





Senate Committee on Ethics in Human Research and Scholarship (SCEHRS) ETHICS CHECKLIST

Revised: September 2008 Psych Sept/10

This Checklist (completed), a typed project description, and relevant attachments are required for all human subjects ethics review proposals. Before preparing submissions, read the SCEHRS Policies and Procedures, and check the current schedule of SCEHRS submission deadlines. Submissions received past deadline will not be reviewed until the subsequent deadline period. Incomplete proposals will be returned for completion and resubmission. Please check off the following list to ensure that you have included all necessary materials. If there is no blank provided under N/A below, the item must be included.

Included	N/A	-
		This Ethics Checklist, signed, with all relevant items completed
		Notes explaining Ethics Checklist responses that raise ethical questions
		Copies of all research instruments
		Copy of consent form and consent form(s) or description of other consent procedure
		Letters of approval from cooperating external agencies, or an undertaking to provide these before the study begins
V		A separate project description meeting the following criteria:
		Length eight (8) pages or fewer (length restriction does not apply to a grant proposal, which may be attached instead of a project description)
		Clearly written, typed and proofread, with all technical terms and procedures explained
		Clearly stated rationale for the research/scholarship, including purpose and anticipated benefits (scholarly and/or other)
1/		Number of subjects/participants, relevant characteristics
		Conditions of participation (volunteer, course credit, etc.)
	/	Indication of whether there are inducements to participate or disincentives for not participating
		Method of obtaining informed consent, or rationale for no consent procedure
		Procedures for ensuring anonymity and confidentiality, or rationale for their absence
		Method of ensuring security of the data collected
		Intended uses of the resulting data/findings/scholarship
	<u> </u>	Identification of any potential risks/harms to subjects/participants, and of steps to be taken to prevent or minimize these
		Discussion of any additional aspects of this research/scholarship that raise ethical concerns
		<u>Correct number</u> of copies of the complete protocol submission, i.e.) all information listed above (see SCEHRS Policies and Procedures, Procedures section)

FOR RESEARCH OFFICE USE ONLY				
Date Received:	Protocol Number:			
	Company Company			

Project Identification Information

Please print or type responses.

1, Name:	2. Department:
Ussmine Bracken	PSYCHOLOGY
3. Phone:	4. E-mall:
5. Please check one:	
Chief Investigator	Student Investigator
6. If student, indicate name and department of superviso	
Name:	Department:
Dr. Gary Rockman	Paychology
7. Name(s) of Co-Investigator(s):	
Dr. Jim Clark	
8. Title of Proposal:	
DISORDERED Eating Behaviours and the n	elationship to Beliefs on control.
9. Funding Status:	
unfunded funding applied for from funding received from	(funder) (funder)
contract research for	(client)
10, Anticipated Commencement Date (month/year):	11. Anticipated Completion Date (month/year):
October 2010	April 2011
12. List all research instruments, including questionne sensory or electronic stimuli. For observational research, I	
Coding Categories, For interviews, list either Interview Q	uestions or Interview Protocol (detailed description of
interview parameters). Include self-constructed, standardized, must be attached to submission.	
- Eating Disorder Inventory (Game	
- Eating Attitudes Test Garner	st Garfinkel, 1979) Appendix B*
- Rosenberg selfesteem Scale - weight control beliefs Questic	(KOSE) IDENY, 19100)
	I project belongs, A or B. (For further clarification)
and for categories of research/scholarship exempted	from ethics review, see Policies and Procedures.)
Category A:	Category B:
Research/scholarship about a living individual involved in the public arena, or about an artist, in which the subject and/or third parties are approached directly for intervious or for access to private materials.	All other research/scholarship not exempted from ethics review that involves living human subjects,

be obtained?

Ethics Checklist Instructions

If your project belongs in Category A (see above), you need only complete Sections A, C and E found below. If your project belongs in Category B, you need only complete Sections B, C, D and E found below. To complete Checklist items, circle Yes or No, and/or write in the required information. If any of the answers circled are underlined (Yes or No), an ethical issue arises that requires you either to reconsider your procedures, or to provide additional information. In the latter case, attach a written note explaining the pertinent circumstances and the provisions you will make to ensure ethical practices, and/or elaborate in the project description. Also, be sure to make a notation beside the question indicating the location of such clarifications (e.g., "See Note #12," or "See p. 4 of Project Description"). Note that in some Checklist sections, you are required to answer all questions (Yes or No). In other sections, you may indicate that a question does not apply (N/A).

Note that this Checklist covers only a portion of the ethical considerations involved in research/scholarship with human subjects/participants. More information is available in the full text of the *Tri-Council Policy Statement (TCPS)* available from the Research Office or on-line at:

http://www.pre.ethics.gc.ca/english/policystatement/policystatement.cfm. Your discipline may also have research ethics guidelines relevant to your study. Furthermore, no set of policies or guidelines can cover all of the ethical considerations that might arise in research/scholarship, and therefore you should be aware that further issues and considerations might arise as ethics review proceeds. If so, you will be contacted by the Departmental or Senate ethics committee involved.

Section A: To be completed only for projects in Category A (research/scholarship about a living individual involved in the public arena, or about an artist, in which the subject and/or third parties are approached directly for interviews and/or for access to private materials). Answer all questions:

NA Please Circle One Will all professional standards that are accepted generally in the investigator's Yes No A1. discipline be applied in the conduct of this research/scholarship? Note: Reference to such professional standards as are relevant to ethical conduct should be made in the project description, or in an attached note. Will potential subjects/participants be informed fully about likely venues Yes No A2. for public presentation of interview contents and/or private materials? Will third parties be informed fully about the extent to which their Yes A3. No identities will be revealed publicly? Yes No A4. Will free and informed consent procedures be used? Does the study involve temporarily leading the subject/participant to Yes. No A5. believe that the study has some purpose other than the actual one? Will the subject's/participant's written or oral consent to participate Yes No A6.

Yes.

Yes

No

В3.

A7. Will any promises be made to the subjects/participants that the Yes No investigator later might have difficulty fulfilling? Answer Questions A8 and A9 as applicable, or indicate N/A If private materials under the control of the subject/participant will be Yes N/A A8. No made public as a consequence of the research/scholarship, will due care be taken to obtain the subject's/participant's written consent, and otherwise to avoid infringing on the subject's/participant/s rights? If the possibility of commercialization of private materials exists, will A9. Yes N/A No the subject/participant who has control of these materials be so informed? To be completed only for projects in Category B (all research/scholarship not exempted Section B: from ethics review that is not about an individual in the public arena or an artist). Answer all questions: Please Circle One Before giving their consent to participate, will the subjects/participants No be informed fully of the nature of their research involvement, and of all features of the research/scholarship that reasonably might be expected to influence their willingness to participate? Note: In this question and several others below, it is assumed that persons studied are aware that they are subjects/participants, and that informer consent is possible. For some research/scholarship (e.g., some kinds of observational research), these assumptions may not be valid. If this is the case, the circumstances should be described fully in the project description. A single notation may be made in the margin here indicating one location in your project description at which an explanation for several question responses may be found. Will free and informed consent procedures be used both at the outset of the subject's participation, and thereafter throughout the study (e.g., by notifying subjects/participants of any later changes or developments that might influence informed consent, and seeking further consent to these)?

Note: In some areas of social science research, undetailed statements of the study's purposes are given in order to avoid over-sensitizing subjects/participants to some

Will the subjects/participants be told that they can discontinue their

they do is being observed, etc.)?

participation at any time without incurring any penalties for doing so?

Does the study involve temporarily misleading the subjects/participants

as to the study's purposes, incomplete disclosure of the study's purposes, or temporary concealment of other information (e.g., staged occurrences, having subjects/participants do one thing while in fact something else

information reasonably could be expected to affect informed consent. The greater the degree of temporary concealment, the higher the level of risk. Describe fully any temporary concealments or incomplete disclosures in the project description, explaining the reasons for them. Also, see Question B40.

B5.	Will the people studied be aware that they are the subjects of your	Yes No	<u>!</u>
В6.	research/scholarship? Will subjects'/participants' written consent be obtained, or if this is inappropriate, will an alternative method of obtaining informed consent be used?	Yes	<u>No</u>
	Note: Normally, written consent is required. If this is culturally unacceptable, or if other good reasons exist for not obtaining written consent, an alternative procedure for obtaining free and informed consent should be documented (in the project description, and/or attached as a separate document).		
В7,	Will informed consent information include a statement of the research Purpose, the identity of the investigator(s), the expected duration and nature of participation, a description of research procedures, and a description of any foreseeable harms and benefits that may arise from participation?	Yes	<u>No</u>
B8.	Will the information describing the study and the materials used to seek consent be worded in language clearly comprehensible to the subjects/participants?	Yes	<u>No</u>
В9,	Are you and/or your associates in a position of power vis-à-vis the subjects/participants?	Yes	No
В10.	Do you foresee that the subjects/participants might feel or perceive any degree of manipulation, coercion, constraint, or undue influence concerning any aspect of their participation in the study?	Yes	No
B11.	Will there be any actual or perceived material inducements to participate that exceed reasonable compensations for such things as transportation, unusually lengthy time demands, etc.?	<u>Yes</u>	No
B12.	Will there be any actual or perceived social inducements to participate that exceed such things as interest in the research, an interesting activity, etc.?	Yes	(No)
B13.	Will there be any actual or perceived disincentives for not participating in the research?	Yes	No
B14.	Is the confidentiality of the subject's/participant's identity positively ensured?	Yes	<u>No</u>
	Note: Regarding Questions B14 and B15, there may be situations in which the		4

	explain, and also provide an assurance that you will obtain consent to revealing subjects'/participants' identities.		
B15.	Are there circumstances under which the subject's/participant's identity might be deduced by someone other than the investigator if the study results are presented publicly?	Yes	No
B16.	Will any promises be made to subjects/participants, or to cooperating external agencies, that the investigator later might have difficulty fulfilling?	Yes	No
B17.	Does the study involve physical stress (or the expectation thereof) such as might result from heat, noise, electric shock, pain, sleep loss, physical deprivation, drugs, alcohol, etc.?	Yes	No)
B18.	Do you foresee that the study might result in the subject's/participant's experiencing mental discomfort (e.g., fear, anxiety, loss of self-esteem, shame, guilt, embarrassment, becoming aware of personal weaknesses)?	Yes	(NS)
B19.	Will the investigator attempt to induce long-term change in subjects'/participants' behavior or attitudes?	<u>Yes</u>	No
B20.	Does the study involve any potential risks to third parties who are not participants in the research?	Yes	No
B21.	Will any individually-identifiable information about subjects/participants be disclosed without their informed consent (e.g., to teachers, doctors, therapists, parents, employers, other researchers, etc.)?	Yes	(No)
B22.	Will written feedback on the outcome of the research/scholarship be made available to participating individuals and agencies/institutions?	(Yes)	<u>No</u>
B23.	Could public presentation of the study's results possibly harm either the subject/participant, or his/her membership group?	Yes	(No)
B24,	Will the investigator report to the Departmental and Senate ethics committees any adverse subject/participant responses to the research/scholarship that exceed the level of adverse responses anticipated and provided for in the project description?	Yes	<u>No</u>
	Note: Adverse responses include, for example, emotional distress, physical distress, objections to the conduct of the research/scholarship that cannot be resolved by discus	islon, et	c.
B25.	Will the investigator explain to the subjects/participants that if they are dissatisfied with the study procedures, they may talk to the Chair(s) of the Departmental and/or Senate ethics committees, and will the investigator provide them with contact information for these persons?	(Fes)	<u>No</u>
B26.	Has the investigator taken all possible steps in the design of the study to balance potential harms to the subjects/participants against potential benefits of the research/scholarship?	Yes	<u>No</u>

Allswe	t the tentamuer of Section is approxime, matering that sestile each item that	t tiots n	ot ap	PAJ ·
B27.	If the investigator plans to induce short-term behavioral or attitude change, will such change definitely be reversible?	Yes	<u>No</u>	(N/A)
B28.	If individual feedback is given to subjects/participants (e.g., tests scores or other comparative-standing information), will information also be presented on the validity, reliability, and appropriateness of norms for the individual?	Yes	<u>No</u>	(N/A)
B29.	If private materials (documents, third-person interview contents, etc.) provided by the subject will be made public as a consequence of the scholarship/research, will due care be taken to obtain subjects'/participants' written consent, and otherwise to avoid infringing on the subjects'/participants' rights?	Yes	No	(N/Å)
В30.	If the study takes place within or in cooperation with an institution or agency (e.g., schools, day care centres, churches, seniors' homes, hospitals, social work agencies, playgrounds, prisons, etc.), has written approval been obtained from its administrators?	Yes	No	N/A)
	Note: Attach copies. If no letters of approval can yet be provided (e.g., because agency approval is contingent on University ethics approval), attach an explana note undertaking not to begin research before you are in receipt of approval lette and to submit copies of such letters to Research services immediately upon recei	ers,		
	Note also: The requirement of approval from external institutions may not apply instances where it would interfere with free inquiry. If so, explain.	in		
B31.	If the subjects/participants are children (under age 18), will written parental or guardian consent be obtained?	Yes	No	(N/A)
В32.	If a written consent form is used, will copies be given to the subjects/participants to retain?	Yes	No	N/A
В33,	If the subjects/participants are legally or otherwise incompetent to provide informed consent, will the written consent of authorized third parties be obtained?	Yes	No	N/A
В34.	If the subjects/participants are not legally competent, is there any other legally-competent group that could be studied in order to address the research question?	Yes	No	(VA)
В35.	If the subjects/participants are drawn from institutionalized or otherwise "captive or dependent" populations (e.g., in prisons, hospitals, psychiatric facilities, mandatory treatment programs, etc.), will special care be taken to ensure that consent is given freely, and that no actual or perceived coercion, constraint, or undue inducement to participate is present?	Yes	No	(N/A)
	Note: In your project description, be sure to describe clearly how this will be achieved.			

B36,	If the consent of a parent or an authorized third party is obtained, will each subject/participant also be informed independently of his/her right to decline to participate at any point in the study?	Yes	<u>No</u>	N/A
В37.	If the study will be conducted in a country other than Canada, and/or under the jurisdiction of an institution other than the University of Winnipeg, and if an ethics review body that has jurisdiction in that country or institution exists, will the study undergo review by that ethics body before the research begins?	Yes	No	NÃ
	Note: If so, please attach documentation, or attach a note undertaking to provide documentation to Research Services immediately upon receipt.		-	:
В38.	If there is any possibility of physical danger or harm to the subjects/participants will all necessary and prudent measures be taken to ensure their safety (e.g., from dangers such as electrical shock, lack of oxygen, falls, traffic or industrial accidents, the possibility of hearing or vision loss, etc.)?	Yes	<u>No</u>	(N/A)
В39.	If subjects/participants have initially formed any false impressions about the purposes of the study or the nature of information collected, if the study purposes were not completely disclosed initially, or if any information was concealed temporarily, will full disclosure be made at the conclusion of data collection? Will the reasons for false impressions, concealment, or incomplete disclosure be explained; and will subjects/participants then be given the opportunity to withdraw their data/information, should they so choose? Will everything possible be done to re-establish trust and respect?	w	No	N/A
B40.	If information on subjects/participants will be obtained from third parties (e.g., institutions, doctors, other researchers, etc.), will subjects/participants be so informed, and will their written consent be obtained?	Yes	No	NA
B41.	If any adverse subject responses to the study are anticipated, have procedures been devised to ameliorate such responses?	Yes	<u>No</u>	NIA
B42.	If the possibility of commercialization of the research findings exists, will the subjects/participants be so informed?	Yes	<u>No</u>	N/A)
В43.	If there is any actual or apparent conflict of interest on the part of the investigator(s), their institutions, or their sponsors, will the participants be so informed?	Yes	<u>No</u>	N/A
B44.	If the research/scholarship involves secondary uses of already-collected data or information regarding identifiable individuals, will appropriate measures be taken to ensure the privacy of the individuals and the confidentiality of the data, and to minimize potential harms to subjects/participants?	Yes	No	NÃ

B45.	If secondary use is to be made of already-collected data or information regarding identifiable individuals, will appropriate measures be taken to ensure the privacy of the individuals and the confidentiality of the data, and to minimize potential harms to subjects/participants?	Yes	<u>No</u>	(N/A)
B46.	If the study concerns generic behaviors/characteristics that are not specific to particular, identifiable social or cultural groups (e.g., child poverty, access to legal services), will any persons be excluded from participation on the basis of culture, religion, race, ethnicity, mental or physical disability, sexual orientation, sex, or age?	Yes	No	N/A
B47.	If information is to be presented to and/or collected from subjects/participants in a language that the investigator does not speak/understand fully, will every possible effort be made to ensure that translation is as clear and accurate as possible	Yes 97	<u>No</u>	(N/A)
B48.	Does the study include the use of personal health information? The Manitoba Personal Health Information Act (PHIA) outlines responsibilities of researchers to ensure safeguards that will protect personal health information. If yes, in an attachment to this checklist, please indicate provisions that will be made to comply with this Act.	Yes	(No)	N/A
•	Note: See document for guidance online at: http://www.gov.mb.ca/health/phia/inde	x.htm	ļ	
	Questions B49 – B54 if your project involves sub cultural, cultural, national, eth group characteristics as a focus of study.	nic, o	r relig	;lous
Otherwis	se, indicate N/A for this section(N/A)			
B49,	Will the investigator ensure that privacy (as defined from the standpoint	Yes	<u>No</u>	(AIA)
B50.	of the subjects/participants) will be respected?			
		Yes	<u>No</u>	(N/A)
B51.	of the subjects/participants) will be respected? Will the investigator ensure the accurate description of customs,	Yes Yes	<u>No</u>	(N/A) (N/A)
B51.	of the subjects/participants) will be respected? Will the investigator ensure the accurate description of customs, community, and heritage? In the case of field work in which informed individual consent cannot be obtained because of cultural constraints, has the investigator devised	•		(N/A)
B51, B52,	of the subjects/participants) will be respected? Will the investigator ensure the accurate description of customs, community, and heritage? In the case of field work in which informed individual consent cannot be obtained because of cultural constraints, has the investigator devised methodological safeguards to protect the subjects/participants fully?	•		(N/A) (N/A)

4.1			٠.	
B53.	If the study involves Aboriginal peoples or subcultural, cultural, national, ethnic, or religious groups, will the investigator cooperate with community institutions, consult within the community, and/or otherwise ensure that the group has been informed and involved as fully as is appropriate and possible concerning the study?	Yes	<u>No</u>	NÃ
B54.	If the study involves Aboriginal peoples or subcultural, cultural, national, ethnic, or religious groups, will the investigator provide the community with an appropriop opportunity to react to the study's findings before they are presented publicly?		<u>No</u>	MA
	Note: If the community, or segments of it, disagree with the findings after consideration and exchange, the investigator should undertake to provide an opport to make the community's views known, and/or should report accurately the control disagreements in any public presentations of the study.	unity	uch	
	er <u>all</u> of Questions 55–60 only if your study involves the purchase or acquisition tents, or artifacts.	of manı	ıserip	ts,
Other	wise, indicate N/A for this section			
B55.	Will the investigator ensure that the acquisition of materials will be for the sole purpose of research/scholarship, and not for personal gain, private	Yes	<u>No</u>	N/A)

B55.	Will the investigator ensure that the acquisition of materials will be for the sole purpose of research/scholarship, and not for personal gain, private collection, or sale?		Yes	No MA
B56.	Will the acquisition of materials meet the legal requirements of the country of origin?		Yes	No NA
B57.	If legal ownership of materials is in doubt, will the investigator inform the proper authorities of the country concerned, and abide by their decision regarding disposition?		Yes	No NIÀ
B58.	Will the investigator ensure proper storage, protection, security, and cataloguing of acquired materials?		Yes	No WA
B59.	If acquired materials are to be deaccessioned or discarded after use, will the investigator ensure that they are first offered to public or educational institutions in the area of origin, then offered to Canadian institutions, and/or otherwise made accessible in the public domain?	er.	Yes	No MA
В60.	If the acquired materials are publicly exhibited, discussed, or published, will the investigator attempt to ensure that no undue embarrassment is caused to the individuals, groups, or countries of the materials' origin?		Yes	No WA

Section C: Consent Form To be completed for all projects in both Category A and Category B Consent Form Checklist

Please complete the following Consent Form Checklist by circling the answer that best suits. The following list is to ensure that all of the necessary elements of a Consent Form(s) have been addressed. If you circle "No" or "N/A" for any of the items listed below please provide brief explanation in the area at the bottom of the page.

1.	The University of Winnipeg's letterhead is used	(Yes)	No	N/A
2.	Identity of the researcher and contact information	Yes	No	N/A
3.	Research topic/question, nature of participation, duration, and research procedures	Yes	No	N/A
4,	Risks and benefits of participation	(Yes)	No	N/A
5.	State how feedback is provided to the participants	Yes	No	N/A
6.	Anonymity	Yes	No	N/A
7.	Confidentiality	Yes	No	N/A
8.	Point of withdrawal and refusal to answer questions	Yes	No	N/A
	For example, "Participants may refuse to answer any question(and may withdraw at any time before <i>publication</i> without consequence."	s)		
9.	Data stayons laurally of notantian and mathod	1	Ma	N/A
	Data storage, length of retention, and method of disposal	(Yes)	No	IVIEX
10.		Yes	No	N/A
	of disposal SCEHRS contact information: Senate Committee on Ethics in Human Research and Scholarship Program Officer, Heather Mowat			

Ethics Checklist		12
		·.
Section D: Risk Assessment	To be completed for Category B stud	ies only
	s of participation in this study that exceed spects of their daily lives that relate to the	
Participation in 4h	is study will not involve	e any risks
4nat would exceed	d the risks that subj	ects/participants
encounter in the	•	
D2. Please check below your asses Procedures for definitions):	isment of the level of risk of the proposed	l study (see Policies and
Minimal Risk	Moderate Risk	Significant Risk
(Nothing listed for Question 1 above)	(Exceeds the standard of everyday-life risk, is moderately invasive, involves a degree of temporary concealment or incomplete information that might influence informed consent, involves vulnerable persons, and/or meets	(See Policies and Procedures)
·	other criteria listed in Policies and Procedures)	
reporting, and/or review may be required of-project report, regular periodic repointervals, visits by committee member propose that no ongoing procedures	other criteria listed in Policies and Procedures) risk level, and other features of the proposed. Please propose the procedures that sorts, meetings with Departmental or Senates to the research site, re-review at schedule applied, please explain why in the second	ionld be applied (e.g., an end- e ethics committees at regular led intervals, etc.). If you pace below.
reporting, and/or review may be required of-project report, regular periodic report intervals, visits by committee member propose that no ongoing procedures	other criteria listed in Policies and Procedures) risk level, and other features of the proposed. Please propose the procedures that slots, meetings with Departmental or Senates to the research site, re-review at schedule applied, please explain why in the scool of the procedures that slots applied, please explain why in the scool of the procedures with the scool of the procedures.	ionld be applied (e.g., an end- e ethics committees at regular led intervals, etc.). If you pace below. PNA, due
reporting, and/or review may be required of-project report, regular periodic report intervals, visits by committee member propose that no ongoing procedures	other criteria listed in Policies and Procedures) risk level, and other features of the propored. Please propose the procedures that sorts, meetings with Departmental or Senates to the research site, re-review at schedu	ionld be applied (e.g., an end- e ethics committees at regular led intervals, etc.). If you pace below. PNA, due
reporting, and/or review may be required of-project report, regular periodic report intervals, visits by committee member propose that no ongoing procedures	other criteria listed in Policies and Procedures) risk level, and other features of the proposed. Please propose the procedures that slots, meetings with Departmental or Senates to the research site, re-review at schedule applied, please explain why in the scool of the procedures that slots applied, please explain why in the scool of the procedures with the scool of the procedures.	ionld be applied (e.g., an end- e ethics committees at regular led intervals, etc.). If you pace below. PNA, due
reporting, and/or review may be required-project report, regular periodic report intervals, visits by committee member propose that no ongoing procedures NO OMBOING P AN HIP MINIM	other criteria listed in Policies and Procedures) risk level, and other features of the proposed. Please propose the procedures that shorts, meetings with Departmental or Senates to the research site, re-review at schedule applied, please explain why in the schedule applied applied, please explain why in the schedule applied applied.	ionld be applied (e.g., an end- e ethics committees at regular led intervals, etc.). If you pace below. PIPA, due 5 Hudy
reporting, and/or review may be required-project report, regular periodic report intervals, visits by committee member propose that no ongoing procedures NO ONGOING P HO HIVE MINIO D4. If your project involves more demonstrate that the method is	other criteria listed in Policies and Procedures) risk level, and other features of the proport. Please propose the procedures that sorts, meetings with Departmental or Senates to the research site, re-review at schedule applied, please explain why in the second risk level of this faminimal risk, scholarly peer reviewable of answering the questions pos	ionld be applied (e.g., an end- e ethics committees at regular led intervals; etc.). If you pace below. Olied, due S Hudy ew may be required in order to ed; and/or to determine whether
reporting, and/or review may be required of-project report, regular periodic report intervals, visits by committee member propose that no ongoing procedures NO ONGOING P TO THE MINIOR P D4. If your project involves more demonstrate that the method is potential benefits of the researce	other criteria listed in Policies and Procedures) risk level, and other features of the proposed. Please propose the procedures that sorts, meetings with Departmental or Senatis to the research site, re-review at schedule applied, please explain why in the social local west with local risk level of this factorial risk, scholarly peer review.	ionld be applied (e.g., an end- e ethics committees at regular led intervals, etc.). If you pace below. ONCO, AMC SHUCH, ow may be required in order to ed, and/or to determine whether to subjects/participants. Are you

No

NA

Yes

Section E: Signature(s)

To be completed for all projects in both Category A and Category B

	ype of review you are requ	esting. (See <i>Policies and I</i>	Procedures for definitions and				
criteria.)1 year Expedited Review	2-2-1 Expedited Review	Full Review	Student (Honours Thesis) and Course				
(Available only for minimal risk projects)	(Available only for minimal risk projects)	(Review type for moderate risk proposals)	Project Review (Departmental review only, minimal risk proposals)				
E2. 2-2-1 Expedited Rev review is necessary for you	l lew. If you are choosing a 2 r research.	2-1 review, please indicate	why this type of ethics				
	WIA						
may have regarding relation	al or apparent material or po uships with potential subjec . Indicate how such conflict	ts/participants, and/or regat					
	NIA						
E4. Your signature(s) bel	ave indicate that you derose	off any that do not annly):					
 E4. Your signature(s) below indicate that you (cross off any that do not apply): have read the SCEHRS Policies and Procedures have read the portions of the Tri-Council Policy Statement (TCPS) relevant to the research AND the ethical research guidelines of APA / CPA (insert name of professional and/or scholarly association most relevant to the research, other than the TCPS) agree to abide by the policies and guidelines listed above 							
 have disclosed all a have disclosed all a believe this submis 	nctual or apparent conflicts of aspects of the study relevant sion to be complete	of interest to ethical review					
 agree to report to Research Services all adverse subject/participant responses that exceed the levels anticipated and provided for in this submission will conduct the study as described in this submission, if approved 							
 will reapply if any of the procedures change substantively will comply with all conditions upon which approval may be contingent 							
Signature of chief or stud	ent investigator:	Dat	ei .				
YOUR	ndol .	$ \alpha $	tober 29/10				
If student signature of supervisor: Date:							
Jon (m		No	01/10				
Signature(s) of co-investig	gator(s):	Dat	e:				

PSYCHOLOGY DEPARTMENTAL ETHICS COMMITTEE REVIEW (For Committee use only) Reviewer # 1

Review (Check all that apply)						
I have reviewed this submission to ensure completeness.						
This submission appears to comply with <i>Policies and Procedures</i> , the disciplinary ethics guidelines.	e Tri-Council Policy, and relevant					
All relevant ethical issues appear to have been addressed in this subn	nission.					
I recommend the following conditions of approval (regarding method ongoing review):	ds, monitoring, reporting, and/or					
Approval Recommendations Note: Unless otherwise recommended above,	approval is in effect for one year only.					
I approve of the procedures proposed in this submission (subject to	any conditions listed above).					
I do not approve of the procedures proposed in this submission.						
Type of Review Recommended						
The investigator has requested Departmental Review, and I recomm	end Departmental Review.					
The investigator has requested Departmental Review, but I do not return The investigator has requested Expedited Review, and I recommend						
The investigator has requested Expedited Review, but I do not recommend Expedited Review.						
I recommend Full Review.						
Additional Comments (optional)						
Print/type name Departmental Ethics Committee Member:	Department:					
Michael Hausonson	Psychology Date:					
Signature of Departmental Ethics Committee Member:	Date: //					
Mike Hallon	M.v. 2, 2010					

PSYCHOLOGY DEPARTMENTAL ETHICS COMMITTEE REVIEW (For Committee use only) Reviewer # 2

Review (Check all that apply)							
I have reviewed this submission to ensure completeness.							
This submission appears to comply with Policies and Procedures, t disciplinary ethics guidelines.	he Tri-Council Policy, and relevant						
All relevant ethical issues appear to have been addressed in this sub	mission.						
I recommend the following conditions of approval (regarding method ongoing review):	ods, monitoring, reporting, and/or						
Approval Recommendations Note: Unless otherwise recommended above	, approval is in effect for one year only.						
I approve of the procedures proposed in this submission (subject to	any conditions listed above).						
I do not approve of the procedures proposed in this submission.							
Type of Review Recommended							
The investigator has requested Departmental Review, and I recomm	The investigator has requested Departmental Review, and I recommend Departmental Review.						
The investigator has requested Departmental Review, but I do not a The investigator has requested Expedited Review, and I recommen							
The investigator has requested Expedited Review, but I do not reco	mmend Expedited Review.						
I recommend Full Review.							
Additional Comments (optional)							
	·						
Print/type name Departmental Ethics Committee Member:	Department:						
Michael Cre	PSYCHOLORY						
Signature of Departmental Ethics Committee Member:	Date:						
Market	Udvender08/10						

SCEHRS REVIEW (For Committee use only)

Review Status (Check all items that apply)
This submission has undergone Expedited Review.
This submission has undergone Full Review.
The following items are outstanding and must be submitted before the study commences:
The following items are outstanding and must be submitted immediately upon receipt by the investigator, but the study may commence before they are submitted:
Approval Status (Check all items that apply):
This submission has been approved provisionally following Expedited Review. Note: Approval will be reviewed at the next SCEHRS meeting. The investigator will be notified only if further review is required.
Following Full Review, the procedures proposed in this submission have been approved.
Following Full Review, the procedures proposed in this submission have not been approved.
The following items are conditions of approval:
Additional Comments (optional):
Print/type name of SCEHRS Chair:
Signature of SCEHRS Chair: Date:

Honours Thesis Proposal

Student Investigator: Jasmine Bracken, Dept. of Psychology

Primary Advisor: Dr. Gary Rockman, Dept. of Psychology

Secondary Advisor: Dr. Jim Clark, Dept. of Psychology

Research Rationale and Purpose

Extensive research has been conducted on factors associated with eating disorders, including perfectionism, locus of control, obsessive-compulsive tendencies, self-esteem and anxiety, to name a few. However, more recent research started to focus on specific disordered eating behaviours and attitudes, rather than the clinically diagnosed eating disorders (Laliberte et al., 2007). It has been noted that a more comprehensive understanding of the relationships between factors such as perfectionism, self-esteem or control and disordered eating attitudes and behaviours may be extremely important in order to fully understand and predict the risk factors for eating disorders. This better understanding may allow research to uncover ways to clearly identify risk factors in a non-clinical population, and take preventative measures before the disordered eating behaviours or attitudes reach the point of being considered a clinical eating disorder.

The large body of eating disorder literature has resulted in the establishment of several reliable and valid measures of disordered eating behaviours and attitudes. The Multi-Dimensional Eating Disorder Inventory (EDI) was developed in order to assess the multiple psychological and behavioural traits commonly seen in Anorexia Nervosa and Bulimia, using eight self-report sub-scales (Garner et al., 1983). Another common measure of disordered eating, the Eating Attitudes Test (EAT) was developed in an attempt to assess a range of target attitudes typically seen in individuals with Anorexia Nervosa (Garner and Garfinkel, 1979). Both measures have been well-established in the literature as being

useful in both clinical and non-clinical samples, and therefore are of value to researchers wishing to assess disordered eating behaviours and attitudes.

As previously mentioned, a key area of eating disorder research has examined the role of locus of control. Results of studies examining the differences in disordered eating, weight loss, and obesity in individuals with an internal locus of control ('internals') compared to individuals with an external locus of control ('externals') were mixed (Balch and Ross, 1975). This ambiguity prompted researchers to refine their thinking, and develop a more domain-specific method of evaluating locus of control, specifically in terms of weight. With counter-intuitive results showing that a strong relationship exists between individuals with an internal locus of control, disordered eating behaviours, and low self-esteem (Stotland and Zuroff, 1990). In further refining the research direction to specifically focus on internal locus of control in eating disorders and disordered eating behaviour, there was an increasing need for the development of a reliable and valid measure of internal control beliefs specific to weight. The Weight Control Beliefs Questionnaire was developed and validated in clinical and non-clinical samples, and found to be a reliable predictor of disordered eating behaviours and attitudes, body dissatisfaction, and self-esteem (Laliberte et al., 2007). The Weight Control Beliefs Questionnaire divides the Internal locus of control in terms of weight into two distinct beliefs: the belief that one should control one's weight, and the belief that one should control one's lifestyle (Laliberte et al., 2007).

This study will attempt to further the understanding and scope of the Weight Control Beliefs

Questionnaire, by using it as a measure of disordered eating behaviours and attitudes in a non-clinical
sample of University of Winnipeg students. Relationships between the two internal beliefs on weight
and specific disordered eating behaviours, attitudes, perfectionism, and self-esteem will be examined,
by using the Eating Disorder inventory (Garner et al., 1983), the Eating Attitudes Test (Garner and
Garfinkel, 1979), and the Rosenberg Self-Esteem Scale (Rosenberg, 1965) in addition to the Weight

Control Bellefs Questionnaire (Laliberte et al., 2007). It is hypothesized that individuals who have bellefs that one should control their weight will show high levels of disordered eating behaviours and attitudes, high levels of perfectionism, and low levels of self-esteem. Reciprocally, it is hypothesized that individuals who have bellefs that one should control their lifestyle will have low levels of disordered eating behaviours and attitudes, low levels of perfectionism, and high levels of self-esteem. Within these general hypotheses, special attention will be paid to differences in terms of specific eating disordered behaviours (e.g. bingeing and purging, overeating, or restrictive eating), specific types of perfectionism (e.g. socially oriented and self oriented perfectionism), and sex differences. With hopes of achieving a further understanding of how these factors play a role in disordered eating behaviours and in the development of clinical eating disorders, it is possible that the results of this study may assist in the development of screening tools for eating disorder risk factors, and a more effective method of preventing eating disorders themselves.

Procedure

Upon signing up to participate in this study, students will be informed of the content and purpose of the questionnaires (e.g. questions will address attitudes towards eating, eating behaviours, beliefs on controlling one's weight and controlling one's lifestyle, and self esteem).

Before beginning the questionnaire, the participants will be asked to sign a consent form (Appendix A). They will be informed that their participation in the study is entirely voluntary, and that they may refuse to answer any question or withdraw from the study anytime before completing the questionnaire and still receive full credit. They will be reminded that their participation in this study will remain anonymous, and be given an opportunity to ask the investigator any questions before they begin the questionnaire.

Participants will be asked to complete a series of short questionnaires (Appendix B), which include the Drive for Thinness, Bulimia, Body Dissatisfaction, Perfectionism, and Ineffectiveness subscales of the Eating Disorder Inventory (Garner, 1983), the Eating Attitudes Test (Garner and Garfinkel, 1979), the Rosenberg Self-Esteem Scale (Rosenberg, 1965) and the Weight Control Beliefs Questionnaire (Laliberte et al., 2007).

Upon completing the questionnaires, participants will be given a student feedback form (Appendix C), containing the purpose of the study, and contact information for further questions or concerns that the participants may have. The participants will also be thanked for their contribution to student research.

Participants

Participants will consist of approximately 200 Introductory Psychology students from the University of Winnipeg. They will be recruited by sign-up sheets posted on the subject pool bulletin board, which will include a brief statement describing the content of the study. This statement will inform students of the types of questions they will be asked should they choose to sign up for this study. If the students do not feel comfortable answering questions concerning attitudes towards eating, eating behaviours, beliefs on control, or self-esteem, they will not sign up to participate.

Informed Consent

Participants are required to complete an informed consent form before participating in the study (Appendix A), and will be provided with a copy of the consent form once they have completed the questionnaires.

Confidentiality, Data Storage and Disposal

Participants will not be asked at any point throughout the study to identify themselves, and their responses to the questionnaires will remain completely anonymous and confidential. The data will be stored in a locked laboratory that only those authorized will have access to. Data will be preserved for at least five years as specified by the American Psychological Association and then disposed of by shredding and formatting any disks containing electronic data. The results from this study may be used in future presentations and/or scientific publications.

Feedback to Participants

Participants will receive a student feedback form (Appendix C) following their completion of the questionnaire. The student feedback form will include the rationale and purpose of this study, and contact information if the participants are interested in the results of the study or have any further questions or concerns. If a participant withdraws from the study because of a specific concern about the questionnaire or feedback form, the participant will be referred to the primary advisor whose contact information is provided on the student feedback form. The participant will still receive a full research credit.

Potential Risk to Participants

All necessary cautions have been taken to ensure that any potential risks are minimized and participants' experience is entirely safe. Methods of minimizing potential risk factors include the statement of intent on the subject pool sign-up sheet, and the reminder of the intent and procedure of the study before the questionnaire begins. These include an advisory that those individuals who may feel uncomfortable answering questions regarding eating attitudes, eating behaviours, beliefs on control, and self-esteem, should not participate. It is also emphasized that each participant has the right to

refuse to answer any question(s), and may withdraw from the research study at any time before the questionnaire is completed, and still receive a research credit. If at any time a participant experiences a negative reaction to the questionnaire or feedback form, the investigator will immediately refer the participant to the primary advisor, who will then take the necessary action to reduce any discomfort (e.g. refer to counselling services, the Department Chair etc.). Any adverse reactions to the study will be reported to the Department Chair and the Chair of Ethics.

Potential Benefits and Use of Findings

Students participating in this study will be helping to further the understanding of disordered eating behaviours and attitudes in non-clinical populations. The results of this study may be of value to future research on eating disorder risk factors and the development of more effective screening tools for disordered eating behaviours and attitudes in clinical or non-clinical settings in the future.

References

- Balch, P., & Ross, A.W. (1975) Predicting success in weight reduction as a function of locus of control: A Unidimensional and multidimensional approach. *Journal of Consulting and Clinical Psychology*, 43 (1), 119.
- Garner, D.M., Olmstead, M.P., Polivy, J. (1983) Development and validation of a multidimensional eating Disorder inventory for anorexia nervosa and bulimia. *International Journal of Eating Disorders*, 2 (2), 15-34.
- Garner, D.M., & Garfinkel, P.E. (1979). The Eating Attitudes Test: an index of the symptoms of anorexia Nervosa. *Psychological Medicine*, 9, 273-279.
- Laliberte, M., Newton, M., McCabe, R., Mills, J.S. (2007) Controlling your weight versus controlling your

 Lifestyle: How beliefs about weight control affect risk for disordered eating, body dissatisfaction,

 And self-esteem. Cognitive Therapy and Research, 31, 853-869.
- Richardson, C.G., Ratner, P.A., Zumbo, B.D. (2009) Further Support for Multidimensionality within the Rosenberg Self-Esteem Scale. *Current Psychology*, 28, 98-114.
- Stotland, S., & Zuroff, D.C. (1990) A new measure of weight locus of control: The Dieting Beliefs Scale.

 Journal of Personality Assessment, 54 (1 & 2), 191-203.

APPENDIX A - Consent Form



Student Investigator: Jasmine Bracken, Dept. of Psychology,

Primary Advisor: Dr. Gary Rockman, Dept. of Psychology, g.rockman@uwinnipeg.ca or 786-9405

Secondary Advisor: Dr. Jim Clark, Dept. of Psychology, j.clark@uwinnipeg.ca

I agree to participate in this study on disordered eating behaviours and the relationship to beliefs of controlling one's weight and lifestyle. This study is being conducted by Jasmine Bracken at the University of Winnipeg, and has been reviewed by the Department of Psychology Ethics Committee. My participation will involve filling out a set of brief questionnaires, which will take approximately 20 minutes. The questionnaires assess four areas of interest: (1) eating disordered behaviours; (2) beliefs on control; (3) attitudes towards eating and (4) self-esteem. Following completion of the questionnaires I will receive one hour of research credit.

I understand that this study is being conducted for research purposes only and that all data is completely anonymous and confidential. At no point throughout my participation in this study will any personally identifying information be requested.

The data obtained from this study will be safeguarded, and only those authorized will have access to it. Data will be preserved for at least five years as specified by the American Psychological Association and then disposed of by shredding of questionnaires and formatting any disks containing electronic data. The results from this study may be used in future presentations and/or scientific publications.

I am aware that my participation in this experiment is completely voluntary. I have the right to refuse to answer any question and the right to withdraw from the study at any time prior to completing the questionnaire and still receive my research participation credit.

Please check one of the fo	ollowing	
I do agree to part	lcipate in the study described above	
I do NOT agree to	participate in this study	
Name (please print):		
Date:	Signature:	<u> </u>
		to a section of the management of miles

Contact Information: If you have any questions about this study, you can contact Dr. Rockman (Chair of the Departmental Ethics Committee) at 786-9405. For general concerns you can also contact Heather Mowat, Research Administration Officer at 786-9058

Eating Disorder Inventory

Age:				-				
Present	t W	eig	(ht:			(lbs) Height:	Sex:	
Highest	t Pa	st\	Vе	ìgh	ıt (e	xcluding pregnancy):	(lbs)	
	Но	W	l.or	ng /	Ago:		(months)	·
	Fo	r H	ow	Lo	ng [Did You Weigh This Amount:	(months)	
Lowest	Pas	st A	du	lŧ۱	Vel	ght:	(lbs)	
	Но	w	Loi	ng /	Ago:		(months)	
	Fo	rH	ow	/ Lc	ngl	Did You Weight This Amount:	(months)	
ideal W	/ele	ht	:				(lbs)	÷
1 = Nev		'hii	nne	3SS	: :	2 = Rarely 3 = Som	etimes 4 = Usually	5 = Always
	1	2	3	4	5	l eat sweets and carbohydrates	without feeling nervous	
	1	2	3	4	5	I think about dieting		
	1	2	3	4	5	I feel extremely guilty after ove	reating	
	1	2	3	4	5	I am terrified of gaining weight		
	1	2	3	4	5	l exaggerate or magnify the imp	ortance of weight	
	1	2	3	4	5	I am preoccupied with the desi	e to be thinner	
	1	2	3	4	5	If I gain a pound, I worry that I v	vill keep gaining	

1 = Never

2 = Rarely

3 = Sometimes

4 = Usually

5 = Always

Bulimla:

- 1 2 3 4 5 leat when lam upset
- 1 2 3 4 5 Istuff myself with food
- 1 2 3 4 5 I have gone on eating binges where I have felt that I could not stop
- 1 2 3 4 5 I think about bingeing (overeating)
- 1 2 3 4 5 Leat moderately in front of others and stuff myself when they're gone
- 1 2 3 4 5 I have the thought of trying to vomit in order to lose weight
- 1 2 3 4 5 leat or drink in secrecy

Body Dissatisfaction:

- 1 2 3 4 5 I think that my stomach is too big
- 1 2 3 4 5 I think that my thighs are too large
- 1 2 3 4 5 I think that my stomach is just the right size
- 1 2 3 4 5 I feel satisfied with the shape of my body
- 1 2 3 4 5 Hike the shape of my buttocks
- 1 2 3 4 5 Ithinkmyhipsare too big
- 1 2 3 4 5 I think that my thighs are just the right size
- 1 2 3 4 5 I think my but tocks are too large
- 1 2 3 4 5 I think that my hips are just the right size

1 = Never

2 = Rarely

3 = Sometimes

4 = Usually

5 = Always

Ineffectiveness:

- 1 2 3 4 5 I feel ineffective as a person
- 1 2 3 4 5 I feel alone in the world
- 1 2 3 4 5 I feel generally in control of things in my life
- 1 2 3 4 5 I wish I were someone else
- 1 2 3 4 5 Ifeelinadequate
- 1 2 3 4 5 I feel secure about myself
- 1 2 3 4 5 I have a low opinion of myself
- 1 2 3 4 5 I feel that I can achieve my standards
- 1 2 3 4 5 I feel that I am a worthwhile person
- 1 2 3 4 5 I feel empty inside (emotionally)

Perfectionism:

- 1 2 3 4 5 Only outstanding performance is good enough in my family
- $1 \ \ 2 \ \ 3 \ \ 4 \ \ 5 \qquad \text{As a child, I tried very hard to avoid disappointing my parents and teachers}$
- 1 2 3 4 5 I hate being less than the best at things
- 1 2 3 4 5 My parents have expected excellence of me
- 1 2 3 4 5 I feel that I must do things perfectly or not do them at all
- 1 2 3 4 5 I have extremely high goals

Weight Control Beilefs Questionnaire

Please read each statement and decide how well each statement describes your beliefs:

1 = Not True 2 = Slightly True 3 = Moderately True 4 = Mostly True 5 = Completely True

1	2	3	4	5	I believe I should control my weight
1	2	3	4	5	I try to live a healthy lifestyle and let my weight go to what is natural for me
1	2	3	4	5	I focus on healthy living rather than controlling my weight
1	2	3	4	5	If I work at it, I should be able to keep my weight where I want it
1	2	3	4	5	I try to accept the weight that is natural for me and focus on living a healthy lifestyle
1	2	3	4	5	If I stick to the right exercise and eating plan, I should be able to achieve the weight and shape
					that I want
1	2	3	4	5	If I am living a healthy lifestyle, my body is likely at the weight I am meant to be
1	2	3	4	5	It is important to me that I accept the weight that comes with living a healthy lifestyle
1	2	3	4	5	The main thing that determines my weight is what I myself do
1	2	3	4	5	If I am careful, I can control my weight
1	2	3	4	5	I'd rather live healthily and accept that we all come in different shapes and sizes
1	2	3	4	5	If my weight is more than what I want it to be, then I am at fault
1	2	3	4	5	Whether I gain, lose, or maintain my weight is within my control
1	2	3	4	5	I am comfortable letting my weight fluctuate naturally
1	2	3	4	5	I focus on healthy eating rather than trying to control my weight
1	2	3	4	5	If I want to be a certain weight, I can make it happen
4	2	2	4	E	I focus on healthy eversise rather than trying to control my weight

Rosenberg Self-Esteem Scale

Please indicate your agreement to each statement.

1 = Strongly disagree 2 = Disagree 3 = Neither agree nor disagree 4 = Agree 5 = Strongly Agree

- 1 2 3 4 5 I feel that I have a number of good qualities
- 1 2 3 4 5 I feel that I'm a person of worth, at least on an equal plane with others
- 1 2 3 4 5 I am able to do things as well as most other people
- 1 2 3 4 5 I take a positive attitude towards myself
- 1 2 3 4 5 On the whole I am satisfied with myself
- 1 2 3 4 5 All in all, I am inclined to feel that I'm a failure
- 1 2 3 4 5 At times I think I am no good at all
- 1 2 3 4 5 I feel I do not have much to be proud of
- 1 2 3 4 5 | certainly feel useless at times
- 1 2 3 4 5 I wish I could have more respect for myself

Eating Attitudes Test

Please indicate which number best represents your attitudes and behaviours

1 = Never	2 = Rarely	3 = Sometimes	4 = Usually	5 = Alway
1 2 3 4 5	Like eating with other	people		
1 2 3 4 5	Prepare foods for oth	ers but do not eat what I	cook	
1 2 3 4 5	Become anxious prior	to eating		
1 2 3 4 5	Am terrified about be	Ing overweight		
1 2 3 4 5	Avoid eating when hu	ngry	•	
12345	Find myself preoccup	led with food		
1 2 3 4 5	Have gone on eating l	oinges where I feel that I	may not be able to stop	
1 2 3 4 5	Cut my food Into smal	l pieces		
1 2 3 4 5	Aware of the calorie of	ontent of foods that I ea	ŧ	
12345	Particularly avoid foo	ds with a high carbohydr	ate content (eg. Bread, r	lce etc)
1 2 3 4 5	Feel bloated after me	als		
1 2 3 4 5	Feel that others woul	d prefer if I ate more		
1 2 3 4 5	Vomit after I have eat	en		
1 2 3 4 5	Feel extremely guilty	after eating		
1 2 3 4 5	Am preoccupled with	a desire to be thinner		
1 2 3 4 5	Exercise strenuously t			
1 2 3 4 5	Weigh myself several	times a day		
1 2 3 4 5	Like my clothes to fit		-	
1 2 3 4 5	Enjoy eating meat			
1 2 3 4 5	Wake up early in the	morning		
· -		•••		

1=Never	2 = Rarely	3 = Sometimes	4 = Usually	5 = Always
1 2 3 4 5	Eat the same foods day	y after day		
1 2 3 4 5	Think about burning up	o calories when lexer	clse	
1 2 3 4 5	Have regular menstrua			
12345	Other people think that	nt I am too thin		,
1 2 3 4 5	Am preoccupled with	the thought of having	fat on my body	ı
1 2 3 4 5	Take longer than other	rs to eat my meals		
1 2 3 4 5	Enjoy eating at restaur	ants		
1 2 3 4 5	Take laxatives	•		
1 2 3 4 5	Avoid foods with sugar	r In them	•	
1 2 3 4 5	Eat diet foods			
1 2 3 4 5	Feel that food controls	s my life		
1 2 3 4 5	Display self control are	ound food		
1 2 3 4 5	Feel that others pressu	ıre me to eat		·
1 2 3 4 5	Give too much time an	d thought to food		
1 2 3 4 5	Suffer from constipation	on		
1 2 3 4 5	Feel uncomfortable af	ter eating sweets		
1 2 3 4 5	Engage in dieting beha	eviour		
1 2 3 4 5	Like my stomach to be	empty		
1 2 3 4 5	Enjoy trying new rich f	oods		
1 2 3 4 5	Have the Impulse to vo	omit after meals		



Student Feedback Form

Student Investigator:

Jasmine Bracken, Dept. of Psychology,

Primary Advisor:

Dr. Gary Rockman, Dept. of Psychology, g.rockman@uwinnipeg.ca or 786-9405

Secondary Advisor:

Dr. Jim Clark, Dept. of Psychology, J.clark@uwinnipeg.ca

There has been a significant amount of research conducted on clinically diagnosed eating disorders, and the risk factors associated with them. More recent research in the field of eating disorders has focused on disordered eating behaviours and attitudes, and the role that factors such as locus of control, perfectionism, and self-esteem may play. More specifically, special attention has been paid to the different levels of Internal control of weight, namely the belief that one can control one's weight and the belief that one can control one's lifestyle (Laliberte et al., 2007). A more comprehensive understanding of how these beliefs on control relate to specific disordered eating behaviours, eating attitudes, perfectionism, and self-esteem may lead to a more effective method of screening for eating disorder risk factors in non-clinical settings, before the disordered eating worsens to the point of being considered a clinical disorder.

The Eating Disorder Inventory (Garner et al., 1983), and the Eating Attitudes Test (Garner & Garfinkel, 1979) were developed to assess disordered eating behaviours and attitudes, and have been proven reliable and valid for use in both clinical and non-clinical settings. The Rosenberg Self-Esteem Scale (1965) is a well-known and efficient method of evaluating an individual's level of self-esteem. The Weight Control Beliefs Questionnaire was developed recently to assess the specific types of internal control beliefs on weight, and has been shown to be reliable and valid in both clinical and non-clinical settings, and able to effectively assess whether an individual beliefs that one should be able to control one's weight, or one should be able to control one's lifestyle (Laliberte et al., 2007).

By answering these questionnaires, you have contributed to the further understanding of beliefs on control and the role that these beliefs play in disordered eating behaviours and attitudes within a non-clinical population. We thank you for your participation in this study. If you have any questions or concerns about your participation in this study or wish to obtain the results of this research, please contact Dr. Rockman (Chair of the Departmental Ethics Committee) at 786-9405. For general concerns you can also contact Heather Mowat, Research Administration Officer at 786-9058.