

**Protocol Title:** Attachment Style, Mindsets, and Moral Disengagement: A Meditational Model  
**Protocol Type:** Expedited  
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**Important Note:** This Print View may not reflect all comments and contingencies for approval. Please check the comments section of the online protocol. Questions that appear to not have been answered may not have been required for this submission. Please see the system application for more details.

**\*\*\* Personnel Information \*\*\***

**Principal Investigator**

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<b>Indicate current Investigator training.</b>					
<input checked="" type="checkbox"/>	Has the PI completed the mandatory human subjects training through CITI?				
<b>Please indicate your status</b>					
<input type="checkbox"/>	Faculty	<input checked="" type="checkbox"/>	Undergraduate Student	<input type="checkbox"/>	Junior
<input type="checkbox"/>	Graduate Student	<input type="checkbox"/>	Postdoctoral fellow		
<input type="checkbox"/>	Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Faculty Advisor**

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<b>Indicate current Sponsor training.</b>				
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<b>Please indicate your status</b>				
<input type="checkbox"/>	Faculty	<input type="checkbox"/>	Undergraduate Student	<input type="checkbox"/>
<input type="checkbox"/>	Graduate Student	<input type="checkbox"/>	Postdoctoral fellow	
<input type="checkbox"/>	Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Co-Investigator(s)**

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<b>Indicate current Co-Investigator training.</b>			
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<b>Please indicate your status</b>			
<input type="checkbox"/>	Faculty	<input type="checkbox"/>	Undergraduate Student
<input type="checkbox"/>	Graduate Student	<input type="checkbox"/>	Postdoctoral fellow
<input type="checkbox"/>	Other	<input type="checkbox"/>	

**Other Personnel**

**\*\*\* Vulnerable Subject Checklist \*\*\***

**Vulnerable Subject Checklist\***

- a) **Select all that apply.**
- X College students (i.e., University of Notre Dame, St. Mary's College)
  - Community research (i.e., local organizations)
  - Decisionally Impaired
  - Economically Depressed Populations
  - Elderly ("Elderly" does not necessarily mean "vulnerable." Explain below what makes the population vulnerable, e.g., senile dementia.)
  - Individuals within organizations (i.e., NGOs, military)
  - Individuals residing in a foreign country
  - International population
  - X Internet based research
  - Minors (under 18 years of age)
  - Neonates
  - Non-English Speakers
  - Patients (i.e., Epworth Center, Oaklawn, Memorial Hospital)
  - Pregnant Women
  - Prisoners
  - Students - Secondary + Elementary (need Letter Approval)
  - No vulnerable populations will be included.
  - Other (i.e., any population that is not specified above)

b) **If any proposed subjects are children/minors, prisoners, pregnant women, those with physical or decisional impairments, or others who are considered vulnerable to coercion or undue influence, state your rationale for their involvement.**

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- c) If your research targets non-English speakers, explain your knowledge of local community attitudes, cultural norms, and cultural sensitivities necessary to carry out the study.
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**\*\*\* General Checklist \*\*\***

**General Checklist**

The purpose of this section is to determine whether the study involves any special situations that may require additional information. Please read through this section carefully, and select all that apply.

- Covert observation
  - Deception or Punishment
  - Genetic information that may be linked to a participant's health status, such as genetic markers for cancer, heart disease, etc.
  - Indicators of suicide ideation
  - Induction of mental and/or physical stress
  - Information normally recorded in a patient's medical record, and the disclosure of which could reasonably lead to social stigmatization or discrimination.
  - Information pertaining to illegal conduct
  - Information pertaining to an individual's psychological well being or mental health
  - Information that if released could reasonably damage an individual's financial standing, employability, or reputation within the community.
  - Information relating to sexual attitudes, preferences, or practices
  - Information relating to the use of alcohol, drugs or other additive products
  - Materials/issues commonly regarded as socially unacceptable
  - Procedures that might be regarded as an invasion of privacy
  - Procedures which may risk physical/mental harm to the participant
  - Use of drugs
- X None of the above apply
- 

**\*\*\* Funding \*\*\***

**Funding Administration**

Are you Internally Funded P

if Yes, by whom?

Department of Psychology

Are you Externally Funded N

if Yes, by whom?

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**\*\*\* Expedited Paragraphs \*\*\***

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#### Expedited Review

In order to be eligible for expedited review, ALL aspects of the research must include activities that (1) present no more than minimal risk to human subjects, and (2) involve only procedures included in one or more of the specific categories listed below and in the regulations at Federal Register Volume 63, No 216.

Select one or more of the following paragraph(s):

**1. Clinical studies of drugs and medical devices only when condition (a) and (b) are met.**

- a) Research on drugs for which an investigational new drug application (21 CFR Part 312) is not required. (Note: Research on marketed drugs that significantly increases the risks or decreases the acceptability of the risks associated with the use of the product is not eligible for expedited review.)
- b) Research on medical devices for which
  - i) an investigational device exemption application (21 CFR Part 812) is not required; or
  - ii) the medical device is cleared/approved for marketing and the medical device is being used in accordance with its cleared/approved labeling.

**2. Collection of blood samples by finger stick, heel stick, ear stick, or venipuncture as follows:**

- a) From healthy, non-pregnant adults who weigh at least 110 pounds. For these subjects, the amounts drawn may not exceed 550 ml in an 8 week period and collection may not occur more frequently than 2 times per week; or
- b) From other adults and children, considering the age, weight, and health of the subjects, the collection procedure, the amount of blood to be collected, and the frequency with which it will be collected. For these subjects, the amount drawn may not exceed the lesser of 50 ml or 3 ml per kg in an 8 week period and collection may not occur more frequently than 2 times per week.

**3. Prospective collection of biological specimen for research purposes by non-invasive means.**

Examples: (a) hair and nail clippings in a nondisfiguring manner; (b) deciduous teeth at time of exfoliation or if routine patient care indicates a need for extraction; (c) permanent teeth if routine patient care indicates a need for extraction; (d) excreta and external secretions (including sweat); (e) uncannulated saliva collected either in an unstimulated fashion or stimulated by chewing gumbase or wax or by applying a dilute citric solution to the tongue; (f) placenta removed at delivery; (g) amniotic fluid obtained at the time of rupture of the membrane prior to or during labor; (h) supra- and subgingival dental plaque and calculus, provided the collection procedure is not more invasive than routine prophylactic scaling of the teeth and the process is accomplished in accordance with accepted prophylactic techniques; (i) mucosal and skin cells collected by buccal scraping or swab, skin swab, or mouth washings; (j) sputum collected after saline mist nebulization.

**4. Collection of data through non invasive procedures (not involving general anesthesia or sedation) routinely employed in clinical practice, excluding procedures involving x-rays or microwaves. Where medical devices are employed, they must be cleared/approved for marketing. (Studies intended to evaluate the safety and effectiveness of the medical device are not generally eligible for expedited review, including studies of cleared medical devices for new indications.)**

Examples: (a) physical sensors that are applied either to the surface of the body or at a distance and do not involve input of significant amounts of energy into the subject or an invasion of the subject's privacy; (b) weighing or testing sensory acuity; (c) magnetic resonance imaging; (d) electrocardiography, electroencephalography, thermography, detection of naturally occurring radioactivity, electroretinography, ultrasound, diagnostic infrared imaging, doppler blood flow, and echocardiography; (e) moderate exercise, muscular strength testing, body composition assessment, and flexibility testing where appropriate given the age, weight, and health of the individual.

**5. Research involving materials (data, documents, records, or specimens) that have been collected, or will be collected solely for nonresearch purposes (such as medical treatment or diagnosis). (NOTE: Some research in this category may be exempt from the HHS regulations for the protection of human subjects. 45 CFR 46.101[b][4]. This listing refers only to research that is not exempt.)**

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- 6. Collection of data from voice, video, digital, or image recordings made for research purposes.
- X 7. Research on individual or group characteristics or behaviour (including, but not limited to, research on perception, cognition, motivation, identity, language, communication, cultural beliefs or practices, and social behavior) or research employing survey, interview, oral history, focus group, program evaluation, human factors evaluation, or quality assurance methodologies. (NOTE: Some research in this category may be exempt from the HHS regulations for the protection of human subjects. 45 CFR 46.101[b][2] and [b][3]. This listing refers only to research that is not exempt.)

**\*\*\* Research Design \*\*\***

Protocol ID: 15-02-2331 -

**Study Title**

Attachment Style, Mindsets, and Moral Disengagement: A Meditational Model

**Short Title :**

**Study Start Date:**  (mm/dd/yyyy)

**Study End Date:**  (mm/dd/yyyy)

Complete each section. When a question is not applicable, enter N/A. Do not leave any sections blank.

**1. Introduction and Background:**

**a) State the problem and hypothesis**

My project pioneers empirical research linking Attachment Theory (Bowlby, 1955), Mindset Theory (Dweck & Legget, 1988), and [im]moral behavior. Although research has suggested connections between attachment styles with moral (dis)engagement, attachment styles with Mindset Theory, and Mindset Theory with moral and immoral behavior, and there is no known research connecting all three concepts into one empirical model. The aim of the present study is to build a model that will offer a better understanding of the relationship between attachment styles, moral disengagement, and Mindset Theory. We have two intertwining hypotheses. First, we hypothesize anxious attachment leads to a threat construal that is disorienting, and, without a strong support behind them, these individuals will adopt a helpless mindset making them more prone to moral disengagement. Second, we hypothesize that secure attachment will lead to the construal of difficult situations as challenging, and, with a strong support behind them, these individuals will adopt a mastery-oriented mindset making them more prone to moral engagement.

**b) Provide the scientific or scholarly reason for this study and background on the topic**

Attachment styles affect not only how individuals view relationships, but also shape the individual's broader outlook on situations outside relationships (Chugh et al., 2014). Recent literature has discussed how attachment styles can influence the choice between moral engagement and moral disengagement due to the fundamentally different ways individuals with each attachment style view achievement situations. When the securely attached encounter an achievement situation, they see it as a challenge, while the anxiously attached view it as a threat and evaluative of their competence (Elliot & Reis, 2003; Chugh et al., 2014). This evaluation of situations as either a threat or a challenge greatly influences individual's moral involvement. Participants primed with attachment security were less willing to steal and morally disengage than those primed with attachment anxiety (Chugh et al., 2014). We believe that the relationship between attachment styles and moral (dis)engagement can be explained by Mindset Theory. There is not much empirical research connecting attachment styles and mindsets, but based on research conducted by Elliot & Reese (2003) and Chugh et al. (2014), we have a good idea of what this relationship may look like. As discussed earlier, when encountering an achievement situation, the securely attached see it as a challenge, and the anxiously attached view it as a threat and evaluative of their competence (Elliot & Reese, 2003; Chugh et al., 2014). This construal of achievement situation as either a challenge or a threat sounds very similar to Dweck and Leggett's (1988) Mindset Theory. When studying students in an academic setting, Dweck and Leggett identified two mindsets: mastery-oriented students, with a goal of learning material and increasing intelligence, and performance-oriented students, who have an idea of intelligence as a fixed entity. Mastery-oriented kids can be thought of as wanting to be smart, whereas performance-oriented kids wanting to look smart. The attachment style of individuals may be an influential factor in the mindset they maintain. Because those who are securely attached see achievement situations as challenges (Elliot & Reese, 2003; Chugh et al., 2014), it would be logical to assume that they tend to be mastery-oriented since they want to increase their overall intelligence and are not afraid of failure. Because those who are anxiously attached view achievement situations as threats to their competence (Elliot &

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failure. Because those who are anxiously attached view achievement situations as threats to their competence (Elliot & Reese, 2003; Chugh et al., 2014), it is logical to believe that they tend to be performance-oriented because they desire to look smart and failure threatens this. In this way, a hypothetical connection between attachment styles and Mindset Theory can be made.

Mindset Theory has not yet been applied directly to morality, but Dweck and Leggett (1988) suggest a parallel between performance in academic situations and morally-challenging situations. When observing students, Dweck and Leggett noticed a difference in performance and engagement when problems were slightly too hard for their grade level. Mastery-oriented students engaged in self-instruction and self-monitoring, remained optimistic that their efforts would be fruitful, and saw failures as unsolved challenges. Performance-oriented students expressed negative self-cognitions, attributed their failure to personal inadequacy, developed an aversion to the task, and engaged in task-irrelevant verbalizations. As indicated by this example, the differences between these two mindsets are made obvious only by situations that challenge an individual's self-concept. In this academic setting, the difficult task challenged students' concepts of themselves as intelligent. Challenges to self-concept can also occur in the confrontation of morally difficult situations. Dweck and Leggett never collected empirical evidence for the application of Mindset Theory to moral (dis)engagement, but they hypothesized that the two mindsets they identified have distinct goals in relation to morality. First, they suggest that individuals with a mastery-oriented mindset have learning goals and that they will pursue courses of action that will help to develop their own moral understanding or to master a morally difficult situation. Since the theorized goal of individuals with a mastery-oriented mindset is to grow morally, these individuals believe that morality is a malleable trait—they can become more moral by positively engaging in morally-challenging situation. Second, Dweck and Leggett theorized that individuals with performance goals will only engage in moral actions that are easily managed because they want to prove to themselves and to others that they are in fact moral. It is hypothesized that individuals with the performance-oriented mindset see morality as a fixed trait, and when these individuals encounter morally challenging situations, they will disengage to protect their moral self-concept.

We think that Mindset Theory is the reason for the empirically supported relationship between attachment styles and moral (dis)engagement. The aim of the present study is to build a meditation model that will offer a better understanding of the relationship between attachment styles, moral (dis)engagement, and mindsets.

## 2. Specific Aims/Study Objectives

### a) List the purpose(s) of the study (what are you hoping to learn as a result of the study)

The purpose of this study is to better understand the relationship between attachment styles, Mindset Theory, and moral (dis)engagement. We would like to find empirical evidence to support the hypothesized relationship between attachment style and mindset theory and to continue the work of Dweck and Leggett (1988) in better understanding the relationship between Mindset Theory and moral (dis)engagement.

## 3. Materials, Methods and Analysis (quantitative and qualitative)

### a) Describe data collection methods (Procedures) be specific

Participants will be recruited through SONA and data will be collected using the online survey platform Qualtrics. Data collection will occur over the Fall semester of 2015. Our sample size goal is 360. This is guided by power analyses for testing a multiple group mediation models. We will have three groups (see "Describe the specific materials..." section), each containing 120 participants.

### b) Describe the specific materials or tools that will be used to collect the data - be specific

We will use the Close Relationship Questionnaire (Bartholomew & Horowitz, 1991) to assess participants' attachment styles. To determine participant's mindsets the Dweck Mindset Questions: Implicit Theories of Morality (1999) will be used. Next, participants will be randomly assigned to one of three tasks. One group will receive a task that threatens their moral self-concept, another group will receive a task that is morally affirming, and the final group a filler task. In the threat condition, participants will write about a time when they "hurt someone by doing something selfish, uncaring, or mean" and how their victim felt. (Effron, 2014, p. 981). In the morally affirming condition, participants will be asked to write about a time in their life when they "helped someone by doing something caring, compassionate, generous, or kind" and how the beneficiary felt (Effron, 2014, p. 981). In the control condition, participants will be asked to write about their dream vacation destination. After completing this writing task, participants will be given the Mechanisms of Moral Disengagement Scale (Bandura, Barbaranelli, Caprara, & Pastorelli, 1996) to measure moral disengagement. Finally, participants will be given a test for cheating in which they will be receive a list of five words to unscramble. They will have four minutes to solve the anagrams and be told that each word they unscramble will be a bonus entry into a lottery for a gift card and that they will self-report the number of words unscrambled. Three of the letter combinations provided will be unsolvable, indicating that any participant who self-reports over two unscrambled words has cheated. Regardless of how many words the participants report to have unscrambled, they will be entered into the lottery for the gift card.

## 4. Qualifications of Study Personnel

### a) Explain the study-specific expertise of the principal investigator, any co-investigators, or other key personnel listed in the

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**application (e.g., sponsor certification in the use of the device).**

Nicole Murgas is has completed CITI training and been working in the MAP Lab for the entirety of the 2014-2015 school year. She has been trained in the use of Qualtrics to gather data. Nicole completed the Psychology Statistics and Methods courses. Ryan Woodbury is a doctoral student that has expertise in quantitative data analysis and data management and a firm understanding of moral development and Mindset theory. Dan Lapsley is the faculty advisor. He has written numerous books and articles on moral development and social cognition.

**b) Student Researcher Only: Describe the expertise you have, or have access to, that prepares you to conduct research in this location and/or with this subject population, including specific qualifications (e.g., relevant coursework, background, experience, or training).**

I have completed both a Psychology Statistics and Methods course prior to conducting this study. From these course I have learned how to analyze data and conduct experiments in an ethical and complete way. Furthermore, I have been working in the MAP Lab since Fall of 2014 and have helped others with their research, participated in weekly lab meetings, and conducted literature reviews.

**\*\*\* General Study Information \*\*\***

**5. General Study Information**

a) Why is this Project being conducted? (please check)

- X Faculty/Staff Research
- X Undergraduate Coursework
- Master's Thesis
- Doctoral Dissertation
- Other:

**\*\*\* Research Population & Recruitment Methods \*\*\***

**6. Research Population & Recruitment Methods**

a) **Inclusion and Exclusion Criteria (what participant traits are needed to be included, what traits exclude participants?)**

This study will be open to any individuals over 18 who wish to participate in it and give informed consent.

b) **What is the scientific or scholarly justification for the number, gender, age, or race of the population you intend to recruit?**

I will not be recruiting any participants specifically based on gender or race. The age of participants will be from 18-22 because the sample will be taken from a university population. I will be recruiting 360 participants to have a large enough sample size that will yield representative data. This is guided by power analyses for testing a multiple group mediation models. We will have three groups, each containing 120 participants

c) **How did you choose the source of participants or data? (census records, University of Notre Dame students, other records, etc)**

I chose University of Notre Dame students because this population is accessible for an undergraduate student conducting beginning research.

d) **Recruitment procedure (if applicable) including who will recruit participants**

My study will be listed on SONA and any student who has access to SONA will be free to sign-up for it.

e) **Tools that will be used to recruit (payment, advertisements and flyers attach copies to this application)**



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Participants will be awarded 1 SONA credit and entered in a raffle to win a \$100 Amazon gift card.

**\*\*\* Confidentiality \*\*\***

**7. Confidentiality**

University of Notre Dame - Data Security

- a) Where the data will be stored, and who will have access to the data and the area?  

The data will be stored on the online survey platform Qualtrics. The program is password protected. Nikki Murgas and Ryan Woodbury will have access to the area where data is stored.
  
- b) How will the data be stored, and in what format (hard or electronic copy, identifiable or deidentified)?  

The data will be stored in an electronic copy. The data will be deidentified. Although we will collect the participants email address in order to award them SONA credit and enter them in the gift card lottery, these email addresses will be separated from the data by use of a separate, but linked survey.
  
- c) Will the participant's identity be coded? Will the codes to identify participants be stored with the data? (Note: If you are working with a Hospital or Clinic, please see information on HIPAA and Research )  

Since the data will be deidentified, it will not be necessary to code the participants. None of their personal information will be stored with the data. Once the lottery gift card recipient has been selected, sent and received, the email addresses and accompanying survey will be deleted.

**\*\*\* Risks and Discomforts \*\*\***

**8. Risks and Discomforts**

Research must present no more than a minimal risk to human participants in order to qualify for expedited review. Minimal risk means that the "probability and magnitude of harm or discomfort anticipated in the research are not greater in and of themselves than those ordinarily encountered in daily life or during the performance of routine physical or psychological examinations or test." (45 CFR 46.102).

- a) Does the research propose greater than a minimal risk to participants? N
  
- b) Indicate if any of the following risks are involved in this study.
  - Administration of physical stimuli (other than auditory or visual stimuli associated with normal classroom situations)
  - Deprivation of physiological requirements (e.g., nutrition, sleep)
  - Manipulation of psychological and/or social variables (e.g. sensory deprivation, social isolation, psychological stress)
  - Physical exertion beyond normal clinic procedures
  - Possible invasion of privacy of a subject or family, including the use of personal information or records
  - Presentation of offensive, threatening, or degrading material
  - Probing for information that an individual might consider to be personal or sensitive

Other risks to which subjects may be exposed - Please identify below.

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- c) Of the risks and discomforts identified above, note the likelihood (probability) and degree (magnitude) of potential harm.



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d) Discuss measures that will be taken to minimize risks or discomforts to subjects.

There are only minimal risks and discomforts associated with this study. To minimize risk and discomfort to subjects, we will ensure that subjects know that their participation is completely voluntary and that they can discontinue the study at any time without penalty. We will let participants know that their responses are confidential and will not be associated with their name or email address.

e) Explain how unanticipated negative outcomes/experiences or serious adverse events will be managed. (Note: This item applies to social-behavioral as well as research, e.g., undue stress or anxiety of subjects or breach of confidentiality via loss of laptop computer with study data. Provisions to protect subjects should be made and described here if applicable.)

Unanticipated negative experiences will be managed by providing subjects with a thorough debriefing after the study which will include researcher information as well as University Counseling Center information.

f) Discuss plans for reporting unanticipated problems, involving risks to subjects or others, or serious adverse events to the IRB. (This item applies to all types of research.)

If any highly unanticipated problem is reported to us by a subject, we will report the problem to the IRB immediately.

g) Describe plans for provision of treatment for study-related injuries and how costs of injury treatment will be covered. Note: This information should also be included in the consent form.

There are no study-related injuries that may occur. Participants will be completing an online survey.

**\*\*\* Drugs and Biological Products \*\*\***

**9. Drugs and Biological Products**

a) Does your study involve the use of a combination drug/biological product and device? If yes, you must complete and submit the Medical Device Form. N

Add all INVESTIGATIONAL drugs, reagents, or chemicals to be administered to subjects during this study.

**Investigational Drugs or Biological Products**

**\*\*\* Potential research benefits to participants \*\*\***

**10. Potential research benefits to participants**

a) Indicate the type of benefit that may result from participation. Consider psychological or emotional benefits, learning benefits, learning benefits, physical benefits and discuss if participant will benefit directly or if the benefit is largely to gather generalizable knowledge or provide scientific or social information on a topic that may benefit society. DO NOT OVERSTATE the benefit.

Benefit for the individual is minimal. Participants may gain some insight into their attachment styles, mindsets, and moral engagement levels after being debriefed from the study. There is benefit in learning more about the relationship between attachment styles, mindsets, and moral engagement for society as a whole. Any relationship we find between these constructs may lead to further research and in the future, a possible intervention to improve moral engagement.

**\*\*\* Informed Consent \*\*\***

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**11. Informed Consent**

A statement that the study involves research

The purpose of the research in lay terms (language understandable tot the participant)

A statement that they are being asked to participate in research, and how they were selected to participate

The expected duration of the participant's participation "You will be asked to complete a survey every month for 1 year"

The total time commitment of participation in the procedures "the survey will take 20 minutes to complete"

A brief but complete description of all procedures to be followed (if research includes treatment describe which procedures are experimental and alternatives to those procedures)

The risks or discomforts that are reasonably expected from the research, and a statement that "There may be unknown risks"

The benefits to the participant or others that are reasonably expected from the research

A statement of confidentiality that provides the participant a contact at the institution who may be reached if injury occurs or confidentiality is breached (this should be someone other than the researcher)

A statement that participation is entirely voluntary and may be discontinued at any time

A statement that withdrawal from participation will not result in denial of entitled benefits

Invasive biological, clinical or behavioral interventions require specific descriptions of the procedure

The consent form must be signed and dated, or oral consent must be witnessed and signed and dated by the witness

A statement and check box that includes the participants have a copy of the informed consent Document

**Note: Individuals with added protections require both permission of a legal representative and assent of the individual.**

**In some instances the IRB may consider altering the informed consent requirements. To be considered for an alteration or waiver of the required elements of informed consent, one of the following must apply in accordance with (45 CFR 46.116 (d)) or 45 CFR 46.117 (c)**

<b>Consent Form Descriptor (e.g., Main Study Consent):</b>	Main Study Consent Form
<b>Consent Information Type or Waiver Request</b>	Consent Form
<b>Consent Version Number</b>	2
	<input checked="" type="checkbox"/> Attachment      IRB Consent Form 2

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Consent Form Sample

Alteration of Consent Regulations

Who will be obtaining consent? If the person is in a position of authority in relation to potential subjects, describe how you will minimize the potential for coercion or undue influence.

Nicole Murgas and Ryan Woodbury will be obtaining consent via online surveys (Qualtrics).

Recognizing that recruitment is part of the informed consent process and that consent itself is a process of communication, describe what will be said to the subjects to introduce the research. (Do not say, "See consent form.") Write the explanation in lay language. Include examples of questions that will be asked to assess the subjects' understanding. (Questions should be open-ended and go beyond requiring only a yes/no response.) If you are using telephone surveys, telephone scripts should be uploaded in the Attachments section.

The research will be introduced to subjects through SONA. A brief paragraph letting the participants know that the study will be examining individual's relationships, attitudes, and abilities to deal with challenging situation, who the principle investigators are (with contact information), length of survey, and an assurance of confidentiality and deidentification of data will be included in the sign-up page.

Describe in detail the consent process to be used in the study.

The participant will either select "I agree" or "I do not agree" after reading the consent form. If participants select "I do not agree," they will automatically be forwarded to the end of the survey

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**\*\*\* Child Assent, Parental Consent \*\*\***

**12. Child Assent, Parental Permission**

Add the Assent Document(s) and Parent/Guardian Permission Form(s) needed for this research. You will be asked to provide relevant background information for each assent document.

An "assent document" is a form or script of the information that will be conveyed to the child about the study. In general, researchers must obtain the affirmative agreement of children ages seven years and older for their participation. Assent forms should be written at a level understandable to the child. If the study includes a broad age range of children, more than one assent form may be needed (i.e., an assent form suitable for a 15-year-old is not usually suitable for a 7-year-old child).

A Parent/Guardian Permission Form is a document that embodies all of the required information (elements of informed consent) designed to help the parent/guardian of a child make an informed decision about whether or not to permit the child's participation in the research. The form must include signature and date lines for the parent(s)/guardian(s) to sign if the child is permitted to take part in the research.

**Documents**

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**\*\*\* HIPAA \*\*\***

**13. Health Insurance Portability and Accountability Act (HIPAA)**

**Protocol Title:** Attachment Style, Mindsets, and Moral Disengagement: A Meditational Model

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The HIPAA Privacy Rule establishes the right of an individual to authorize a covered entity, such as a health plan, health care clearinghouse or health care provider, to use and disclose his/her Protected Health Information (PHI) for research purposes. The Privacy Rule defines the elements of individual information that comprise PHI and establishes the conditions under which PHI may be used or disclosed by covered entities for research purposes. It also includes provisions to allow an individual's PHI to be disclosed or used in research without the person's authorization (i.e., IRB Waiver of HIPAA Requirement Authorization). For more information, consult HIPAA Research Guidance.

a) Does the study involve the use of PHI from an University of Notre Dame covered entity? N  
If Yes (and a limited data set will not be used), EITHER provide a HIPAA Authorization Form in the Attachments section OR request/add a Waiver/Alteration of HIPAA Authorization below.

b) Does the study involve use of Protected Health Information (PHI) from a covered entity outside of University of Notre Dame (i.e. another organization or institution)? N  
If Yes, explain what arrangements have been made to comply with the HIPAA requirements of the entity from which the PHI will be obtained.

c) Does the study involve use of a "limited data set"? N

If Yes, patient authorization for use of the data set is not required; however, you must have a data use agreement in place with the entity from which the data will be obtained as required by HIPAA. Attach a copy of the agreement in the Attachments section

**HIPAA WAIVER/ALTERATION:** For each waiver or alteration of the requirement for authorization from the subjects for use of their PHI, provide justification in the table below.

Click Add ONLY when requesting a Waiver or Alteration of HIPAA Authorization for use of PHI from an University of Notre Dame covered entity.

**HIPAA Waiver/Alteration**

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**\*\*\* Attachments \*\*\***

**14. Attachments**

Add appropriate attachments (e.g., federal grant/sub-contract, questionnaires, surveys, advertisements, reference list, investigator's or sponsor's protocol, investigator's brochure, etc.) in this section.

Type	Questionnaires
Attachment	Attachment_Mindsets_and_Moral_Disengagement2
Attachment Name	Attachment_Mindsets_and_Moral_Disengagement2

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**\*\*\* Attestation \*\*\***

**Protocol Title:** Attachment Style, Mindsets, and Moral Disengagement: A Meditational Model

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**Attestation**

The Principal Investigator of this study provides the following attestations:

The eProtocol application submitted for this study is complete and accurate.

The PI acknowledges responsibility for the conduct of this project as described in the IRB application.

The PI has evaluated the protocol and determined that s/he has sufficient resources to conduct the study as submitted and necessary to protect subjects who enroll in the study.

All co- or sub-investigators, study coordinators, and other research personnel to whom the principal investigator delegates study-related responsibilities will receive thorough training in human subjects protections as well as in the specific details of study procedures.

The principal investigator will not begin the study until s/he has received notification of final IRB approval. If SPA approval is required, s/he will not begin the study until s/he have received notification of final SPA approval.

The principal investigator acknowledges his/her responsibility for the accuracy of all documents research personnel submit to the IRB on his/her behalf.

The principal investigator will comply with all IRB requests to report on the status of the study.

The principal investigator will seek and obtain prior approval from the IRB for modifications in the study, including changes in procedures, consent forms, etc.

The principal investigator will promptly report any unexpected or otherwise significant adverse events or unanticipated problems or incidents that may occur in the course of this study.

The principal investigator will notify the IRB when his/her research has been completed or terminated.

Note: If applicable, attach the Federal Grant Application (including competing renewals), investigator's brochure, and protocol for all industry-sponsored clinical trials. You will be prompted for these in the Attachments section.

The Principal Investigator has read and agrees to abide by the above obligations.

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**\*\*\* Event History \*\*\***

**Event History**

Date	Status	View Attachments	Letters
02/18/2015	NEW FORM CREATED		
05/04/2015	NEW FORM SUBMITTED	Y	
05/05/2015	NEW FORM PANEL ASSIGNED		
05/05/2015	NEW FORM PANEL MANAGER REVIEW		
05/05/2015	NEW FORM SUBMITTED (CYCLE 1)	Y	
05/05/2015	NEW FORM REVIEWER(S) ASSIGNED		
05/13/2015	NEW FORM APPROVED	Y	Y