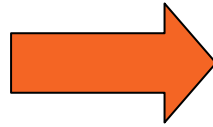

**Around 66% of women ages 15 - 44 use
some form of contraception.**

Original Domain:

Women's health



More focused problem domain:

Empowering people to make the right women's health care decisions **for them**

The Team



Shreya
Coterm in CS



Allie
BS in CS

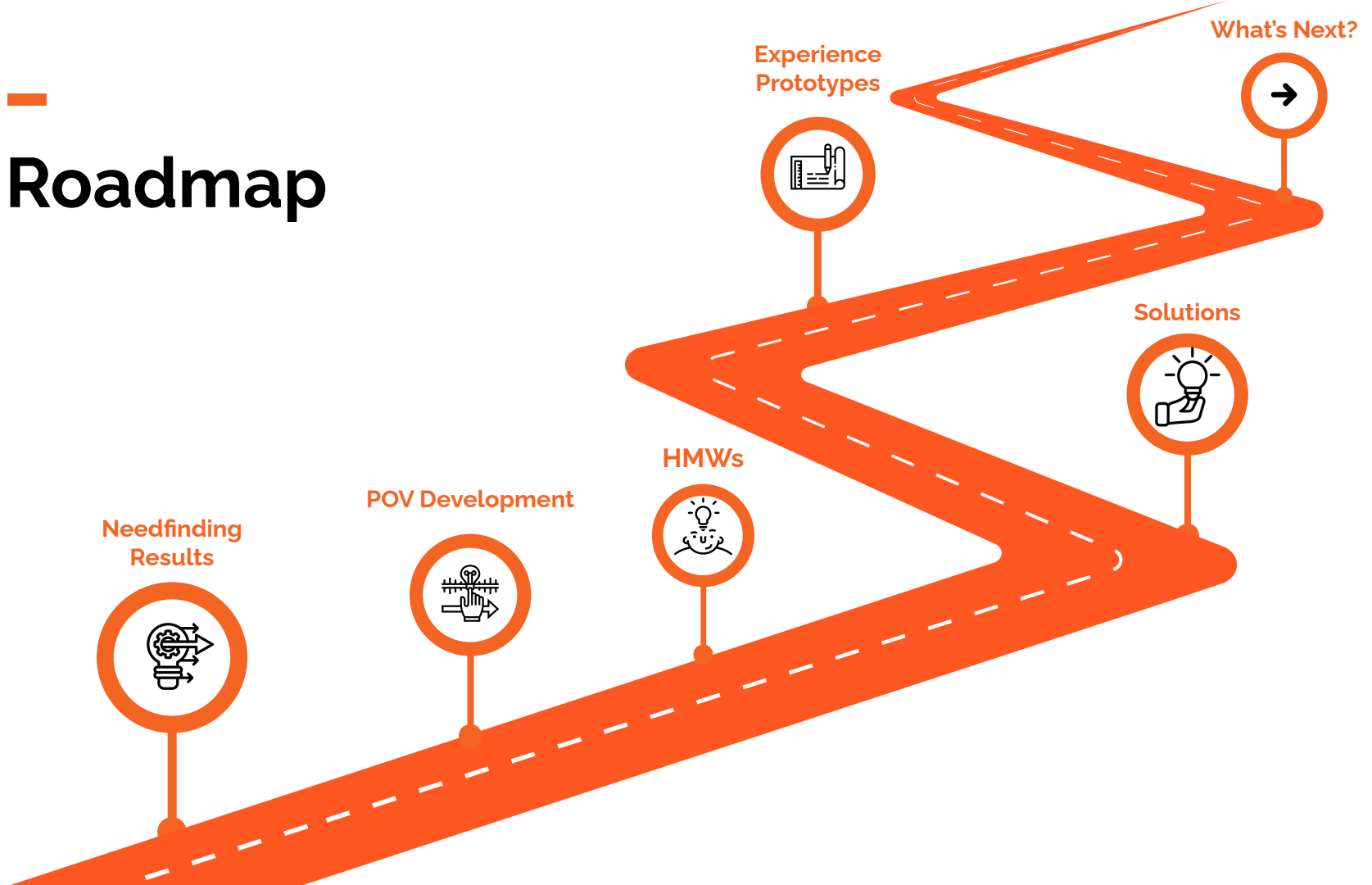


Emily
Coterm in CS

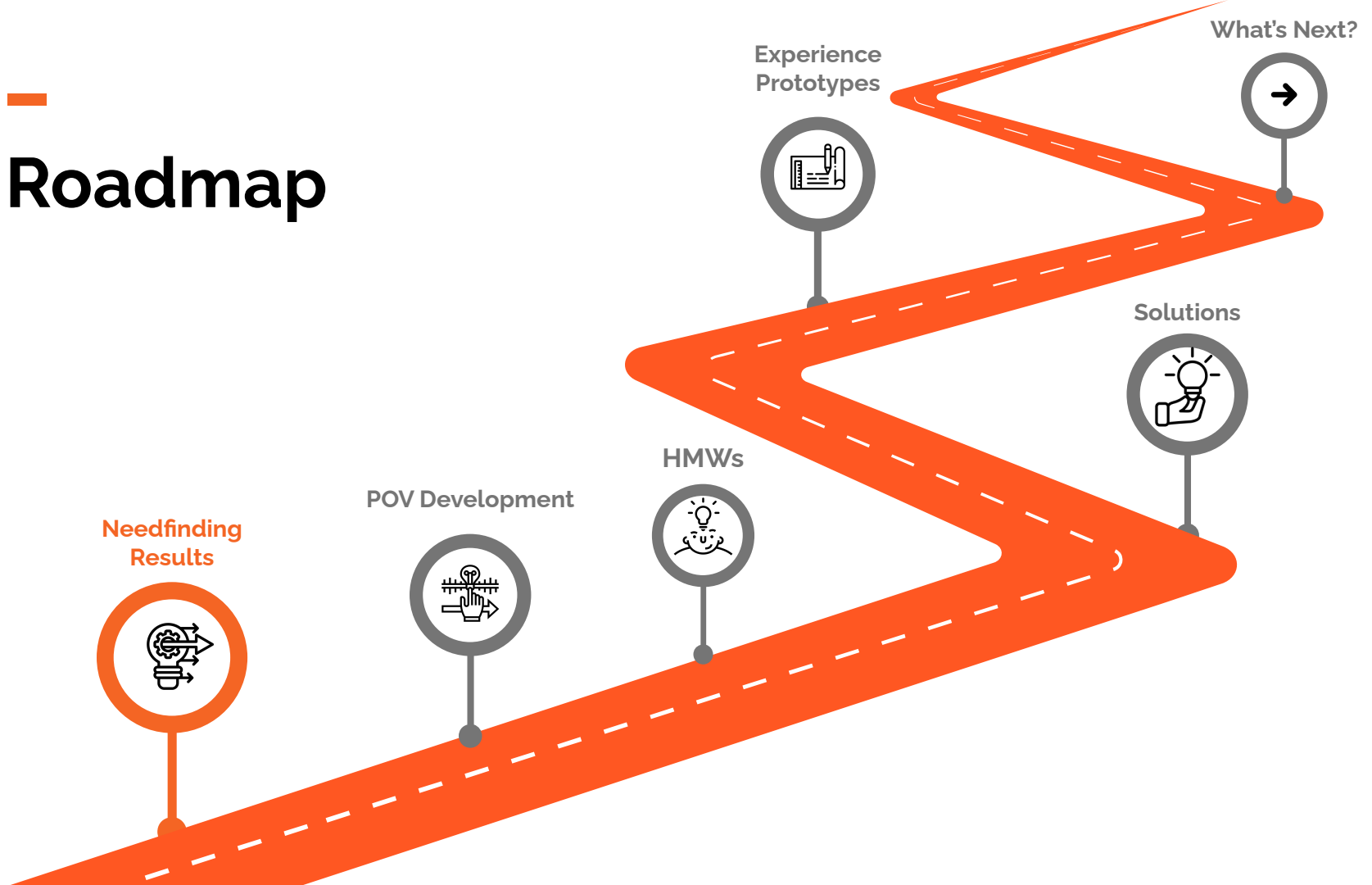


Eric
Bs in CS

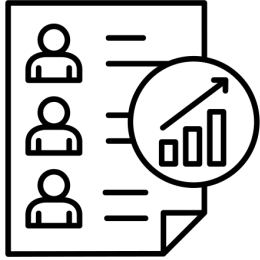
Roadmap



Roadmap



Additional Needfinding Results



Participants

Brianna, a 40-year-old sexual health specialist and premenopausal women with irregular periods.

Angela, a 66-year-old retired high school teacher who recently went through menopause.

Emily, a 23-year-old med school applicant who struggled with finding good contraceptives.





Additional Needfinding Results

Women's personal values and past experiences influence their treatment choice: Brianna cares about her menstrual health but rejected conventional hormonal treatments.

Women have to advocate for their women's health every time they change doctors: Angela finds it frustrating to distill down your medical history to a few lines.





Additional Needfinding Results

Women have difficulty finding the right contraceptive with their unique symptoms and struggles: Emily found it stressful and time consuming to figure out a good contraceptive method for herself.



POV Development + HMWs



Final POV 1

We met...

- Emily, a 23 year old medical school applicant, who has had difficulty finding the right contraceptive method for her.

We were surprised to notice...

- While she did talk to her doctor about contraceptive options, she needed to do her own research on what contraceptives were a viable option for her.

We wonder if this means...

- Finding a contraceptive that works best is a stressful and time-intensive experience for users.

It would be game-changing to...

- Simplify how menstruators understand their symptoms and needs.
-

**How might we simplify how women
record their symptoms?**





Final POV 2

We met...

Brianna, a 40-year-old administrative worker in student sexual health who is premenopausal and struggles with irregular periods and autoimmune disease.

We were surprised to notice...

Despite her complicated medical history, she was still prescribed a **one-size-fits-all** hormonal treatment.

We wonder if this means...

That there is a **lack of personalization** of treatment in relation to menstrual health which is **extremely frustrating** to users.

It would be game-changing to...

Personalize women's health medications based on preferences and patient history.

How might we personalize health medications/contraceptives for women based on their preferences and experiences?





Final POV 3

We met...

- Angela, who is a 66-year-old retired school teacher who recently finished menopause.

We were surprised to notice...

- That when older women leave the workforce they change doctors frequently due to different insurance plans.

We wonder if this means...

- That it's frustrating for older women to have to become their own self-advocate to ensure continuity of medical care.

It would be game-changing to...

- Empower women to be able to provide their medical women's health history efficiently and simply.
-

**How might we make relaying
medical history simple and
efficient?**



—

Solutions

HMW

How might we personalize health medications/contraceptives for women based on their preferences and experiences?

Solution

Give women recommendations for hormonal therapies based on previous health history and current menstrual symptoms.



HMW

How might we simplify how women record their menstrual symptoms?

Solution

Continuous questionnaire that periodically sends notifications to get symptomatic feedback based on contraception and menstrual health



HMW

How might we make relaying medical history simple and efficient?

Solution

Takes notes during doctors visits based off of recording, creates a patient's own version of doctors notes automatically which can be shared with new doctors



Experience Prototypes

Critical Assumptions

Patients WANT:

1. Their own version of doctor's notes.
 2. Personalized drug medication for women's health
 3. To Track their symptoms AND will respond to a questionnaire.
-

Experience Prototype 1

- **Solution**
Personalized recommendations for hormonal therapies.
- **Critical Assumptions**
Women want personalized drug medication.
- **Process**
Series of questions about contraception + algorithm = personalized specific contraception.
- **Questions**
Types: general health, medical history and preferences questions.

General information questions

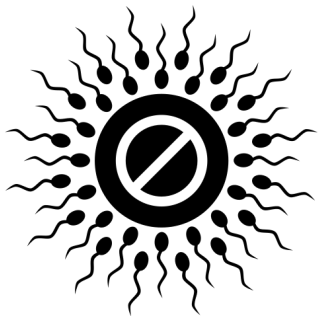
- What was the first day of your last period?
- Do you think you might be pregnant?
- Have you ever used the following medications: birth control pills, birth control shot, condoms, birth control patch, birth control ring, emergency contraception, birth control implant, IUD, or other?
- Have you ever experienced a bad reaction to using hormonal birth control? If yes, describe the method?
- Have you ever been told by a medical professional not to take birth control?

Medical History

- Have you given birth within the past 6 weeks?
- Do you have diabetes?
- Do you get migraine headaches?
- Do you have high blood pressure?
- Have you ever had a heart attack?
- Have you had recent major surgery?
- Do you have any allergies?

Preferences

- What are your habits? Can you commit to taking a drug every day?
 - What are your key concerns?
-



What Worked, What Failed

Users: Multiple college aged women.

What Worked

- Process made her feel listened to and empowered as she currently is not on contraception due to fear.

What Failed

- Needed more questions to be comfortable taking the guidance.
-

Experience Prototype 2

Do you have migraines?

-

Solution

Continuous questionnaire app that periodically sends women notifications to get symptomatic feedback that's based on contraception and menstrual health

Very rarely

Yesterday 4:22 PM

Do you have cramps?

-

Critical Assumption

Users will want to track their symptoms and will respond to a questions being sent to them

Yesterday 5:53 PM

Before I started taking birth control I did, but now I don't

Yesterday 8:25 PM

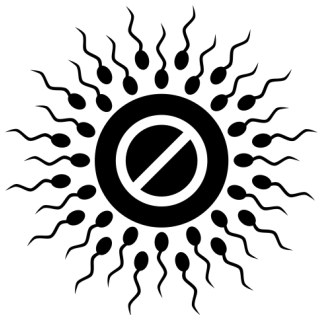
Do you bloat or get easily fatigued

-

Process

Participants were sent questions about common menstrual symptoms that would be sent to the user at random intervals throughout the to simulate an app notification.

Yes



What Worked, What Failed

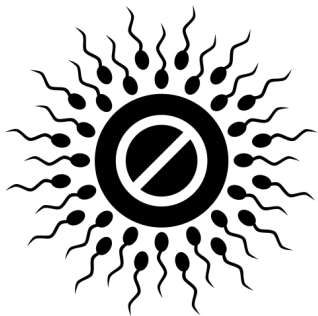
Users: Multiple college aged women.

What Worked

- Both users were willing to respond to the questions, and responded quickly
- They liked the spacing of the questions (they didn't feel spammed)

What Failed

- Users would have preferred checking off yes or no instead of typing a response
-



New Learnings & Validations

New Learnings

- Participants liked getting notifications about possible symptoms
- Participants felt they were more likely to keep track of symptoms if they were prompted by an external source

Validation

- The critical assumption was validated as the participants were willing to respond to questions to track their symptoms
-

Experience Prototype 3

Solution

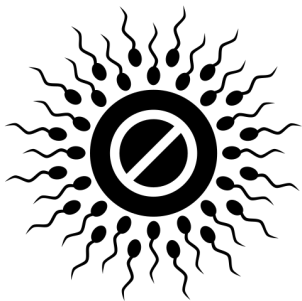
- Takes notes during doctors visits based off of recording, creates a patient's own version of doctors notes automatically which can be shared with new doctors

Critical Assumptions

- Women want an easy way to share menstrual health histories with new doctors

Process

- Ask 2 women to summarize their menstrual health histories, experiences with gynecology visits, and period symptoms currently. Provide them a summary of the points that they mentioned and ask them how they feel about the “doctor notes” that were provided to them. Would they send it to other doctors?
-



What Worked, What Failed

Users: Multiple college aged women.

What Worked

- Our two candidates really enjoyed that they got a record of their menstrual history not even for future gynecologists but for personal knowledge
- Prompting women to dig deep into their period history helped them recall symptoms and conditions they had forgotten

What Failed

- Women didn't know when they would see a gynecologist next so didn't know how relevant these notes were for future visits
-

What's Next?

Solution Selected



Solution

- Combine our first two solutions: effective and regular menstrual symptom tracking and catered contraception/menstrual regulation suggestions
 - When users join the app, we prompt them to provide their menstrual history and family history
 - We ask them if they're looking for contraception/non-hormonal therapy recommendations in which case we provide them with some
 - If not, users can use the app to track their symptoms and general health
-



Ethical Implications

- Menstrual health is poorly understood generally – it might be hard to give super catered contraceptive/non-contraceptive recommendations since not all side effects have been identified
 - We want to be careful with giving individuals lifestyle directions to follow
-



Who does it serve? Who might it leave out?

- Currently prioritizes cisgender women
 - Non-menstruating women or women unable to get pregnant may feel excluded
 - Assumes some level of access to healthcare and technology
-

Appendix

How might we simplify how women record their symptoms?

Period tracker, but once you log a period it asks for symptoms

Form where you check off each symptom instead of individual questions

Incentivize users- earn points for gift card

App sends notifications encouraging users to journal every night to win fun badges/other things.

Voice journals that transcribes your symptoms

Gamify symptom recording by making answers to questions generate art

App that incentivizes users to record during a specific time like BeReal

Video diary app where users record their day symptoms and can go back and see what they recorded for that day

Push notifications at certain times of the month that take like 30 seconds

Create a community that makes you want to post in your close-friends circle

Predictive questions based on the most common side effects of a contraceptive drug following up with specific questions

Users can put in the days that they bleed into a tracker but they can also list all of their symptoms and moods and extra information

How might we personalize health medications/contraceptives for women based on their preferences and experiences?

Connect users to gynecologists in a chosen distance range

Weekly check in that asks if prescription works/what symptoms

Give information about symptoms and benefits from different contraceptives/treatments when prompted

Give recommendations for hormonal therapies based on health history and current symptoms

Conversational app that asks for your menstrual health stories

App that connects to health care provider platforms to automatically update current meds/contraceptives

App on body (like Apple Watch) that can track some symptoms itself

App that highlights all hormonal therapies and allows users to rule out medications with certain side effects

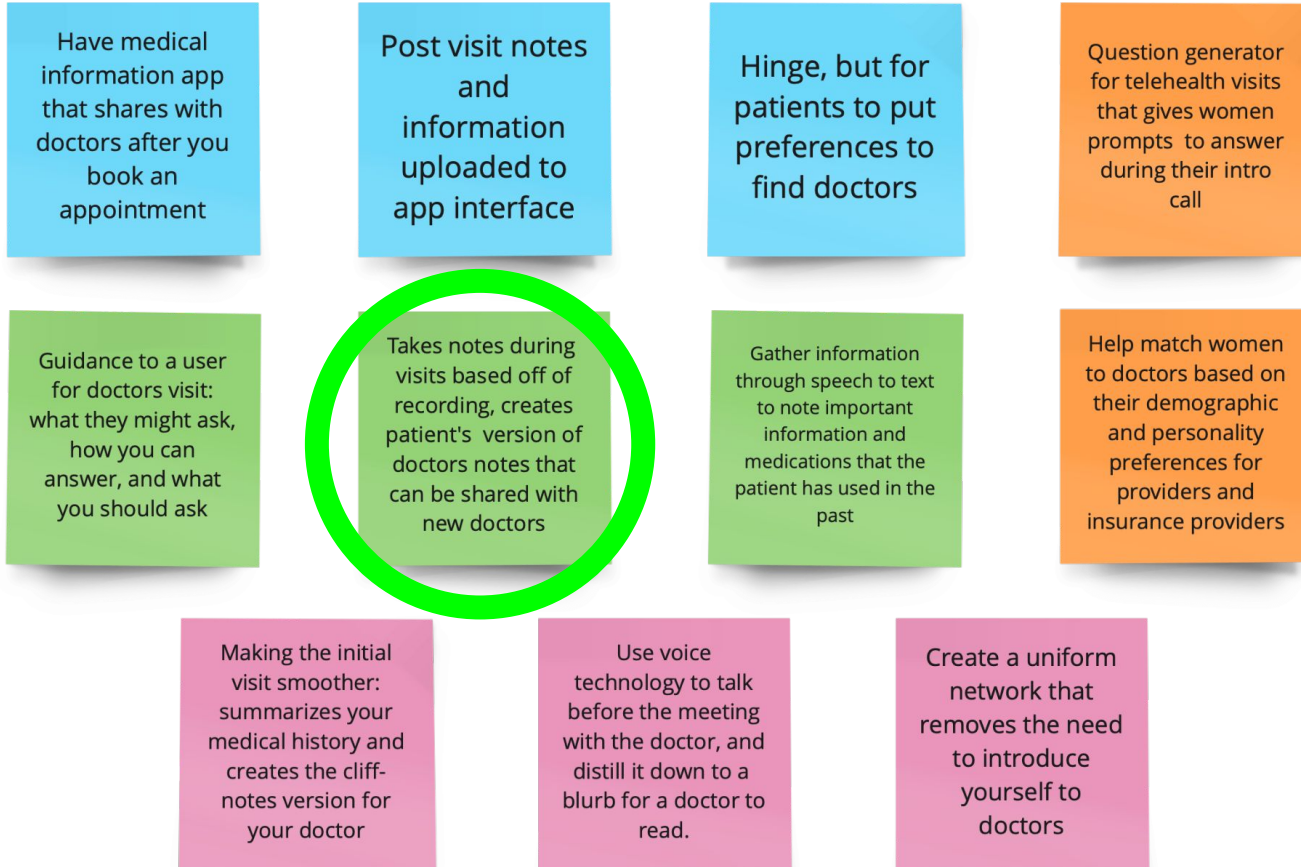
Questionnaire that takes in preferences and experiences and gives a preliminary prescription connected to telehealth providers

Information tracker that takes information from the questionnaire and purely shoots out a preliminary tracker

App that periodically sends women notifications to get feedback based on contraception and menstrual health

Users put in menstrual symptoms and conditions and provides them specific hormonal therapy alternatives based on medical conditions, preference and /history

How might we make relaying medical history simple and efficient?



Any Questions?
