

Challenge

Behavioral health and their current systems, services and structures exist in a state of anxiety.

How might a novel system composed of collaborative teams and AI assist both practitioners and patients in real time?



Augmenting Behavioral Health Services

- 1 Research & Uncover
- 2 Analyze & Understand
- 3 Synthesize
- 4 Create & Innovate

tools

\

INTENT STATEMENT
PRIMARY RESEARCH
QUALITATIVE ANALYSIS
QUANTITATIVE ANALYSIS
COGNITIVE ANALYSIS
COGNITIVE MODELING

TEMPORAL IDENTITY
SECONDARY RESEARCH
PROCESS MODELING
NARRATIVE DEVELOPMENT
PUBLICATIONS RESEARCH
ETHNOGRAPHIC INTERVIEWS

INSIGHTS SORTING
JOURNEY MAPPING
DESIGN PRINCIPLES GENERATION
ANALYSIS, IDEATION WORKSHOP
DATA MODELING
CONCEPT GENERATION

SYSTEM SORTING
CO-FACILITATIONS
PROTOTYPING
SYSTEMS VISUALIZATION
SERVICE ARCHITECTURE
STAKEHOLDER SEGMENTATION

1

Research & Uncover

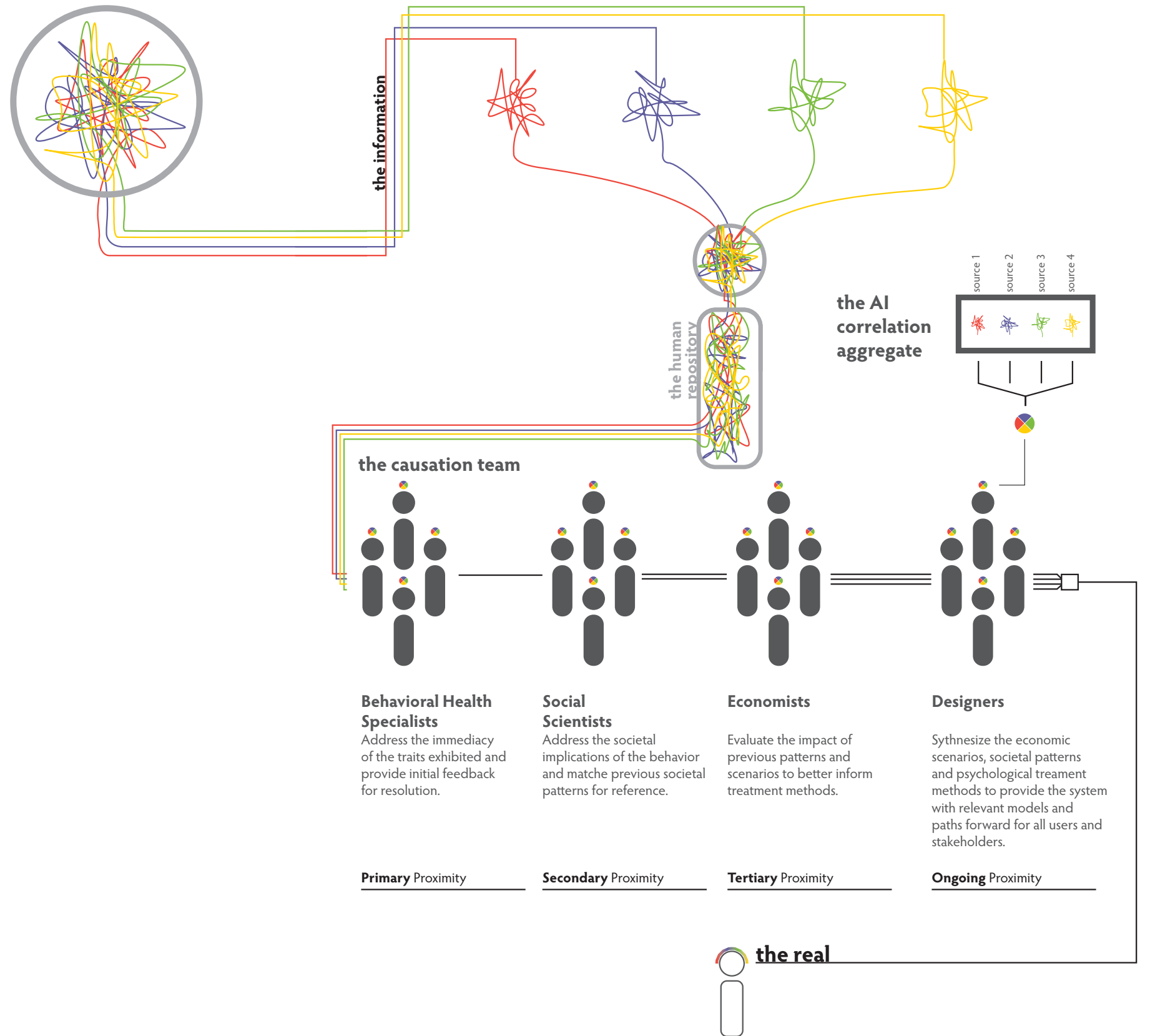
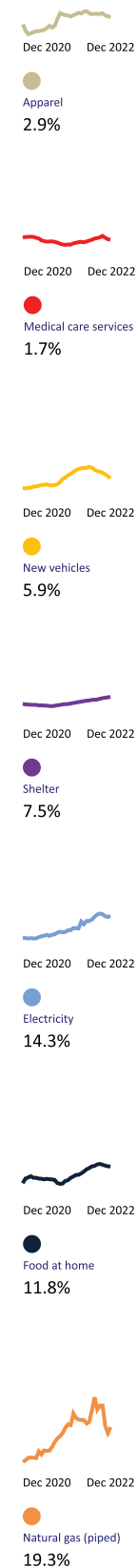
Behavioral health professionals often lack the necessary social relevance to accurately inform their methods, now endemic to accurate treatment for healthful results, societal wellness and a collective grounded reality. Without broader contexts, a professional's output remains self-referential, a time-lapse placebo leveled against an increasing crisis in mental health wherein clients are further and further detached from what is.

Objective

Fuse cultural contexts, patient need and provider relevance.

Understanding Patient Threshold

A blind online survey was developed and distributed to individuals with backgrounds in nursing, behavioral health and computer science. While the answers provided are meant to feel out the viewer's understanding and efficacy of the presentation of the solution, the details regarding the solution, setting, and characters involved are, as of yet, incomplete. Such incompleteness towards a complex solution may inadvertently weight a viewer's responses, as may their proximity to the solution based upon their prior involvement in similar actual settings. Based upon their feedback it is possible to clarify the unclear and remove or reduce cognitive boundaries that would preclude a more full grasp of the solution.



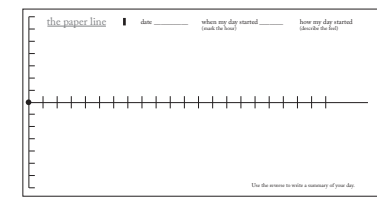
2 Analyze & Understand

Providing a digital interface utilizing front-facing biometrics and back-facing AI mapping, behavioral health, social science, economics, and design professionals can quickly compile, assess and communicate a more relevant response path, trace causes and be provided with relevant data modeling to re-focus a user to a path of wellness. User patterns contribute to a reference library, continually updating and informing larger societal patterns. It is a real-time behavioral health system that, rather than pull the weeds, tends the soil.

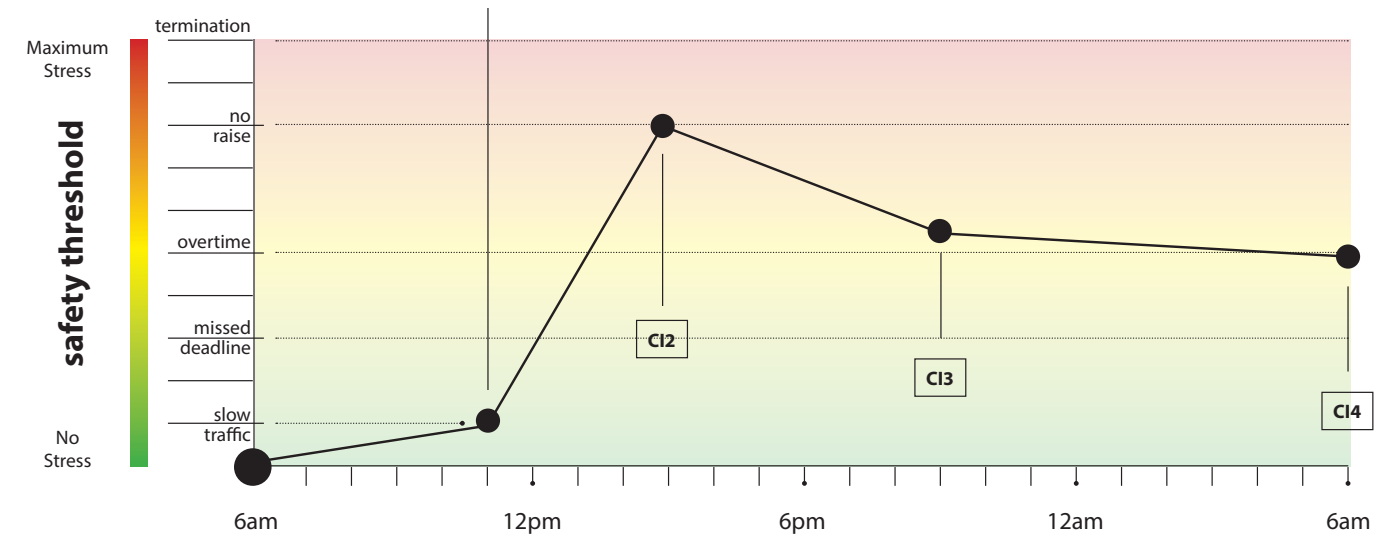
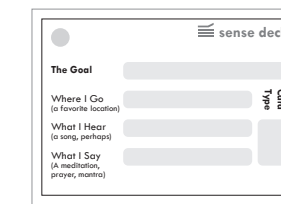
Stakeholders

A proposed component of the eventual solution is an AI aggregate that enlists media sources and compiles behavioral patterns as they ripple throughout subsets of society. AI will remain a misunderstood topic until we as a species grapple with our self complacency in creating products and things intended merely to serve us.

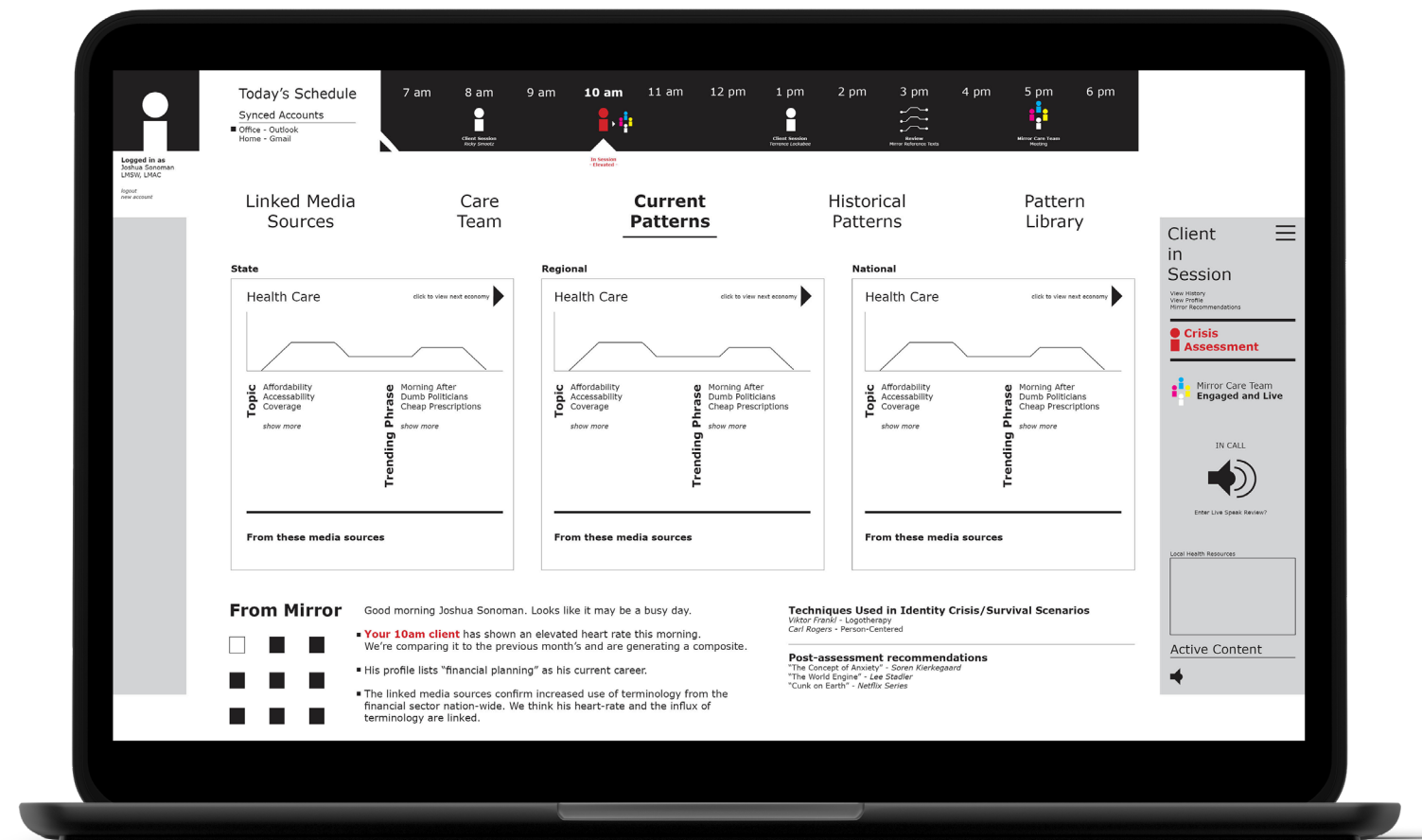
"Paper Line" 2010



"Sense Deck" 2011



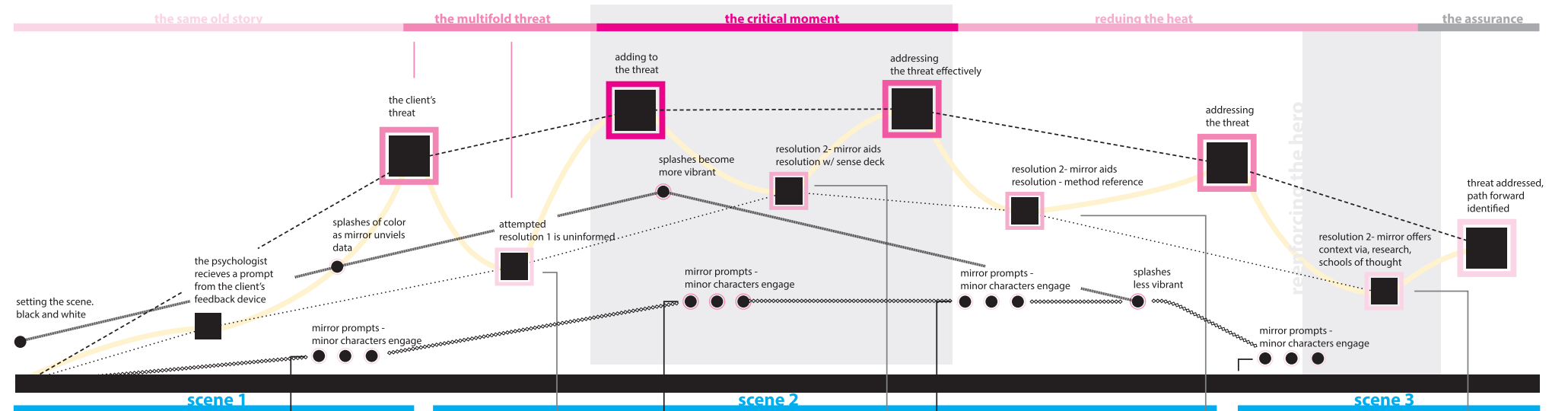
lo-fi interface mockup



3

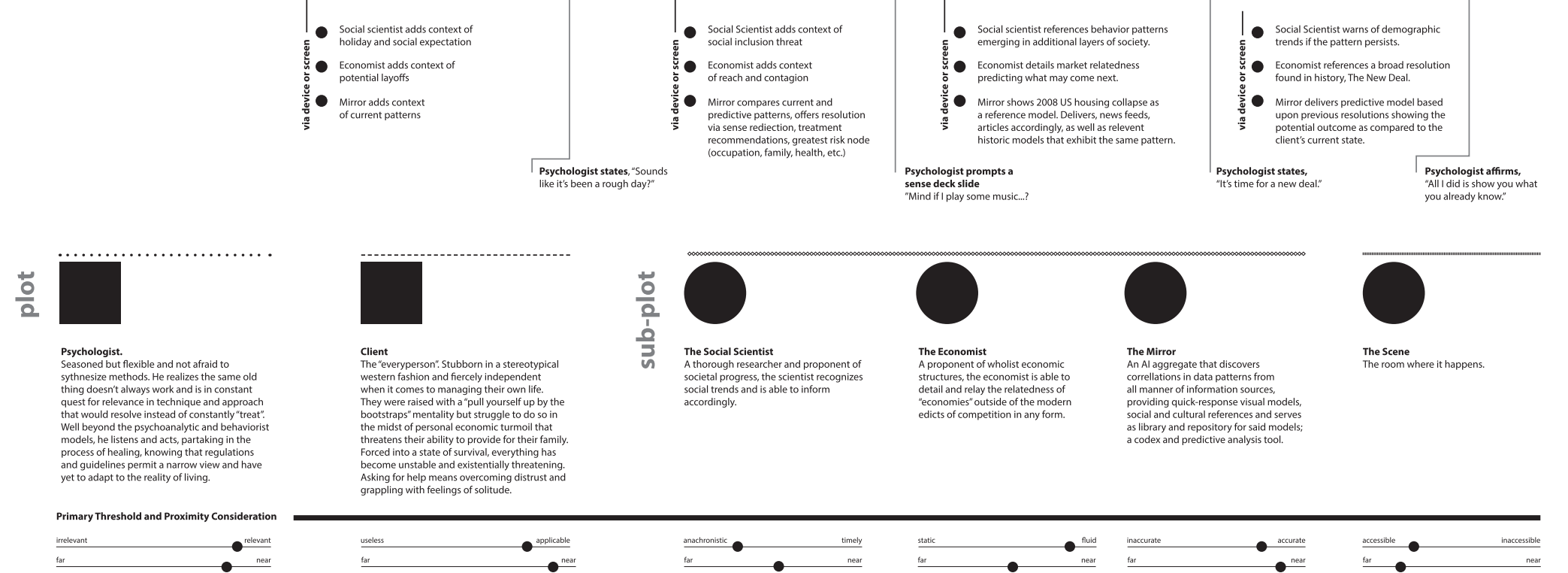
Synthesize

Thorough solutions employ a variety of techniques to inform their viability. Context modeling, journey maps, quantitative spectrums and archetypes are common and necessary as components in building a solution.



A Comprehensive Narrative

A 2x2 prioritization matrix visualizes information clusters on a macro scale and aids in the discovery of resource gaps. Common to multiple fields of research and development, matrixes may be used at many stages of the service and ux design process wherever a point of distillation is needed. Here the 2x2 encapsulates persona ranges based upon the primary and secondary research, each showing a different vertical characteristic as it relates to willingness to donate. Additionally, and just as important as the information clusters themselves are the spaces in between the clusters as they apply to a willing capacity to donate. They are spaces of the unknown and are the opportunity to bridge potential for growth, affinity and belonging.



plot



Psychologist.
Seasoned but flexible and not afraid to synthesize methods. He realizes the same old thing doesn't always work and is in constant quest for relevance in technique and approach that would resolve instead of constantly "treat". Well beyond the psychoanalytic and behaviorist models, he listens and acts, partaking in the process of healing, knowing that regulations and guidelines permit a narrow view and have yet to adapt to the reality of living.



Client
The "everyperson". Stubborn in a stereotypical western fashion and fiercely independent when it comes to managing their own life. They were raised with a "pull yourself up by the bootstraps" mentality but struggle to do so in the midst of personal economic turmoil that threatens their ability to provide for their family. Forced into a state of survival, everything has become unstable and existentially threatening. Asking for help means overcoming distrust and grappling with feelings of solitude.

sub-plot



The Social Scientist
A thorough researcher and proponent of societal progress, the scientist recognizes social trends and is able to inform accordingly.



The Economist
A proponent of wholistic economic structures, the economist is able to detail and relay the relatedness of "economies" outside of the modern edicts of competition in any form.

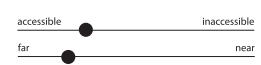
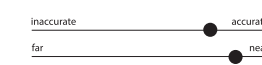
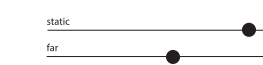
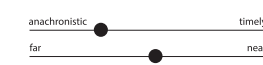
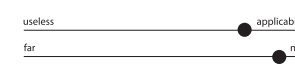
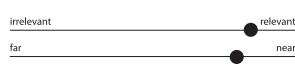


The Mirror
An AI aggregate that discovers correlations in data patterns from all manner of information sources, providing quick-response visual models, social and cultural references and serves as library and repository for said models; a codex and predictive analysis tool.



The Scene
The room where it happens.

Primary Threshold and Proximity Consideration



4

Innovate & Implement

Mirror becomes a collaborative team-based tool that compares real-time societal response patterns to client behavior and potential outcomes in order to find resolution within an individual's context of treatment while maintaining integrity of practice and patient confidentiality.

[watch the demo](#)

A Better Future

Feedback gained from direct conversation with behavioral health professionals, in this case clinicians involved in multi-faceted clinical operations, secular and sectarian operations and a wide variety of client backgrounds, voiced a mixture of curiosity, apprehension and support for what the scenario proposed. While anecdotal, their feedback remains viable as an initial metric for what "might be" should Mirror continue development.

