

Factors Associated with Continuous Use of a Cancer Education Metaverse Platform: Mixed Methods Study

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Abstract

Background: Early detection of cancer and provision of appropriate treatment can increase the cancer cure rate and reduce cancer-related deaths. Early detection requires improving the cancer screening quality of each medical institution and enhancing the capabilities of health professionals through tailored education in each field. However, during the COVID-19 pandemic, regional disparities in educational infrastructure emerged, and educational accessibility was restricted. The demand for remote cancer education services to address these issues has increased and, in this study, we considered medical metaverses a potential means of meeting these needs. In 2021, we developed Dr. Meta, a multidomain metaverse cancer care digital platform. Among the multiple subplatforms in the Dr. Meta metaverse platform, Metaverse Educational Center was developed for the virtual training of health professionals. In 2022, we used Metaverse Educational Center to train radiologic technologists remotely in mammography positioning.

Objective: This study aimed to investigate the user experience of Metaverse Educational Center and identify variables associated with the intention to continuously use the subplatform.

Methods: We conducted a multicenter, cross-sectional survey between July and December 2022. We performed a descriptive analysis to examine the Metaverse Educational Center user experience and a logistic regression analysis to clarify factors closely related to the intention to use the subplatform continuously. Additionally, a supplementary open-ended question was used to obtain feedback from users to improve Metaverse Educational Center.

Results: Responses from 192 Korean participants (male: n=16, 8.3% and female: n=176, 91.7%) were analyzed. More than half of the participants were satisfied with Metaverse Educational Center (178/192, 92.7%) and wanted to continue using the subplatform in the future (157/192, 81.8%). Less than half of the participants had no difficulty in wearing the device (85/192, 44.3%). Logistic regression analysis results showed that intention for continuous use was associated with satisfaction (adjusted odds ratio [95% CI]=3.542 [1.037-12.097]; P=.044), immersion (2.803 [1.201-6.539]; P=.017), and no difficulty in wearing the device (2.020 [1.004-4.062]; P=.049). However, intention for continuous use was not associated with interest (0.736 [0.303-1.789]; P=.499) or perceived ease of use (1.284 [0.614-2.685]; P=.507). According to the qualitative feedback, Metaverse Educational Center was useful in cancer education, but the experience of wearing the device and the types and qualities of the content still need to be improved.

Conclusions: Our results demonstrate the potential of Metaverse Educational Center for remote cancer education for health professionals. Our results also suggest that improving users' satisfaction and immersion and ensuring lack of difficulty in wearing the device may enhance their intention for continuous use of the subplatform.

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Abstract

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Results: Responses from 192 Korean participants (male: $n=16$, 8.3% and female: $n=176$, 91.7%) were analyzed. More than half of the participants were satisfied with Metaverse Educational Center (178/192, 92.7%) and wanted to continue using the subplatform in the future (157/192, 81.8%). Less than half of the participants had no difficulty in wearing the device (85/192, 44.3%). Logistic regression analysis results showed that intention for continuous use was associated with satisfaction (adjusted odds ratio [95% CI]=3.542 [1.037-12.097]; $P=.044$), immersion (2.803 [1.201-6.539]; $P=.017$), and no difficulty in wearing the device (2.020 [1.004-4.062]; $P=.049$). However, intention for continuous use was not associated with interest (0.736 [0.303-1.789]; $P=.499$) or perceived ease of use (1.284 [0.614-2.685]; $P=.507$). According to the qualitative feedback, Metaverse Educational Center was useful in cancer education, but the experience of wearing the device and the types and qualities of the content still need to be improved.

Conclusions: Our results demonstrate the potential of Metaverse Educational Center for remote cancer education for health professionals. Our results also suggest that improving users' satisfaction and immersion and ensuring lack of difficulty in wearing the device may enhance their intention for continuous use of the subplatform.

Keywords: metaverse; virtual reality; cancer education; cancer detection; digital health

Introduction

The need for non-face-to-face medical services has grown owing to factors such as infectious disease outbreaks and regional disparities in medical resources [1]. In the context of cancer, a life-threatening disease, the importance of providing non-face-to-face, timely, and continuous cancer prevention education and care services for successful management is increasing [2]. Scholars have recently focused on medical metaverse technology as a new alternative to meet these demands, and

the literature demonstrates its potential [3-5]. However, the number of studies is relatively small, and the research has predominantly focused on small-scale single-purpose platforms. Despite efforts to validate the effectiveness of metaverse platforms for cancer control, determining whether these platforms are actually being used and maintained in real-world settings remains challenging. It is essential to develop organized and continuously managed integrated medical metaverse platforms to establish comprehensive and systematic cancer care services and achieve a thorough understanding of the impact of metaverse on cancer control.

We developed a multipurpose metaverse digital cancer care platform, Dr. Meta, at National Cancer Center (NCC) Korea in 2021, supported by the Republic of Korea's Ministry of Science and ICT [6]. It was developed to optimize the effectiveness of cancer control by remotely providing immersive services that enhance information availability and usability and stimulate user interest through interactive experiences and customized services tailored to users and their purposes while meeting their needs comprehensively and continuously. The Dr. Meta metaverse platform showed potential for successful cancer control—however, according to participants' feedback, its weakness was the lack of content diversity [6]. In 2022, supported by the Republic of Korea's Ministry of Health and Welfare, we upgraded the metaverse platform to improve the Dr. Meta user experience by embedding new educational virtual reality (VR) content in the Metaverse Educational Center subplatform and adding a new VR Healing Theater subplatform under the Dr. Meta platform [7]. Using Metaverse Educational Center, developed for health professionals' virtual training, users can watch not only existing educational VR content produced for home-based hospice non-face-to-face practice training, but also newly added educational VR content created for mammography positioning training and endoscope cleaning and disinfection method training. Using VR Healing Theater, patients and family caregivers can watch diverse 360° videos (eg, travel, performances, and exhibitions) to enhance their psychological well-being. These upgrades facilitated a more dynamic, realistic, and diverse quality of content and provided users a variety of options to choose content based on their needs.

Breast cancer is one of the most common cancers affecting women. Survival rates can increase with early detection, which is linked to proper treatment [8,9]. Mammography is a widely accepted method for early detection of breast cancer that enables health professionals to detect tumors in patients with no signs or symptoms of the disease [10,11]. High-quality mammograms are essential for the successful early detection of breast cancer, and mammography positioning is one of the key elements in securing high-quality mammograms. Thus, mammography positioning training for radiologic technologists is crucial for improving the feasibility of successful early detection of breast cancer [12]. The outbreak of infectious diseases such as COVID-19 and the disparity in cancer screening and diagnosis educational systems among medical institutions have led to a decline in access to excellent cancer education [13,14]. Overcoming these problems requires efficient digital healthcare services that enable comprehensive, systematic, and continuous online cancer education. Consequently, we collaborated with the Division of Cancer Early Detection of NCC Korea in 2022 using Metaverse Educational Center to virtually educate radiologic technologists working at each regional cancer center (RCC) on mammography positioning.

Studies have shown that the metaverse can serve as a promising tool in cancer education [15-17]. However, to effectively use the tool, it is insufficient to merely know the positive relationship between the metaverse and cancer education. Novel strategies for developing and using metaverse services are needed to maximize their effectiveness, and identifying the factors that may affect the decision to use them is important for creating such strategies. Establishing and implementing metaverse service development, upgrading, and operating strategies in a direction that can influence these determinants may dramatically increase service effectiveness. Numerous studies have explored possible factors that can impact the use of metaverse technology, frequently applying the technology

acceptance model (TAM) to identify meaningful factors [18-20].

In this study, we considered TAM-based factors when developing a metaverse platform and conducting usability tests. As securing a sufficient number of participants was difficult in the first usability test of the Dr. Meta metaverse platform, it was conducted as a pilot test. Thus, we confirmed users' evaluations of the factors we anticipated to be determinants of the use of this metaverse platform, but were unable to reveal more detailed relationships among these factors [6]. In the context of remote mammography positioning training for radiologic technologists, this study goes beyond the usability test of Metaverse Educational Center and examines the factors and relationships associated with using the subplatform for an advanced understanding of its use. Based on the TAM, perceived usefulness and perceived ease of use of technology impact satisfaction and, subsequently, intention to use [21]. In this study, we identified independent variables that could potentially predict intention for continuous use, with intention for continuous use as a dependent variable.

In summary, this study investigated the usability of Metaverse Educational Center for mammography positioning training and discovered factors associated with the intention to use the subplatform continuously. We believe that Metaverse Educational Center is an outstanding digital tool for cancer education, and study outcomes suggest practical strategies for improving the quality of Metaverse Educational Center and facilitating its successful dissemination and implementation.

Methods

Study Design

After demonstrating the Metaverse Educational Center subplatform of the Dr. Meta metaverse platform to participants, we conducted a multicenter cross-sectional survey to examine their experiences with the subplatform. Quantitative data were collected through Likert scale survey questions, and qualitative data were collected through an open-ended question.

Procedure

Project Description

NCC Korea's Division of Cancer Early Detection runs a national cancer screening support project aimed at increasing the cure rate and reducing cancer-related mortality by inducing early cancer detection and treatment. Simultaneously, the division is in charge of a national cancer screening quality management project that offers tailored education to medical institutions and health professionals involved in cancer screening and diagnosis in various fields, and manages the quality of cancer screening continuously in a comprehensive direction to enhance benefits and reduce losses. The division leads regionally driven quality improvement activities of national cancer screening to enhance its accuracy and reliability and to perform regular training in each region to reduce regional disparities in the quality of national cancer screening [22]. The division provides various online educational programs and content for training purposes, including non-face-to-face VR educational videos for mammography positioning training and endoscope cleaning and disinfection method training [23]. The VR educational videos provided to RCCs required significant manual effort during the delivery process, and the division recognized the need for a digital platform to facilitate content delivery and management and continuous non-face-to-face education.

The need for a digital platform for the early detection of cancer aligned well with the Dr. Meta

metaverse platform's need for content variety. To actively respond to the demand for non-face-to-face services in the post-COVID-19 era, we developed the Metaverse Educational Center subplatform, which helps users overcome physical constraints (eg, time and space) in education and conveniently receive training on-demand. The subplatform is equipped with multimedia so that users can upload and interact with various medical training materials, ranging from typical documents, images, videos, presentation slides, and webpages to 3D object data and VR content created using 360° video technology. However, improving the diversity of content in the subplatform was a challenge [6]. Based on the goal of positively contributing to the efficiency of national cancer screening through VR education, we collaborated with NCC Korea's Division of Cancer Early Detection, and installed the Division of Cancer Early Detection VR educational videos for mammography positioning training and endoscope cleaning and disinfection method training within our Metaverse Educational Center subplatform.

In 2022, we disseminated Dr. Meta to 12 RCCs (ie, Ajou University Hospital, Chonnam National University Hwasun Hospital, Chungbuk National University Hospital, Chungnam National University Hospital, Gachon University Gil Medical Center, Gyeongsang National University Hospital, Jeju National University Hospital, Jeonbuk National University Hospital, Kangwon National University Hospital, Kyungpook National University Chilgok Hospital, Pusan National University Hospital, and Ulsan University Hospital). After preparing for the launch of the remote mammography positioning training program, we conducted virtual sessions for radiologic technologists through the Metaverse Educational Center subplatform in cooperation with the Division of Cancer Early Detection.

Study Participants

Metaverse Educational Center usability tests were conducted at 13 cancer centers (NCC and 12 RCCs). Participants aged greater than 19 years were recruited from each cancer center between July and December 2022. Inclusion criteria for the study were having experience in using Metaverse Educational Center and being older than 19 years. Exclusion criteria for the study were having experience in using the subplatform but being younger than or equal to 19 years, having a severe physical or mental condition that prevented them from participating in the study, being unable to complete the self-reported survey, not consenting to the survey, or withdrawing consent during the study. Only those who read the research information and voluntarily consented to participate in the survey were able to participate. Users who participated in the study received an everyday item worth approximately \$5 as reward. Data used in this study were anonymous because participants were not asked for identifying information (eg, name and social security number). Figure 1 shows images of participants using Metaverse Educational Center.



Figure 1. Pictures of participants using Metaverse Educational Center

Measures

Based on the feedback received from the pre-test of the questionnaire, we used theory-based but easy and short survey questions to facilitate participants' understanding of the questions, despite their feelings of fatigue after professional virtual training while experiencing new metaverse technology. The survey questions were adapted from previous studies examining the TAM in the context of metaverse services [6,7,24], translated into Korean, abbreviated, and modified to suit the purpose and context of the study. Additionally, we adopted the viewpoint of separating the experience of technology use into hardware and software aspects [24,25]. First, participants were asked to provide their sociodemographic information (age, sex, and position in the hospital). Next, they were asked to assess their individual differences (2 items: "I am usually interested in using new technologies or devices" and "I tend to not experience dizziness or motion sickness easily") and user experiences (8 items: "I was generally satisfied with using this subplatform," "This subplatform made me feel interested," "This subplatform made me feel immersed," "This subplatform was easy to use," "There was no discomfort (eg, dizziness and nausea) in using this subplatform," "There was no difficulty in wearing this subplatform device (ie, head-mounted display and controllers)," "There was no difficulty in operating this subplatform device (ie, head-mounted display and controllers)," and "I want to continue using this subplatform in the future") relevant to the use of Metaverse Educational Center. Each item was scored on a 4-point Likert scale (1="strongly disagree" to 4="strongly agree"). Finally, participants were asked to provide their feedback to improve Metaverse Educational Center by answering the open-ended question ("If you have any suggestions or improvements, please write them in"). We used these 10 quantitative questions and the open-ended qualitative question to evaluate participants' experiences with Metaverse Educational Center. The questionnaire used in this study is presented in Multimedia Appendix 1.

Statistical Analysis

First, we conducted a descriptive analysis to examine how participants perceived their experiences using Metaverse Educational Center. The user experience was rated by obtaining the frequency and proportion of participants with positive opinions for each survey question. The number of participants with positive opinions after using Metaverse Educational Center was calculated by adding those who answered “agree” and “strongly agree.” Next, we performed a logistic regression analysis to identify the variables associated with the intention to continue using the subplatform. To create a binary dependent variable, we divided participants’ reaction values to a survey question relevant to intention for continuous use into two groups (“strongly disagree” + “disagree” vs “agree” + “strongly agree”). Univariate analyses were performed for each variable to obtain odds ratios with 95% CIs of intention for continuous use. Multivariate analysis was performed to identify factors related to this dichotomous dependent variable using only variables with statistical significance from the univariate analyses. Finally, we qualitatively reviewed the feedback acquired from the open-ended question on the improvement of the subplatform. Data analysis was conducted using IBM SPSS Statistics V22.0 (IBM Corp.).

Ethics Approval

The study was approved by the Institutional Review Board of NCC Korea (IRB: NCC2022-0209).

Results

Participant Characteristics

Overall, 196 individuals participated in the survey after using the Metaverse Educational Center subplatform, and data from 192 participants were analyzed. Among the 192 participants, 74 (38.5%), 69 (35.9%), 38 (19.8%), and 11 (5.7%) were aged 20-29, 30-39, 40-49, and 50-59 years, respectively. Additionally, 16 (8.3%) participants were male and 176 (91.7%) were female. Regarding position in the hospital, most participants fell into the “Health professionals (other)” category (160/192, 83.3%). These results can be attributed to mammography positioning training for radiologic technologists using Metaverse Educational Center in collaboration with the Division of Cancer Early Detection of NCC Korea in 2022. Table 1 presents participants’ demographic characteristics.

Table 1. Demographic information of participants (N=192).

Characteristics		Participants, n (%) ^a
Age group (years)		
	20-29	74 (38.5)
	30-39	69 (35.9)
	40-49	38 (19.8)
	50-59	11 (5.7)
Sex		
	Male	16 (8.3)
	Female	176 (91.7)
Position in the hospital		
	Health professionals (doctors)	10 (5.2)
	Health professionals (nurses)	19 (9.9)

	Health professionals (other) ^b	160 (83.3)
	Other ^c	3 (1.6)

^a Percentages may not add up to 100% due to rounding.

^b “Health professionals (other)” includes radiologic technologists, physical therapists, and pharmacists in this study.

^c “Other” includes hospital administrative staff, educators, social workers, and researchers in this study.

Usability Results

Our results showed that more than half of the participants were satisfied with their user experience of Metaverse Educational Center (178/192, 92.7%). More than half of the participants responded that Metaverse Educational Center was an interesting (184/192, 95.8%) and immersive (174/192, 90.6%) subplatform. A total of 138 (71.9%) participants reported that the subplatform was easy to use. Over half of the participants wanted to continue using the subplatform in the future (157/192, 81.8%). Table 2 presents the overall positive experiences of Metaverse Educational Center’s participants.

Table 2. Participants’ positive experiences after using Metaverse Educational Center.

Items ^a	Participants, n (%) ^b
Individual differences	
I am usually interested in using new technologies or devices.	167 (87.0)
I tend to not experience dizziness or motion sickness easily.	99 (51.6)
User experiences	
I was generally satisfied with using this subplatform.	178 (92.7)
This subplatform made me feel interested.	184 (95.8)
This subplatform made me feel immersed.	174 (90.6)
This subplatform was easy to use.	138 (71.9)
There was no discomfort (eg, dizziness and nausea) in using this subplatform.	103 (53.6)
There was no difficulty in wearing this subplatform device (ie, head-mounted display and controllers).	85 (44.3)
There was no difficulty in operating this subplatform device (ie, head-mounted display and controllers).	110 (57.3)
I want to continue using this subplatform in the future.	157 (81.8)

^a Items are based on a 4-point scale (ranging from 1=“strongly disagree” to 4=“strongly agree”). The number of participants who had positive opinions after using Metaverse Educational Center was calculated by adding the number of participants who answered “agree” and “strongly agree.”

^b Percentages may not add up to 100% due to rounding.

In univariate analyses, a usual interest in using new technologies or devices (odds ratio [95% CI]=1.998 [1.141-3.497]; $P=.015$), satisfaction (8.079 [3.284-19.875]; $P<.001$), interest (3.000 [1.570-5.731]; $P=.001$), immersion (5.753 [2.985-11.088]; $P<.001$), perceived ease of use (2.973 [1.741-5.077]; $P<.001$), no discomfort in use (2.021 [1.287-3.173]; $P=.002$), and no difficulty in

wearing the device (2.494 [1.448-4.296]; $P=.001$) were statistically different between participants not having intention for continuous use and participants having intention for continuous use. In the multivariate-adjusted analysis, participants who were generally satisfied with using Metaverse Educational Center were more likely to intend to continue use the subplatform than those who were not (adjusted odds ratio [95% CI]=3.542 [1.037-12.097]; $P=.044$). When immersion increased by one unit, users were 2.803 times more likely to have intention for continuous use (2.803 [1.201-6.539]; $P=.017$). Having no difficulty in wearing the device was positively associated with intention for continuous use (2.020 [1.004-4.062]; $P=.049$). Table 3 presents the results of the univariate and multivariate analyses for each variable.

Table 3. Factors associated with intention for continuous use of Metaverse Educational Center.

Items		Intention for continuous use			
		Univariate		Multivariate	
		Odds ratio (95% CI)	<i>P</i> value	Adjusted odds ratio (95% CI)	<i>P</i> value
Sociodemographics					
	Age group (years)	0.976 (0.651-1.466)	.909		
	Sex	1.559 (0.471-5.157)	.467		
	Position in the hospital	1.741 (0.980-3.093)	.058		
Individual differences					
	I am usually interested in using new technologies or devices.	1.998 (1.141-3.497)	.015	1.823 (0.949-3.502)	.071
	I tend to not experience dizziness or motion sickness easily.	1.282 (0.833-1.973)	.258		
User experiences					
	I was generally satisfied with using this subplatform.	8.079 (3.284-19.875)	<.000	3.542 (1.037-12.097)	.044
	This subplatform made me feel interested.	3.000 (1.570-5.731)	.001	0.736 (0.303-1.789)	.499
	This subplatform made me feel immersed.	5.753 (2.985-11.088)	<.000	2.803 (1.201-6.539)	.017
	This subplatform was easy to use.	2.973 (1.741-5.077)	<.000	1.284 (0.614-2.685)	.507

	There was no discomfort (eg, dizziness and nausea) in using this subplatform.	2.021 (1.287-3.173)	.002	1.212 (0.682-2.153)	.512
	There was no difficulty in wearing this subplatform device (ie, head-mounted display and controllers).	2.494 (1.448-4.296)	.001	2.020 (1.004-4.062)	.049
	There was no difficulty in operating this subplatform device (ie, head-mounted display and controllers).	1.475 (0.928-2.346)	.100		

Furthermore, regarding the feedback on the Metaverse Educational Center subplatform, participants answered the open-ended question “If you have any suggestions or improvements, please write them in.” We broke down the 145 participants’ responses at the sentence-unit level and collected 276 sentences. We then sorted these sentences into groups with homogeneous attributes and labeled them accordingly. Participants provided a wide range of feedback on the advantages and improvements of Metaverse Educational Center. Regarding the subplatform’s advantages (21 sentences), the most commonly reported label was “useful.” Regarding the subplatform’s improvements (255 sentences), the most commonly reported one was “deficiency of interactivity in the content.” “Deficiency of content variety” and “heaviness of the device” were other representative improvements mentioned by participants. Table 4 presents more information about the feedback on the participants’ experiences with Metaverse Educational Center.

Table 4. Feedback details of participants’ experiences of Metaverse Educational Center.

Labels	Examples	Sentences, n (%) ^a
Advantages		
No inconvenience	“There was no inconvenience in using Metaverse Educational Center because I was well-instructed on how to wear and operate the device.”	2 (9.5)
Immersion and concentration	“This training method is likely effective because it raises immersion and concentration.”	2 (9.5)
Usefulness	<ul style="list-style-type: none"> “It was good to obtain in-depth knowledge through this educational metaverse platform.” “If a few more improvements are made, this subplatform can be used for educational purposes in more areas.” 	6 (28.6)
Ease of understanding	“The explanations of the topics and content of the training were easy to understand.”	2 (9.5)
Vividness and sense of presence	“The educational materials were vividly delivered and made me feel like I was there.”	4 (19.0)
Interest	“Unlike viewing the educational materials in a fixed position on a personal computer, I could move and interact with them, so it was fun and not boring.”	1 (4.8)

	Satisfaction	“Overall, I was satisfied with the experience.”	4 (19.0)
	Improvements		
	Difficulties in using the software	<ul style="list-style-type: none"> · “I wish this subplatform changed to be more accessible and more straightforward.” · “It was difficult to operate the cancer education metaverse platform, and there were too many options that made me confused.” 	10 (3.9)
	Poor settings of the screen focus	<ul style="list-style-type: none"> · “It was difficult to freely set the screen’s focus, angle, and height in the direction I wanted or as if I was looking from the front.” · “I was forced to move my head or body continuously while watching the screen as its perspective was not smoothly switched, and this experience was a bit uncomfortable and painful.” 	26 (10.2)
	Poor qualities of the images	<ul style="list-style-type: none"> · “The qualities of images need to be improved.” · “I would like to see educational materials with more stereoscopic and clearer visuals.” 	27 (10.6)
	Dizziness, fatigue, and distraction	<ul style="list-style-type: none"> · “I felt dizzy and had eye strain at the end of the training.” · “I could not concentrate well in the middle of watching the video.” 	19 (7.5)
	Issues of noise	“I could not pay attention to the training because this educational platform was vulnerable to external noise, and reversely, the platform sounds echoing outward made me realize the need for earphones or a headset.”	7 (2.7)
	Lengthy videos	“The video was too long, preventing me from adequately closing my eyes or taking a break while watching.”	2 (0.8)
	Poor online connections	“I experienced freezing while playing videos or navigating the platform space.”	2 (0.8)
	Difficulties in wearing the device	<ul style="list-style-type: none"> · “Wearing the device of this subplatform was frustrating and uncomfortable for me because the device was pressing my head and nose and its fit was not seamless.” · “The device of this subplatform did not fit properly and was too loose and fogged up.” 	24 (9.4)
	Heaviness of the device	<ul style="list-style-type: none"> · “The device of this subplatform was heavy.” · “As Metaverse Educational Center’s device was heavy, I would like to see improvements in making it lighter or adding instruments that support wearing it stably.” · “Metaverse Educational Center's device was heavy and uncomfortable to wear for long periods.” 	33 (12.9)
	Difficulties in operating the device	<ul style="list-style-type: none"> · “Operating the device of this subplatform was too complicated and needed to be simplified.” · “Sometimes, errors occurred during the operation 	20 (7.8)

		of this subplatform's device, hindering the smooth progress of training."	
	Physical constraints	"It was uncomfortable to be restricted to the particular location and equipment requirements to experience this service."	1 (0.4)
	Deficiency of content variety	<ul style="list-style-type: none"> · "I want to get training through this educational subplatform not only for mammography positioning but also for other topics." · "I hope different mammography positioning cases and methods for different patients will be handled on educational materials as each patient has different characteristics." · "I would like to see cancer education programs related not only to screening but also to treatment." 	34 (13.3)
	Deficiency of interactivity in the content	<ul style="list-style-type: none"> · "I want to control and interact more with the digital content of this subplatform, not just watch it." · "It would be great to have a realistic participatory simulation feature in this subplatform so users can practice mammography positioning." · "As the educational program is created based on metaverse technologies, seeing more immersive and engaging content that allows users to amplify the advantages and uniqueness of metaverse by manipulating the device would be nice." 	42 (16.5)
	Requests for function enhancement	"I want this subplatform to work both online and offline, and I want its virtual environment to be closer to the real world along with containing more controlling functions."	7 (2.7)
	Necessity of different training methods	"It would be nice to have other training methods in case people have difficulties using Metaverse Educational Center, as it is different for everyone to feel motion sickness after using this educational metaverse platform."	1 (0.4)

^a Percentages may not add up to 100% due to rounding.

Discussion

Principal Findings

This study investigated the Metaverse Educational Center subplatform's user experience and the factors associated with intention for continuous use by focusing on cases of using the subplatform in a remote mammography positioning training project. In this study, we secured more participants than the first study of Dr. Meta use [6] by inviting new RCCs to our project and recruiting participants for an extended period. We also installed specific purpose-driven VR content produced for use in an actual cancer education project in cooperation with the Division of Cancer Early Detection of NCC Korea. Based on the increased sample size and new metaverse cancer education content, this study targeted the subplatform in an obvious context, complemented the methodology, and addressed its usability in various ways.

Our results verify the potential of the Metaverse Educational Center subplatform as a successful digital health tool for non-face-to-face cancer education. More than half of the users considered the subplatform satisfactory, interesting, immersive, and easy to use. Although less than half of the users indicated positive opinions regarding the lack of difficulty in wearing this subplatform device, more than half of the users expressed positive opinions on the lack of discomfort in using the subplatform and lack of difficulty in operating its device. Finally, more than half of the users wanted to use the subplatform continuously. The positive user experience of the subplatform indicates that it can also be successfully used in another project of the Division of Cancer Early Detection—endoscope cleaning and disinfection method training. We intend to enhance the scalability of the subplatform and its usage in the future by developing metaverse content covering various cancer education topics and mounting them into the subplatform.

Our study's outcomes demonstrated factors related to the intention to continue using Metaverse Educational Center. According to the logistic regression analysis results, users' intention for continuous use of the subplatform was associated with satisfaction, immersion, and lack of difficulty in wearing the device. In previous studies, satisfaction, immersion, and lack of difficulty in wearing the device have been identified as factors directly or indirectly related to the intention to continuously use metaverse or other interactive media services [26-28]. Our results are consistent with those of previous studies. A higher level of satisfaction may increase the likelihood of intention for continuous use [24,26]. Users immersed in metaverse content may lose their self-consciousness, concentrate intensely on the content, and become satisfied with it [27,29]. Users may pursue an easy and relaxed experience of wearing the device and, therefore, they are more likely to use it if it is not difficult to wear continuously [28,30,31].

Conversely, the associations between intention for continuous use of Metaverse Educational Center and interest, perceived ease of use, and lack of discomfort in use were not statistically significant. No associations of intention for continuous use with interest, perceived ease of use, or discomfort in use were unexpected because their associations—whether direct or indirect—have often been observed in previous studies [32-34]. These discrepancies may be due to different contextual characteristics. This study provided remote mammography positioning training to health professionals. Therefore, users may have had a strong motivation to learn skills, and the content may have been produced to deliver professional knowledge as a top priority. Entertainment, ease of use, and comfort may have weak relevance to the strong purposefulness of training—interest, perceived ease of use, and lack of discomfort in use may not be associated with intention for continuous use of the educational metaverse platform. Additionally, many younger individuals known to be familiar with the metaverse [35], and many radiologic technologists known to be familiar with complex medical devices [36] participated in this study. We assume that they tend to use emerging technologies to accomplish goals frequently—that is, they have high technology readiness [37]. However, contrary to the expectation of positive associations [38,39], neither age group nor position in the hospital showed a significant association with intention for continuous use of the Metaverse Educational Center subplatform. Although younger participants may be familiar with metaverse services for purposes such as entertainment, they may not have been familiar with metaverse services for medical training. Furthermore, radiologic technologists may be familiar with the medical devices they usually handle but may be unfamiliar with metaverse devices, which can be considered relatively cutting-edge and perceived differently from other medical devices. This discussion implies that scrutinizing external variables such as the characteristics of the target period, target population group, and other situational contexts is vital when exploring factors associated with intention for continuous use of metaverse services, including the Metaverse Educational Center subplatform. Various media theories, including the TAM, have evolved to include external variables for better explanatory power [40].

Therefore, subsequent research is needed to delve into the mixed results regarding the associations of intention for continuous use contingent on external variables, to understand the reasons behind them.

Implications

Discovering the factors associated with the intention to continuously use the Metaverse Educational Center subplatform has both theoretical and practical implications. With regard to theoretical implications, knowledge of these statistically supported associations may trigger research into the mechanisms or conditions of associations. Applying mixed-methods approaches that directly ask participants deeper about quantitative results regarding which factors are associated, in what direction, and why can be one of the future research directions. Such attempts to understand the patterns of association may lead to the development of a systematic theoretical framework. Regarding practical implications, information about factors related to intention for continuous use of the subplatform can guide the development of more effective intervention strategies that encourage its continuous use. It will be feasible to save time and cost for upgrading the subplatform and promoting its user experience by prioritizing factors that are likely to affect intention for continuous use.

Furthermore, feedback on Metaverse Educational Center-shaped discourse pointed to future directions for upgrading the subplatform. Regarding the subplatform's advantages, the total number of relevant sentences was smaller than that of sentences related to the subplatform's improvements because the question did not directly ask about the advantages. However, the usefulness of the subplatform was remarkable. As the usefulness of the Metaverse Educational Center subplatform is proven, it will be possible to increase the quantity and quality of educational content helpful in gaining knowledge with varying topics and formats and expand the range of use of the subplatform. Such upgrading strategies can facilitate dynamic virtual training and activate the use of the subplatform among various user groups. Regarding the subplatform's improvements, the deficiency of interactivity in the content, deficiency of content variety, and heaviness of the device were the main weaknesses. Poor screen focus and image quality, which lead to negative visual experiences, were also notable weaknesses. Despite upgrading the Dr. Meta metaverse platform based on the results of the first study to use the platform [6], the results of this study indicate that further quantitative and qualitative enhancements are needed for the content and devices of the subplatform. To improve the usability of the subplatform, it is crucial to address these weaknesses by securing diverse interactive metaverse content, solving the device's weight problem, and improving functions related to screen focus control and image quality.

Additionally, feedback substantially supported the results of the usability test. The outcomes of the descriptive and logistic regression analyses were similar to those of the responses to the feedback question. More than half of the users thought that the Metaverse Educational Center subplatform was satisfactory, interesting, immersive, and easy to use. Less than half of the users believed that there was no difficulty in wearing the subplatform device. The former was addressed in the feedback as an advantage, whereas the latter was mentioned as an improvement. Factors associated with intention for continuous use of the subplatform (ie, satisfaction, immersion, and lack of difficulty in wearing the device) also appeared in the feedback. Beyond emphasizing quantitative results, the feedback also clarifies new elements that received little attention but might be related to the user experience with the subplatform. For example, improving the audio system, reducing the runtime of content, and optimizing the operation of content would attract users' motivation to experience the subplatform.

The feedback also suggests that certain advantages and improvements may be closely related. For example, some participants found it easier to understand the educational content through immersion

(eg, “The content was easily understandable due to high immersion” [Immersion and concentration - Ease of understanding]), and some were overall satisfied with the subplatform because the educational content was beneficial to them (eg, “I was satisfied with this subplatform because I could get helpful information” [Usefulness - Satisfaction]). Some participants complained of dizziness, fatigue, and distraction due to the lack of breaks, lengthy videos, and blurry image quality when receiving training through the subplatform (eg, “The educational video was too long, so it was unable to rest for a long time. Even the image quality was not sharp. I was dizzy, tired, and had decreased concentration after finishing the training” [Poor qualities of the images; Lengthy videos - Dizziness, fatigue, and distraction]). Some also expressed that wearing the device was challenging due to its heavy weight (eg, “The device was heavy and easy to slip off, making it difficult to wear” [Heaviness of the device - Difficulties in wearing the device]). Some connected the difficulties in wearing the device with wearing glasses (eg, “It was hard to wear the device to the extent that I had to take off my glasses during the education session. To make matters worse, the poor quality of the educational content’s image disrupted my learning” [Difficulties in wearing the device (there was no specific categorized label about wearing glasses)]). Such feedback can serve as indirect evidence for inferring new potential factors, their relationships, and directions. Determining whether these ideas are statistically valid could also be a topic for future research. By probing the feedback, we could reconfirm the results obtained from statistical methods and deal with more profound levels of user experience statements that are seldom obtained from quantitative approaches.

Future Perspective

This study employed a mixed-methods design to comprehensively understand the usability of the Metaverse Educational Center subplatform while embracing diverse user experiences. Through quantitative approaches, this study suggests that the upgrading direction of increasing identified factors associated with intention for continuous use of the subplatform—immersion and lack of difficulty in wearing the device—may effectively enhance the user experience and lead to future successful effects. Additionally, through qualitative approaches, this study identified ideas for materializing this upgrade direction.

First, enhancing users’ perceived interactivity is an option to increase immersion. Studies have shown that perceived interactivity of new media, including metaverse and other interactive media, is positively associated with immersion [41-43]. In this study, although over half of the participants thought the subplatform was immersive, there was also considerable feedback, indicating that participants wished for the educational content to be more interactive. Adding content scenarios and features that allow users to directly manipulate the 3D equipment needed for mammography or correct patients’ mammography positioning in a virtual environment through the switch buttons on the subplatform device would help increase perceived interactivity. The incorporation of participatory content that induces user engagement and sensory expansion through hands-on practice in a virtual space after theoretical education would also be beneficial. By improving interactive content in which users can directly control virtual spaces and digital objects relevant to mammography positioning training, it is possible to enhance immersion of the subplatform beyond its current level and sustainably increase intention for continuous use.

Next, reducing the device weight is an option to decrease the difficulty in wearing the device. Previous studies have asserted that the heavy weight of a head-mounted display makes it difficult to wear and serves as a barrier preventing the activation of VR service [28,31]. In this study, less than half of the participants thought there was no difficulty in wearing the subplatform device, and there was considerable feedback claiming difficulties in wearing the device. Some feedback indicated that it was uncomfortable to wear the device because of its heavy weight, allowing us to infer the

relationship between difficulties in wearing the device and its heaviness. Other feedback also mentioned that the subplatform device pressed on the nose or placed strain on the neck with fatigue, which seemed to be caused indirectly by the heaviness of the device. The difficulties in wearing the device and its heaviness issues were already acknowledged in the first Dr. Meta study [6]. Some improvements had been made using accessories to lighten the device weight—however, the results of this study revealed that further improvements are needed. If the difficulties in wearing the device cannot be adequately solved by improving the head-mounted displays, accessories, or peripheral devices, replacing them with entirely new devices could also be an option. If the disadvantages of a head-mounted display, such as difficulties in wearing it [28], outweigh its advantages, such as greater immersion by blocking additional visual inputs and other external stimuli [44], it may be more efficient to mitigate the disadvantages—even at the expense of some advantages. Overall engagement may slightly decrease if the subplatform is experienced on existing devices, such as desktops, laptops, cellphones, or tablets. However, the engagement inherent in the characteristics of metaverse content will be maintained, and difficulties in wearing the device will largely disappear. Most importantly, if users are given the choice of device to use for the subplatform by themselves, they can weigh the pros and cons and select it according to their needs and preferences. As a self-tailored experience, this may increase user satisfaction [45]. As difficulties in wearing the device may impair immersion [28], it would be beneficial to develop web and app modes and compatible modes to allow users to use the subplatform on familiar or mobile devices. Development of a new usage model that can be run on different portable devices can alleviate difficulties in wearing the device, improve accessibility to the educational content, and complement the existing usage model in diffusing the subplatform.

In this study—although not addressed by quantitative approaches—we obtained specific feedback related to the deficiency of content variety, following the first Dr. Meta study [6]. Participants wanted to receive not only mammography positioning training but also other mammography-related education through the Metaverse Educational Center subplatform, and showed interest in cancer education on different topics—meeting these demands requires diverse scenarios, digital objects, and virtual environments. Applying artificial intelligence (AI) technology can effectively solve deficiencies in content variety. Scholars argue that embedding generative AI that creates images and 3D digital objects into the metaverse can save the time, energy, and costs associated with content development [46,47]. Moreover, employing AI to collect and analyze metaverse usage data can further advance service automation and personalization [48,49]. If AI combined with a metaverse captures and analyzes user experience and choice data, it can dynamically change virtual backgrounds and digital objects in real time to match user needs. It is essential to establish policies and ethics related to the use of metaverses and AI, and data security must be ensured. If these prerequisites are met, the industry will rapidly accelerate toward building data-driven metaverse systems using AI in the future. A successful combination of metaverses and AI may also appeal to participants to continuously use the subplatform.

Limitations

Although this study presented positive assessments of the cancer education metaverse platform and outlined prospects for its future development, several limitations exist. First, our results may be specific to a particular context, topic, or population, making it challenging to generalize the results to the overall level of education through a medical metaverse. In this study, we only used the subplatform for the remote mammography positioning training of health professionals. Hence, it is difficult to anticipate whether contextual differences affect our results. For instance, if the purpose of cancer education is not to train health professionals but to teach cancer care methods to patients or cancer prevention methods to the general public, the factors associated with intention for continuous

use might differ. Demographic information, such as sex and age distribution ratios, might also vary, potentially affecting research outcomes. Further studies are needed to confirm whether the results of this study can be reproduced in the general population or other specific population groups.

Second, as this study used cross-sectional data, not all observed relationships among variables are actual causalities but associations—therefore, careful interpretation of causal assumptions is necessary. Although mixed methods can supplement explanations of the possibilities of some causal relationships, some aspects still need to be addressed. In particular, with the current research design, it is difficult to provide valid reasons for the relationships showing inconsistent results compared to other existing studies, such as those regarding interest or perceived ease of use. To explain the relationships among factors and their mechanisms concretely, an experimental study or other study employing different research methods capable of providing evidence of causality should follow.

Third, because this study mainly tested the usability of the cancer education metaverse platform, its effects remain unknown. By expanding the scope of research to encompass variables related to the educational effectiveness of the subplatform, an inclusive understanding of its impacts can be achieved. However, developing a topic-focused questionnaire rather than a universal usability questionnaire is required to accomplish this goal. Efforts to develop survey methods that can overcome physical constraints and be easily used by each cancer center and to explore a systematically validated questionnaire suitable for educational topics are required. We will consider conducting this subplatform effects study by seeking research methods specialized in a target content topic for metaverse cancer education.

Conclusions

This study introduced a nationwide project in Korea using the Metaverse Educational Center subplatform of the Dr. Meta multidomain metaverse cancer care digital platform. The results of this study demonstrated the potential of the subplatform for successful remote cancer education. This study also identified variables that may influence the intention to use the subplatform continuously. We comprehensively described how to make effective plans for improving the user experience with the subplatform by considering how to enhance the evaluation of these variables. Moving forward—beyond mammography positioning training for health professionals—expanding the scope of this cancer education metaverse platform to include various topics and target populations may enable the establishment of a valuable system for successfully conducting remote cancer education. When operating educational intervention programs for vulnerable patient populations with limited access to medical information or difficulty in hospital visits, the subplatform may play a key role in sharing knowledge. Moreover, it may provide a communication space that offers enjoyment and psychological support to younger patients who are relatively familiar with virtual spaces and new media (eg, adolescent and young adult patients). To bolster metaverse cancer education programs and amplify their effects in the future, it is necessary to explore ways to secure their various contents and establish systems to promote their broad use.

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Data Availability

The datasets generated or analyzed in this study are available from the corresponding author on reasonable request.

Authors' Contributions

SK contributed to the conceptualization, data curation, formal analysis, investigation, methodology, project administration, writing of the original draft, and review and editing of the paper. TJ contributed to the supervision and review and editing of the paper. DKS contributed to the funding acquisition, investigation, and supervision. MS contributed to the resources and review and editing of the paper. YJC contributed to the conceptualization, funding acquisition, investigation, methodology, resources, supervision, project administration, writing of the original draft, and review and editing of the paper. All authors approved the final version of the study.

Conflicts of Interest

None declared.

Multimedia Appendix 1

The questionnaire used to evaluate participants' experiences using Metaverse Educational Center.

Abbreviations

AI: artificial intelligence

NCC: National Cancer Center

RCC: regional cancer center

TAM: technology acceptance model

VR: virtual reality

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Supplementary Files

Figures

Pictures of participants using Metaverse Educational Center.



Multimedia Appendixes

The questionnaire used to evaluate participants' experiences using Metaverse Educational Center.
URL: <http://asset.jmir.pub/assets/6fec9188cea7b921e7ec6d1255e2560f.pdf>



CONSORT (or other) checklists

GRAMMS Checklist (for mixed methods studies).

URL: <http://asset.jmir.pub/assets/97ba9dbdc06cf8a3405369ec5eec847b.pdf>

TOC/Feature image for homepages

Participants are using Metaverse Educational Center for remote cancer education.

