Title of Study: An Evaluation of the Familias en Acción Achieving a Higher Education Program

Consent to be part of a Study to be conducted at UT Health San Antonio (UTHSA)

Information about this Form

You or your child is eligible to take part in a study. This form gives you important information about the study. Parents or legal guardians, who are giving permission for a child less than 18 years old, please note that in the sections that follow the word "you" refers to "your child." Parents or legal guardians who are giving permission for a child will be asked to sign on page 2 of this document.

Please take the time to review this information carefully. You should talk to the researchers if you have any questions. You can call them at 210-358-3881 or 210-760-9390. You may also wish to talk to others like your friends or family about participating in this study. If you decide to take part in the study, you will be asked to sign this form. Before you sign this form, be sure you understand what the study is about, including the risks and possible benefits to you. You are free to choose not to take part in the study.

General Information – Who is conducting this research?

Principal Investigator. The Principal Investigator (PI) is the researcher directing this study. The PI for this study is Manuel Ángel Oscós-Sánchez MD of the UTHSA Department of Family and Community Medicine. The PI is responsible for protecting your rights, safety and welfare as a participant in the study.

Purpose of this study – Why is this study being done?

This study is being done to evaluate the effects of the Familias en Acción Achieving a Higher Education Program.

Information about Study Participants – Who is participating in this research?

You are being asked to be a participant in this study because you have previously participated in a Familias en Acción event or program and in the near future you will be invited to participate in the Familias en Acción Achieving a Higher Education Program. This study will enroll a maximum of 500 participants.

Information about Study Procedures – What will be done if you decide to be in the research?

If you decide to take part, you will first be asked to sign this consent form.

You will be asked to attend two survey sessions with the research study staff. After you complete a baseline survey, you will be invited to come back for a 3 month follow-up survey. Each session will take about 60 minutes. As a participant you will be asked to fill out a confidential survey that asks you questions about:

1) Your knowledge, attitudes and behaviors related to the ability to achieve a higher education
2) Your gender, age, grade level, race/ethnicity, housing stability
3) Things that may affect your ability to achieve a higher education such as school attendance, grades, depression, ADHD, exposure to community violence, violence, and substance use

Risks and Benefits– What are the risks and possible benefits of participation in the research?

Risks from the research. As part of this study you will be asked to fill out a confidential survey. A risk is a breach of confidentiality; that means that someone may find out how you answered one or more of the questions. We are doing the following to minimize a risk from a breach of confidentiality:

1) You will come to a data collection site to fill out the survey.
2) At the data collection site you will sit at a private desk or table.
3) You will **not** put your name on the survey.
4) You can choose **not** to answer any question that you do not want to answer.
5) You will be asked to seal your survey so no one at the data collection site can see your answers.

Risks related to choosing not to participate or to stop participation. Your decision to take part in this study is voluntary. You are free to choose not to take part in the study or to stop taking part at any time. You do not have to take part in the study to get standard medical treatment at UTHSA or to be able to participate in any future activities conducted by Familias en Acción. If you stop participating in the study before it is finished, there will be no penalty to you. Not participating in this research is an alternative option.

Benefits to taking part in this study. You may not receive any personal benefits from being in this study, but we hope the information learned from this study will benefit other people like you in the future.

Cost and Compensation – Will there be any cost or compensation for participation?

You will not have to pay any money to take part in this study. You will be compensated $25 for each of the two confidential surveys that you complete. You must participate in the baseline survey to be eligible to participate in the 3 month follow-up survey.

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Confidentiality – How will your records be kept confidential?

Information we learn about you in this study will be handled in a confidential manner, within the limits of the law. If we publish the results of the study in a scientific journal or book, we will not identify you. The Institutional Review Board (IRB) and other groups that have the responsibility of monitoring research may want to see study records which identify you as a participant in this study.

Contact Information – Who can you contact if you have questions, concerns, comments or complaints?

If you have questions now, feel free to ask us. If you have additional questions, concerns, comments or complaints later or you wish to report a problem which may be related to this study please contact:

Primary contact: Manuel Ángel Oscós-Sánchez MD can be reached at 210-358-3881(office) or 210-760-9390 (cell).

If primary is not available, contact: Dolores Oscós-Flores (Project Coordinator) can be reached at 210-358-3881 (office) or 210-563-0757 (cell).

The UT Health San Antonio committee that reviews research on human subjects (IRB) will answer any questions about your rights as a research subject, and take any concerns, comments or complaints you may wish to offer. You can contact the IRB by calling 210-567-8250, or by mail to IRB, UT Health San Antonio, Mail Code 7830, 7703 Floyd Curl Drive, San Antonio, TX 78229-3900.

Research Consent Signature Section

If you agree to participate in this study sign this section. You will be given a copy of this form to keep. You do not waive any of your legal rights by signing this form.

SIGN THIS FORM ONLY IF THE STATEMENTS LISTED BELOW ARE TRUE

- You have read the above information.
- Your questions have been answered to your satisfaction.

Child Participant Signature Section.

If you are a parent/guardian giving permission for your child, you and your child should sign in this section.

I voluntarily give consent for my child to participate in this study because I believe they want to take part and I believe it is in their best interest. I authorize the collection, use and sharing of my child's information as described in this form.

			AM PM
PRINTED Name of **Child** (less than 18 years old)	Signature of Child Indicating Assent (agreement)	Date	Time
PRINTED Name of **Adult Giving** Consent & Authorization for Child	Signature of Adult Giving Consent & Authorization for Child ☐Parent ☐Guardian ☐Legally Authorized Representative	Date	AM PM Time

Adult Participant Signature Section.

If you are 18 years old or older and the person that will be participating in the study, you are asked to sign this section. When you come to the data collection site, you must bring proof of your age.

I have voluntarily decided to take part in this research study. I authorize the collection, use and sharing of my information as described in this form.

			AM PM
PRINTED Name of Adult Participant	Signature of Adult Participant	Date	Time

THIS SECTION FOR UTHSA STAFF ONLY

			AM PM
PRINTED Name of Person Obtaining Consent & Authorization	Signature of Person Obtaining Consent & Authorization	Date	Time