**Consent to Participate in Research**

**Basic Study Information**

Title of the Project: Exploring Social Biases in Children’s Evaluations of Others

Principal Investigators: Madeline N. Garza, Oscar I. Najera and Ajna F. Kertesz, Graduate Students, Psychology Department, University of Texas at Austin

Faculty Advisor: Catharine H. Echols, Ph.D., Associate Professor, Psychology

Department, University of Texas at Austin

**Invitation to be Part of a Research Study**

Your child is invited to be part of a research study. This consent form will help you choose whether or not to allow your child to participate in the study. Feel free to ask if anything is not clear in this consent form.

**What is the study about and why are we doing it?**

The goal of the study is to assess how readily 7-to 9-year-old children are able to match differently accented speakers to individuals if they have different skin tones. Furthermore, we are also interested in exploring whether children think of accents as fixed or malleable over time.

**What will happen if you take part in this study?**

If you agree to allow for your child to participate in this study, your child will be introduced to a matching task in which he/she quickly will be asked to pair voices to faces. Your child will hear a series of sentences spoken by differently accented individuals. Your child will hear one sentence at a time and will decide which speaker on the screen said the sentence. Next your child will be asked to indicate some social preferences of the people shown (e.g., who is the friendliest, smartest…etc.). Lastly, your child will be asked a few questions about their perceptions of accented speaker and weather they think accents can be changed or not over time. Additionally, we will ask you to complete a demographics questionnaire about your child. Both you and your child have the right to stop and withdraw from the study at any point.

**How long will you be in this study and how many people will be in the study?**

Participation in this study will take about 15-20 minutes.

Altogether, there will be approximately 100 child participants in this study.

**What risks and discomforts might you experience from being in this study?**

In general, the risks involved in this study are not greater than everyday life. The primary risk is

a risk to confidentiality. Protections against this risk are described below. Furthermore, there is a potential of minor distress due to children being bored, uncomfortable or upset. However, children will be encouraged to just do their best and they will be told that they can discontinue participation at any time during the study.

**How could you benefit from this study?**

Although you or your child will not directly benefit from being in this study, others might benefit because the research will increase our understanding of how people process information and,

specifically, factors (e.g., race and accent) that affect their judgments about the credibility of others.

**How will we protect your information?**

Any information that is obtained in connection with this study and that can be identified with your child will remain confidential and will be disclosed only with your permission. All participants will be assigned a code, used for purposes of making all data collected de-identified. Any identifying information (including, but not limited to, consent forms, and code-name reference) will be kept in locked drawer, in a locked office, or on a password protected server associated with the University of Texas at Austin campus.

We plan to publish the results of this study. To protect your privacy, we will not include

any information that could directly identify you.

We will share your data with other researchers for future research studies that may be similar to this study or may be very different. The data shared with other researchers will not include information that can directly identify you.

Information about you may be given to representatives of UT Austin and the UT Austin Institutional Review Board.

**What will happen to the information we collect about you after the study is over?**

As part of this study we will collect your child’s responses to the task. Your child’s answers to the social judgement questions and to the malleability of accents will be audio recorded. We will keep your child’s research data to use for future research. Your name and other

information that can directly identify you or your child will be kept secure and stored separately from the research data collected as part of the project.

**How will we compensate you for being part of the study?**

Your child will receive a small toy for participation in this study.

**What other choices do you have if you do not take part in this study?**

It is totally up to you and your child to decide to be in this research study. Participating in this

study is voluntary. The decision to participate will not affect your or your child’s relationship with

The University of Texas at Austin. You and your child will not lose any benefits or rights you

already had if you decide not to participate. Even if you decide to allow your child to be part of

this study now, you may change your mind and stop at any time. Your child does not have to

answer any questions they do not want to answer.

**Contact Information for the Study Team**

If you have any questions about this research, you may contact:

Madeleine N Garza

Phone: (956-638-9213)

Email: [mngarza@utexas.edu](mailto:mngarza@utexas.edu)

Oscar I Najera

Phone: (915-777-5573)

Email: [oscarnajera@utexas.edu](mailto:oscarnajera@utexas.edu)

Ajna F. Kertesz

Phone: (518-992-0177)

Email: [akertesz@utexas.edu](mailto:akertesz@utexas.edu)

OR

Catharine H. Echols, Ph.D.

Phone: (512) 471-4879

Email: [echols@utexas.edu](mailto:echols@utexas.edu)

**Contact Information for Questions about Your Rights as a Research Participant**

If you have questions about your rights or your child’s rights as a research participant, or wish to

obtain information, ask questions, or discuss any concerns about this study with someone other

than the researcher(s), please contact the following:

The University of Texas at Austin Institutional Review Board

Phone: 512-232-1543

Email: irb@austin.utexas.edu

Please reference the protocol number found at the top of this document.

**Your Permission**

By signing this document, you are agreeing to allow your child to be in this study. Make sure

you understand what the study is about before you sign. We will give you a copy of this

document for your records. We will keep a copy with the study records. If you have any

questions about the study after you sign this document, you can contact the study team using

the information provided above.

I understand what the study is about and my questions so far have been answered. I agree to

allow my child take part in this study.

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Printed Child Name

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Signature of Parent or Legal Guardian Date