



.calm

Contextual Inquiry

## Introduction & Mission Statement

Anxiety disorders are among the most common mental health disorders in the United States. They can be chronic, debilitating, and incapacitating for those who suffer from them.

.calm aims to support those living with anxiety by encouraging self-awareness through the use of cognitive behavioral therapy.

.calm—it's CBT in your pocket.

## Contextual Inquiry Participants

Due to the sensitivity of our topic our interviews were conducted in private, safe settings. We relied heavily on role-playing and verbal walkthroughs to discuss anxiety. Our participants also showed us how they use the tools that they currently turn to in anxious situations.

Our first participant is Colin. He has been dealing with anxiety and depression for most of his life. He is 36 years old and works as a contractor at Group Health. He has been in therapy in the past but did not find it effective, and has never taken medication for his depression or anxiety. He used to depend on cigarettes as a way of helping him deal with his anxiety; the nicotine worked chemically to calm him, but it also created a socially acceptable way of taking a break from situations that were making him feel anxious. Since quitting smoking 15 months ago Colin has been having trouble finding a new mechanism to help him deal with his anxiety. As such, Colin represents the segment of the population who is dealing with anxiety on their own.

Emily, our second participant, has also struggled with anxiety for much of her adult life. She is 23 years old, works at a coffee shop, and has no health insurance. Despite this, she has been seeing a therapist for her anxiety for the last 2 years. Emily currently takes medication for her anxiety in addition to attending regular therapy sessions. Emily experiences many physical symptoms of anxiety and suffers occasionally from panic attacks. She doesn't currently use any structured anxiety management tools outside of therapy, but often writes in a journal about how she feels and is also very open with her friends and family about her anxiety. Emily finds that openness about anxiety makes her feel better, though she is usually reluctant to divulge it to people at first. Emily represents the portion of the population who suffers greatly from the physical manifestations of anxiety.

Our last participant is Zach. Zach is 24 years old and a student at the University of Washington. He has been in therapy for several years and his therapy sessions are the only effective tool he currently has for managing his anxiety. His anxiety diagnosis is relatively recent. He has also used anti-depressant medication off and on, and would prefer to live without the medication, but is considering taking it again to help him through finishing school. When he has not had access to his therapy sessions he has noticed a downward cycle of anxiety that he has not been able to manage on his own.

As such, Zach represents the segment of the population who would like a tool that could be used to augment his therapy, not replace it.

## Contextual Inquiry Results

### Support Network

Each of our interviews revealed the importance of a support network to anxiety management. Colin, Emily and Zach all indicated that they either talk to a therapist or friends about their anxiety and that it is usually helpful. Zach and Emily enjoy their therapy sessions and find them useful, but Colin stopped going to therapy because he did not find it to be effective. When receiving support from others, all three participants mentioned needing reassurance and validation that there was nothing fundamentally wrong with them and that they were going to get through a particular episode of anxiety.

### Importance of Routine

All of our participants mentioned the importance of elements of routine to anxiety management. For Emily and Zach, part of that routine is seeing a therapist weekly. Emily also routinely takes baths and makes tea. She also smokes cigarettes to relieve stress. Emily finds that routine helps her refocus her energy towards something that is more positive and constructive than continuing to “think [herself] into a hole.” For Colin, smoking used to be a routine that helped him deal with anxiety, but since quitting smoking he is looking for a healthier alternative.

### Anxiety Awareness

Our participants understood their own anxiety—including triggers and escalation—to varying degrees. Emily has been in therapy for several years and feels reasonably comfortable discussing it with those she is close to. She has several adult mentors who happen to be mental health professionals, which contributes to her own understanding and awareness of her mental processes. Colin is intimately familiar with his anxiety triggers and relatively well informed about the subject. Zach, on the other hand, has only recently come to terms with having anxiety. Although Zach has been seeing a therapist, he has little awareness of the mechanics of anxiety when compared to our other participants.

## Being Understood

Common to all of our participants was a desire to be understood by others and to overcome feelings of stigma associated with mental health issues. To varying degrees our participants sought to educate others about their anxiety and found it to be helpful. Emily mentioned that in order to truly feel close to someone, she must talk to them about her anxiety because she sees it as a crucial part of who she is and how she interacts with the world. Similarly, Zach is comfortable sharing anxiety with his close friends, but not strangers. Colin stated in his interview that he makes a point of educating people on an individual basis about anxiety in order to combat potential stigma.

## Analysis of New and Existing Tasks

### Easy Task: Logging and Visualization

Alice is 26 years old and has been in therapy for a couple of years. She works as an Administrative Assistant for Sprint in downtown Seattle. As part of her anxiety management Alice tracks her moods and physical well being on a daily basis. Every morning she assigns a value from one to ten in a few different categories such as happiness, stress levels and health.

This kind of task is a common tool to track trends in moods and health to help bring awareness, not just of upcoming problems, but also a history that shows a cycle of good and bad times.

### Medium Task: Guided Question and Answer Session

Brandon is a 30-year-old mechanic. He has tried therapy in the past but found that he didn't feel comfortable with it. He has had mild anxiety and depression most of his life and has done a lot of reading about the subject in hopes of understanding and managing his anxiety on his own.

One night after work Brandon gets into a fight with his girlfriend while visiting her at her apartment. They resolve their fight and Brandon goes home at the end of the night knowing that the fight was based on a misunderstanding and their relationship is not harmed. However, Brandon cannot stop thinking about the fight, going over in

his mind things he could have said differently, and he starts getting more and more anxious, wondering if everything really is okay.

Brandon notices that he is experiencing anxiety and turns to a Cognitive Behavioral Therapy (CBT) questionnaire. The questionnaire is short and walks him through what was said, what happened, and the thoughts that he is having about what happened. The questions that help him identify the difference between what happened and his fears about what could have happened. By identifying the stories and scenarios that Brandon was starting to build in his mind he is able to let go of them and his anxiety abates.

This kind of task is a more advanced tool, but can still be managed without the direct involvement of a therapist. It is a common CBT tool and is often used by people who want to independently manage their anxiety.

### Hard Task: Interactive Modules With a Therapist

Cynthia is 22 years old and is a recent college graduate. She has been in therapy for four years, meeting with her therapist once a week. Recently her therapist, Dr. Donaldson, has begun giving Cynthia CBT assignments to work through in between their sessions.

Cynthia and Dr. Donaldson meet on Wednesday afternoon. They begin their session normally, but towards the end of the session Dr. Donaldson and Cynthia discuss the concepts introduced in the latest CBT module Dr. Donaldson assigned to Cynthia, a module about daydreaming. Cynthia has been keeping track of her daydreams, filling out short questionnaires prompted by the module, which has brought to her notice a trend of fantasies she has been having while driving about getting into a car accident. Cynthia has never noticed that she was having these daydreams before since she only has them while commuting to her new job 45 minutes away.

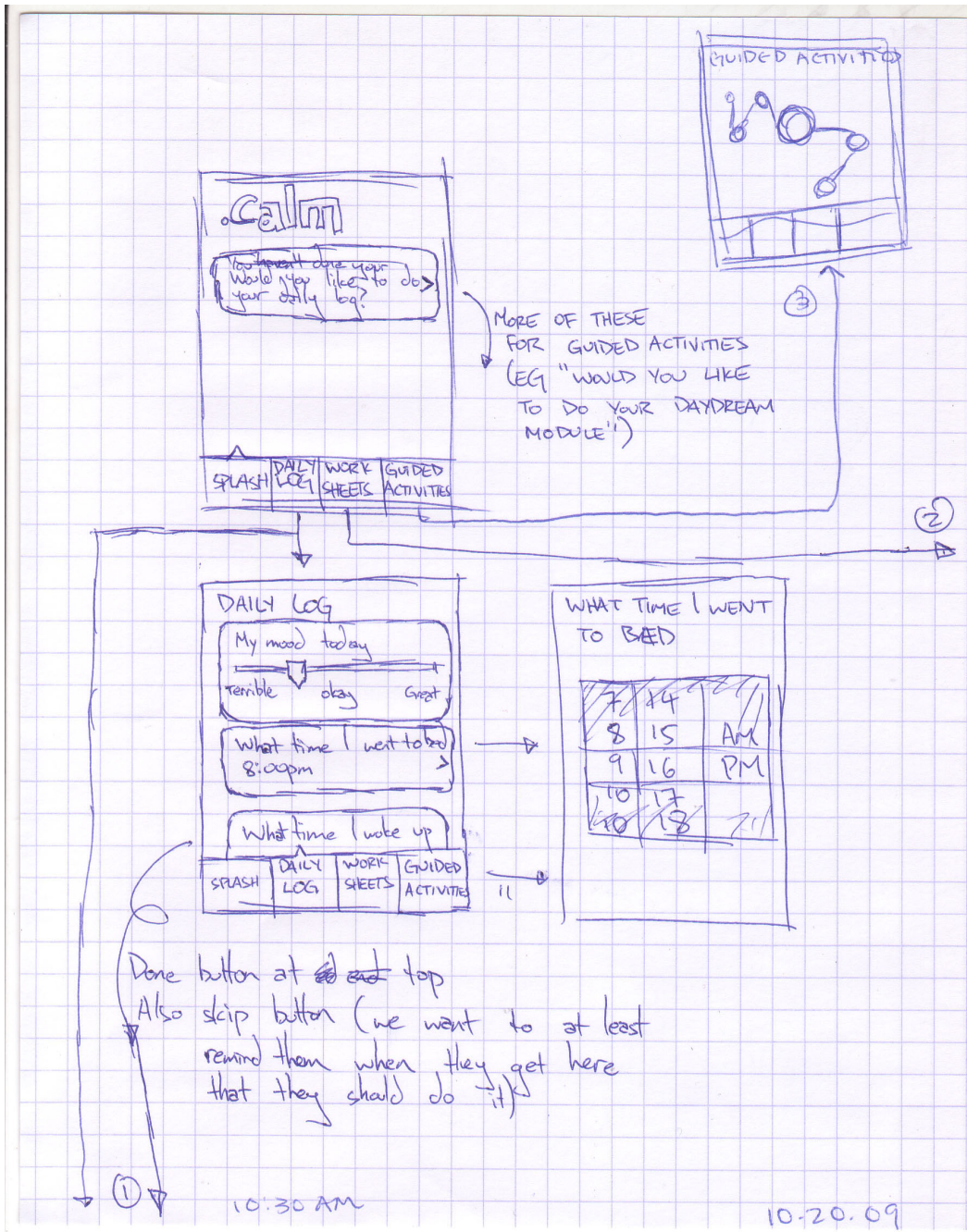
Dr. Donaldson and Cynthia talk a little bit about why she might be having those daydreams and then Dr. Donaldson assigns the next part of the module which deals with following the daydream to its root, its reason for coming to mind.

Over the next week in working with the CBT module Cynthia notices that she especially has the daydreams after having a hard day at her job. She notices that she feels that she cannot quit because it's her first job after graduation and that the car accident fantasies are due to her wanting to avoid going to work without having to

confront those feelings. The next week Cynthia reports these results the Dr. Donaldson and they are able to address the source of anxiety directly.

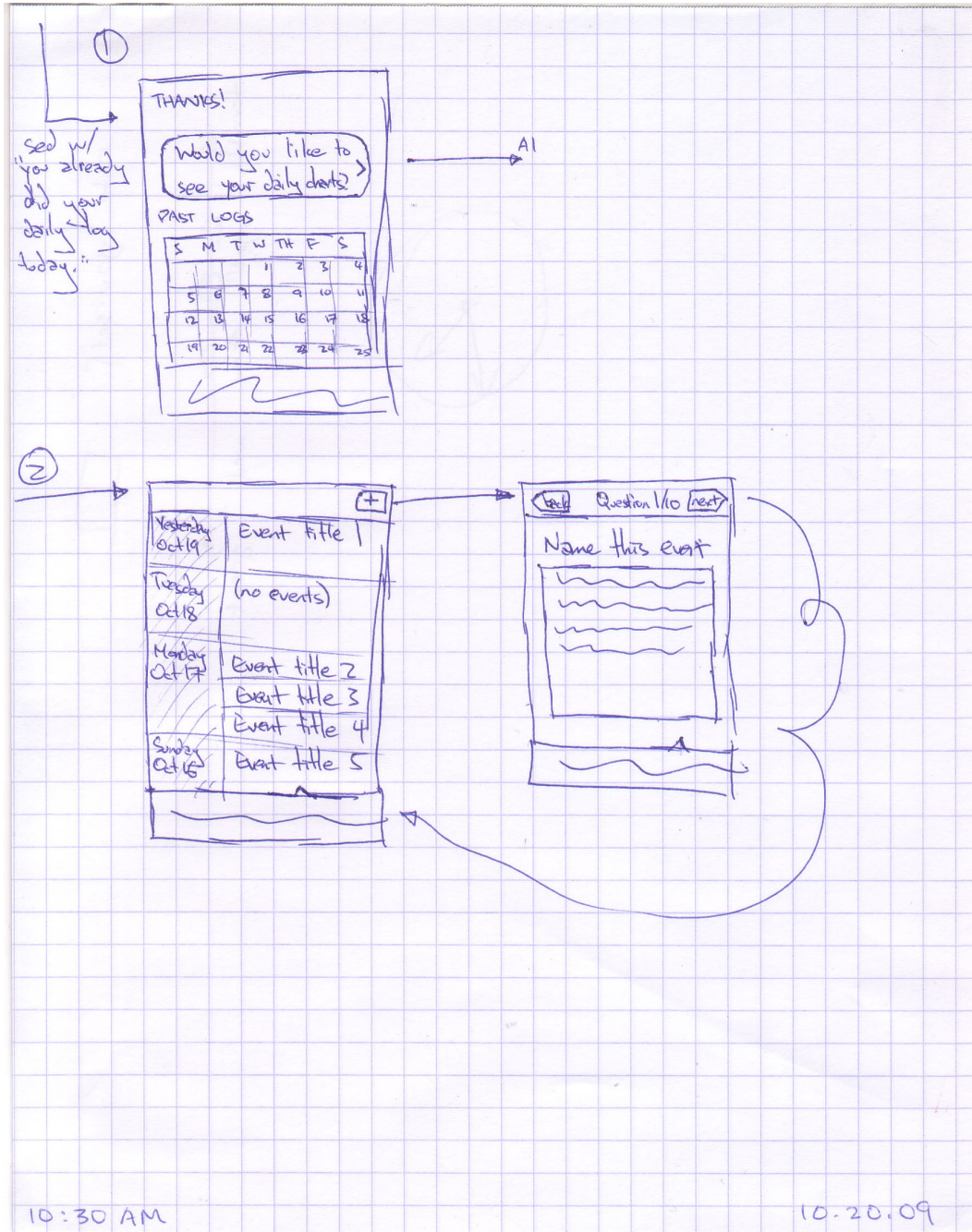
This kind of task would only be available to people working with a therapist who uses CBT techniques. Though it requires a lot of involvement and commitment from the therapist, it is as much a tool for the therapist as for their clients. Used in conjunction with regular therapy sessions, the tool can increase the effectiveness of therapy and promote the client's self-reliance.

# Sketches (1 of 4)



10-20-09

# Sketches (2 of 4)





## Sketches (3 of 4)



# Sketches (4 of 4)

