

Carpenter Ants



Accessible Design for Different Abilities _____

Focused on Learning Disabilities

Our Team



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Initial POV



Lydia, a Stanford student with Dyslexia who was diagnosed late in her academic career

We were amazed to realize...

Lydia's biggest social pressure is having to read out loud because she stumbles over words and reads slow. It's the only time she feels her disability is visible.

We wonder if this means...

Her disability, when visible, makes her feel "othered" in spaces she would normally feel comfortable

It would be game changing to

Help Lydia feel accepted by her classmates and teachers.

mire

Interviewees



Sylvia

23 years old

Medical Student

Spinal Cord Injury -Paralysis



Warren

25 year old

Early Professional

Obsessive Compulsive Disorder



Warren

25 years old

Early Professional

Obsessive Compulsive Disorder









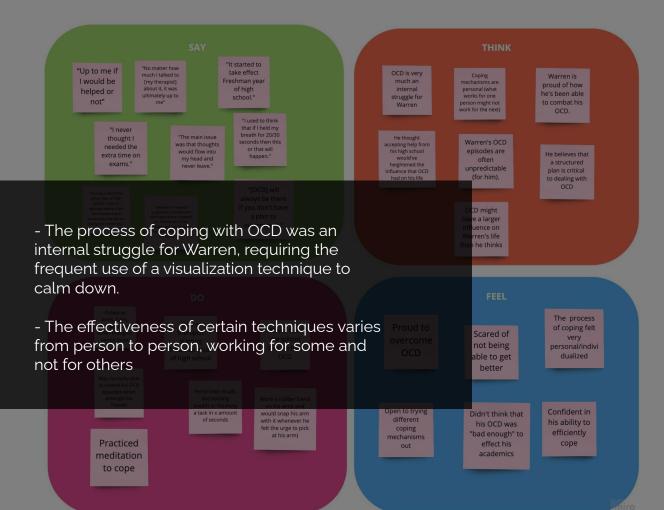


Warren

25 years old

Early Professiona

Obsessive Compulsive Disorder





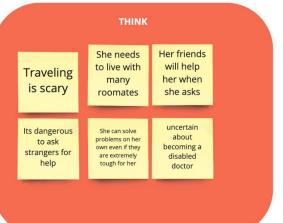
Sylvia

23 years old

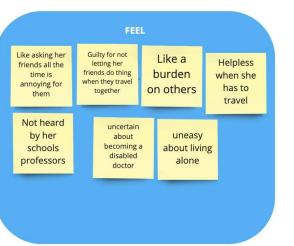
Medical Student

Spinal Cord Injury -Paralysis











Sylvia

23 years old

Medical Studen

Spinal Cord Injury -Paralysis



- Reaching out to people directly for help, even if it's over the phone, evokes a sense of guilt.

Ask stranger have to stand the property so

Calls agency to help carry bag on/off train

her.

Travels with a backpack Lives with friends so she can get help Like asking her friends all the time is annoying for them

Not heard by her about schools becomin

professors

uncertain about uneasy becoming a disabled doctor alone

Like a

burden

on others

Helpless

when she

has to

travel

POV 1

We met...

Mercy, a stay-at-home mom of a daughter with Sotos Syndrome who teaches allinclusive fitness classes

We were amazed to realize...

Mercy wouldn't let Sammy go to foothill college until COVID caused online learning because then she could watch over her while she was on Zoom.

We wonder if this means...

She gets anxious about letting Sammy go out on her own and wonders if she'll be able to conform to the social and educational standards

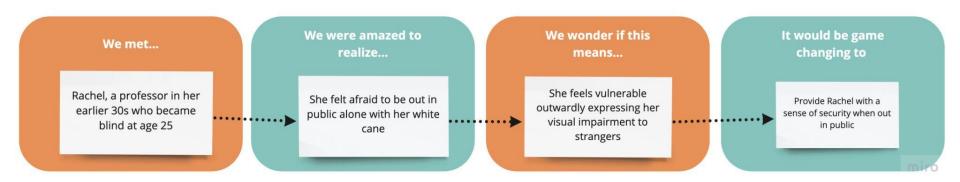
It would be game changing to

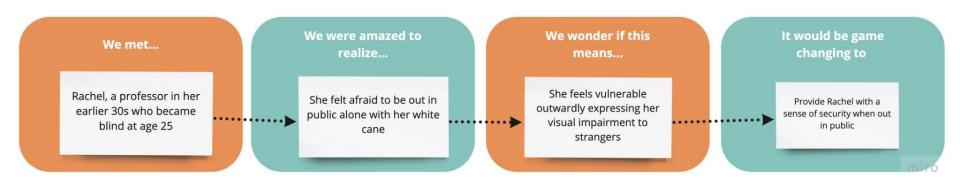
Give Mercy peace of mind that her daughter is getting adequate support in class

We were amazed to We wonder if this It would be game We met... realize... changing to means... Mercy wouldn't let Sammy go to She gets anxious about Mercy, a stay-at-home mom Give Mercy peace of mind foothill college until COVID letting Sammy go out on her of a daughter with Sotos caused online learning because that her daughter is getting own and wonders if she'll be Syndrome who teaches allthen she could watch over her adequate support in class able to conform to the social inclusive fitness classes while she was on Zoom. and educational standards

How might we provide Mercy with information about her daughter's actions and whereabouts?

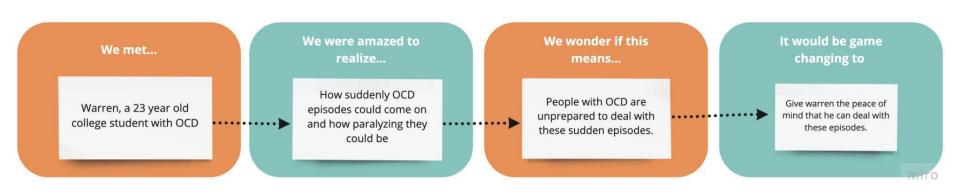
POV 2

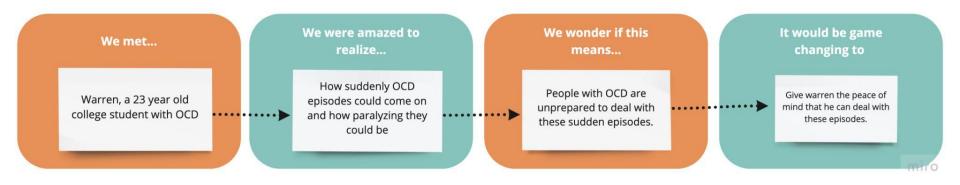


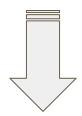


How might we match disabled individuals to others who are willing to help?

POV 3







How might we make coping mechanisms more accessible?

Solution 1 – How might we match disabled individuals to others who are willing to help?

- -Connect those with disabilities to network of friends that could potentially help them in their area with **digital help-request platform.**
- User can send out help request to friends, people in area get notification and one friend can opt-in to help Only friends can see how often they have helped/not helped and user does not have to ask for help face to face.

Prototype

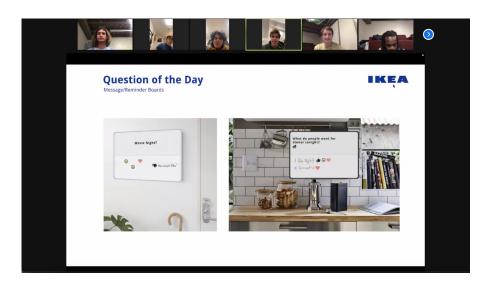
Assumption: People feel more comfortable asking for help if the process removed personalized contact and was to a group of respondents.

Prop: Zoom presentation to group

Actors: Stanford students (5-6 per

presentation)

How it worked: One presentation where participants were asked to ask questions to just the presenter- second presentation where they knew there were three of us answering questions.



Results

Things that worked:

- More people asked questions when they knew there were more people to answer questions
- Lots of questions were asked throughout the presentation

Things that didn't work:

 Was hard to get same turnout and give identical presentation - so maybe way it was presented was a factor as well as who was there

Surprises:

 The questions posed to the group were, on average, more thought out than those posed to the individual People feel more comfortable asking for help if the process removes personalized contact and is to a group of respondents.



Solution 2

– How might we make coping mechanisms more accessible?

- Create a **repository of all OCD coping mechanisms** that people who are suffering from episodes can access on their phone.
- Offer individuals the ability to gain access to mechanisms and **learn how to cope** with their episodes.
- Also offer **guided walkthrough** of the selected coping mechanisms.

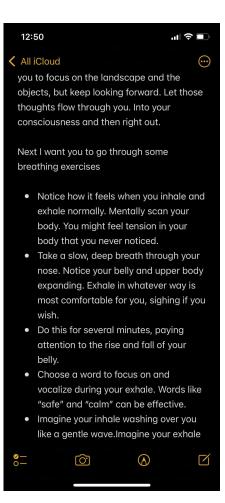


Prototype

Assumption: A phone is an effective medium for leading someone experiencing an OCD episode through various coping mechanisms.

Prototype Description: Provide descriptions of multiple coping mechanisms to someone who suffers from OCD and have them go through one/some of them during their next episode.

How we tested: We texted David, a student with OCD, descriptions of two different coping mechanisms (a visualization activity and a breathing exercise) and told him to read through them the next time that he had an episode. We followed up with David 3 days later and asked him how often he used the exercises and how effective they were for him.



Results

Things that worked:

- Mechanisms were easily accessible
- -Anxiety from episode was lowered: "I immediately felt like I had a plan and was confident in fighting back"

Things that didn't work:

- Visualization tasks were not as easy (some of the mechanisms that required coming up with thoughts in head)

Surprises:

- Breathing exercises were very successful

A phone is an effective medium for leading someone experiencing an OCD episode through various coping mechanisms.



BUT...

Some coping methods were not as easy when being read as formative tasks (visualization tasks)

Solution 3 – How might we make coping mechanisms more accessible?

- Allow those with mood affecting disorders to quickly track daily emotions.
- On days where users might encounter a trigger, Provide functionality to **document coping mechanisms** to deal with these triggers, and **optionally journal reactions and responses** to these coping mechanisms.

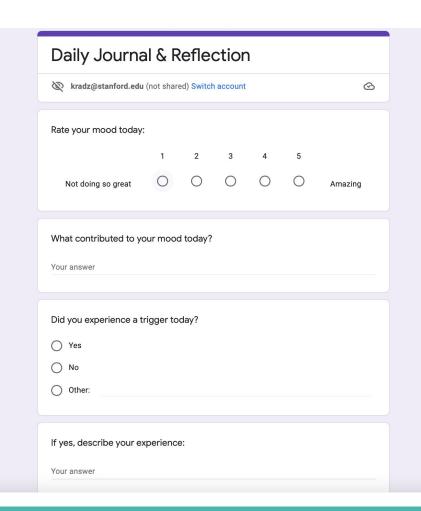
Prototype

Assumption: People are comfortable and willing to confront their triggers head on in order to reflect and grow

Prop: Google form "Journal"

Actor: College student diagnosed with depression

Role: Fill out the form for two consecutive days



Results

Trigger: Unexpected car crash in a movie caused a panic attack

Past Occurrences: 10-15

Things that worked:

- Improved their mood
- Generally positive and helped them move past it

Things that didn't work:

- "Sometimes it made me feel worse"
- Hard to revisit

Surprises:

 Helpfulness depended on the day/severity of the trigger People are comfortable and willing to confront their triggers head on in order to reflect and grow



BUT...

A daily mood journal would be more productive than one that could be used as the user

We learned...

- Confronting emotional triggers can be beneficial, but there may be a limit as to **how frequent** one is comfortable with the action
- OCD episodes can effectively be dealt with through self-lead walk throughs of coping mechanisms, but formatting these personalized list has an effect on the user's experience.
- People are **more comfortable** asking questions to a group vs an individual, and questions posed to groups are typically **more elaborate** than those posed to individuals.

What's next...

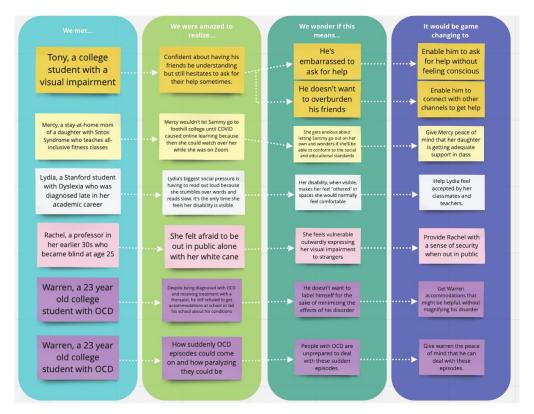
Solution 1: Connect those with disabilities to network of friends that could potentially help them in their area with a **digital help-request platform**.

The needs this solution addresses were recognized in the most diverse range of individuals with both physical and mental disabilities

Next we hope to test some more of this solution's assumptions with new prototypes.

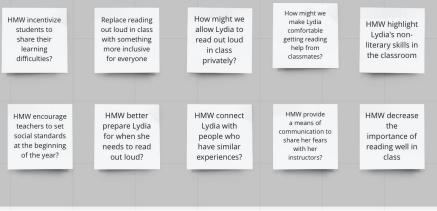
Thank you! Any Questions?

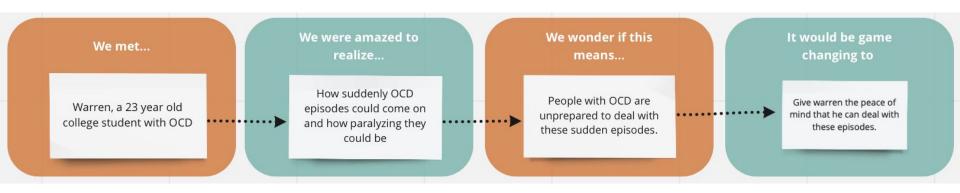
Appendix: POVs

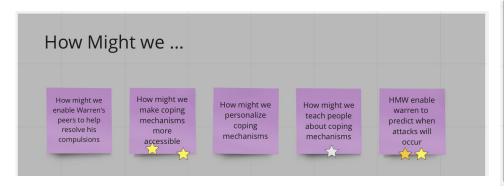




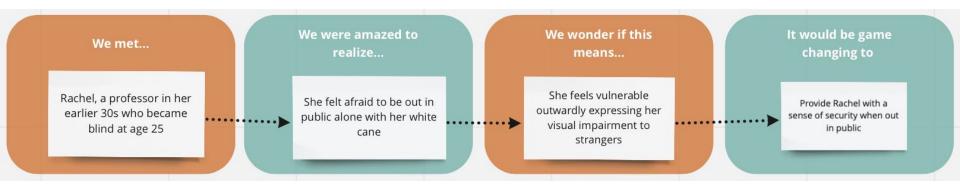


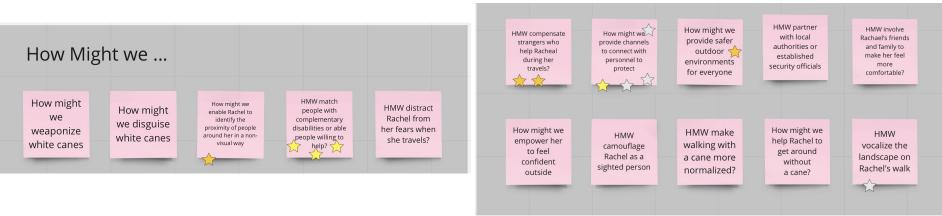


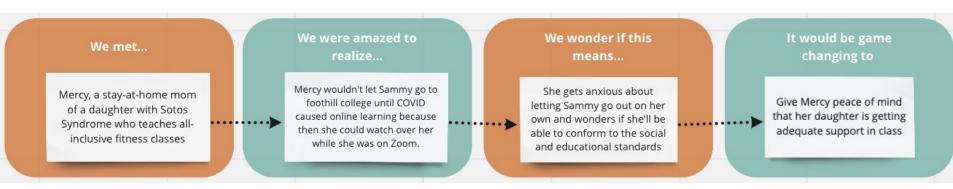


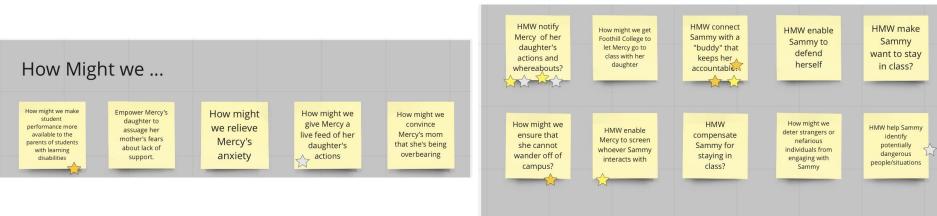




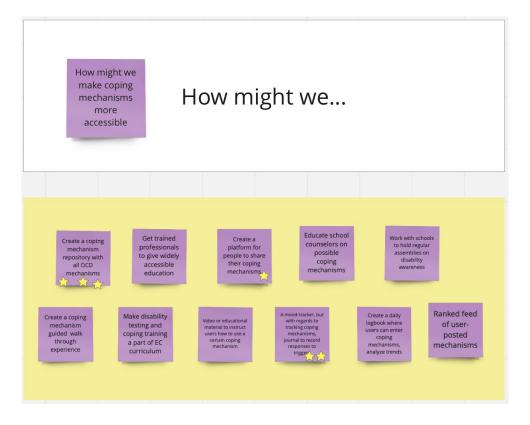




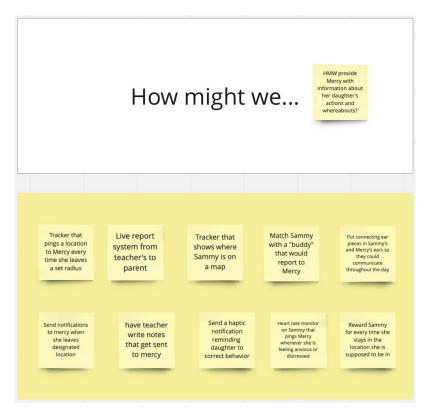




Appendix: Solutions for each HMW



Appendix: Solutions for each HMW



Appendix: Solutions for each HMW



Appendix: Google Form Prototype Questions

