# Survey for Elderly Tech-Usage & Preferences

**CONSENT TO PARTICIPATE IN**

Case Study: Designing for the Elderly

I understand that I have been asked to participate in a research project being conducted under the supervision of Hakim Mellah of Computer Science and Software Engineering of Concordia University (hakim.mellah@concordia.ca).

**A. PURPOSE**

I have been informed that the purpose of the research is to look at the user experience and user interface (UX and UI) design an application to support elderly users' physical and mental wellbeing whether living at home or in a nursing home with a focus on our current times. Participants of the study will be asked about their current screen time habits, which apps help them to connect with others, how comfortable they are with technology, what kind of apps they find are good for the health, happiness, etc.

**B. PROCEDURES**

I understand that by participating in the following research I will be requested to answer questions and discuss your feelings towards and opinions of smartphone and other applications. I understand I will be asked about my perception of what would be useful for encouraging healthy habits, happiness and wellbeing, what kind of app functionality would be deemed useful, what would make it usable etc.
Furthermore, participants might be asked to look at designs and play around with prototypes and be asked about their opinions on the designs and experiences using these prototypes. Participation in this research will be carried out either using online questionnaires or virtual interviews.

**C. RISKS AND BENEFITS**

It is not anticipated that you will experience any discomfort from the procedures, and this research is not intended to benefit you personally.

**D. CONDITIONS OF PARTICIPATION**

• I understand that I am free to withdraw my consent and discontinue my participation at any time without negative consequences.
• I understand that my participation in this study is: CONFIDENTIAL (i.e., the researcher will know, but will not disclose my identity)
• I understand that the data from this study may be published.

**I HAVE CAREFULLY STUDIED THE ABOVE AND UNDERSTAND THIS AGREEMENT. I FREELY CONSENT AND VOLUNTARILY AGREE TO PARTICIPATE IN THIS STUDY.**

Name:_____

Signature:_____

If at any time you have questions about the proposed research, please contact the study's Principal Investigator Hakim Mellah of CSSE of Concordia University (hakim.mellah@concordia.ca).
If at any time you have questions about your rights as a research participant, please contact the Manager, Research Ethics, Concordia University, 514.848.2424 ex. 7481 oor.ethics@concordia.

1. **1. What is your age group?**

   *Mark only one oval.*

   ◯ a) 60-65

   ◯ b) 66-70

   ◯ c) 71-75

   ◯ d) 76-80

   ◯ e) 81 and above

2. **2. Do you have any chronic illnesses or medical conditions?**

   *Mark only one oval.*

   ◯ Yes

   ◯ No

3. **3. Do you feel you lack social interaction in your daily life?**

*Mark only one oval.*

◯ Yes

◯ No

4. **4. Do you use a cellphone or smartphone regularly?**

*Mark only one oval.*

◯ Yes

◯ No

5. **5. What type of apps do you generally use on your cellphone/smartphone?**

*Check all that apply.*

☐ a) Social Media (e.g., Facebook, WhatsApp)

☐ b) Health & Fitness (e.g., step tracker, medication reminders)

☐ c) Games & Entertainment

☐ d) News & Information

6. **6. Would you prefer having an app that centralizes many features (like medication reminders, social connection, and news) instead of using multiple apps?**

*Mark only one oval.*

◯ Yes

◯ No

7. **7. What prevents you from using or downloading more apps on your cellphone?**

*Check all that apply.*

☐ a) I find some apps confusing or not intuitive.

☐ b) My phone lacks storage or becomes slow.

☐ c) Concerns about privacy and data.

☐ d) Other

8. **8. In your opinion, what makes an app good or user-friendly for you?**

*Check all that apply.*

☐ a) Simple and easy-to-understand design.

☐ b) Useful features that cater to my needs.

☐ c) Quick response and not laggy.

☐ d) Good customer support or help features.

9. **9. Is the privacy of your data (like personal information, contacts, photos) important to you when using an app?**

*Mark only one oval.*

◯ Yes

◯ No

10. **10. How often do you seek help (from friends, family, or online sources) when facing challenges with an app or tech device?**

*Mark only one oval.*

◯ Frequently

◯ Rarely

◯ Never