

Declaration of consent

- 1. I hereby declare that I have read and understood the information provided for the study "Creativity during pregnancy". I have had time to think about it. All my questions have been answered.
- 2. In this project no invasive measures are used, with the exception of routine clinical measurements (mouth swab, hair analysis, maternal heart rate measurements), short questionnaires, the recording of birth data, breastfeeding rates and a collection of umbilical cord blood and placental tissue after birth to investigate indicators of stress and metabolism.
- 3. It is also possible to take part in examinations preferably on the speech development of children 3-6-12-24 months after birth.
- 4. I understand that chance decides whether I take part in a "live" or "digital" music intervention.
- 5. I understand that my data will be processed pseudonymised and stored for 5 years after the end of the study. I was informed that only the main staff of the study can link my personal data. I have the right to access, rectification, erasure, restriction of processing and complain to the supervisory authority responsible for data protection at any time.
- 6. I understand that the results of my participation in the study will be used anonymously as a basis for future research. I am also aware that the Berliner Philharmonic Foundation intends to document the project with image, sound and video recordings and that artistic work will be documented in the case of voluntary projects. I can indicate if I do not wish this to happen without jeopardizing my participation.
- 7. I can withdraw my consent to participate and to the processing of my data at any time and thus cancel my participation without any consequences.
- 8. I understand that I might be approached again for aspects of future projects.
- 9. I agree to participate in the above-mentioned project, regardless of the allocation to the life or digital group. I agree and send a printed, signed form with a scan by e-mail to: kreativ@clara-angela.info or send it by post to Prof. Birgit Arabin Koenigsallee 36 14193 Berlin

Participant Name	Post code Place of living	Date and Signature