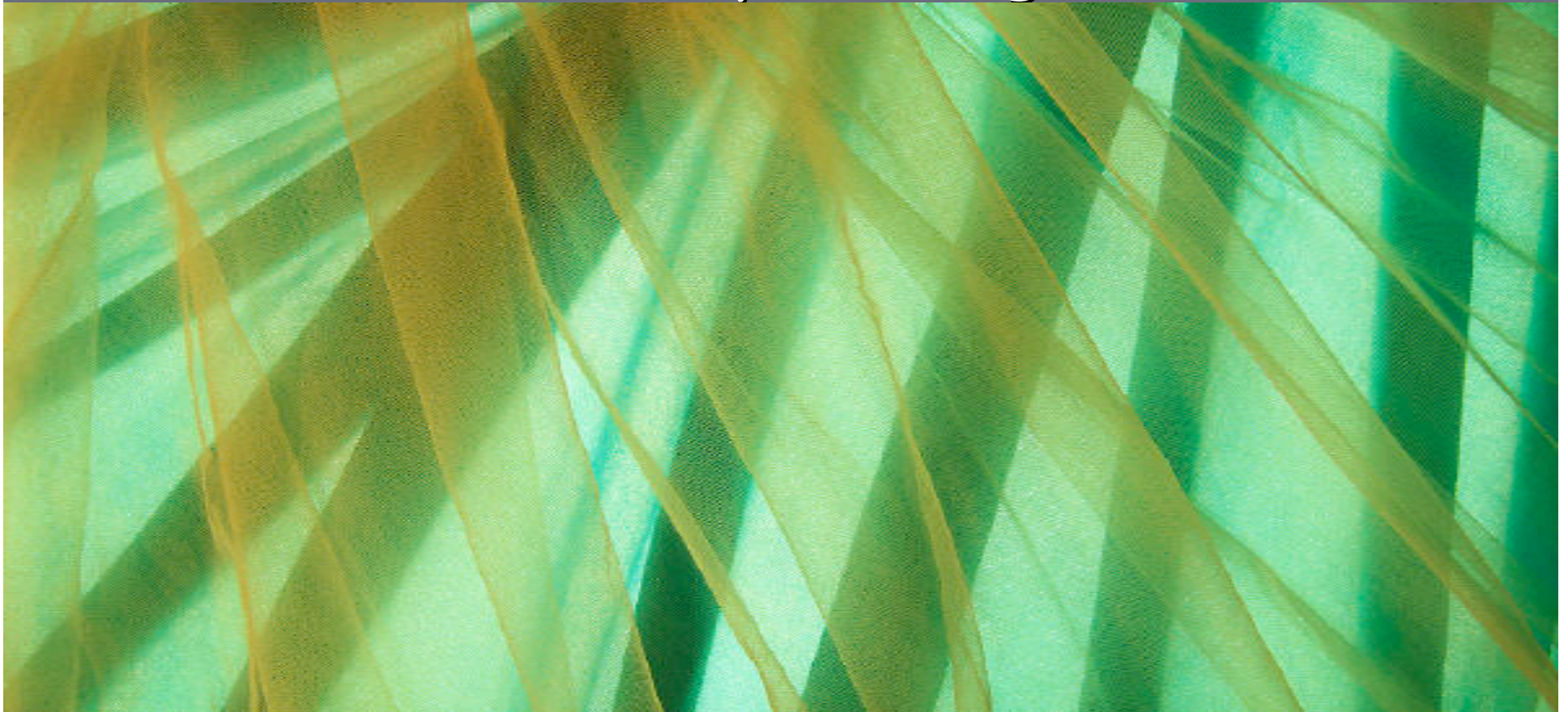


A Clinical View of Requirements Engineering

Stephen Fickas

University of Oregon



Talk Outline

- Working definition of a clinical process illustrated with Eye Clinic.
- Second example using rehabilitation field (extends the process).
- Description of four-year study using email as treatment (uses the process).
- Current status and future work.
- Conclusion.

The Clinical Process: a Working Definition

Starts With a Human-Centric Problem Domain



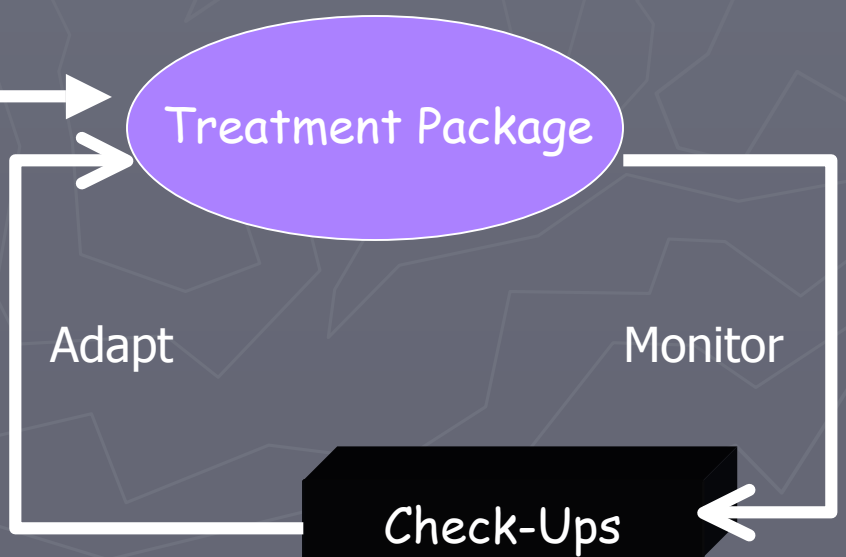
Initial Exam

Treatment Package

Adapt

Monitor

Check-Ups



Sub-processes of Initial Exam

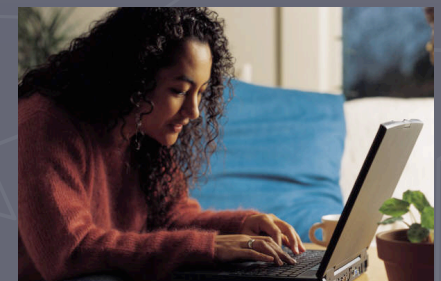


Initial Exam

Individual Assessment

Requirements Acquisition

Activities of daily living (ADLs) affecting vision



The Treatment Cycle

Initial Exam

Specification



Adapt



Monitor

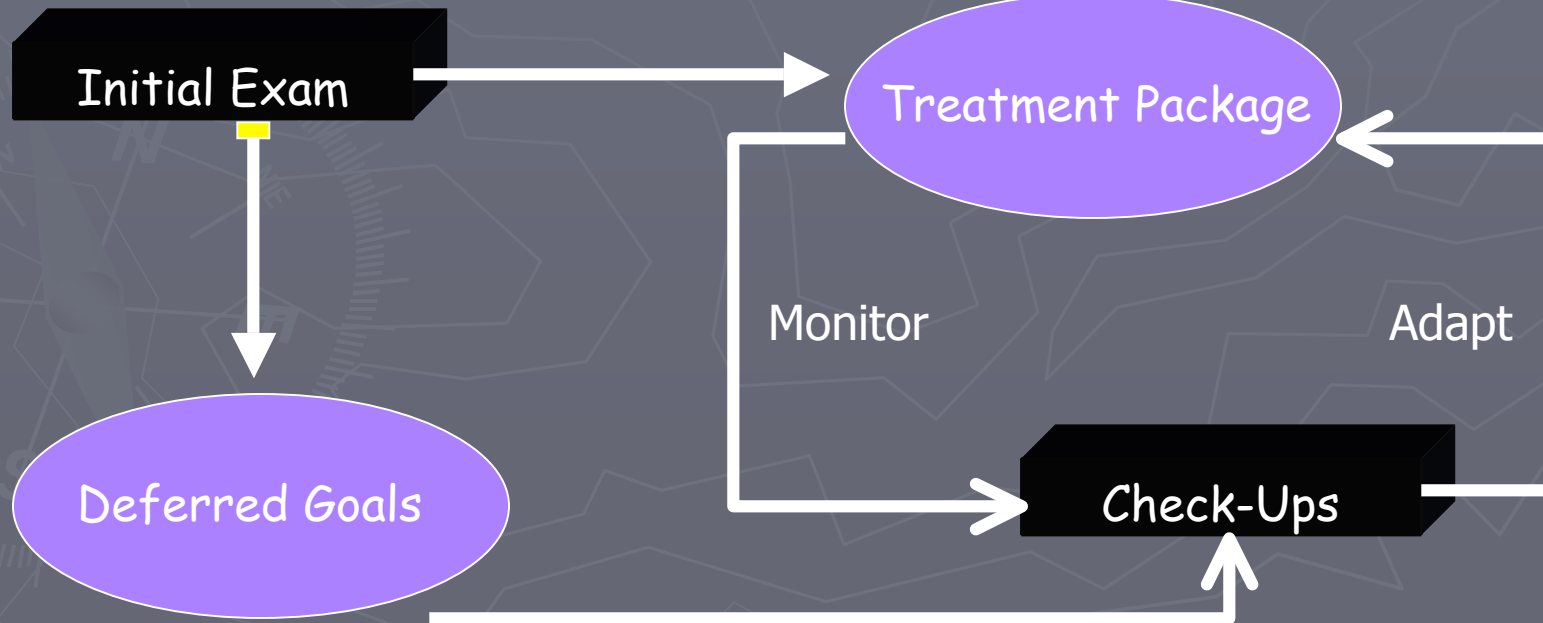
Check-Ups

Key Points of Clinical Process

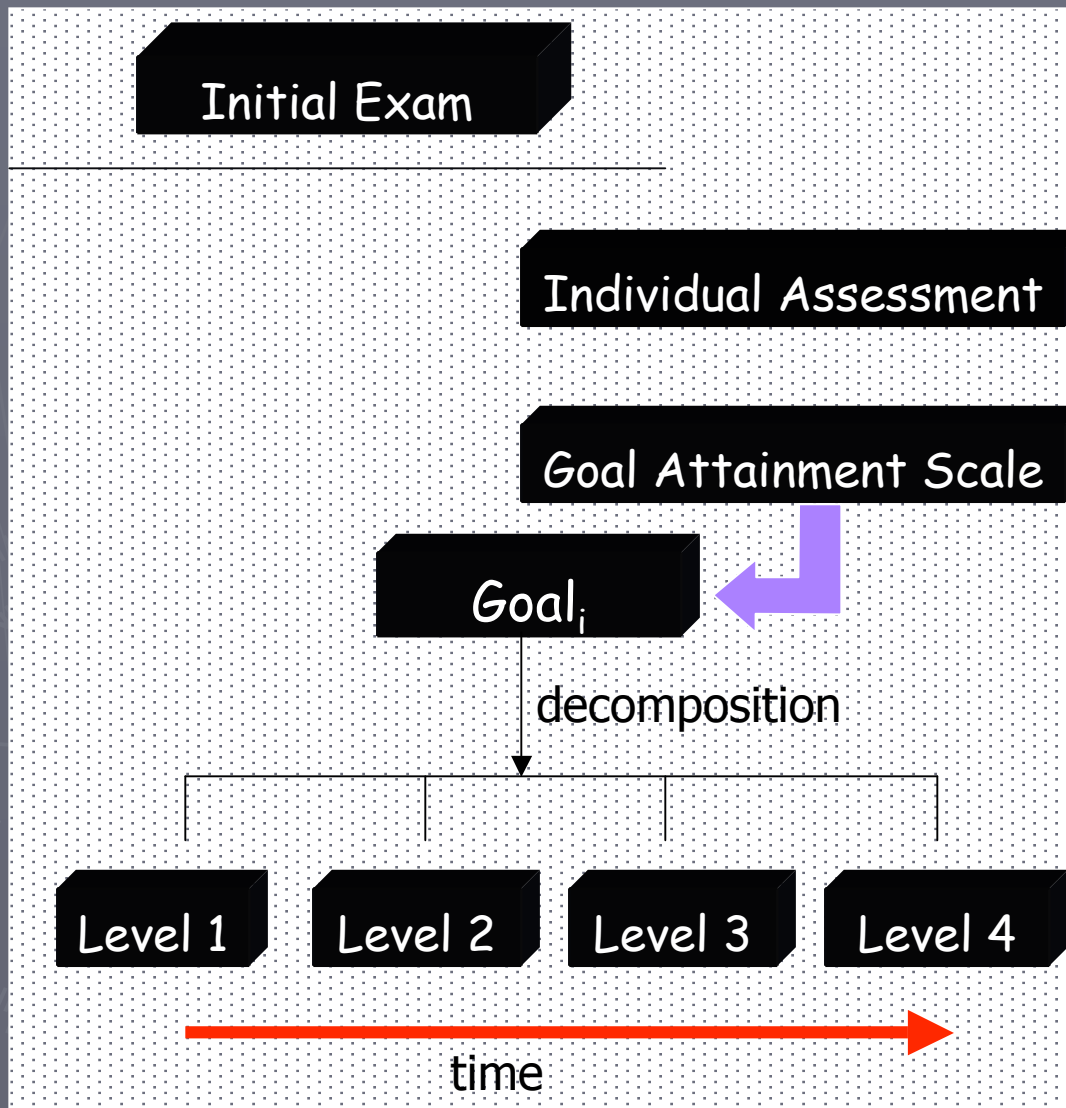
- ❖ Individual process: assumes (a) one-size-fits-all solution will fail, and (b) problem changes over time in individualized ways.
- ❖ Assessment implies a skills inventory. For optometry, a theory of vision under varying circumstances.
- ❖ Treatments imply a solution-theory that maps assessed skills (e.g., unaided eyesight), combined with requirements, to solutions.
- ❖ Process assumes that both humans and their environment can change over time. Hence, treatment comes in two sides of same coin: (a) what is delivered initially, and (b) what new/adapted solutions are delivered by monitoring over time.

Another Clinical Process: Rehabilitation

Starts With a Human-Centric Problem Domain



Introduction of Goal-Attainment Scale



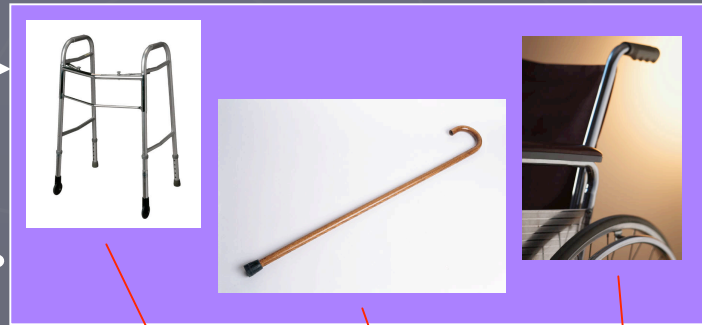
Some shared ADLs,
some individualized

- ❖ self-care skills (dressing, eating, bathing, going to the bathroom)
- ❖ home-care skills (cooking, cleaning)
- ❖ work and leisure skills (using a phone, transportation)

The Modified Treatment Cycle

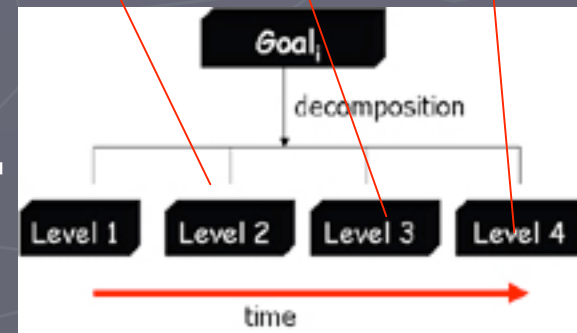
Initial Exam

Specification



Adaptation is driven by attainment levels.

Adapt



Monitor

Key Points of Extended Process

- ❖ Goal-Attainment Scale (GAS) implies a decomposition of the domain into measurable sub-goals or levels of attainment.
- ❖ People are encouraged to set long-range goals. Goals/levels that are not immediately applicable are deferred.
- ❖ Deferred goals have some metric that allows them to be monitored for applicability.
- ❖ Monitoring is goal-based. The goals of an individual are used to prune the entire monitoring space.

Can Software Play a Role in Treatment?

- ❖ Staying in the Rehabilitation field, I will switch to Cognitive Rehabilitation.
- ❖ Within this field, I will focus on survivors of a Traumatic Brain Injury (TBI). Numbers are roughly 6-10 million in US.
- ❖ The Cognitive Rehabilitation field is not a software domain, per se. However, it follows a clinical process that includes a GAS component.
- ❖ The challenge handed to me was to work-in a software component to a treatment package, and working backwards into the entire clinical process

Brief Description of TBI impairments

Two general classes of problems:

1. Memory

Short term memory (holding on to set)

Anterograde memory (memory for new learning)

2. Executive functions

Initiation

Organization

Planning

Self-monitoring

Inhibition

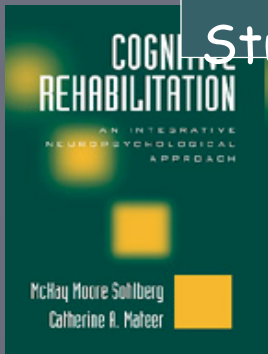
Impairment space is taken by expanding each issue on a severity scale, and then taking the cross-product of all issues+severity.

It is difficult to identify the typical/ brain-injured individual from

A Social-Reconnection Clinic for TBI

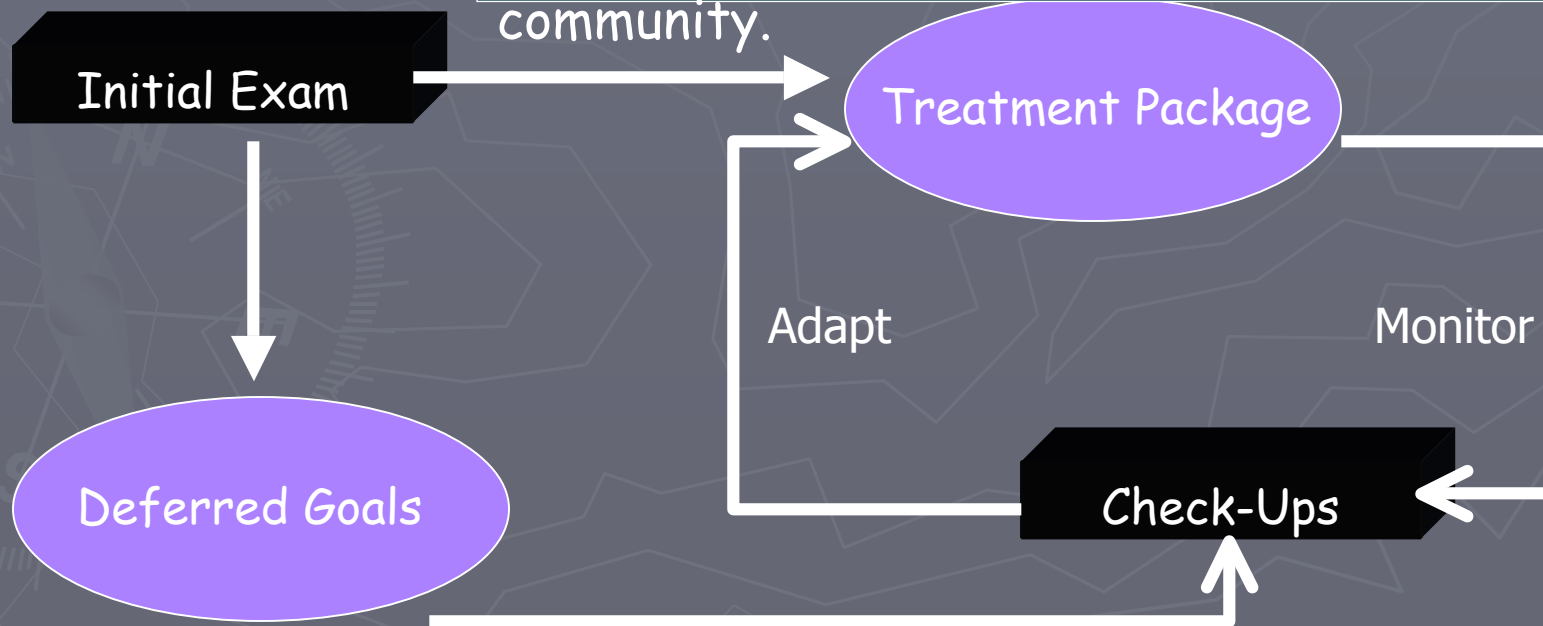
Surv

❖ Clinic staff includes academics and practitioners from the fields of Cognitive Rehabilitation, Training/Education, Qualitative Studies, Field Observation, Computer Science.

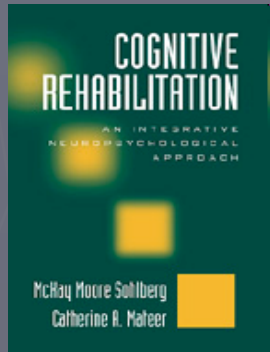


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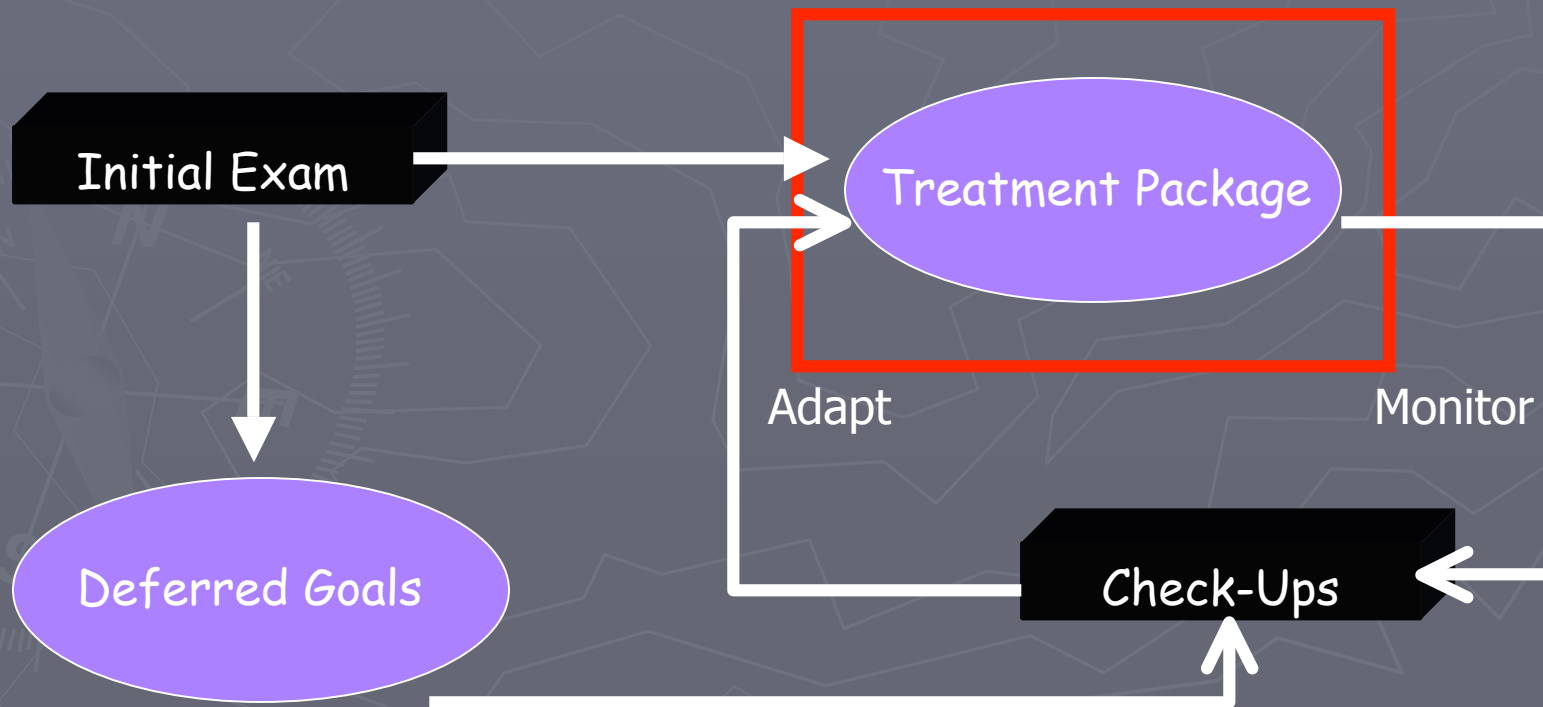
Working with clinic staff, I came up with two potential treatments: (1) email as a way to reconnect with friends and family (and to make new friends), and (2) navigation aids to support trips that provide reconnection with the physical community.



A Social-Reconnection Clinic for TBI Survivors



We started here



The Email Client

❖ In the summer of 2001, we ran a pilot study to determine the range of email clients (and features) that

❖ Closed buddy list.

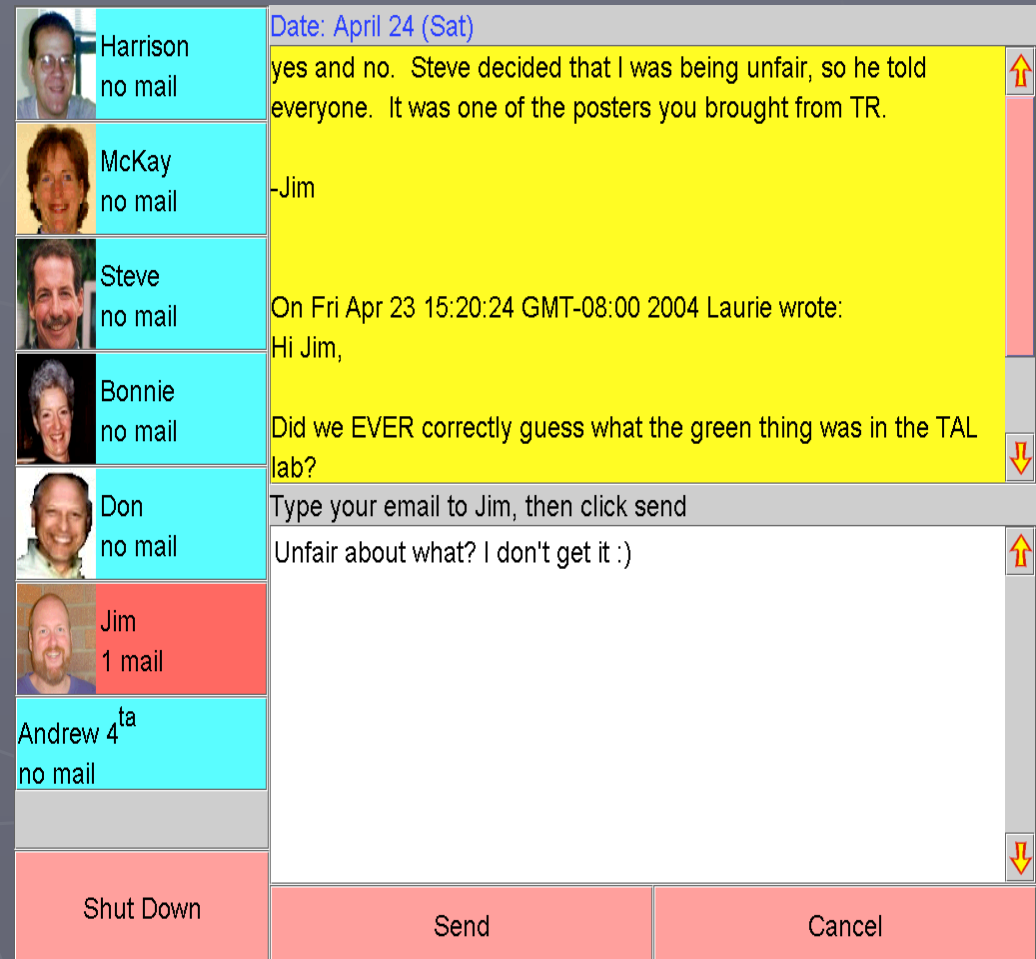
❖ Fixed windows.

❖ Minimize access to OS interface.

❖ Control of process

❖ different individuals
Control of composition

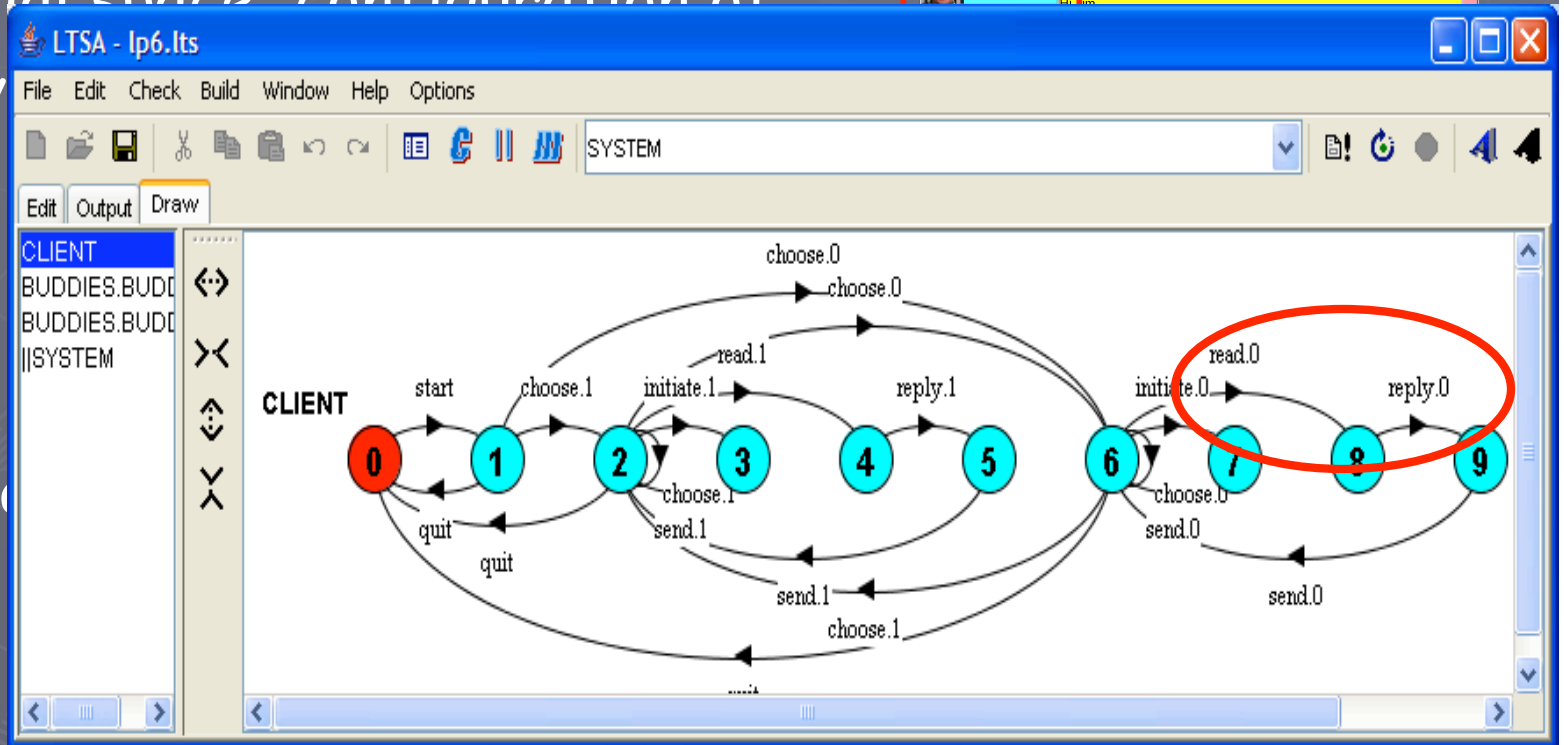
❖ This led to our construction of a



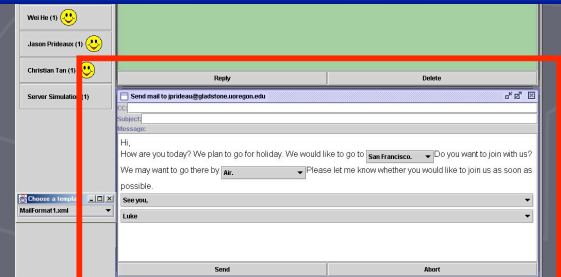
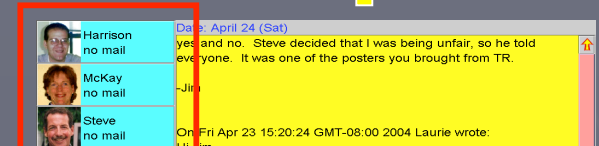
Configuration Space

1. The social space: configuration of the buddy

2. The em control vs

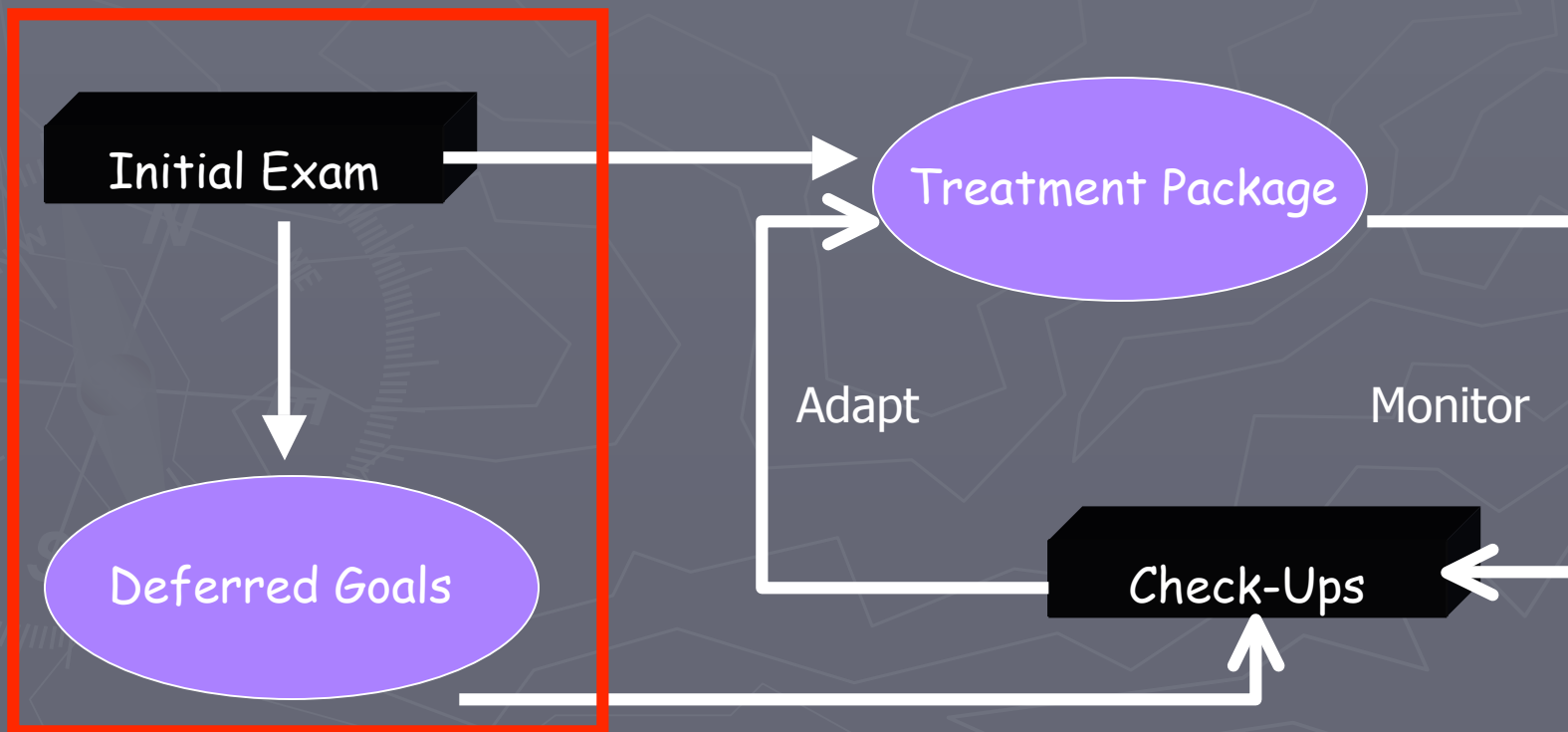
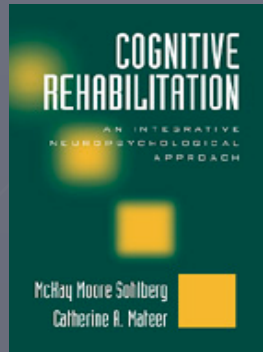


Roughly 10x10x10 configurations.



A Social-Reconnection Clinic for TBI Survivors

We next looked here



A Skills-Study of Emailing

Initial Exam

Individual Assessment

Goal Attainment Scale

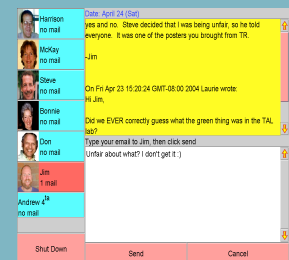
Letter keys,
Special characters,
Arrow keys



Mouse movement,
Clicking



Interface navigation



Six month project produced roughly 50 skills

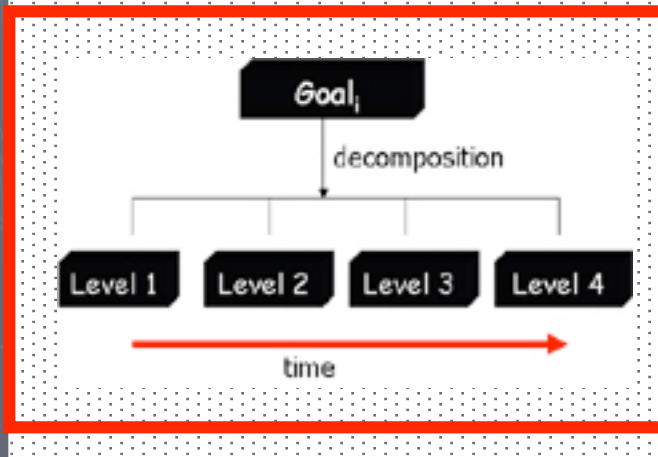
Executive Function



Email GAS

Initial Exam

Individual Assessment



General Goal Patterns

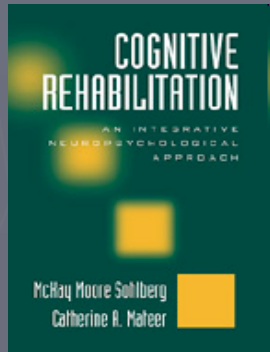
- Reconnect with friends and family
- Learn something new
- Advocate (e.g., congressman, SIG)

Idiosyncratic Goals

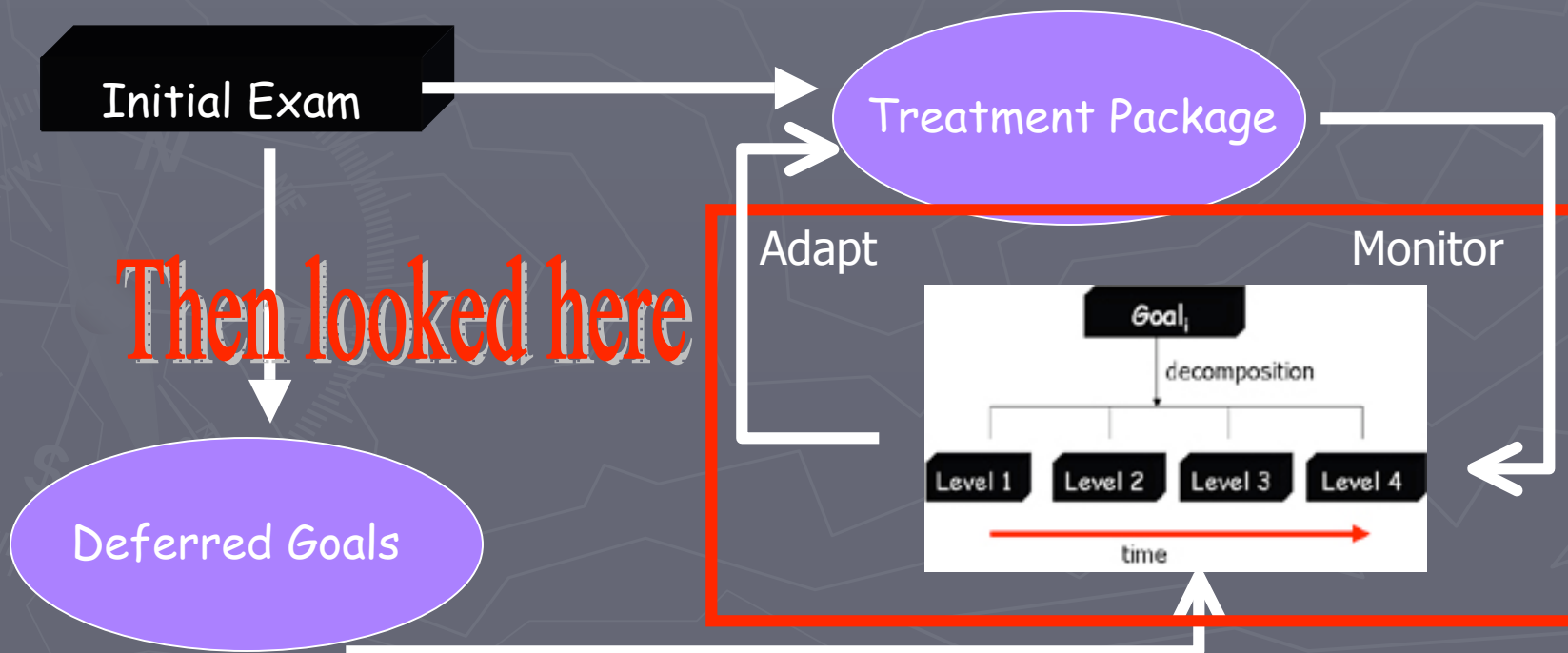
- Work on getting inheritance cleared up

➤ Distribute poetry

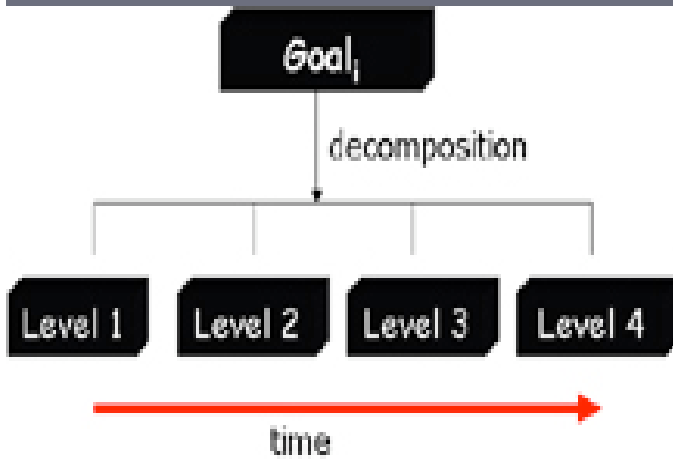
A Social-Reconnection Clinic for TBI Survivors



Note: assistive-technology (AT) abandonment is well-known for this population. Saw this play out in our clinic in terms of the treatment cycle.



Weekly Evaluation



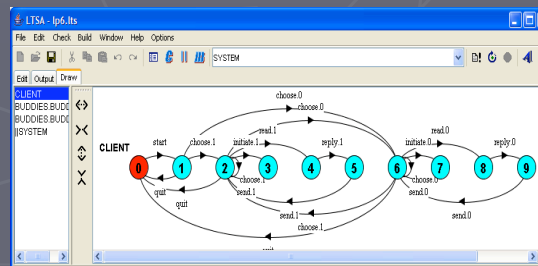
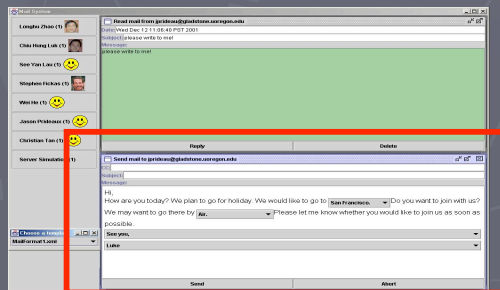
Log Data



Field Notes

Deferred goal becomes active goal.

Configuration changes



Case Study: Yolanda

❖ Yolanda is a 37-year old, Native American female with cognitive disabilities due to a traumatic brain injury from a motor vehicle accident 17 years ago.

❖ She has difficulty with short-term memory for new information and planning.

❖ She is independent in daily living activities.

❖ Staff provide support and in-home counseling.

❖ She is independent using the bus to visit familiar locations around town.

Yolanda's Impairments

1. Memory

Short term memory (moderate)

Anterograde memory (mild)

2. Executive functions

Initiation

Organization (mild)

Planning (moderate)

Self-monitoring (severe)

Inhibition (severe)

One of Yolanda's Goals



Goal: contribute to an online newsletter

Level 1 : can do simple email correspondence.

Level 2: will be able to write letter-style email (size, topic).

Level 3: will have one letter printed in the newsletter.

Level 4: will have regular letters printed in the newsletter.

Level 5 (fully attained): will be asked to write a guest letter.

Yolanda's Timeline of Adaptation

First letter published!

Today = 20M

Initial system:

- Controlled composition (size limit)
- Restricted process (reply required)
- Short buddy list (two relatives)

0-3

3-6

6-9

9-12

12-15

15-18

18-21

Adaptation within **process** space:

Change to: saved drafts

Linked-goal: letter-style content

Triggered-by: retain set across sessions

Adaptation within **composition** space:

Change to: freeform composition

Linked-goal: letter-style content

Triggered-by: meeting size constraints

Adaptation within **social** space:

Change to: added editor to buddy list

Linked-goal: submit to newsletter

Triggered-by: consistent performance

My Notes On Adaptation Experience

Adaptation management is a critical problem:

1. Missed adaptations.

A modification was needed and either (a) monitoring did not pick it up or (b) staff evaluation of monitored data did not pick it up.

2. Superfluous adaptations.

Typically, project staff inferred the need for an adaptation that was either (a) not supported by monitoring data, or (b) did not match with a user's goals.

Example of the former: ADLs that are hard to monitor, e.g., changing meds.

Examples of the latter: lots ☹️. But it got better as we built up higher level concepts from raw monitoring data. And were better able to know individual behavior patterns.

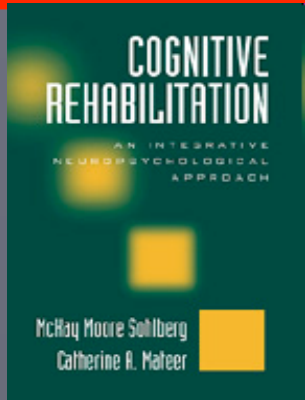
Example of the former: attempts to use time as a measure, e.g., after 6 months, most should be ready for a less-intrusive system.

Examples of the latter: our good, but misguided intentions, e.g., changes to social space when not goal-directed.

Summary to Date

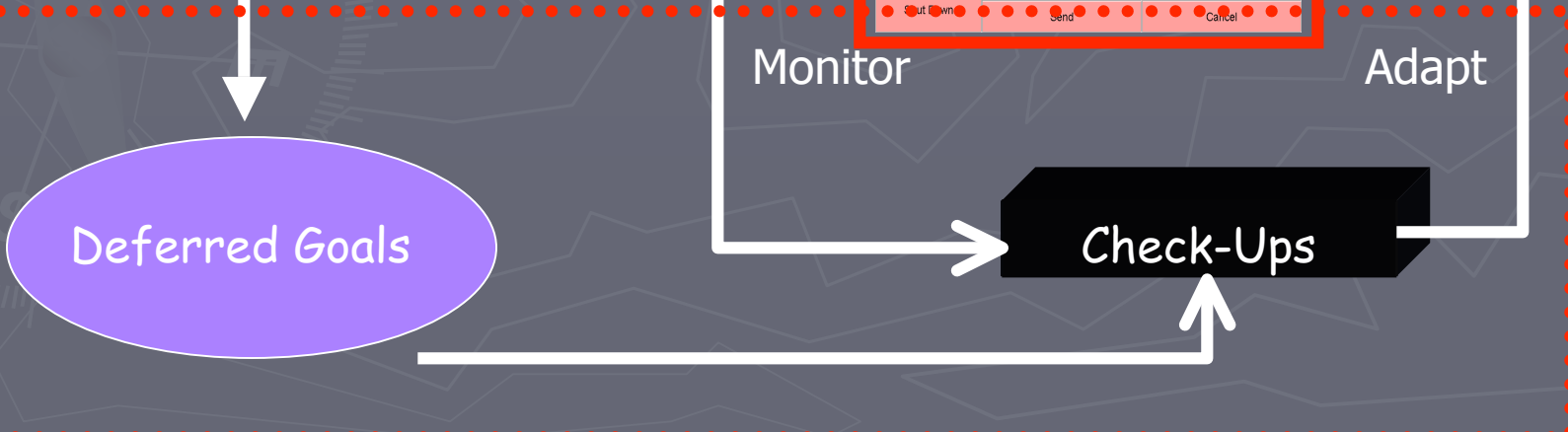
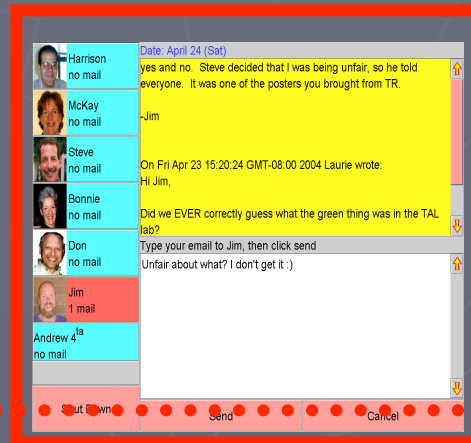
- ❖ Ten participants in study: 4 have been emailing a year or longer, 4 have been emailing at least 6 months, and 2 have just entered the study.
- ❖ They range in living environments: 3 live in their own homes, 4 live in a minimal-care facility, and 3 live in a full-care facility.
- ❖ All reported an inability to use a computer when entering the study.
- ❖ None were able to use a COTS email client during the initial exam. Same result at 6-month re-exams: none have been able to use COTS email without FTF staff support.
- ❖ The good news: all participants continue to use email successfully. All have reached at least minimal attainment of their goals.

Scale Issues, One By One



Understanding how to find a patient
Labor-intensive process now. Some automation is needed.

Initial Exam



Two Important Scale Questions

1. Can we automate portions of the monitor-adapt cycle?

[and by backchaining]

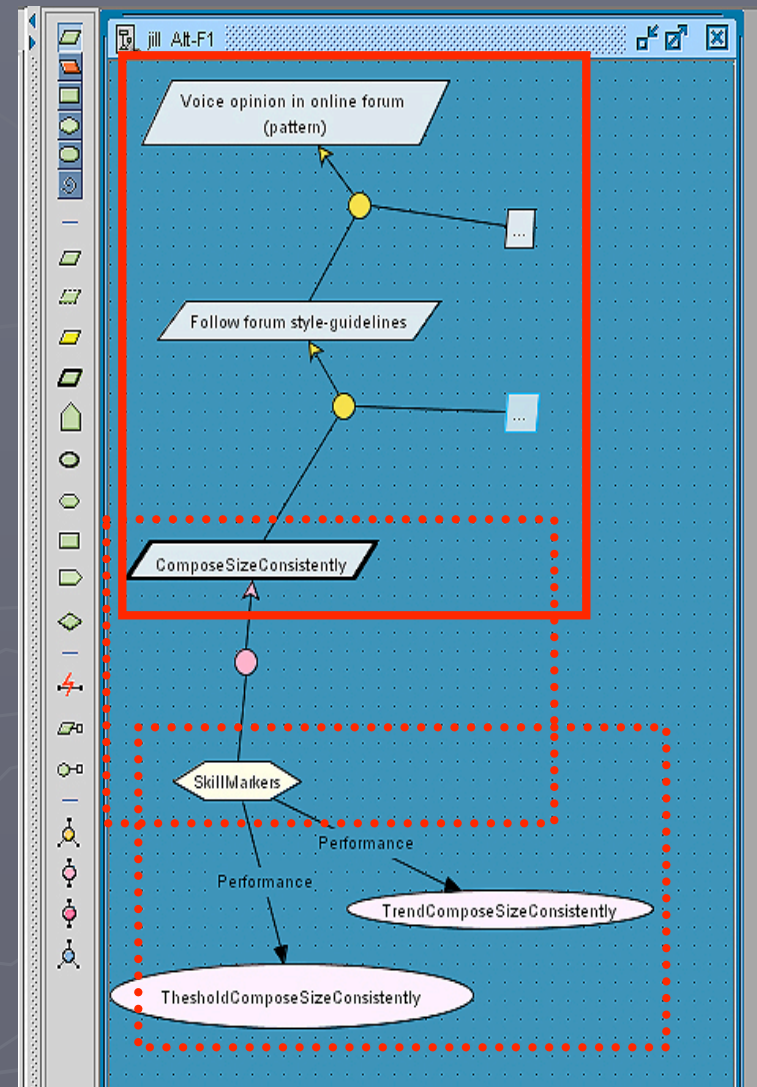
2. Can we formalize the assessment and goal-attainment processes?

A First Cut at Formalizing GAS

The KAOS Tool as a Means to Formalize GAS

1. A means to refine a goal into levels.
Yes. Rich language of goal refinement.
2. A means of attaching skill prerequisites to goals.
We are extending the language to include this.
3. A means of linking prerequisites to performance.
We are extending the language to include this.
4. A means of reasoning about events in past, present and future.

Yes. Use of LTL-style logic to reason temporally



ReqMon: Linking KAOS Goals to Monitoring (credit to Bill Robinson)

A means of attaching skill prerequisites to goals.

A means of reasoning about events in past, present and future.

A means of linking goal activation to performance.

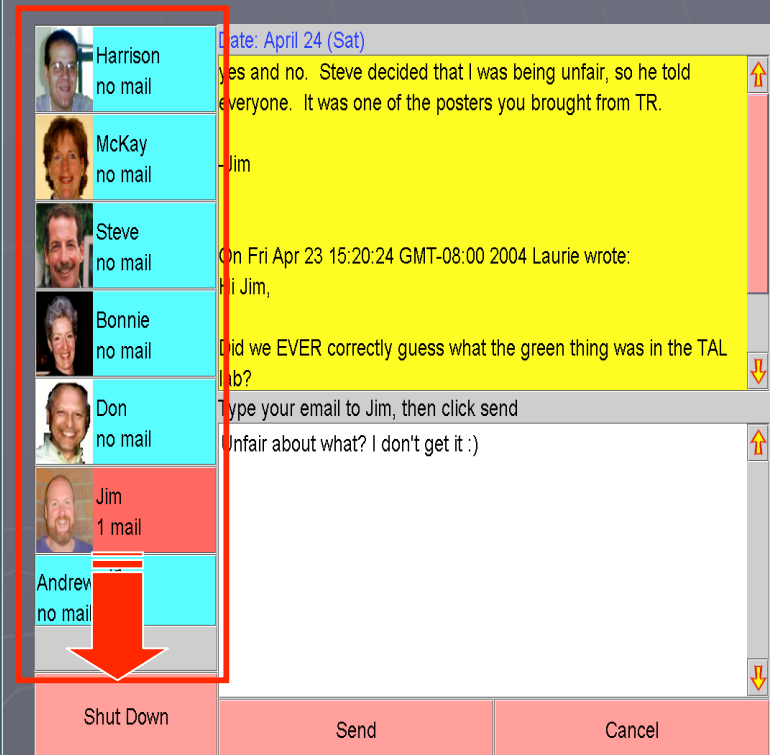
```
(GOAL ReplyInTimelyFashion
(BaseSkills: ReadSkill ReplySkill ...)
(MonitoredSkills: ThesholdReadAndReply ...)
...)

(MONITOR ThesholdReadAndReply
(Count: read:event
(m1:EmailMessage, u1,u2:User
EmailRead(m1,u2,u1))
(Count: reply:event
(m1:EmailMessage, u1,u2:User
(EmailRead(m1,u2,u1) ->
<> EmailReply(m1,u1,u2)))
(Trigger: (reply/read > .75) over 14d)
...)
```

A Small Case Study: Ron's Buddy List

Data Mining

- ❖ *Test:* rational-reconstruction of adaptations seen on project.
- ❖ *Goal monitored:* Ron wanted to eventually have lots of buddies.
- ❖ *Data collected:* Ron's daily activity in correspondence.
- ❖ *Adaptation looking for:* add new buddy to Ron's list.



Ron's email client

Read/reply within a session.

Number of *different* buddies sent to in a session.

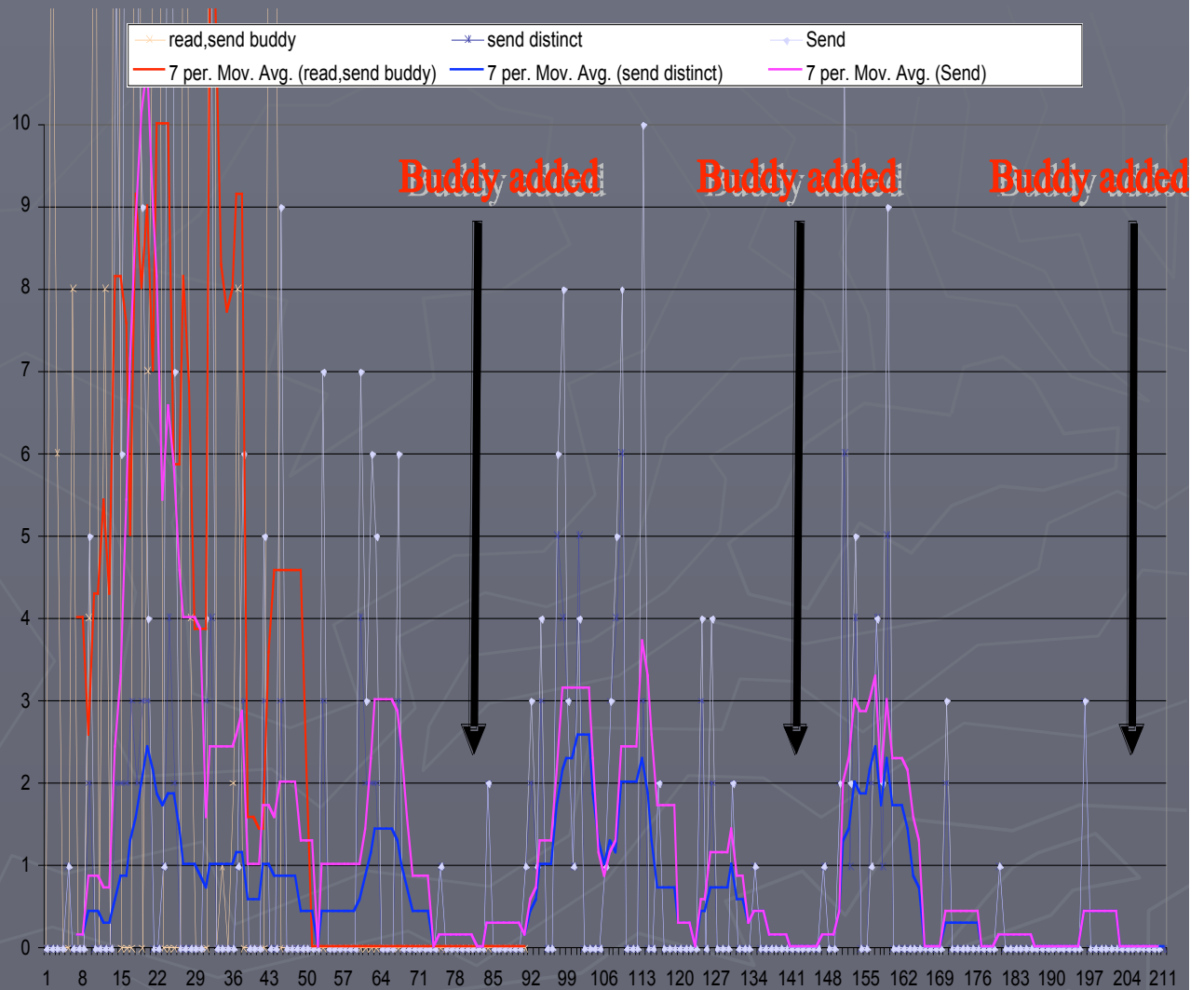
Total number of sends in a session (could be all to same buddy).

Results

- ✓ Placed monitored data in Excel.
- ✓ Plotted using various curve fitting and running average techniques.
- ✓ Potential correlation between down-trend in activity and adding buddy.

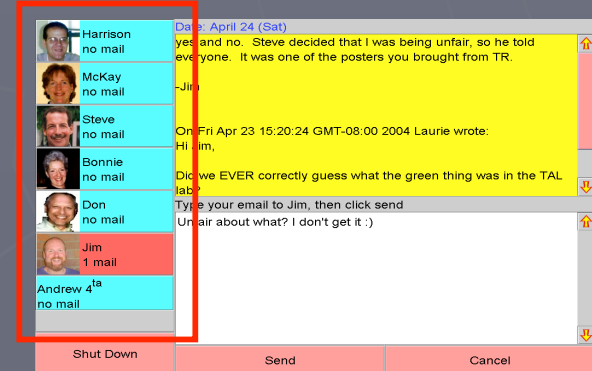
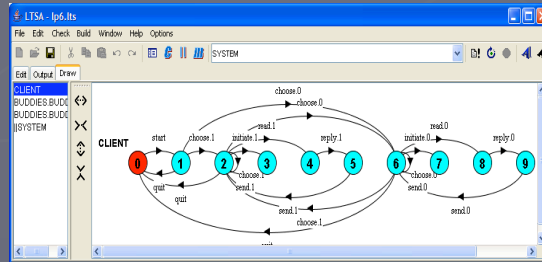
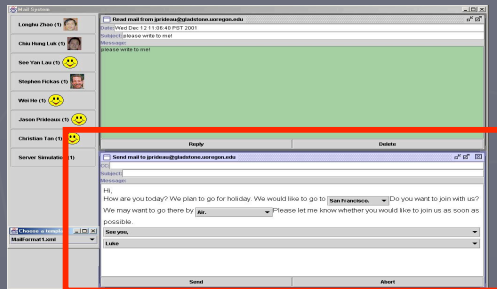
Future

- Use ReqMon data-miner to analyze, rather than Excel
- Use regression, neural net, & statistical correlation techniques



Reasoning About Adaptation

Configuration changes



Ties to adaptive systems in HCI.

Related to look-and-feel adaptations (see GTK).

Ties to adaptive business-rules.

Just starting to look here.

Ties to the social-space of email.

Growing body of work on MoSoSos.

Conclusions I Feel Safe Making

- ❖ Clinical fields take a personal view of treatment, and often employ the *GAS* approach to structure treatment.
- ❖ Cognitive Rehabilitation Clinics are a logical place to start to provide computer-based tools to a marginalized population.
- ❖ It is possible to work a Personal RE process into these clinics and have success in tool delivery and sustainability.
- ❖ Scale issues are challenging (but interesting 😊).

Sponsors Acknowledgement



National Institute on Disability and Rehabilitation Research



Web Sites

<http://www.think-and-link.org>

THINK & LINK
EMAIL FOR INDIVIDUALS WITH COGNITIVE DISABILITIES

Think and Link

Welcome to Think-and-Link. Universal access to electronic communication is our goal. It would mean that people with brain injuries could use this technology to email and stay connected with friends and relatives. While email is a major source of connection for persons without disabilities, its potential to provide social connection for persons with acquired cognitive disabilities is completely unexplored. Virtually nothing is known about what modifications are required when the email user has difficulties in memory, attention, problem solving and language. The lack of research on a potentially rich source of social connection motivates our project.

This 5 year project, funded by the U.S. Department of Education, recognizes that the development and evaluation of assistive technology for people with cognitive disabilities requires a partnership among experts in computer science, rehabilitation professionals and individuals living with the effects of cognitive disabilities. Our researchers represent each these groups and are using a collaborative research model to ensure the expertise of all is utilized in the development of our email technology. We also understand the importance of examining email use in the natural environment in order to develop appropriate supports. [Read more ...](#)

[home](#) | [survivors and family](#) | [researchers and clinicians](#) | [software developers](#) | [sponsors](#)

[write to us@think-and-link.net](mailto:write_to_us@think-and-link.net)

<http://www.go-outside.org>

Get GO Outside
Navigation Assistance For Individuals With Cognitive Disabilities

GO

Welcome to the GO project website. GO is dedicated to helping people with acquired cognitive impairments "Get Outside". Brain injuries can severely restrict one's ability to navigate around town, or even around the block. Our goal is to find ways of assisting brain injury survivors with day to day navigation tasks. We will be exploring both high-tech and human solutions.

The GO team consists of computer scientists, rehabilitation specialists, and brain injury survivors. We recognize that to create a useful solution to navigation problems, the expertise of all three groups will be needed. To that end we have held [focus groups](#) and a [special interest group](#) to learn more about the difficulties experienced by those with cognitive impairments. Because we expect that part of our solution will involve survivors carrying some kind of computer with them on excursions, we developed a [wearable prototype](#) which we demonstrated at some of the focus groups to see how people would react to its form-factor and user interface.

Recently we have been focusing our efforts on designing an [experiment](#) to investigate the various instruction modalities a navigation device could employ. This experiment will focus on audio, textual, point of view image, and plan view image modalities. We hope to begin running the experiment fairly soon.

[home](#) | [survivors and family](#) | [researchers and clinicians](#) | [software developers](#) | [sponsors](#) | [community partners](#)

Contact Us: [write to us@go-outside.org](mailto:write_to_us@go-outside.org)

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Thank You

