



Parent Permission/Consent Form

Study Title: Learning Social Rules

Principle Investigator: Judith Smetana, Ph.D.

Project Coordinator: Courtney Ball, M.S.

This permission form describes a research study, what you may expect if you decide to allow your child to take part, and important information to help you make your decision.

Please ask the study staff questions about anything that is not clear before you decide whether or not you and your child want to participate. You may take this form home to think about and discuss with family or friends.

- Being in this study is voluntary – it is your choice.
- If you decide to be in the study and allow your child to be in the study, you can change your mind and stop at any time.

Introduction

You and your child are being asked to take part in this study because your child is 2- to 3 or 4- to 5 years of age and you indicated interest in the study. Dr. Judith Smetana of the University of Rochester's Department of Clinical and Social Sciences in Psychology is conducting this study.

Purpose of the Study

We want to know how children learn about everyday rules for their behavior (like not hitting or following parental rules). Children's understanding of social rules develops quickly during the preschool years, and we are studying how this develops and what influences this understanding.

Description of Study Procedures

We will ask you to fill out a 20- to 30-minute survey that asks about different aspects of your child's development and your relationship with your child, as well as some basic information about yourself (e.g., your age, education). We also show your children a brief puppet show, as well as some pictures on a touch screen tablet, and then ask your child some questions about what he or she saw and what he or she thinks about it. The puppet show and pictures depict kids breaking everyday rules. We will also use puppets and a behavioral task to measure children's attention, ability to delay responses, and, for older children, perceptions of parenting. These sessions will be conducted by a trained researcher and will be video recorded. The interviews are designed specifically for young kids, are fun to do, and will last 35 to 45 minutes. You and your child do not have to answer questions or participate in any activities that you (or your child) do not want to. Members of the research team are available to answer any questions you may have, and you can call or email us at any time (see the Contact Info section on this form).

Number of Subjects

We hope to have 50 children and their mothers from the Rochester area take part in our study.

Duration of Study

The sessions will last about 45 minutes.

Risks of Participation

The rule breaking behaviors shown in this study are ones that are very common at this age (e.g. hitting or talking loudly). Our staff is trained to work with young children. If your child expresses any discomfort, the interview will be stopped until he or she chooses to continue. Children will be told that they do not have to answer any questions they do not want to and that no one will be mad if they don't want to complete the interview.

Benefits of Participation

There are no direct benefits to participating in the study, but children often find the interviews fun and engaging.

Costs

There will be no cost to you/your child to participate in this study.

Payments

You will receive a \$25 for participating in the study.

Confidentiality of Records

The University of Rochester makes every effort to keep the information collected from you and your child private. In order to do so, all information will be stored in a locked cabinet and on secure, password protected computers. Sometimes, however, researchers need to share information with people that work for the University or the government that may identify you/your child. If this does happen we will take precautions to protect the information you have provided. Results of the research will be presented at meetings or in publications, but names will never be used.

Contact Persons

For more information, or if you feel that your or your child's participation has resulted in any emotional discomfort, please contact Courtney Ball at 585-275-9148 (email: Courtney.Ball@rochester.edu) or Dr. Judith Smetana at 585-275-4592 (email: judith.smetana@rochester.edu).

Please contact the University of Rochester Research Subjects Review Board at 265 Crittenden Blvd., CU 420315, Rochester, NY, 14642, Phone 585-276-0005 or 585-877-449-for the following reasons:

- You wish to talk to someone other than the research staff about your rights as a research subject;
- To voice concerns about the research;
- To provide input concerning the research process;
- In the event the study staff could not be reached.

Voluntary Participation

Taking part in this study is your choice. You and your child do not have to participate and you can withdraw from the study at any time, for whatever reason. In the event that you or your child withdraws from this study, the information already provided will be kept confidential.

SIGNATURE/DATES

Subject Consent: I have read (or have had read to me) this form and have been encouraged to ask questions. I have received answers to my questions. I give my consent to participate in this study. I have received (or will receive) a copy of this form for my records.

Parent/Guardian Name (print): _____

Parent/Guardian Signature: _____ Date: _____

Parental permission: I have read (or have had read to me) this form and have been encouraged to ask questions. I have received answers to my questions. I give my permission for my child to participate in this study. I have received (or will receive) a copy of this form for my records.

Child's Name (print): _____

Parent/Guardian's Name (print): _____

Parent/Guardian's Signature: _____ Date: _____

*****DO NOT WRITE BELOW THIS LINE *****

Person Obtaining Consent: I have read this form to the parent and/or the parent has read this form. I have provided the parent with a copy of this permission form. An explanation of the research was given when the permission forms were given out, any questions from parents were answered or have been answered and by signing and returning this form the subject, in my judgment, has demonstrated comprehension of the information.

Name and Title: _____

Signature: _____ Date: _____