#### Consent

University of Wisconsin - Madison Research Participant Information and Consent Form

Study Title: Assessment of Medical Schools and Native American Tribal Opportunities

Principal Investigator: Dr. Carolee Dodge Francis, Ed. D, School of Human Ecology, University of Wisconsin-

Madison (Email: dodgefrancis@wisc.edu)

#### **Investigators:**

William Swain (member of ANAMS policy committee)

MS3, University of Wisconsin School of Medicine and Public Health (Email: whswain@wisc.edu)

#### **Description of the research:**

You are invited to participate in a research study about assessing student interactions with their medical schools as it relates to rotations at Tribal healthcare facilities/Indian Health Service institutions.

You have been asked to participate because you are/were a member of the Association of Native American Medical Students.

The purpose of the research is to determine how Native medical students engage with their school for establishing Tribal rotations, and how medical schools can improve engagement in Native communities. Overall, our goal is to help facilitate partnerships between Native healthcare institutions and medical schools, and data obtained in this study might help shed light on ways to do this.

This study will include a single online Qualtrics survey.

This research will be conducted at the University of Wisconsin-Madison.

#### What will my participation involve?

If you decide to participate in this research, you will be asked to complete a brief online survey.

Your participation will last <10 minutes.

#### Are there any risks to me?

There will be no potential risks to participating in this research study. You may feel a little uncomfortable answering questions in this survey that rate your satisfaction towards your school in various aspects. The survey does not ask any identifying information such as your name, address, or phone number, and your answers will not be readily linked to you. In addition, this survey will not ask you to name your specific medical school. All responses to this survey will be reported as a group. Individual responses will not be reported.

### Are there any benefits to me?

There will be no direct benefits to you for participating in this survey. We are hoping to learn more about how schools are engaging Native communities and establishing clinical rotations at Tribal healthcare institutions. We hope that these results will then be used in the future to affect policies that will

encourage partnerships between Native healthcare institutions and medical schools.

## How will my confidentiality be protected?

This study is confidential. Neither your name nor any other identifiable information will be recorded.

Members of the study team will have access to data obtained from this survey. No personal identifying information will be collected from this survey. De-identified data collected from this survey could be used for future research studies or distributed to another investigator for future research studies without additional informed consent from you.

### Whom should I contact if I have questions?

You may ask any questions about the research at any time. If you have questions about the research during or after you complete the survey, you should contact:

William Swain (investigator) at whswain@wisc.edu

You can also contact the Principal Investigator, Dr. Carolee Dodge Francis, Ed.D. at dodgefrancis@wisc.edu with any questions.

If you decide not to participate or to withdraw from the study, you may do so without penalty.

#### **Voluntary Participation:**

Your participation in this study is voluntary. You may refuse to participate in this study or any part of this study. You may withdraw at any time. You are encouraged to ask questions about this study at the beginning or any time during the research study

# **Participation Consent:**

I have read the above information and agree to participate in this study. I have been able to ask questions about the research study. I am a member of the Association of Native American Medical Students.

Do you provide consent to participate in this study?
O Yes
○ No
Are you a current or past member of the Association of Native American Medical Students (ANAMS)?
O Yes
O No

# **Background information**

What is your ethnicity? (select multiple if applicable)

I am affiliated with a tribe (descendant of)

Did you grow up obtaining health services from the Indian Health Services (IHS) or another tribal healthcare service? (select multiple)

Yes - IHS

Yes - a different Tribal healthcare service

No

Information about your medical school

What state is your medical school in?
What degree(s) do you plan on obtaining?
■ MD
□ DO
☐ Pharm.D
☐ Ph.D
☐ Masters
□ NP
□ PA
Another option not listed
What IHS geographic location is your medical school located in? If unsure, please reference this link:
Alaska
Albuquerque
O Bemidji
O Billings
O California
O Great Plains
Nashville
Navajo
Oklahoma
O Phoenix
OPortland
O Tuscon
O I don't know

Does your medical school offer tribal rotations? (select multiple if applicable)

Yes - at IHS
Yes - at non-IHS tribal healthcare sites
□ No
☐ I am not sure
Did (or will) you complete a tribal rotation in medical school?
Yes, I have completed a tribal rotation
O I plan on completing a tribal rotation
O I don't plan on completing a tribal rotation
O I don't know yet
Did the ability to complete a tribal rotation influence your decision to go to your specific medical school?
O It strongly influenced my decision
O It somewhat influenced my decision
O It did not influence my decision

# Rank the following. These are questions about your medical school

Answer the following questions about your medical school

	Strongly agree	Somewhat agree	Somewhat disagree	Strongly disagree	l don't know
I feel a sense of community with Native peers at my institution	0	0	0	0	0
I am satisfied with my school's effort to recruit Native students	0	0	0	0	0
There is adequate scholarship funding at my school for Native students	0	0	0	0	0

	Strongly agree	Somewhat agree	Somewhat disagree	Strongly disagree	l don't know
I am satisfied with Native faculty representation and mentorship at my school	0	0	0	Ο	0
I am satisfied with my school's engagement with Native faculty and experts to contribute to lectures and other learning opportunities	0	0	0	0	0
I am satisfied with the amount of cultural competancy training as it relates to AI-AN health care delivery at my institution	0	0	0	0	0
I am satisfied with my school's education and training that exposes students to Native communities and health	0	0	0	0	0
I am satisfied with the amount of education of AI-AN health disparities at my institution	0	0	0	0	0
I am satisfied with the opportunities provided by my institution to do clinical electives in tribal communities	0	0	0	0	0
I am satisfied with my school's outreach to Native organizations	0	0	0	0	0
I am satisfied with my school's outreach to Native communities	0	0	0	0	0

# **Challenges and alleviating factors**

What challenges or barriers have you had to overcome to get to where you are today? Rank these options by dragging them into the box - you may choose up to 3.

If you chose more than 3, you will have to drag items out of the box in order to proceed.

## Items

Financial

Family related issues

Distance from family

Loss of culture

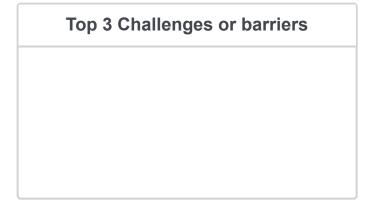
Imposter syndrome

Lack of role models

Unfamiliarity with the process of applying to medical school

First generation college graduate

First generation medical student



What factors have helped you get to where you are today? Rank these options by dragging them into the box - you may choose up to 3.

If you chose more than 3, you will have to drag items out of the box in order to proceed.

#### **Items**

Outreach programs through medical schools

Undergraduate outreach programs

AAIP (Association of American Indian Physicians)

Members of my home community

Family

Native mentors or role models

Financial assistance via scholarships or grants

Top 3 fa	ctors

A sense of community in my medical school

A sense of community in my undergraduate school

Native American communities face many health disparities. How might we address these issues?

This question is optional. Feel free to be as open-ended or succinct as you wish.

Please do not share any information that could make it possible identify you. If present, such information will be deleted from the research record.

# **Future plans**

**Psychiatry** 

Radiation oncology

Wh	nat field of medicine do you plan on going into?
0	Anesthesiology
0	Dermatology
0	Diagnostic radiology
0	Emergency Medicine
0	Family Medicine
0	Internal Medicine
0	Interventional radiology
0	Neurology
0	Ob/Gyn
0	Ophthalmology
0	Orthopedic surgery
0	Otolaryngology
0	Pathology
0	Pediatrics
0	Physical medicine and rehabilitation

0	Surgery (general)
0	Surgery (subspecialty)
0	Urology
Do	you plan on working for IHS in the future?
0	Yes - full time
0	Yes - part time
0	No
0	I am not sure
Do	you plan on working for a non-IHS Tribal healthcare institution in the future?
0	Yes - full time
0	Yes - part time
0	No
0	I am not sure yet

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