1. Project Identification and Abstract

1.1. * Type of Submission:

- Research Protocol or Study on Human Subjects
- Grant/Contract Only
- Facilitated Review (NCI CIRB)
- USC/CHLA Collaborative Review
- Use of Humanitarian Use Device (Not Research)
- Ceded Review (Utilize approval by an outside IRB)

1.2. * Full Title of Research Protocol

Whiteness: A narrative analysis on student affairs professionals, race, identity, and multicultural competency

1.3. * Short Title

Whiteness

1.4. Abstract: Provide a simple explanation of the study and briefly address (in 1 to 2 sentences) each of the following points: rationale; intervention; objectives or purpose; study population or sample characteristics; study methodology; description of study arms (if appropriate); study endpoints or outcomes; follow-up; statistics and plans for analysis.

This qualitative study will be a narrative analysis that examines the experiences of white student affairs professionals. The study will look at the effect race and racial awareness have on a professional’s day-to-day work, their interaction with students, their investment in being multiculturally competent, and their racial identity as white student affairs professionals. The research questions that will guide the study are: How do white student affairs professionals see their own race affecting their daily job? Do white student affairs professionals feel invested in being multiculturally competent? And how aware are white student affairs professionals of their own racial identity, racial attitudes, and privilege?

To answer these research questions, this study will interview white, mid-level student affairs administrators who work at predominantly white institutions. The knowledge that will be gained from this study is intended to better understand the impact that race has on how student affairs professionals perform their jobs and how mid-level student affairs administrators can be supported in their racial identity and professional development. The hope is that this study will open a dialogue about whiteness, the study will lead to improved programs, services, and policies on college campuses, and that the study will contribute to literature in the field of student affairs about racial identity and multicultural competency.

1.5. * Select which IRB you are requesting review from:

USC-University Park Campus (UPC)
2. Study Personnel

2.1. Study Personnel and their roles:

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Organization</th>
<th>Study Role</th>
<th>Certifications</th>
<th>Obtain Consent</th>
</tr>
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<tbody>
<tr>
<td></td>
<td></td>
<td>ROSSIER SCHOOL OF EDUCATION</td>
<td>Principal Investigator</td>
<td>HS</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td></td>
<td>ROSSIER SCHOOL OF EDUCATION</td>
<td>Faculty Advisor</td>
<td>HS</td>
<td>no</td>
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<tr>
<td></td>
<td></td>
<td>UPC Office Of Human Studies</td>
<td>Study Contact Person</td>
<td></td>
<td>no</td>
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2.2. Is the Principal Investigator a student, resident, fellow, other trainee, or visiting scholar at USC/CHLA?

☐ Yes ☐ No

Please Designate a Faculty Advisor in 2.1.

2.3. If there are any individual collaborators from other institutions, check here: □

2.5. Specify the group/organization who has reviewed this study for scientific merit:

Doctoral Dissertation Committee

iStar ID: UP- IP

4. Funding Information

4.1. * What existing, planned, or pending support will be used for this study? (check all that apply)

☐ Cooperative Group (SWOG, COG, RTOG, etc.)

☐ CTSI

☐ Department of Defense (DOD) Funds

☐ Departmental/Institutional Funds

☐ Federal Grant/Contract

☐ Foundation Grant/Contract

☐ Industry

☐ Intramural/Internal Grant

☐ Residual Funds

☐ State or Local Grant/Contract

☐ Subcontract from another institution

☑ No Funding

☐ Other

iStar ID: UP-IP

Application Version Date: 1/23/2012

Version: 1.0

5. Type of Study Review

5.1. Select the type of review that you are requesting for this study:

☐ Full Committee Review
5b. Type of Study Review - Application for Exempt Status

This screen is required if you are requesting a claim of exemption for this study (Question 5.1.) If this is the incorrect review type, please return to page 5 to make changes.

WARNING: A Claim of Exemption is not allowed for any research involving prisoners. In these cases, you must request Expedited Review.

5b. * Choose the applicable exemption categories from the list below. (Note: these exemptions do not apply to research involving prisoners. For children, all exemption categories may apply except for (2) unless it is simply observation of public behavior and the investigator does not interact with the children.)

- [ ] (1) Research conducted in established or commonly accepted educational settings, involving normal educational practices...
- [x] (2) Research involving the use of educational tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures or observation of public behavior...
- [ ] (3) Research involving the use of educational tests, survey procedures, interview procedures, or observation of public behavior that is not exempt under paragraph (b)(2) of this section...
- [ ] (4) Research involving the collection or study of existing data, documents, records, pathological specimens, or diagnostic specimens...
- [ ] (5) Research and demonstration projects which are conducted by or subject to the approval of Department or Agency heads, and which are designed to study, evaluate, or otherwise examine...
- [ ] (6) Taste and food quality evaluation and consumer acceptance studies...

5b.2. Do you intend to enroll or study minors in the research?

- [ ] Yes
- [ ] No

***** WARNING: This Study May Not Qualify For Exempt Category 2! *****

For Exempt Category 2 to apply, the study activities must be limited to observation of public behavior of minors (no participation) unless the study is at USC, has no funding, and is determined to qualify for the USC Flexibility Policy. Please contact the IRB if you have any questions.

6. Study Location(s)

6.1. Select the locations where this study will be conducted by the USC/CHLA investigator(s) (check all that apply):

- [ ] HSC - Health Sciences Associated Locations
- [ ] UPC - University Park Associated Locations
- [ ] CHLA
6.2. Are there other sites besides USC/CHLA involved in the research?  
- Yes  - No

6.3. Is USC/CHLA the coordinating site or are there sites where USC/CHLA is conducting the study?  
- Yes  - No

9. Methods and Procedures - Selected Descriptors/Community Engaged Research

Note: The list of items below IS NOT an all-inclusive list of methods and procedures available to investigators. The list only includes items that will trigger additional questions specific to areas of research or are necessary for the review process.

9.1. This study will involve: (check all that apply)
- Prospective collection of data/specimens
- Use of existing or retrospective data/specimens

9.2. Study Procedures: (check all that apply)
- Audio/Video Recordings or Photographs
- Behavioral Observations and/or Behavioral Experimentation
- Behavioral Interventions
- Deception
- Interview/Focus Groups
- Population-based Field Study
- Psychophysiological Testing
- Surveys/Questionnaires/Psychometric Testing
- Creation of a Data or Tissue Repository
- Magnetic Resonance Imaging (MRI)
- Stem Cell Research
- Venipuncture

9.4. Will data from this study be submitted to the NIH Genome-Wide Association Studies (GWAS) data repository?  
- Yes  - No

9.5. Does your study involve community-engaged research (community-engaged research addresses community needs and involves the community in research plan, conduct of study, etc)?  
- Yes  - No
11. Study Design and Methodology

11.1. Describe in detail the design and methodology of the study. If applicable, include information on stratification or randomization plans. Identify and distinguish between those procedures that are standard of care and those that are experimental. Include the frequency and duration of each activity and the total length of subject participation.

The proposed methodology for this study is a qualitative approach. The primary source of data for this study is through narrative analysis of 15-20 white student affairs professionals. Narratives will be developed through in-depth interviews in which participants discuss the path to their profession, the experiences that shape their identity, and reflections on race in relation to their profession. Narrative analysis is well-suited to studies of identity because it allows the researcher to understand how individuals construct their identity, make sense of important events in their lives, and represent those events to others (Riessman, 1993). Narrative analysis is key to this study because this study is most interested in the individual perspectives of student affairs professionals and how they see their race and their racial identity affecting their jobs. Being able to capture individual stories and to develop them into a narrative will provide a good representation of how mid-level student affairs managers make sense of their race, in relation to their professional work. Narrative research does not have a prescribed or formalized approach, but it does expect that stories will be collected, the context of the stories will be relevant, and that expertise will be used in the analysis of the stories (Creswell, 2007).

11.2. Provide a description of the study population.

I will be surveying and interviewing white mid-level student affairs administrative managers in higher education.

19. Methods and Procedures - Interview/Focus Groups

This screen is required if you indicated the use of Interview or Focus Groups as a procedure (Question 9.2.)

19.1. Attach copies of any scripts and/or questions that will be used to guide the interviews/groups.

<table>
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<tr>
<th>name</th>
<th>Version Modified</th>
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<tr>
<td>Interview Questions.docx</td>
<td>History 0.01 1/23/2012 5:11 PM</td>
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21. Methods and Procedures - Surveys/Questionnaires/Psychometric Testing

This screen is required if you indicated the use of Surveys, Questionnaires, or Psychometric Testing (Question 9.2.)

21.1. List all of the measures/instruments that will be used for this study and attach copies below. Explain the purpose of the measures and indicate if any have been previously validated.

Demographic Survey

21.2. Attach copies of all measures/instruments that will be used for this study.

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<thead>
<tr>
<th>name</th>
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<tbody>
<tr>
<td>Demographic Questions.docx</td>
<td>History 0.01 1/23/2012 5:11 PM</td>
</tr>
</tbody>
</table>
22. Special Subject Populations

22.1. Indicate any vulnerable subject populations you intend or expect to enroll in the research: (check all that apply)

- Normal Volunteers
- Employees or Students
- Adults not Competent to Consent (or likely to lose the capacity to consent during the study)
- Non-English Speaking Populations
- Minors (subjects under 18 years of age)
- Pregnant Women / Human Fetuses
- Neonates (infants under 30 days old)
- Prisoners/Detainees
- Wards
- None of the above

24. Subject Recruitment and Informed Consent

24.1. Recruitment Tools that will be used by the local site (check a box only if your site will control the use or distribution of the recruitment tool): (check ALL that apply)

- E-mail/Electronic Mailing List
- Brochure
- Flyers
- Letters
- Newspaper/Magazine Advertisements
- Radio/Television Announcements
- Subject or Participant Pool
- Telephone Scripts
- Verbal (Personal Solicitation)
- Website / Social Media Outlets
- Other
- None of the above

24.1.1. Please specify:
Snowball Sampling through various contacts in higher education

24.1.2. Describe how you will be obtaining contact information:

24.2. Attach copies of all recruitment tools that will be used at the local site. (Do not attach any advertising or recruitment materials that are provided by a sponsor that cannot be modified by the
24.3. Will you be obtaining informed consent, assent, parental permission, or be providing participants with information sheets?

- Yes
- No

24.4. Attach copies of the informed consent documents(s), information sheets, and any statements of new information/findings or consent addenda (as applicable) that will be used in this study. This set should also contain any assent or parental permission documents that will be used.

25. Financial Obligation and Compensation

25.1. Financial Obligation: Describe who pays for financial obligations that the subject may incur as a result of participating in the study.

- All costs are paid by the sponsor or funding agency.
- Research costs are paid by the sponsor or funding agency. Other costs are the responsibility of the participants and/or their healthcare plans.
- All costs are the responsibility of the participants and/or their healthcare plans.
- Study drug will be provided but not the costs of preparation or administration, which will be the responsibility of the participants and/or their healthcare plans.
- All costs are covered by the department/division.
- There are no financial obligations related to participation.
- Other

25.1.1. If other is selected, please specify:

There are no financial obligations associated with participation.

25.2. Payment for Participation: Describe how much, if any, financial or other form of compensation will be provided to the subject/family. Describe the requisite conditions that must be fulfilled to receive full or partial compensation. Describe the proposed method of timing and disbursement. If children are involved, please specifically address how the compensation will be distributed to children.

I will be providing a $ gift card to all participants.

26. Participant Privacy and Data Confidentiality

26.1.
**Privacy Protections:** Privacy is a participant’s ability to control how other people see, touch, or obtain information about his/her self. Violations of privacy can involve circumstances such as being photographed or videotaped without consent, being asked personal questions in a public setting, being seen without clothing, being observed while conducting personal behavior, or disclosing information about abortions, HIV status, or illegal drug use.

**Select the provisions to protect the privacy of the individual during screening, consenting, and conduct of the research:** (check ALL that apply)

- Research procedures will be conducted in person in a private setting.
- Data will be captured and reviewed in a private setting.
- Only authorized research study personnel will be present during research related activities.
- The collection of information about participants is limited to the amount necessary to achieve aims of the research.
- Participants will not be approached in a setting or location that may constitute an invasion of privacy or could potentially stigmatize them.
- Other (specify below)

26.1.1. **Please specify:**

All participants will be interviewed on multiple occasions. While the researcher will collect identifiable information about the participants during the final publication all of the participants will be assigned pseudonyms in order to protect their identity. The interviews will be audio-taped though this will not be a condition of participation.

26.2. **Confidentiality Precautions:** Confidentiality is an extension of the concept of privacy; it refers to the participant’s understanding of, and agreement to, the ways identifiable information will be collected, stored, and shared. Identifiable information can be printed information, electronic information, or visual information such as photographs.

**How will the research data/specimens be recorded?** (check ALL that apply)

- Data and/or specimens will be directly labeled with personal identifying information. (Identifiable)
- Data and/or specimens will be labeled with a code that the research team can link to personal identifying information. (Coded)
- Data and/or specimens will not be labeled with any personal identifying information, nor with a code that the research team can link to personal identifying information. (Anonymous)
- Other (explain below)

26.3. **How will the research data and/or specimens be protected against inappropriate use or disclosure?** (check ALL that apply)

- Locked office
- Locked storage unit
- Restricted access to authorized study personnel
- Secure computer/laptop
- Individual ID plus password protection
- Encryption of digital data
- Network Restrictions

Security software (firewall, antivirus, anti-intrusion) is installed and regularly updated in all...
servers, workstations, laptops, and other devices used in the study

Restrictions on copying study related materials

Destruction of source data immediately after data collection (to preserve anonymity of participants)

Audio and/or video recordings will be transcribed and then will be destroyed

Audio and/or video recordings will be modified to eliminate the possibility that study participants could be identified

Photos or images will be modified to eliminate the possibility that study participants could be identified

Study personnel will sign statements agreeing to protect security and confidentiality of study information

Access rights are terminated when authorized study personnel leave the study

Not Applicable

Other (specify below)

26.3.1. Please specify the physical location and describe how data will be secured to protect confidentiality.
The data will be stored on a password protected computer.

26.4. Will coded or identified data and/or specimens be released to a third party (external to USC/CHLA)?

☐ Yes ☐ No

26.4.1. Specify what data and/or specimens will be released, to whom (the individuals and/or agencies), and why.
The data will not be released to third parties.

26.5. What will happen to the research data and/or specimens at the conclusion of the study? (check ALL that apply)

Direct identifiers and/or the key to the codes will be destroyed upon completion of the research (all data/specimens will be stripped of identifying information and/or the key to codes destroyed, paper documents shredded, electronic files purged, electronic media securely erased).

Retained for study record keeping purposes per institutional policy.

Retained by the investigator for future research use.

Retained for future research use (create data or tissue repository/bank).

Restricted use data will be destroyed or returned to the source.

No direct or indirect identifiers are being collected. The anonymous data and/or specimens will be retained at the discretion of the investigator.

This research is a clinical trial conducted under FDA regulations. Direct identifiers and/or the key to the codes will be destroyed as directed by the sponsor (IND/IDE holder) in accordance with FDA regulations.

Other (specify below)

26.5.1. If Other is selected, please specify:
The data set will be kept for three years and then destroyed.
28. Risk/Benefit Analysis - Potential Benefits and Alternatives

28.4. Risks in relation to benefits:

- The potential benefits to the research participants justify exposure of the participants to the risks.
- The potential benefits to humanity justify exposure of the participants to the risks.
- Other (specify below)

28.4.1. Other risk benefit analysis:

There are no anticipated benefits and/or risks associated with this study.

35. Is the HIPAA Privacy Rule Applicable?

35.1. Do you intend to access, review, collect, use or disclose protected health information (PHI) in your research? Answer yes if you intend to do any of the following:

- Look at medical records (paper or electronic) to identify potential research participants
- Look at clinic logs to identify potential research participants
- Record demographic information obtained from medical records (paper or electronic)
- Record health information obtained from medical records (paper or electronic)
- Obtain information from laboratory reports, pathology reports, radiology reports or images, or other reports from medical or mental health testing and treatment
- Obtain information from medical billing records
- Record or use medical record numbers or other information that could be used to identify an individual (review the list of HIPAA identifiers below)

- Yes  - No

35.2. Do you intend to record data that contains any of the 18 elements defined by HIPAA as identifiers (listed below), in your research?

- Yes  - No

- Name/Initials
- Street address, city*, county*, precinct*, zip code*, or equivalent geocodes*
- All elements of dates (except year) directly related to an individual (date of birth, admission date, discharge date, date of death)*
- Elements of date, including year, for persons 90 or older
- Telephone number
- Fax number
- Electronic mail address
- Social Security Number
- Medical record number
- Health plan identification number
- Account number
- Certificate/license number
- Vehicle identifiers and serial numbers, including license plate number
- Device identifiers and serial number
- Web addresses (URLs); Internet IP addresses
35.3. Are you going to record only the personal identifiers marked with an asterisk (*)? If so, you may be able to obtain or use such health information from a healthcare provider for research purposes without an authorization. Under the HiPAA Privacy Rule, this data constitutes a “limited data set”. If you are creating or obtaining a limited data set, you must complete a Data Use Agreement. Attach a copy of the signed Data Use Agreement below.

There are no items to display

USC Template Data Use Agreement

39. Conflict Of Interest Information

39.1. Does the Investigator, Research Personnel or Close Relation have an ownership interest (any equity in a non-publicly traded company, regardless of value, or stock, stock options or warrants, in a publicly traded company of $5,000 or more excluding mutual funds) in:

- The sponsor of the research; or
- An entity that has a license or is negotiating a license to the intellectual property (e.g., patents) developed from this research; or
- An entity that has an economic interest in the research.

☐ Yes  ☐ No

39.2. Does the Investigator, Research Personnel or Close Relation have a management role (such as director, officer, scientific, or technical appointment), or any other role with significant decision-making authority, in:

- The sponsor of the research; or
- An entity that has a license or is negotiating a license to the intellectual property (e.g., patents) developed from this research; or
- An entity that has an economic interest in the research.

☐ Yes  ☐ No

39.3. Did the Investigator, Research Personnel or Close Relation receive in the last twelve months or does the Investigator, Research Personnel or Close Relation expect to receive in the next twelve months any payments for services (such as speakers fees, payments for consulting, participation on an advisory board, or assistance with protocol design) from:

- The sponsor of the research; or
- An entity that has a license or is negotiating a license to the intellectual property (e.g., patents) developed from this research; or
- An entity that has an economic interest in the research.

This does not include salary for services as an investigator/staff on the research study. Also excluded are payments from the federal government for services performed (i.e. peer review, study section participation, seminars, lectures, or service on advisory committees).

☐ Yes  ☐ No

39.4. Does the Investigator, Research Personnel or Close Relation personally receive intellectual property rights (e.g. patents, copyrights, or royalties) directly from:
• The sponsor of the research; or
• An entity that has a license or is negotiating a license to the intellectual property (e.g., patents) developed from this research; or
• An entity that has an economic interest in the research.

This does not include royalties paid directly from USC

☐ Yes  ☐ No

39.5. To the investigator’s knowledge, does the institution have financial and or intellectual property interests in the sponsor or the products used in this project? An institutional conflict may occur when a financial interest of the University has the potential to bias the outcome of research conducted by its employees or students or to create an unacceptable risk to human subjects.

☐ Yes  ☐ No

40. Additional Supporting Documents

40.1. Attach any other documents that have not been specifically requested in previous questions, but are needed for IRB review.

name  Version  Modified

There are no items to display

40.2. If there is any additional information that you wish to communicate about the study include it below. Please note, this section should not be used instead of the standard application items.

99. Instructions for Submission

You have reached the end of the application. When you are sure of the content, the following steps may be taken to submit your application for review.

1. Click the "Finish" button on the top or bottom application navigator bar to return to the workspace.
2. Use the SmartForm Progress Calculator to determine that all sections of the application are filled out correctly.
3. Use the "Send Study Ready Notification" activity to send an email to the Principal Investigator and Co-Investigators with instructions for reviewing and submitting the application.
4. All listed Co-Investigators (indicated in item 2.1.) must use the "Agree to Participate" activity and answer yes.
5. Once all the Co-Investigators have agreed to participate, the Principal Investigator (indicated in item 2.1.) can submit the application by using the "Submit Application to _____", where _____ indicates the IRB you are submitting to.
6. The PI will have to check the PI endorsement box. The PI will also have to check the student endorsement box if it is applicable.
7. The application is submitted. The state indicator in the top left of the workspace will no longer display Pre Submission.
8. The PI and Study Contact Person will receive an email confirming the application has been submitted.