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# Enhancing health communication through virtual reality-based art therapy: an opinion

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virtual reality, art therapy, health communication, media perception, health education

#### 1 Introduction

Art practice promotes health, helps manage life problems, and prevents physical and mental health conditions (World Health Organization, 2019). Art therapy refers to therapist-led, art-based creative practices to improve client mental health (Malchiodi, 2011); it pertains to physical activity and positive mood, and facilitates healing and health education and communication. Artistic activities (e.g., dance) are considered therapy forms that emphasize experience participation, action-oriented technology, and creative expression. Virtual reality (VR) has improved convenience in artistic activities—reducing space, materials, and tools limitations; it promotes self-acceptance and mental health knowledge acquisition (Kaimal et al., 2020; Shamri Zeevi, 2021).

There are comprehensive reviews on art-based health communication and education research, showcasing that art helps spread understanding of health problems and the need for an art-public health link. One study reviewed art application in American community health communication projects, encompassing studies with different cultural groups and health-sensitive topics (e.g., depression; Sonke et al., 2021). It shows the usability of art to establish relationships with these groups, attention to health issues, and to form a health communication program. Art therapy also induces healthy emotional states during activities, difficult-to-achieve emotional states, and improves individuals' ability to conduct healthy self-reflection (van den Broek et al., 2011).

Health communication has changed significantly in the new media era (Riva et al., 2019); it utilizes communication evidence, strategy, theory, and creativity to advocate for behaviors and practices that enhance individual- and community-level health and wellbeing (Edgar and Volkman, 2012). Effective health publicity uses educational information with entertainment and mass media platforms. Health communication has been combined with art to provide accessible and operational health information (Robinson et al., 2014; Orji and Moffatt, 2018). Moreover, perception- and art-oriented health communication uses the unique feelings generated in aesthetic encounters for transformation (National Center for Health Statistics, 2020a,b; Sajnani et al., 2020). VR-based art therapy is an innovative method that provides healing environments for people with physical and mental health problems, complementing health communication activities.

Research on VR-based health communication is limited and has primarily focused on immersion and health information visualization functions. For example, visualizing food products' impact on the environment and health through VR supermarkets

that display related information can help promote environmentally-friendly food choices (Smit et al., 2021). VR videos (e.g., hand-washing promotion videos) can help promote Korean students' willingness to engage in preventive health behaviors (Meijers et al., 2022). VR vaccine information can also increase vaccination intention and influenza transmission concerns (Lee et al., 2023). However, these studies targeted specific demographics, neglecting VR's diverse applications.

The progress and affordability of technology allowed VR application to art therapy. Numerous studies have used VR to examine behavior (Banakou and Slater, 2014), neural processing (Limanowski et al., 2017); treat phobia (Botella et al., 2017), post-traumatic stress disorder, anxiety (Goncalves et al., 2012), eating disorders (Clus et al., 2018); and offer pain management (Freeman et al., 2017). This article speculates that VR use in interventions effectively promotes the integration of mental health education and practical efforts, marking a shift of VR from its use in treatment to its use in communication and experience, making it a powerful driver of health–art integration into daily life. It comprehensively reviews studies on VR-based art therapy, classifies them, outlines the benefits of VR's artistic use for health, and evaluates VR-based art therapy's effectiveness for health communication purposes.

# 2 VR art therapy and its health communication potential

There are several categories of VR-based art therapy. Some provide participants with a diversified activity environment, like TiltBrush (i.e., allows drawing in a 3D environment). Using the acoustic response mode enables several people to simultaneously conduct painting activities in a shared VR environment, enhancing the collective perceived connection and affinity (Hacmun et al., 2021; Haeyen and Noorthoorn, 2021). VR can also simulate the traditional ceramic vase modeling, provide users with digital tools, and connect health education with traditional culture by providing authentic, culturally-meaningful experiences (Capece et al., 2023) VR can also help reach different disease groups and tackle the therapeutic needs of different age groups. Researchers have evaluated VR's effectiveness in neurological rehabilitation programs for children with attention-deficit/hyperactivity disorder, and improved the ecological effectiveness of treatment and children's participation by providing interactive experiences (Goharinejad et al., 2022; Zangiacomi et al., 2022). VR use as a screening and training tool for older adults' cognitive impairment helped screen for diseases and disseminate health information (Skurla et al., 2022). Individuals can use VR to participate in artistic creation activities at home. VR's artistic creation background and types draw attention to health and health awareness (Cavalcanti Barroso et al., 2022; Stevenson and Orr, 2013).

With this lack alongside mobile media's popularity, improvements in sensory participation during health treatment and education enhance the aesthetic experience of artistic activities (Sajnani et al., 2020) and improve health knowledge acceptance (Tao et al., 2021). Aesthetic experiences are "heightened, immersive, and particularly meaningful" and "important to us because they demonstrate the expressive power of life" (Parrish, 2007). Thus, VR provides aesthetic experiences and effectively realizes the

integration of health education, artistic creation, and daily life. Public health professionals often mention the importance of art in cultivating a sense of meaning, and that meaningful experiences are more memorable and help people consider problems more deeply (Koch, 2017). The theoretical framework of experiential aesthetics includes artistic perception (impression side) and active artistic creation (expression side) (Koch, 2017). In VR's vivid aesthetic experiences, both artistic perception and creation are magnified by the immersive creative environment, realizing the concept of health knowledge through such experience. By integrating aesthetic experiences with health communication, VR can enhance the appeal, effectiveness, experience, and retention of health messages. This intersection of art, technology, and health communication opens innovative possibilities for health education and empowerment.

Health communication should be based on two-way information exchanges and use "common signs and behavior systems" (Malikhao, 2020), be approachable, and able to generate "feelings of mutual understanding and sympathy" between communication group members and audiences (Backer et al., 1992; Kreuter and Wray, 2003). Therefore, VR can be considered a practical alternative to traditional art therapy (Hacmun et al., 2021), and can be spread as a people-oriented care method. The creative connection afforded by VR basic creative art activities allows for the gradual elimination of communication barriers between health information and audiences (Haeyen et al., 2021; Gillibrand et al., 2023). VR may also be more attractive for some groups, such as people with mobility difficulties and youngsters with game addiction tendencies, expanding the range of audiences for health communication (Shamri Zeevi, 2021). Furthermore, health practitioners conducting artistic creation activities with audiences helps reduce the communicator-audience and doctor-patient power dynamics (Horghagen et al., 2007) producing positive psychological reactions on both sides. Using VR as an experiential tool in physical and mental healthcare activities stimulates interest and promotes communication and information dissemination.

# 3 Advantages and limitations

# 3.1 Advantages

Communication activities can be considered as aesthetic art. VR injects vitality into health communication by updating the experience of artistic healing and health activities and providing multiple simulation environments. By doing so, classic narratives can be effectively revitalized, transformed into dynamic narratives, and their rigidity can be challenged (Chinn and Kramer, 1991; Kaimal et al., 2020). The integration of physical interaction and VR-based artistic creation further improves (vs. traditional health communication) participation in artistic creation (Lohrius and Malchiodi, 2018), enabling involvement in health-related activities tailored to conditions, promoting health knowledge acquisition, and personalized narrative cultivation (Bale et al., 2023). Through its immersion and foresight, VR integrates entertainment and education into health communication.

VR technology has great appeal to youngsters, who are proficient in technology. They are often the promoters and

audiences of VR-based health communication because of their openness to new technologies and comfortableness in using VR (Kouijzer et al., 2023). To maintain the relevance of health communication, VR contents are generally designed to be more enjoyable than traditional contents (Namkoong et al., 2023).

VR provides a safe experience for engagement in various artistic activities. People can experience the "sense of existence" of events through virtual interaction with objects (Rivera et al., 2015). While traditional official agency communication and one-way printed publicity only enable passive education, VR affords a sense of existence that can produce an embodied direct experience, enabling the application of own health understanding into artistic practice to obtain more intuitive and profound health knowledge. Some patients with mental illnesses, severe dementia, and risks of self-injury and aggression may consume non-edible objects and not be allowed to use tools to participate in manual creative activities (e.g., carpentry; Vaartio-Rajalin et al., 2021). VR may enable them to experience virtual creation while ensuring their safety (Kouijzer et al., 2023).

#### 3.2 Limitations

VR-based art therapy use in health communication has several challenges. VR technology development has been uneven across fields, and yet VR-based art therapy mandates ongoing technical refinements to achieve universal applicability. Additional sensory inputs and actuators, like the amalgamation of olfaction and gustation (Spence et al., 2017), remain under development. Users often believe that art therapists are reluctant to embrace novel technologies due to either regional technological disparities or a lack of related proficiency (Haeyen, 2020). However, this perspective overlooks the potential advantages of VR-based art therapy.

#### 4 Discussion

VR-based art therapy utilizes VR's sense of presence and immersion, has diversified practice forms, and promotes inclusiveness. Furthermore, while VR-based health communication provides passive educational experiences, simulation observation, and skill training, VR-based art therapy gives way for inspiration from artistic creation and self-expression. Since the promotion of health knowledge and emotional resonance sometimes overlap, health communication activities could use VR-based art therapy to customize the environment according to healthcare needs and encourage spontaneous expression. This personalized method may be more adaptable to participants' real-time reactions, making health communication more effective for each user. Thus, VR-based art therapy may be applicable to health communication.

This article presents the following opinions on VR-based art therapy application and research in health communication activities. First, empirical research should validate VR-based art therapy's effectiveness in health communication, specifically its effects on mental health, emotional release, and health behaviors. Research and feedback mechanisms should be established, and user behavioral and physiological reaction data related to health

communication activities using VR-based art therapy should be collected for activity optimization. This will help us better understand the effect of different interventions and conduct the necessary adjustments. Notably, behavioral and physiological data can only be interpreted in light of patients' subjective assessment of therapy effectiveness and subsequent health-related behaviors.

Second, VR can be used to design personalized art experience programs (e.g., painting) to meet individual preferences. Various VR intervention types (e.g., VR experiences) should be distinguished to secure targeted treatment (Perez-Marcos, 2018).

Third, VR's ability to embody different perspectives should be leveraged to build empathy and self-awareness around health issues. VR-based artistic experiences tailored for health issues (e.g., mental health) should be designed, and VR's interactive features should be employed to stimulate emotional responses (e.g., experiences that show the treatment's emotional journey).

Fourth, VR can be used to create communal artistic endeavors that facilitate engagement, connections, and a platform for advocacy. Public health institutions should also incorporate VR-based reality art therapy equipment, as these can provide a platform for personal narrative exploration in health education. Allowing session-based artwork continuation could also deepen the engagement with health topics.

Fifth, interdisciplinary medical teams should cooperate with technical teams to design VR-based artistic health communication activities, ensuring that the activities meet professional and safety standards.

Finally, future research could quantify the benefits of VR-based art therapy in health communication and explore intervention optimization for different contexts. Studies on long-term outcomes and specific VR-based health communication intervention effectiveness in various demographic groups would provide deeper insights into VR's potential.

VR-based art therapy presents a promising frontier for enhancing health communication, as its immersive artistic environments support health activity simulation, aesthetic experiences, and participants' understanding—hence contributing to more effective health communication. As VR evolves, its art therapy application could become crucial in health communication for its immersion, convenience, and diversity.

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# Conflict of interest

The authors declare that the research was conducted in the absence of any commercial or financial relationships

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## References

Backer, T. E., Rogers, E., and Sopory, P. (1992). Designing Health Communication Campaigns: What Works? Newbury Park: Sage Publications.

Bale, A. S., Javed, S., Mishra, P., and Savadatti, M. B. (2023). Psychological approach based on virtual reality (VR) for creating successful encounters to improve mobility for people with disabilities. *J. ReAttach Ther. Dev. Divers.* 6, 182–190.

Banakou, D., and Slater, M. (2014). Body ownership causes illusory self-attribution of speaking and influences subsequent real speaking. *Proc. Natl. Acad. Sci. U. S. A.* 111, 17678–17683. doi: 10.1073/pnas.1414936111

Botella, C., Fernandez-Alvarez, J., Guillen, V., Garcia-Palacios, A., and Banos, R. (2017). Recent progress in virtual reality exposure therapy for phobias: a systematic review. *Curr. Psychiatry Rep.* 19:42. doi: 10.1007/s11920-017-0788-4

Capece, N., Gatto, C., Manfredi, G., Gilio, G., Nuzzo, B. L., De Paolis, L. T., et al. (2023). Enhancing art therapy with virtual reality and hand gesture recognition: a case study in pottery modeling. *Int. Conf. Extend. Real.* 14219, 210–226. doi: 10.1007/978-3-031-43404-4 14

Cavalcanti Barroso, A., Rai, H. K., Sousa, L., Orrell, M., and Schneider, J. (2022). Participatory visual arts activities for people with dementia: a review. *Perspect. Public Health* 142, 22–31. doi: 10.1177/1757913920948916

Chinn, P. L., and Kramer, M. K. (1991). Theory and Nursing: Integrated Knowledge Development. St. Louis: Mosby.

Clus, D., Larsen, M. E., Lemey, C., and Berrouiguet, S. (2018). The use of virtual reality in patients with eating disorders: systematic review. *J. Med. Int. Res.* 20:e157. doi: 10.2196/jmir.7898

Edgar, T., and Volkman, J. E. (2012). Using communication theory for health promotion: practical guidance on message design and strategy. *Health Promot. Pract.* 13, 587–590. doi: 10.1177/1524839912450879

Freeman, D., Reeve, S., Robinson, A., Ehlers, A., Clark, D., Spanlang, B., et al. (2017). Virtual reality in the assessment, understanding, and treatment of mental health disorders. *Psychol. Med.* 47, 2393–2400. doi: 10.1017/S003329171700040X

Gillibrand, S., Hine, P., Conyers, R., Gravestock, J., Walsh, C., McAvoy, A., et al. (2023). "Take a walk in someone else's shoes": the role of participatory arts for health research development and training. *Res. Involv. Engage.* 9:40. doi: 10.1186/s40900-023-00441-6

Goharinejad, S., Goharinejad, S., Hajesmaeel-Gohari, S., and Bahaadinbeigy, K. (2022). The usefulness of virtual, augmented, and mixed reality technologies in the diagnosis and treatment of attention deficit hyperactivity disorder in children: an overview of relevant studies. *BMC Psychiatry* 22:4. doi: 10.1186/s12888-021-03632-1

Goncalves, R., Pedrozo, A. L., Coutinho, E. S., Figueira, I., and Ventura, P. (2012). Efficacy of virtual reality exposure therapy in the treatment of PTSD: a systematic review. *PLoS ONE* 7:e48469. doi: 10.1371/journal.pone.0048469

Hacmun, I., Regev, D., and Salomon, R. (2021). Artistic creation in virtual reality for art therapy: a qualitative study with expert art therapists. *Arts Psychotherapy* 72:101745. doi: 10.1016/j.aip.2020.101745

Haeyen, S. (2020). Vaktherapie online; het perspectief van vaktherapeuten. Resultaten van de enquête over online vaktherapie. Available online at: https://www.han.nl/projecten/2020/online-vaktherapie.-telepresent-zijn-als-vaktherapeut/Artikel-TAV-TVVT-Vaktherapie-online-het-perspectief-van-vaktherapeuten.pdf (accessed April 29, 2024).

Haeyen, S., Jans, N., and Heijman, J. (2021). The use of VR tilt brush in art and psychomotor therapy: an innovative perspective. *Arts Psychotherapy* 76:101855. doi: 10.1016/j.aip.2021.101855

Haeyen, S., and Noorthoorn, E. (2021). Validity of the self-expression and emotion regulation in Art Therapy Scale (SERATS). *PLoS ONE* 16:e0248315. doi: 10.1371/journal.pone.0248315

Horghagen, S., Josephsson, S., and Alsaker, S. (2007). The use of craft activities as an occupational therapy treatment modality in Norway during 1952–1960. *Occup. Ther. Int.* 14. 42–56. doi: 10.1002/oti.222

Kaimal, G., Carroll-Haskins, K., Ramakrishnan, A., Magsamen, S., Arslanbek, A., and Herres, J. (2020). Outcomes of visual self-expression in virtual reality on psychosocial well-being with the inclusion of a fragrance stimulus: a pilot mixed-methods study. *Front. Psychol.* 11:589461. doi: 10.3389/fpsyg.2020.589461

Koch, S. C. (2017). Arts and health: active factors and a theory framework of embodied aesthetics. *Arts Psychotherapy* 54, 85–91. doi: 10.1016/j.aip.2017.02.002

Kouijzer, M., Kip, H., Bouman, Y. H. A., and Kelders, S. M. (2023). Implementation of virtual reality in healthcare: a scoping review on the implementation process of virtual reality in various healthcare settings. *Implement. Sci. Commun.* 4:67. doi: 10.1186/s43058-023-00442-2

Kreuter, M. W., and Wray, R. J. (2003). Tailored and targeted health communication: strategies for enhancing information relevance. *Am. J. Health Behav.* 27, S227–S232. doi: 10.5993/AJHB.27.1.s3.6

Lee, J., Wu, D.-Y., Lin, J.-H., Kim, J., and Ahn, S. J. (2023). Using time travel in virtual reality (VR) to increase efficacy perceptions of influenza vaccination. *J. Comp. Mediat. Commun.* 28:zmad010. doi: 10.1093/jcmc/zmad010

Limanowski, J., Kirilina, E., and Blankenburg, F. (2017). Neuronal correlates of continuous manual tracking under varying visual movement feedback in a virtual reality environment. *Neuroimage* 146, 81–89. doi: 10.1016/j.neuroimage.2016.11.009

Lohrius, J., and Malchiodi, C. (2018). "Virtual reality art therapy," in *Handbook of Art Therapy and Digital Technology*, ed C. Malchiodi (London; Philadelphia, PA: Jessica Kingsley Publishers).

Malchiodi, C. A. (2011). Handbook of Art Therapy. New York, NY; London: Guilford Press.

Malikhao, P. (2020). Health Communication: Approaches, Strategies, and Ways to Sustainability on Health or Health for All. Handbook of Communication for Development and Social Change (Singapore: Springer), 1015–1037.

Meijers, M. H., Smit, E. S., de Wildt, K., Karvonen, S.-G., van der Plas, D., and van der Laan, L. N. (2022). Stimulating sustainable food choices using virtual reality: taking an environmental vs health communication perspective on enhancing response efficacy beliefs. *Environ. Commun.* 16, 1–22. doi: 10.1080/17524032.2021.1943700

Namkoong, K., Chen, J., Leach, J., Song, Y., Vincent, S., Byrd, A. P., et al. (2023). Virtual reality for public health: a study on a VR intervention to enhance occupational injury prevention. *J. Public Health* 45, 136–144. doi: 10.1093/pubmed/fdab407

National Center for Health Statistics (2020a). *Healthy People 2020*. Available online at: https://www.cdc.gov/nchs/healthy\_people/hp2020.htm (accessed April 28, 2024).

National Center for Health Statistics (2020b). *Healthy People 2020*. Available online at: https://www.cdc.gov/nchs/healthy\_people/hp2020.htm (accessed April 28, 2024).

Orji, R., and Moffatt, K. (2018). Persuasive technology for health and wellness: state-of-the-art and emerging trends. *Health Inf. J.* 24, 66–91. doi: 10.1177/1460458216650979

Parrish, P. E. (2007). Aesthetic principles for instructional design. *Educ. Technol. Res. Dev.* 57, 511–528. doi: 10.1007/s11423-007-9060-7

Perez-Marcos, D. (2018). Virtual reality experiences, embodiment, videogames and their dimensions in neurorehabilitation. *J. Neuroeng. Rehabil.* 15:113. doi: 10.1186/s12984-018-0461-0

Riva, G., Wiederhold, B. K., and Mantovani, F. (2019). Neuroscience of virtual reality: from virtual exposure to embodied medicine. *Cyberpsychol. Behav. Soc. Netw.* 22, 82–96. doi: 10.1089/cyber.2017.2 9099.gri

Rivera, R. M. B., Arbona, C. B., García-Palacios, A., Castellano, S. Q., and López, J. B. (2015). Treating Emotional Problems With Virtual and Augmented Reality. The Handbook of the Psychology of Communication Technology (Hoboken, NJ: Wiley), 548–566.

Robinson, M. N., Tansil, K. A., Elder, R. W., Soler, R. E., Labre, M. P., Mercer, S. L., et al. (2014). Mass media health communication campaigns combined with health-related product distribution: a community guide systematic review. *Am. J. Prev. Med.* 47, 360–371. doi: 10.1016/j.amepre.2014.05.034

Sajnani, N., Mayor, C., and Tillberg-Webb, H. (2020). Aesthetic presence: the role of the arts in the education of creative arts therapists in the classroom and online. *Arts Psychother*. 69:101668. doi: 10.1016/j.aip.2020.101668

Shamri Zeevi, L. (2021). Making art therapy virtual: integrating virtual reality into art therapy with adolescents. Front. Psychol. 12:584943. doi: 10.3389/fpsyg.2021.584943

Skurla, M. D., Rahman, A. T., Salcone, S., Mathias, L., Shah, B., Forester, B. P., et al. (2022). Virtual reality and mental health in older adults: a systematic review. *Int. Psychogeriatr.* 34, 143–155. doi: 10.1017/S104161022100017X

Smit, E. S., Meijers, M. H. C., and van der Laan, L. N. (2021). Using virtual reality to stimulate healthy and environmentally friendly food consumption among children: an interview study. *Int. J. Environ. Res. Public Health* 18:1088. doi: 10.3390/ijerph18031088

Sonke, J., Sams, K., Morgan-Daniel, J., Schaefer, N., Pesata, V., Golden, T., et al. (2021). Health communication and the arts in the United States: a scoping review. *Am. J. Health Promot.* 35, 106–115. doi: 10.1177/0890117120931710

Spence, C., Obrist, M., Velasco, C., and Ranasinghe, N. (2017). Digitizing the chemical senses: Possibilities and pitfalls. *Int. J. Hum. Comput. Stud.* 107, 62–74. doi: 10.1016/j.ijhcs.2017.06.003

Stevenson, M., and Orr, K. (2013). Art therapy: stimulating non-verbal communication. Nurs. Resident. Care 15, 443–445. doi: 10.12968/nrec.2013.15.6.443

Tao, G., Garrett, B., Taverner, T., Cordingley, E., and Sun, C. (2021). Immersive virtual reality health games: a narrative review of game design. *J. Neuroeng. Rehabil.* 18, 1–21. doi: 10.1186/s12984-020-00801-3

Vaartio-Rajalin, H., Santamaki-Fischer, R., Jokisalo, P., and Fagerstrom, L. (2021). Art making and expressive art therapy in adult health and nursing care: a scoping review. *Int. J. Nurs. Sci.* 8, 102–119. doi: 10.1016/j.ijnss.2020. 09.011

van den Broek, E., Keulen-de Vos, M., and Bernstein, D. P. (2011). Arts therapies and Schema Focused therapy: a pilot study. *Arts Psychotherapy* 38, 325–332. doi: 10.1016/j.aip.2011.09.005

World Health Organization (2019). What is the Evidence on the Role of the Arts in Improving Health and Well-being? A Scoping Review. Available online at: https://www.who.int/publications/i/item/what-is-the-evidence-on-the-role-of-the-arts-in-improving-health-and-well-being-a-scoping-review (accessed April 29, 2024).

Zangiacomi, A., Flori, V., Greci, L., Scaglione, A., Arlati, S., and Bernardelli, G. (2022). An immersive virtual reality-based application for treating ADHD: a remote evaluation of acceptance and usability. *Digit Health* 8:20552076221143242. doi: 10.1177/20552076221143242