

Speech Processing in Stuttering

NCT04929184

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UNIVERSITY OF MICHIGAN

ASSENT TO BE PART OF A RESEARCH STUDY

FOR CHILDREN AGES ~10 TO 17

We want to tell you about a research study we are doing and see if you want to take part in it. Research is a way to learn more about something. This is the way we find out how your brain works when you say and listen to words and sentences.

The name of this study is: Speech processing in stuttering

The researchers are: Emily Garnett and Soo-Eun Chang

It is okay to ask questions about what we are telling you. You can circle or highlight things on this paper you want to know more about. If you don't understand something, just ask us. We want you to ask questions now and anytime you think of them.

We are working to understand different ways that people listen to words and sounds. This will help us find out why some people have bumpy speech and some people have smooth speech.

For you to be in this study both you and your parent (or guardian) must agree to you being in it. It is the adult's job to make sure the benefits and risks of this study are okay for you. But it is still up to you if you *want* to do it.

Parents and children say "no" for different reasons. It may be that you would miss too many activities or school. It could be the risks seem too great or that the benefits seem too low. Whatever the reason, it is your decision. You will not be treated any differently if you say "no."

If you decide to be in this research and your parent or guardian says yes, this is what will happen:

- We will ask you to listen to some sounds and some words. Sometimes you will also say the sounds or words. We will ask you to pay attention and listen for certain sounds or words.
- We will check to see how well you hear, and we will talk with you about pictures and stories. Your parent can stay in the lab with you.
- We will ask you some questions and listen to you talk. We will also record your speech so we listen to it later and study it more closely.
- We will also ask your parents some questions about you, such as how you talk.
- This will take 2 or 3 visits that each last about 2 to 3 hours depending on whether or not you have done some of the tasks in another study of ours before this one.

We do not know for sure if you will be helped by being in this study. Also, we could learn something that will help other children who stutter someday.

There is a chance that during the research you could feel uncomfortable, afraid, or bored. We will take steps to help you with these feelings or discomforts. And you can stop at any time if you want to. Some of these risks are:

- Sometimes the questions we ask can make you feel embarrassed or uncomfortable.
- Sometimes you might find the tasks to be too easy or too hard.

You don't have to be in this study if you don't want to. Nobody will be mad at you if you don't want to be in the research study. You can say okay now and you can change your mind later. Just tell me or any of the other adults if you want to stop at any time.

Signature:

I have read this form or someone has read it to me. If I did not understand something, I asked the doctor or the assistant to explain it to me. I can always ask the doctor or the assistant a question about the study if I don't understand something. I will be given a copy of this form.

Please check one box:

- ☐ **YES**, I want to be in this study and I know I can change my mind later.
- ☐ **NO**, I do not want to be in this study.

Child's Name (print legal name): _____

Child's Signature: _____

Date of signature: _____

Age # _____

Date of Birth (mm/dd/yyyy): _____

The following should be completed by the study member conducting the assent process if the child agrees to be in the study. Check all that apply.

The child is capable of reading and understanding the assent form and has signed above as documentation of assent to take part in this study.

The child is not capable of reading the assent form, but the information was verbally explained to him/her. The child signed above as documentation of assent to take part in this study.

The child had ample opportunity to have his or her questions answered.

*Printed name of person
obtaining agreement:* _____

*Signature of person
obtaining agreement:* _____

Date of signature: _____