



华东师范大学人类受试者保护委员会 University Committee on Human Research Protection

Participant Information Sheet

We sincerely invite you to participate in an experimental study on the self-training intervention of virtual reality exposure therapy (VRET) on college students' social anxiety conducted by the School of Psychological and Cognitive Sciences of East China Normal University. The experimenter of this study is Kan Chinghsiang, a graduate student in Master of Applied Psychology. This participant information sheet (PIS) will introduce you to the purpose, steps, benefits, risks, inconvenience or discomfort of the study, etc. Please read it carefully and make a prudent decision whether to participate in the study. When the researcher explains and discusses the consent form with you, you can always ask questions and let him/her explain to you what you don't understand. If you voluntarily participate in this study, please sign this PIS.

Research Purposes

We invite you to participate in the research, the results of which will help to understand the self-training intervention effect of VRET on college students' social anxiety.

Research Content

If you agree to participate in the research, we will coordinate the date with you. You need to come to the Zhongbei Campus of East China Normal University (No. 3663 Zhongshan North Road, Putuo District, Shanghai) in person for a total of 2 times, and we will guide you to use the head-mounted device (VR glasses), measure heart rate (HR) and blood pressure (BP) and conduct simple interviews. You will receive VR glasses in the school laboratory, and complete the 14-day training course at home, spending 15 minutes a day, including social scene videos and filling out questionnaires. If necessary, we will also arrange a group test or follow-up test.

The purpose of measuring HR and BP is to understand your health status in multiple regards. If the measurement results show medical abnormalities, we will give you feedback immediately.

After the training course is completed, please follow our instructions in person in the school laboratory or pick up the package by courier service (please pay the courier fee in advance, return the screenshot of the mailing list to the experimenter, and we will pay you through WeChat) Return the VR glasses.

Research Risks



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The probability and extent of the expected damage or discomfort caused by participating in this study does not exceed daily life or routine physical or psychological examinations and tests, but the following risks may still exist:

1. With regard to VR glasses, in the past research, individual participants felt dizzy and nauseated. We will invite you to test yourself in the school laboratory. In case of unbearable dizziness, nausea, you can take off your glasses immediately.
2. The social scenes presented in the video may make you feel uncomfortable, which is a key link in the effect of exposure therapy. If you do not wish to endure it, you may remove the device yourself and withdraw from the study.
3. If there are any questions in the questionnaire that make you feel uncomfortable, you can also stop answering and withdraw from the study.

If the above situation occurs, please contact the experimenter in time. If you want to talk to someone about how you feel about this study, we can introduce you to a psychological counselor.

Benefits of Participate in this Study

By participating in this study, you can get a free 14-day self-training intervention program, which may alleviate your social anxiety symptoms after extensive research abroad.

Research Fees and Compensation

After participating in this study and completing all the tasks, you will receive a remuneration of RMB 60; but if you withdraw from the study, you will not be able to get this fee.

Authorization to use participant information

When you sign this sheet, the research director, collaborators and their assistants will be allowed to see and use your relevant information. This relevant information includes the identity information you fill in and the data we collect in the research. All information will be kept as long as possible for future reference. After the study is over, your personal information will be removed, and the collected information may be used in other studies or by other researchers in the future, and the researchers will not obtain informed consent from the participants or legal guardians again.

If you withdraw from the study for any reason while the study is in progress, we will continue to use the information and study data we have already collected about you. Because we need to know the performance of all the people who take part in the study,



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not just those who complete the study.

Confidentiality and Privacy Policy

Your participation in the research and all information we collect about you while in the research will be kept confidential. We will replace your name with a code that does not contain your identity information; your information will be stored in an encrypted file, which can only be viewed by researchers; the informed consent form that records your personally identifiable information will be shared with the researcher. All other information collected about you (such as your health information and experimental data, etc.) is stored separately, so that your identity information is kept confidential. The data obtained from the research may be used for teaching, publishing in journals, peer-to-peer communication at academic conferences, or other activities, however, your name and information that can identify you will not be disclosed. You have the right to access your personal data as well as publicly reported research findings if required.

According to the Personal Information Protection Law, the research team clearly informed the following information: the identities of the participants will be numbered first, identity information (in order to send VR glasses and manage legal risks such as damage, loss and theft, it is necessary to collect addresses and ID numbers) and experiment The data is stored separately in two hard drives, and the files are encrypted separately to achieve triple privacy protection. After the research is over, the identity information will be retained for three years and then deleted and destroyed, and the experimental data will be permanently preserved.

Join or Leave the Experiment

Your participation in this study is voluntary, and you can refuse to participate if you do not want to, which will not have any negative impact on your current or future medical rights and other rights. Even after you agree to participate, you have the right to withdraw from this study at any time without explaining any reason, and you will not receive any unfair treatment because of your withdrawal, which will affect your other reasonable treatment and your rights. In addition, the investigator may voluntarily ask you to withdraw from the study, possibly for the following reasons:

- The researcher's concern for your health or safety.
- You cannot follow research instructions.
- The entire study was aborted for some reason.

After you withdraw from the study, we will still strictly follow the confidentiality and privacy regulations mentioned above, and keep your information properly.



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Contacts for Questions or Concerns

If you have any questions related to this research, please contact the experimenter Kan Chingsiang (Address: School of Psychology and Cognitive Science, East China Normal University, No. 3663 Zhongshan North Road, Putuo District, Shanghai, WeChat ID: animalfarmkang, E-mail: animalfarmkang@msn.com, Tel: 13585700546). If you have any questions about the rights and interests of the participants themselves, please contact the Human participants Protection Committee of East China Normal University, email: ask.irb@admin.ecnu.edu.cn.

Participant Statement

I _____ (name of participant) confirm:

1. I have read this participant information sheet and understand all the information given above. I have had ample time and opportunity to ask questions, and I am satisfied with the answers to my questions.
2. I have been informed who to contact if I have any questions about this study or any concerns about my rights and interests in taking part in this study.
3. I confirm that my participation in this study is voluntary and I understand that I can withdraw from this study at any time during the study without any reason. My withdrawal will not affect my medical treatment or any other legal rights and interests.
4. I have been given a copy of this participant information sheet.
5. I agree to participate in this study, and my signature on this informed consent form indicates that I agree to participate in this study.

Signature of Participant

Date

Signature of Experimenter

Date