BrightSign Usability Study

Entry Survey – Parents

Please Answer these questions about your child who will be taking part in this study:

Name: [redacted]

Age: [redacted]

Gender: [redacted]

Age started signing:

Sign language library: BSL Makaton Signalong Other ……..

Level of signing: Beginner Intermediate Advanced

Study Group: [redacted]

Has your child been part of previous studies for assistive technology?

- Yes
- No

Has your child ever used assistive technology for communication ?

- Yes: an app on tablet
- Yes: other……
- No

Who covers, or would cover, the cost of assistive technology for your child:

- Health insurance
- Government aid
- The school (Education aid)
- Device loan from accessibility platform (CENMAC, LGFL, etc)
- Yourself

How does your child communicate in public ?

- Family, friend translate
- Sign language
- Smart device
- Other:……

What is the primary reason you registered your child in this study ?

- Improve signing skills
- Promote communication independence
- Enhance social interaction
- Support assistive technology development
- Other:

Please rate the study evaluation criteria in the order of importance to your child:

- Technology Development
- Social Behaviour
- Education Support
- Early adopter of BrightSign

Which of the following supplementary features of BrightSign can be beneficial to your child? *Tick all that applies elaborating on why you would use it*

- Customising sign language (Training for personal versions of sign language)

  ……
- Customising speech voice (Child, a friend, family member.. .etc)

  ……
- Translating speech to other languages (French, Indian ..etc)

  ……
- Personalized textile design (favourite character, colour ..etc)

  ……

Would you like to keep BrightSign when the study is concluded?

- Yes
- No

Please write in your own words what do you hope your child will gain from this study?

Thank you for completing BrightSign entry survey ☺