

## LOW/NEGLIGIBLE RISK HUMAN RESEARCH CHECKLIST FOR IFN521

Complete this form for the research project proposal in academic unit IFN521, including WIL-based research. **Ensure that you complete every field.** Where there are examples in grey text, either replace this text, or, if you choose to use it, change the text to black, reword it and remove the "e.g." at the start.

Name & student number:

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Location/site:

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### 1. Project title

The Influence of Readers on Emotional Reactions to the Writing Format of Natural Disaster News:  
A Comparison of Human-Written and AI-Written Articles

### 2. Provide a brief summary of the research question, including the aims and hypotheses, with justification of why this is important, using the relevant literature (max 300 words).

Our hypothesis is that decision of positive reaction will be lower for information written by a human compared to information written by AI for natural disaster news. People may feel less positive when they see a natural disaster news. However, AI-generate news may lead to less emotional reaction because of non-emotional text. The aim of this research is to whether an AI-generated natural disaster news or not will influence individuals' emotion. Jakesch et al. (2019) indicates that AI-generated information lacked emotion or authenticity and Nils & Luca D (2021) also believe that AI machines lack of expression of deep emotion. And the human creativity, which are a combination of real-world experience, emotion, and inspiration, cannot be replicated by AI (Haase & Hanel, 2023). Therefore, we assume that human-written text can impact emotion more than AI-written text.

### 3. Does your project already have pre-existing ethics approval from an ethics committee?\*

☐ Yes

Ethics Approval Number:

Human Research Ethics Committee providing approval:

☒ No

\* Note – this answer is already filled in for you. Do not change this.

**YOU CANNOT CONDUCT ANY data collection (i.e., ask any person to complete your experiment) unless you receive formal ethics approval from a Human Ethics Committee. Ethics approval will not be granted as part of this assessment, which is why simulated data will be used.** The purpose of completing this document is to provide experience and practical knowledge about ethics requirements for research involving human data.

The unit ethics document is relating to **negligible or low risk research**. Negligible or low risk research is defined as research in which the only foreseeable risk is one of **inconvenience** or **discomfort**. Examples of inconvenience may include filling in a form, participating in a verbal survey, or giving up time to participate in research. Discomforts could include being photographed, the discomfort of measuring blood pressure, or the anxiety induced by an interview. For more information, refer to the [National Statement on Ethical Conduct in Human Research \(2007\)](#).

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Failure to comply with ethical requirements may be deemed as academic or student misconduct.

4. **Benefits of your research – briefly describe the benefits of this research to i) you as a researcher, ii) the participants, and iii) the placement site and/or the wider community (max 100 words).**

There are no anticipated benefits for participants, however, conducting this experiment will provide me with relevant experience in experimental design and completion of a learning activity important for unit IFN521. Also, the experiment results will benefit the improvement of AI techniques.

**Conflict of interest** – You must declare if you have any actual, potential, or perceived [conflict of interest\(s\)](#) in completing this research e.g. you may financially benefit from conducting the research.

☐ Yes

Conflict of interest

☒ No

### Participant recruitment information

**If conducting the research, would you recruit participants with specific inclusion criteria e.g. participants who have a particular characteristics (age, gender, etc.)?**

☐ Yes

Inclusion/exclusion criteria

☒ No

5. **If you were to conduct the research, confirm that you would provide participants Participant Information Sheet & Consent form, and inform them that their decision to participate or not participate will in no way affect their relationship with you or QUT.**

☒ Yes

☐ No

6. **Confirm that you would provide sufficient time for participants to read and ask questions about the participant information sheet, and then decide whether they would like to participate.**

☒ Yes

☐ No

7. **Would your experiment involve identifiable information being collected from participants? e.g. images, voice, name, date of birth.**

☐ Yes

☒ No

**Low/Negligible risk research criteria:** You must answer each question below in the "Assessment of Risks for Participants Checklist" to ensure the level of risk to participants in your project is minimal.

### Assessment of Risk for Participants Checklist

If you answer "YES" to any of the questions in the checklist below, it may indicate that your research is not negligible or low risk. You must ANSWER ALL QUESTIONS in the checklist.

**No data collection is allowed to be conducted. This exercise is for practical purposes only to assist in the understanding of Human Ethics requirements.**

**Are any of the following topics covered in part or as a whole in your project?**

Research about parenting issues

☐ YES

☒ NO

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Explorations of grief, death or serious/traumatic loss	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Depression, mood states, anxiety	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Gambling	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Eating disorders	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Illicit drug use	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Substance abuse	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Self-report of criminal behaviour	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Any psychological disorder	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Suicide	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Gender identity	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Sexuality	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Race or ethnic identity	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Fertility	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Pregnancy or termination of pregnancy	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Sensitive cultural/social/political/economic or religious issues	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
<b>Are any of the following procedures to be used in your project?</b>		
Use of personal data obtained from Commonwealth or State Government Department/Agency	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Use of personal data obtained from State Government Department/Agency	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Use of personal information from a non-government organisation	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Deception of participants or limited disclosure	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Concealing the purposes of the research or covert observation	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Audio or visual recording without consent	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Recruitment of a third party or agency	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Withholding from one group specific treatments or methods of learning, from which they may "benefit" (e.g. in medicine or teaching)	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Psychological interventions or treatments	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Administration of physical stimulation	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Invasive physical procedures	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Infliction of pain	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Administration of drugs	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Administration of other substances	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Exposure to ionising radiation	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Tissue sampling or blood taking	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Collecting body fluid	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Use of medical records where participants can be identified or linked	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Use of a waiver of consent (i.e. you are not asking people for consent)	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Genetic testing/DNA extraction	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Drug trials or other clinical trials	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Activities overseas	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
<b>Does your project specifically target participants from any of the following groups?</b>		
People living with a psychological disorder	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
People with a physical vulnerability	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
People highly dependent on medical care	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Children and/or young people (<18 years of age)	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO

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People who may not be able to give consent	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Resident of a custodial institution eg prisoners	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
People unable to give free informed consent due to difficulties in understanding information provided e.g. language difficulties	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Members of a socially and/or culturally identifiable group with special social/cultural/ethnic or religious beliefs or political vulnerabilities	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Aboriginal and Torres Strait Islander peoples	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Those in a dependent relationship with the researchers e.g. lecturer/student, doctor/patient, teacher/pupil & professional/client	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Participants are identifiable in the final report when specific consent for release has not been given	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
<b>Other Risks?</b>		
Are there any potential risks to the researcher? e.g. research conducted in unsafe environments or trouble spots?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Are there any potential risks to non-participants in the research, such as, participant's work colleagues, family members and social community? e.g. effects of biography on family and friends or infectious disease risk to the community)	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO