

## Teen Information Sheet

### ALFI VR

#### Why am I being asked to be in this study?

We are inviting teenagers aged 13 – 17 to help us test out a new Virtual Reality (VR) training game called ALFI-VR to see if it can help improve attention and impulse control. You have been asked to be in the study because you have a diagnosis of Attention Deficit/Hyperactivity Disorder (ADHD) or difficulty with attention. ADHD can make it difficult to pay attention and ignore distractions, and may be associated with impulsive or hyperactive behaviour. This can all interfere with day-to-day functioning.

The Alfi VR game has been designed to train inhibition, which is the ability to control your reactions and to change your behaviour to better suit a situation. We think that this might lead to improvements in attention and impulse control.



#### Do I have to be in the study?

Participation in any research project is voluntary. You and your parents should decide if being in this study is the right thing for you.

You have the right to leave this study at any time, this includes the right to change your mind after you start the study.

If you do not want to be in this study, you should discuss this with your parents so that you can decide together.

### **What will I need to do during this study?**

First we will ask you and your parents some questions about your home and school life. At our first visit, we'll also ask you to do some tasks on a computer. These visits will take place at your school, during class time.

In this study we are testing whether the ALFI VR game improves attention and impulse control, to do this we will ask half of you to play the ALFI VR game for 20 minutes, twice a week. Researchers will come out to your school each week for 8 weeks so that you can play the game. We will ask the other half of you to continue going to your classes as normal. That way we can make sure any improvements are due to playing the game.

At the end of the 8 weeks we will come visit you all at school one last time so you can do the same computer tasks as your first visit.

### **Can anything bad happen during the study?**

You may feel tired or get frustrated when doing some of the tasks. There is also a chance that you might experience something called cybersickness while playing the VR game. This is similar to motion sickness which you might experience on a roller coaster or boat. Just let us know if you don't feel great, and we can take a break or stop the session if needed.

### **Who will get my information?**

As part of this study, we'll be recording information about you in a database. The only people who can get copies of this information are your parents or caregivers, and the people working on this study.



### **Who can I ask questions?**

If you have any questions, you can talk to one of the study team. You can also ask your parents to talk to us if you prefer.

Dr Hannah Kirk & Prof. Kim Cornish (Lead Researchers)

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## ASSENT FORM: ALFI VR

**Project ID:** 21530

**Project title:** ALFI-VR – Training the vulnerable teenage brain: A pilot study

**Version Number:** 1

**Version Date:** 16 August 2019

**Chief Investigator:** Dr Hannah Kirk

I have been asked to join in this Monash University study. The letter that explained everything about this study has been talked about with me and I have had a chance to ask questions about it. I understand what this research project is about and would like to join in.

I understand that being in this study is my choice and that I can change my mind and choose to not be part of this study any time I like and that no one will be disappointed with me if I change my mind. I know that if I have any questions I can ask my parents or the researchers at any time.

I agree to:	Yes	No
Testing a Virtual Reality game module	<input type="checkbox"/>	<input type="checkbox"/>
Providing feedback to the researchers on this game	<input type="checkbox"/>	<input type="checkbox"/>
Completing questionnaires about myself	<input type="checkbox"/>	<input type="checkbox"/>
Completing a cognitive assessment	<input type="checkbox"/>	<input type="checkbox"/>

\_\_\_\_\_  
**Name**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**