

## PARTICIPANT INFORMATION SHEET

### Discourse, Interaction, Support and Communication Outcomes in Virtual Reality for People with Post-Stroke Aphasia (DISCOVER Aphasia) (ETH24-9754)

#### WHO IS DOING THE RESEARCH?

We are a team of **6 researchers**.

We are 4 **speech pathologists**, a **physiotherapist**, and an **orthoptist**.

Dr Lucy Bryant  
(speech pathologist at UTS)



Dr Brielle Stark  
(speech pathologist from the USA)



Professor Emma Power  
(speech pathologist at UTS)



Dr Peter Stubbs  
(physiotherapist at UTS)



Dr Vincent Nguyen  
(orthoptist at UTS)



Professor Bronwyn  
Hemsley  
(speech pathologist at UTS)



## WHAT IS THIS RESEARCH ABOUT?

**Aim:** To understand how people with aphasia **talk and move** in virtual reality.

We want to know **how virtual reality can** help with rehabilitation.

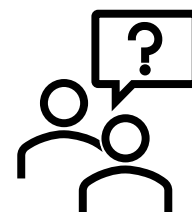
**Virtual Reality** uses glasses to make you feel like you are somewhere different.

It is like being inside the picture on your TV.



### Why?

- Virtual Reality can help with assessment and therapy
- It might help with **safe practice** of talking
- We need to make sure it works before people use it



**How?** You will **watch videos** and **talk to people** in virtual reality.

We will **ask you questions** about it and listen to your talking.

## WHY HAVE I BEEN ASKED?

We want **people with aphasia** to join the study

You had a **stroke**.

You have difficulty with talking and understanding.

You want to **try virtual reality**.



## WHAT WILL I HAVE TO DO?

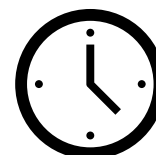
**You will do these things if you want to participate:**

We will have a **video call** with you to ask you some questions.

We will ask **about you**.

We will ask you about virtual reality to **make sure it is safe** for you to use.

This will take **20 minutes**



**20 mins**

You will visit The University of Technology Sydney.

We will do **an assessment** of your aphasia.

Then you will **use the Virtual Reality** glasses.

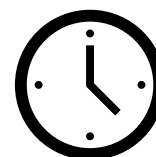
You will watch **1 video** and play **2 games**.

You will also watch a video on an iPad.

We will **ask you questions** about using Virtual Reality after each video or game, and at the end.


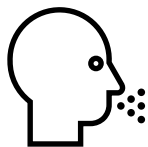


We will record you on video while you do these things.

This will take about **2 hours**.



**2 hours**

**ARE THERE ANY RISKS/INCONVENIENCE?**

<p>You could be <b>uncomfortable</b> when you use Virtual Reality.</p> <p>You can tell us if you are uncomfortable, and we will stop.</p> <p>Using Virtual Reality might make you <b>tired</b>. We can have a break if you are tired.</p>	
<p>Some people <b>feel sick</b> when they use Virtual Reality.</p> <p>We will watch closely and ask questions about sickness while you use Virtual Reality.</p> <p>We will <b>stop if you feel sick</b>.</p>	
<p>You will be <b>sitting down</b> when you use Virtual Reality so that you don't fall over.</p>	
<p>You will need to <b>travel</b> to the University of Technology Sydney for this project. It is in Chippendale, <b>in the city</b>.</p> <p>We will give you a <b>\$50 gift card</b> to help cover your travel costs.</p>	

## DO I HAVE TO SAY YES?

**You can choose** if you want to participate in this research.

You can say **no**.

If you say no, **it will not affect your relationship** with the research team or UTS.



## WHAT IF I WITHDRAW FROM THE RESEARCH?

You can stop the research **at any time**.

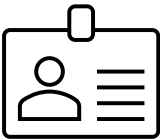

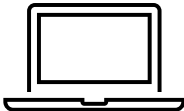
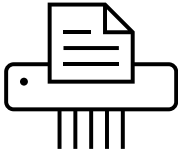


You can **tell the researcher** that you want to stop at any time.

You can send the researcher an email at [lucy.bryant@uts.edu.au](mailto:lucy.bryant@uts.edu.au)

You can choose to take your data out of the study when you stop. We have to keep your consent form by law. We will destroy all other data.



## WHAT HAPPENS TO INFORMATION ABOUT ME?

<p>You agree to let us <b>collect and use your personal information</b> for the research when you sign the consent form.</p>	
<p>All of your information will be treated <b>confidentially</b>.</p> <p>Information and video recordings that identify you will be stored separately.</p> <p>All the information will be stored at UTS. Only the researchers will be able to see it.</p>	 
<p>We will <b>keep the information</b> to use in other projects about VR if you say it is OK.</p> <p>If you don't want us to keep your information, we will destroy it after 5 years.</p> <p>Only the researchers will be able to use your information.</p>	
<p>We expect to <b>publish the results</b> from this study in articles and presentations. You will <b>not</b> be able to be identified from these publications.</p>	
<p>You have a <b>right to request information</b> that is collected and stored by the research team, in line with Australian and NSW Privacy laws. Please tell us if you want to see your information.</p>	

## WHAT IF I HAVE CONCERNS OR A COMPLAINT?

Contact Lucy if you have any questions or concerns.

[Lucy.Bryant@uts.edu.au](mailto:Lucy.Bryant@uts.edu.au)



This study has been approved by the University of Technology Sydney Human Research Ethics Committee.

If you have any concerns about the research and you want to talk to someone outside of the research team, you can contact the Ethics Secretariat at +61 2 9514 2478 or email [research.ethics@uts.edu.au](mailto:research.ethics@uts.edu.au).

## Communication Accessibility


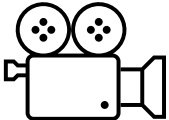
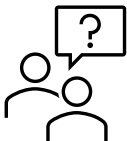


We have followed Rose et al.'s (2012) guidelines to make this document easy to follow.

Rose, T. A., Worrall, L. E., Hickson, L. M., & Hoffmann, T. C. (2012). Guiding principles for printed education materials: Design preferences of people with aphasia. *International Journal of Speech Language Pathology*, 14(1), 11–23. <https://doi.org/10.3109/17549507.2011.631583>


## CONSENT FORM

### Discourse, Interaction, Support and Communication Outcomes in Virtual Reality for people with Aphasia (DISCOVR Aphasia) (ETH24-9754)

Tick each item if you agree.

	I, _____ (name), agree to participate in the Virtual Reality research project at the University of Technology Sydney	<input type="checkbox"/>
	<p>I have read the information sheet. I understand:</p> <ul style="list-style-type: none"> <li>• Why the research is being done.</li> <li>• What I will do in the research.</li> <li>• The risks of the research.</li> </ul>	<input type="checkbox"/>
	I know I will be recorded as part of the project.	<input type="checkbox"/>
	<p>I have asked questions, if I was not sure about anything.</p> <p>I am happy with the answers.</p>	<input type="checkbox"/>
	I freely agree to participate in the research. I know I can leave the study at any time. Leaving will not affect my relationship with anyone on the research team or UTS.	<input type="checkbox"/>
	I know I will be given a signed copy of this consent form to keep.	<input type="checkbox"/>
	The researchers can keep my information for future projects on virtual reality	<input type="checkbox"/>



	<p>I know that I can contact Lucy Bryant if I have any concerns about the research. If I want to speak to another person I can contact the Ethics Secretariat at +61 2 9514 2478 or email <a href="mailto:research.ethics@uts.edu.au">research.ethics@uts.edu.au</a>.</p>	<input type="checkbox"/>
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Please sign here.

Participant name: _____	Date: _____/_____/_____
Signature [participant]: _____	

Name: _____	Date: _____/_____/_____
Researcher signature: _____	

Name: _____	Date: _____/_____/_____
Witness* signature: _____	

**Witness to the consent process**

If the participant, or if their legally acceptable representative, is not able to read this document, this form must be witnessed by an independent person over the age of 18. In the event that an interpreter is used, the interpreter may not act as a witness to the consent process. By signing the consent form, the witness attests that the information in the consent form and any other written information was accurately explained to, and apparently understood by, the participant (or representative) and that informed consent was freely given by the participant (or representative)