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Lead Researcher on eHearing Study:

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Researchers' Statement

We are asking you to be in a research study. The purpose of this consent form is to give you the information you will need to help you decide whether to be in the study or not. Please read the form carefully. You may ask questions about the purpose of the research, what we would ask you to do, the possible risks and benefits, your rights as a volunteer, and anything else about the research or this form that is not clear. When we have answered all your questions, you can decide if you want to be in the study or not. This process is called "informed consent." You will be given a copy of this form for your records.

PURPOSE OF THE STUDY

The purpose of this study is to help us better understand how to support people affected by hearing loss and to learn what you think is working and what isn't in the healthcare system for people with hearing loss. About 1 in 10 adults has a problem with hearing at some stage in their lives and hearing loss becomes more common as people get older. Even if we do not ourselves have hearing problems, we often experience its effects when engaging in communication with someone who does. Therefore, the purpose of this study is to invite you to express opinions, preferences and perceptions about hearing health care (e.g., motivators and barriers to accessing support and services). With this information we hope to be able to inform policy makers, health care providers and others to help enable seniors to develop, use and maintain their communication potential.

STUDY PROCEDURES

For the study, small groups of 4-8 volunteers will usually be tested at the same time, but each person will be assigned to his/her own computer to complete a survey and a hearing screening test. No group work is required. First you will spend 30-60 minutes to complete the survey using a computer. After the survey, you will spend about 15-30 minutes to complete the hearing screening test. For the hearing test you will listen for tones of different pitches and loudness levels and you will indicate if you heard the tone. If you do the computer self-test of hearing you will wear earbuds (similar to what people use to listen to portable audio devices) and you will indicate your answer by touching yes or no on the computer screen. This test gives us results that are similar to the results of a standard clinical test. The results will be used for research and not for clinical purposes. For those who do not wish to do the computer self-test of hearing or for whom earbuds cannot be used, a regular hearing test can be conducted instead. The results will be used for research and not for clinical purposes. You

will be sent a copy of your hearing test results by email at the end of the appointment. After the test, if you are interested in having a complete clinical hearing test, we can give you some information about hearing healthcare options available to you in the community.

RISKS, STRESS, OR DISCOMFORT

The research assistant will look in your ears to be sure that it is OK for you to use earbuds before she places the earbuds for the computer hearing test in your ears. You may choose to place the earbuds yourself or to have a standard hearing test with over-the-ear headphones instead of the computer hearing test.

Answering the survey questions may cause you to become tired or bored. You are free to take breaks as needed while you are answering the survey.

If the study raises your concerns about hearing loss and you wish to discuss these concerns then the Professor leading the study at the University of Toronto will talk to you and provide information about how you can obtain services or information in the community.

BENEFITS OF THE STUDY

There are no direct personal benefits to you for participating in this study. We hope the results of the study will be used to improve the hearing healthcare system.

SOURCE OF FUNDING

The study is funded by the National Institutes of Health in the USA and the study is being conducted in four countries, the USA, UK, Australia and Canada. The University of Toronto in Mississauga is the Canada study site.

CONFIDENTIALITY OF RESEARCH INFORMATION

All of the research data we collect from you will be stored on a password-protected, secured server and will be kept private. Your name and email will be stored separately from your research data. The only link between the study data and your name and email address will be a numerical code. We will keep this linking code in case we need to communicate with you about the study and it will be destroyed when it is no longer needed at the end of the study.

The information you provide will be confidential. In the rare event that we learn that you intend to harm yourself or others, we must report it to the authorities.

Government or university staff sometimes review studies such as this one to make sure they are being done safely and ethically. If a review of this study takes place, your records may be examined by authorized reviewers. These reviewers will protect your privacy in the same way as the study researchers. The study records will not be used to put you at any risk of harm.

OTHER INFORMATION

You may refuse to participate and you are free to withdraw from this study at any time without penalty or loss of benefits to which you are otherwise entitled.

You will receive \$20 to compensate you for your time and effort. Parking will be provided for free or bus fare to travel to UTM for the study will be reimbursed.

Participant’s Statement

This study has been explained to me. I volunteer to take part in this research. I have had a chance to ask questions. If I have questions later about the research, or if I have been harmed by participating in this study, I can contact the lead researcher listed on the first page of this consent form or any of the researchers listed on the study website.

If I have questions about my rights as a research participant, I can contact the University of Toronto Office of Research Ethics by email at ethics.review@utoronto.ca or by phone at (416) 946-3273.

The lead institution for the study is the University of Washington in Seattle and I can also contact the University of Washington Human Subjects Division at +1 (206) 543-0098.

I have been given a copy of this consent form.

**SCHEDULING AN APPOINTMENT OR TAKING THE SURVEY MEANS THAT
YOU AGREE TO PARTICIPATE IN THE STUDY.**

PRINT NAME: _____

Email: _____

Signature: _____

Date: _____