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| **­­** | **Exercise and Sport Psychology Lab****School of Kinesiology****210 War Memorial Gym****6081 University Boulevard****Vancouver, BC V6T 1Z1** |

# Body-related self-conscious emotions and sport participation among adolescent females

# PARENT INFORMATION and CONSENT LETTER

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**Introduction:** Your child is invited to take part in a research study entitled: “*Body-related self-conscious emotions and sport participation among adolescent females”.* This study will examine how body-related thoughts and emotions influence sport motivation, commitment, and enjoyment in youth female athletes. We are recruiting 270 female athletes between the ages of 13 and 17 who are currently participating in organized sport.

**Background:** Research shows that girls’ participation in sport is linked to positive body image, positive self-esteem, enhanced peer relationships, and overall positive youth development. Unfortunately, girls consistently report lower rates of sport participation and lower sport enjoyment compared to boys. Ongoing research suggests that body-related emotions and perceptions of physical competence (sport skills, endurance, coordination, strength, body appearance) might be important predictors of sport motivation, enjoyment, and continued participation. This research suggests the importance of conducting sport research to promote healthy active living in female adolescents.

**Purpose of the Project:** The purpose of this research is to examine how adolescent female athletes’ perceptions about their physical competence and appearance as well as body-related emotions (e.g., pride, guilt, anxiety, embarrassment) influence their sport motivation, commitment and enjoyment.

**Study Procedures:** If you are willing to have your child participate in this research, you will be asked to sign this consent form. This form also asks for your child’s email and their signature, so that they can be provided with the link and password to access the online questionnaires. If your child also agrees to participate in this study, we will ask her to complete some general demographic questions and scientifically validated questionnaires on body-related thoughts and emotions, sport motivation, sport commitment, and sport enjoyment. Your child will be able to complete the questionnaires at home in approximately 20 to 40 minutes. Your child’s completion of the online questionnaires will constitute their assent to participate in this study.

Your child will be informed that she does not have to answer any question she does not feel comfortable answering. She does not have to participate in the study, even if you provide consent for her to participate. If your child wishes to withdraw from the study, she may do so at any time without having to give any reason for doing so. Withdrawing from the study will not result in any negative consequences for your child.

**Potential Risks:** There are no foreseeable risks associated with your child’s involvement in this study. This study will not subject her to any physical risk. She can refuse to answer any question and doing so will result in no penalty to her or anyone else. She can discontinue her involvement in the study at any time, again resulting in no penalty. Any data collected prior to withdrawal will be omitted from the study and destroyed. In the event that you or your child would like to further discuss feelings regarding the topics in the questionnaires, you may wish to contact Family Services of Greater Vancouver (Counselling Services: 604-874-2938).

**Potential Benefits:** There are no immediate benefits related to participation in this study. All participants will be entered into a random draw for a chance to win a Sport Chek gift card. There are 10 cards valued at $25 available to be drawn. The information we collect for this study may help to design future programs that improve female adolescents’ sport participation. A summary of the results and copies of any resulting publications will be provided at your request.

**Confidentiality:** Information gathered on the questionnaire will be used for research purposes only. There are no personal identifiers on the questionnaire. Questionnaires are identified by code number only and will be securely stored for a minimum of five years as required by the University of British Columbia guidelines. Results of this study will be analysed in group form and will be used in the preparation of a presentation and an academic research publication, all of which are public documents. A summary of the results will be available upon request. You or your child do not waive any legal rights by reading or agreeing to consent to participate in this study. Your child is free to withdraw from this study at any time with absolutely no penalty. The decision to withdraw will NOT result in any loss of services or any other negative consequences.

**Contact Information about the Study:** If you have any questions or want more information about this study, please contact the researchers using the information provided at the beginning of this form.

**Contact for Concerns about the Rights of Research Subjects:** If you have any concerns or complaints about your rights as a research participant and/or your experiences while participating in this study, contact the Research Participant Complaint Line in the UBC Office of Research Ethics at 604-822-8598 or if long distance e-mail RSIL@ors.ubc.ca or call toll free 1-877-822-8598.

**DECLARATION OF CONSENT**

A signed copy of this consent form will be kept by the researchers and you may keep a copy for your personal records.

**I have read the content of this consent form, and I agree to let my child participate in this study**

**Child’s name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent’s name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent’s signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Child’s email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Child’s signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Contact Information** (this information is needed if your child has won a gift card)

1. First and Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Cellphone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Mailing Address (\*we need your mailing address to send the gift card)

Street Number and Street Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Apt Number\_\_\_\_\_\_\_\_ City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Postal Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Home Phone Number **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please return this form in one of the following three ways:**

1. Place in the envelope provided and return to your coach for the researcher to collect
2. Scan or take a photo of the form and attach it to an email sent to **libbie.pritchard@ubc.ca**
3. Mail the signed form to: **Exercise and Sport Psychology Lab (Peter Crocker)**

 **School of Kinesiology**

 **210 War Memorial Gym, 6081 University Boulevard**

 **Vancouver, BC V6T 1Z1**