

Title: Modeling Patient-centered Pathways of the Current PTSD Care System

Keywords: PTSD care; Patient-centered care; PTSD pathways

Description (Please provide a presentation description to be used in promotional literature if your presentation is accepted. Do not exceed 50 words.)

Current pathways for post-traumatic stress disorder (PTSD) care are a combination of coordinated and ad hoc efforts that have naturally evolved into a complex socio-technical system. The purpose of this study is to address such complexity by modeling the current care system with a patient-centered, systems perspective.

Abstract (This brief abstract will be used to help the committee decide if your presentation matches the conference's needs. As such, it is important to describe in as much detail as possible, the content, methods, tools and techniques, results noted to date, lessons learned, etc. Do not exceed 300 words.)

Objective/Purpose: Post-Traumatic Stress Disorder (PTSD) is a prevalent mental disorder among veterans who have served in recent combats. To meet the increasing demands, a variety of specialized diagnosis and treatment techniques have been developed over decades. Current pathways for PTSD care are a combination of coordinated and ad hoc efforts that have naturally evolved into a highly complex socio-technical system. Yet, such complexity has not been explored systematically, especially from patients' point of view. The purpose of this study is to model the current PTSD care system with a patient-centered, systems perspective, from the moment a potential patient entering the system until the moment the patient gets discharged to identify opportunities for improvement.

Methods/Approach: A descriptive model of PTSD care system has been built and validated through iterative semi-structured interviews with subject-matter experts (SMEs) – i.e., five clinical psychologists (including two having specialty in biofeedback methods) and one research psychiatrist. Interviews were transcribed, coded, and analyzed taking a grounded theory-based qualitative data analysis approach. During the coding process, each transcript was coded by at least two coders to avoid bias. An inter-coder reliability analysis was conducted to assess the level of agreement.

Results/Findings: Findings suggest that a potential patient goes through six consecutive phases in the current PTSD care system: Quick Screening, Screening & Diagnosis, Prescription, Treatment, Homework/Self-assessment, and Follow-up & Diagnostic Re-assessment. While constructing the model, three possible areas of improvements are identified. These are lack of communication between different care providers, lack of consideration of PTSD patients' unique characteristics, and lack of support for in-between sessions.

Conclusion/Practical Implications: Such findings are expected to inform the design of novel treatment-supportive technologies and enable them to be better integrated with the current care system.

Biography (This brief description should include your name, title, company, location, education, current activities, relevant former positions, honors, and other professional society or association affiliations. The biography will be used to by the Session Moderator to introduce you at the conference. Please limit your biography to 100 words.)

Jukrin Moon is a PhD student at the department of Industrial and Systems Engineering, Texas A&M University. Prior to joining her PhD program, she received BS and MS degree in the same major from KAIST, South Korea. With her advisor Dr. Farzan Sasangohar, she is currently working on designing a novel PTSD support system. She is also working on a NSF-sponsored project to improve an incident management team's decision-making with technological interventions. She is a student member of IISE and HFES, and currently an officer at the Texas A&M HFES student chapter.

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