustainable development and ethical design.
- Investor vs. Healthcare Providers: Growth-driven features vs. clinically validated solutions.

Statement on AI Tool Usage

In preparing this assignment, our team used **ChatGPT (OpenAI, GPT-5)** for limited purposes, specifically:

- **Language polishing:** improving clarity, grammar, and flow of our written sections.
- **Formatting suggestions:** organizing user journeys and stakeholder lists more clearly.
- **Brainstorming support:** exploring alternative phrasings and structures.