# Informed Consent Form

**Purpose:** We are inviting you to participate in a research activity. The research involves wearing eye-tracking glasses, which monitor the movement of a person’s eyes while they look at ads for consumer products. The study results will help us to develop recommendations for modifying the ads.

**Sponsorship:** Westat is conducting this project on behalf of, and funded by, a federal agency.

**What is involved:** We will ask you to wear eye-tracking glasses. First, the researcher will help you put the glasses on your head. The researcher will set the equipment to record the movement of your eyes. We will ask you to look at ads for two consumer products while you wear these glasses. Then you will take the glasses off and be asked to complete a questionnaire on a computer. [In pretesting only: After that, we will ask you to answer some questions about the items on the questionnaire and review portions of a recording of your eye movements.]

Your participation in this research project is voluntary, and you have the right to stop at any time or to refuse to answer any question. The session will take approximately 60 minutes. You will be paid $50 cash for completing the session.

**Confidentiality:**We would like to video-record the interview, which will capture what you are doing while you wear the glasses, our discussion, and also a view of you looking at the screen. Sometimes it is helpful to review a portion of a recording as we make recommendations for improving the ads. If the recording is reviewed later, it will only be by a few Westat staff and possibly the client.

You will never be identified by name. The things you say may be put in a written summary of this interview, but there will be no way to identify who said what, and your name will not be used anywhere.

**Risks:**  Eye tracking glasses use infrared light, a type of light that is invisible to us. The infrared lights detect where eyes focus and move. Infrared lights are harmless to most people. The risks to people with using the eye-tracking equipment are minimal and largely associated with using the equipment while walking around or in a way that does not conform to the operating instructions. However, you should not wear the eye-tracking glasses if you:

1. Have photosensitive epilepsy (PSE), a form of epilepsy where flashing lights or regular moving patterns may cause seizures. The pulses of the eye-tracking glasses might make you feel odd or cause a seizure.
2. Use any type of medical equipment that is sensitive to infrared light (for example, some types of pacemakers). There are risks for those who use any type of medical equipment that is sensitive to infrared light. The eye-tracking glasses could interfere with the medical equipment. If you are unsure if your medical equipment is sensitive to infrared light, please alert the study administrator before agreeing to participate.

It is very important to let us know if you have epilepsy or use some type of medical equipment.

You may skip any question(s) that you do not want to answer, or that you find uncomfortable to talk about in the questionnaire [in pretesting only: and in the discussion afterwards]. The information you provide will be treated as confidential. The recordings will be destroyed within 6 weeks of the end of the study.

**Benefits:** There are no direct benefits to you for participating in this study. However, you will be helping with an important research project..

**Questions:** If you have questions about the project, you may call the Task Manager, Doug Williams, at 800-937-8281, Ext. 2934. For questions about your rights and welfare as human subjects in this study, you may call the Institutional Review Board at Westat at 1-888-920-7631. Please leave a message with your full name, the name of the research study that you are calling about, i.e. the Consumer product study, and a phone number beginning with the area code. Someone will return your call as soon as possible.

If you agree to participate, please sign below.

I have read and understand the statements above. I consent to participate in this session.

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Participant’s signature Date