



# **Participant Information & Informed Consent Form**

## Study title: What stories does generative AI tell about people with disabilities?

You are about to participate in a research study. Before you decide if you want to take part, we need to inform you about the nature of the study and the type of your participation. This document will provide you with answers to the most frequent questions, but you can always contact Vasiliki Mylonopoulou for further information.

#### Thank you in advance for considering participation in this study!

## Principal Researcher(s)

Vasiliki Mylonopoulou, Ph.D./ Senior lecturer for University of Gothenburg, Sweden <a href="mailto:vasiliki.mylonopoulou@ait.gu.se">vasiliki.mylonopoulou@ait.gu.se</a> Swen Gaudl, Ph.D./ Senior lecturer for University of Gothenburg, Sweden.

Neva Bojovic, Ph.D./ Senior lecturer for KEDGE Business School, Bordeaux, France.

#### Who is organizing and funding this project?

This project has received funding from Vinnova, the Swedish Innovation Agency, with reference number 2024-02063.

#### What is the purpose of this study?

The purpose of the research is to explore how generative AI represents people with invisible health conditions or disabilities during job application processes and how this representation could become more accurate and fairer.

This workshop aims to discuss technical considerations for AI professionals and offer advice to enhance LLMs, algorithms, and data based on issues identified in previous workshop with people who have or have had experienced one or more invisible health conditions or disabilities.

#### What will happen if I participate?

If you volunteer your time, you will be part of the discussions and activities in the workshop. We will audio record and keep notes of the discussion if all people present agree.

#### How will my data be used?

We will not collect personal data during the workshop, apart from your signature and name in the informed consent, which we will keep locked for 10 years at the premises of the University of Gothenburg and then destroyed.

### How will my confidentiality be managed?

In case we record the workshop, the recordings will be held in a digitally locked environment at the University of Gothenburg. We will not ask any personal questions, and we do not plan to drive the discussion towards sharing personal data. However, if that happens organically, initiated by you, then these data will be managed according to the EU Directive 95/46/EC and the Swedish adaptation of the law.

#### Are there any benefits from my participation?

There are no financial benefits for your participation; you contribute to the field of knowledge and potentially to the development of Generative AI.

#### Are there any risks involved in participating?

There are no direct foreseeable risks in participating.

#### What happens if I do not agree to participate?

If you do not agree to participate, just inform Vasiliki Mylonopoulou at Vasiliki.mylonopoulou@ait.gu.se.

### What will happen if I don't want to proceed with the study?

You are free to withdraw from the study at any time, no questions asked, and without waiving legal rights. If you decide to leave the study, you should inform Vasiliki Mylonopoulou.

## Will I be paid for taking part in this study?

We are not able to pay you or cover potential expenses for your participation in this workshop.

## Has an ethics committee reviewed this study?

The nature of this study does not require approval by an ethics committee.

## Where can I get more information about the study?

If you have more questions about this study, you can visit <a href="https://vasilikimylo.wixsite.com/ai-disability">https://vasilikimylo.wixsite.com/ai-disability</a> or contact Vasiliki Mylonopoulou via email <a href="mailto:vasiliki.mylonopoulou@ait.gu.se">vasiliki.mylonopoulou@ait.gu.se</a> or phone 0702 517 497





## **Informed Consent Form**

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## By signing this form, you confirm that the following conditions have been met:

- ✓ I have read and understood the provided information.
- ✓ I have had the opportunity to ask questions and discuss the study.
- ✓ I have received satisfactory answers to all my questions.
- ✓ I have received enough information about this study.
- ✓ I understand that an anonymized copy of my data will be stored digitally and archived at the end of the study.
- ✓ I understand that I am free to withdraw from the study at any time without giving a reason, and without affecting my future medical care or legal rights.
- ✓ I understand that if I withdraw from the study, any data generated up until the withdrawal may be used.

## Furthermore, you consent to the following procedures:

- ✓ I consent to the use of my data in the current study.
- ✓ I consent to be audio recorded during this workshop.
- ✓ I consent to the use of my data in future studies of the same general kind that adhere to the EU Directive
- ✓ I agree to participate in the study.

A physical copy, where you will be able to sign, will be provided upon arrival