**Institutional Review Board Questionnaire**

**Department of Anthropology**

**Colby College**

**Submitted by:**

**Email address:**

**Title of Project:**

**Course number, if applicable:**

**Overview to determine exempt from full review status**

Is your data collection procedure fully anonymous? (Data are not anonymous in any case where participants Colby ID, name, email address or similar information is included.)

YES NO

Are you working with special populations? (Special populations include children, prisoners, or anyone who is not be able to give consent.)

YES NO

Will participants perform tasks that are not normally encountered in their daily life in school or work?

YES NO

Is there any potential that your participants will be injured or upset as a result of participating in your study?

YES NO

Please type in your answers to the following questions. Copies of all relevant materials, including (a) consent forms or scripts, (b) debriefing forms or scripts, (c) survey or interview questions, and (d) additional measures or materials, should be added at the end of the document. Please submit one file electronically to the Colby Institutional Review Board Chair, Tarja Raag (tarja.raag@colby.edu).

1. *Approximate date for starting and ending this research project after it has been approved by the IRB.*

1. *The name of the investigator(s), departmental address(es), e-mail address(es), fax number(s), and campus phone number(s). All applicants other than professors must list the name, departmental address, e-mail address of a faculty advisor.*
2. *State briefly the purpose of the intended research, specifying the problems addressed, what is to be learned, and identify the specific objectives of the research.*
3. *Describe in detail the procedures that will be used to achieve the objectives of the research project; copies of all relevant (a) consent forms or scripts, (b) debriefing forms or scripts, (c) survey or interview questions, and (d) additional measures or materials should be included in Part 14, below.*
4. *Describe in detail the method of subject selection. Special attentions should be paid to subject selection and affiliation when Colby students will not be used for the subject sample. Also include information about any compensation rates to subjects. Please be sure to report everything that the subject will be told about the study prior to participating in the research.*
5. *Do you plan to obtain signed or oral consent from all study participants? Please explain. If you plan to use a consent form, please attach a copy.*

[proposed standard response for oral consent:

My ethnographic fieldwork will involve conversational participant-observation. This method is driven by the interests of the participants and relies on the development of an open-ended, informal relationship between researcher and participants. The aim of this research method is to understand issues and relationships as a participant understands them.

In order for this approach to be effective, researchers treat participants as experts from whom they are learning. Introducing a consent form inhibits this process by giving the researcher a false appearance of authority and expertise, and by giving the research a false appearance of narrow precision. In this kind of research, consent forms have a tendency to undermine participants’ ability to direct conversation by positioning them as subjects to be studied rather than experts who are contributing to scholarship.

Introducing consent forms also tends to undermine the mutual trust which must be present in participant-observation. This approach is premised on the idea that participants are empowered to determine their level of comfort in revealing information and that they may cease to participate at any time. Clearly communicating this basic premise, I will make certain that each participant is fully aware of their right to discontinue participation in my research at any time.

Finally, confidentiality is an important value in this research. Consequently, I will be using pseudonyms in my field-notes and all other documentation; if consent forms were to be collected in this research, these forms would be the only documents linking named individuals to my study. Not having consent forms would provide an additional assurance both to my participants and myself concerning preservation of confidentiality.]

1. *Does the proposed research involve deception, e.g. through provision of misinformation, withholding information, etc?*
2. *Provide a full account of the debriefing procedures to be followed, if appropriate. If you plan to debrief, please attached a copy of the written debriefing or interview protocol.*
3. *Does participation by human subjects or informants place any group or class of individuals in physical, legal, social and or/psychological jeopardy? If so, how can the potential risk be assessed?*
4. *Does the research place individual subjects at risk? If so, please describe fully the ways in which the risk will be controlled.*
5. *In a few sentences, please address the benefits of the research, both to the participant and to society. The ethical review requires the IRB to balance how any possible risks that may be involved in the research, even though the risks may be minimal, are justified by the potential benefits resulting from the investigation.*
6. *Please describe what procedures will be used for storage of consent forms and the secure and separate storage of all other study materials. Who will have access to these materials?*
7. *In the event that outside agencies are involved (in data gathering, processing, and storage), how will the rights of the subjects be guaranteed by that agency?*
8. *Please paste below all relevant (a) consent forms or scripts, (b) debriefing forms or scripts, (c) survey or interview questions, and (d) additional measures or materials.*

**Consent Form**

**Colby College Department of Anthropology**

Title of the Study: [insert study title]

Researcher Name(s): [insert researcher name(s) and contact information]

 The general purpose of this research is to [insert a sentence describing the general purpose of the research]. Participants in this study will be asked to [insert a sentence describing the general procedure of the research].

 Informed consent is required by Colby College for any person participating in a College-sponsored research study. This study has been approved by the College's Institutional Review Board for Research with Human Subjects.

I hereby give my consent to be the subject of this research study. I acknowledge that the researcher has provided me with:

A. An explanation of the study’s general purpose and procedure.

B. Answers to any questions I have asked about the study procedure.

I understand that:

A. My participation in this study will take approximately [insert duration].

B. No unusual risks are anticipated as a result of participating in this research [if any greater-than-minimal risks are anticipated, replace this sentence with “Participating in this research may result in” and list the anticipated risks].

C. The potential benefits of this study include [briefly describe the study’s potential benefits to participants and others, not including compensation].

D. I will be compensated for participating in this study with [insert the form and amount of compensation, or replace this sentence with “I will not be compensated for participating in this study”].

E. My participation is voluntary, and I may withdraw my consent and discontinue participation in the study at any time. My refusal to participate will not result in any penalty.

F. The specific nature of and reasons for the procedures employed, those aspects of my behavior that have been recorded for measurement purposes, and what the investigators hope to learn from this study will all be fully explained to me at the end of the session.

G. All data collected for this study will be kept confidential. The data will be stored in a secure location, and research reports will only present aggregate statistics without any personally identifying information. [If you plan to quote individual participants or identify them by name, then revise this point appropriately.]

H. After the study’s purpose and procedure have been fully explained to me, I may, for any reason, choose to withhold use of any data provided by my participation.

Consent to record:

I *agree / do not agree* (circle one) to be [insert type of recording: photographed / audio recorded / video recorded] as part of this research study, and to have these [photographs / recordings] confidentially studied by the researchers. [If you do not plan to photograph or record participants, then delete this prompt. If you plan to present participant photographs or recordings to anyone other than the research team, then delete this prompt and include a complete permission-to-record form.]

 Signature Date

**Permission for [Photographs or Recordings]**

**Colby College Department of Anthropology**

Title of the Study: [insert study title]

Researcher Name(s): [insert researcher names]

As part of this research project, we will [photograph, or make an audio recording of, or make a video recording of] you while you participate in the study. Please indicate what uses of this recording you consent to by initialing below. Your responses to this form will in no way affect your compensation. We will only use the recording in ways that you agree to. In any use of this recording, your name would not be used unless you consent to being personally identified.

A. The [photographs or recording] can be studied by the researchers as part of this project.

Please initial: Yes \_\_\_\_ or No \_\_\_\_

[Researchers, add or delete possible uses as needed.]

B. The researchers can identify me by name in publications or presentations. (If you mark No or leave this prompt blank, then the researcher will use an alias instead of your real name.)

Please initial: Yes \_\_\_\_ or No \_\_\_\_

C. The [photographs or recording] can be used in scientific publications.

Please initial: Yes \_\_\_\_ or No \_\_\_\_

D. The [photographs or recording] can be presented at scientific meetings.

Please initial: Yes \_\_\_\_ or No \_\_\_\_

E. The [photographs or recording] can be presented to other participants.

Please initial: Yes \_\_\_\_ or No \_\_\_\_

F. The [photographs or recording] can be presented to students in class.

Please initial: Yes \_\_\_\_ or No \_\_\_\_

G. The [photographs or recording] can be used in public presentations.

Please initial: Yes \_\_\_\_ or No \_\_\_\_

H. The [photographs or recording] can be presented on radio or television programs.

Please initial: Yes \_\_\_\_ or No \_\_\_\_

I have read the above description, I give my consent to be [photographed or recorded], and I give my consent for the [photographs or recording] to be used as indicated above.

 Signature Date