IRB# 2008N3890

**Consent Form**

**Texas State University at San Marcos**

You are being asked to participate in a research study. This form provides you with information about the study. The Principal Investigator, Tonia Howze, or her representative Dr. Stephen Springer can describe this study to you and answer all of your questions. Please read the information below and ask questions about anything you don’t understand before deciding whether or not to take part. Your participation is entirely voluntary and you can refuse to participate without penalty or loss of benefits to which you are otherwise entitled. If you wish you may keep a copy of this consent form.

My name is Tonia Howze and I am a graduate student attending Texas State University. I am requesting your permission to conduct a research study at the Judson Secondary Alternative School (JSAS), Judson Independent School District. I am currently pursuing an M.S.I.S. Degree. The Master’s of Science in Interdisciplinary Studies M.S.I.S. degree academic modules consists of an entry module (nine hours in effective communications), an academic module (21 hours), and an exit module (nine hours). I am currently working towards completing the exit module within my degree program. The Interdisciplinary Studies degree is highly individualized and is designed to provide the adult with various course options.

As part of my exit module, I have to complete a research study. The purpose of this research study is to administer a modified version of the Youth Risk Behavior Surveillance Survey and examine the types of health-risk behaviors (Intentional and unintentional injuries; tobacco use; alcohol and other drug use, sexual behaviors that contribute to intended pregnancy and sexually transmitted diseases (STDs) (including human immunodeficiency virus [HIV] infection); unhealthy dietary behaviors; and physical inactivity) adolescents are engaging in that may place them at a high health risk.

**Title of Research Study:** Youth and Health-Risk Behaviors

**Principal Investigators and Contact Telephone Numbers**: Tonia Howze, 210-867-2623. I am a graduate student attending Texas State University in San Marcos University.

**Funding source:**

Personal funds will be utilized. No compensation will be given to the survey participants.

**What is the purpose of this research study?**

The purpose of this research study is to examine the types of health-risk behaviors (Intentional and unintentional injuries; tobacco use; alcohol and other drug use, sexual behaviors that contribute to intended pregnancy and sexually transmitted diseases (STDs) (including human immunodeficiency virus [HIV] infection); unhealthy dietary behaviors; and physical inactivity) adolescents are engaging in that may place them at a high health risk.To determine if there is a correlation between middle and high school students and the types of health-risk behaviors they are engaging in that are unhealthy, habit-forming, addictive, and dangerous. Some of these behaviors could even lead to their death.

###### What will be done if you take part in this research study?

The Youth Risk Behavior Survey will be administered to middle and high school students. It is an 87 questions survey and it takes about 45 minutes to complete. It is strictly voluntary, as well as confidential.

**What are the possible discomforts and risks?**

The primary risk to participants is the discomfort that can occur from being tested. We will do everything that we can to minimize this discomfort and to put you at ease. You may decline to answer any question(s) and you can choose to discontinue answering the survey at any time.

If you wish to discuss the information above or any other risks you may experience, you may call the Principal Investigator listed on the front page of this form.

**What are the possible benefits to you or to others?**

Results from the study will be measured and conclusions drawn. Following this, a final report will be provided to school administrators based on the conclusions.

**If you choose to take part in this study, will it cost you anything?**

There are no costs associated with participating in this study.

**Will you receive compensation for your participation in this study?**

###### There is no compensation for participating in this study.

**What if you are injured because of the study?**

This study does not involve physical risk and no injuries are anticipated; however, no treatment will be provided for research related injury and no payment can be provided in the event of a medical problem.

**If you do not want to take part in this study, what other options are available to you?**

Participation in this study is entirely voluntary. You are free to refuse to be in the study, and your refusal will not influence academic success at the Judson Secondary Alternative School.

How can you withdraw from this research study?

If you wish to stop your participation in this research study for any reason, you should contact: Tonia Howze at 210-867-2623 or at [th1049@txstate.edu](mailto:th1049@txstate.edu) or razmti@aol.com. You are free to withdraw your consent and stop participation in this research study at any time without penalty. Throughout the study, the researchers will notify you of new information that may become available and that might affect your decision to remain in the study.

In addition, if you have questions about your rights as a research participant, please contact Dr. Springer, Occupational Education, (512) 245-2115.

###### How will your privacy and the confidentiality of your research records be protected?

If the results of this research are published or presented at scientific meetings, your identity will not be disclosed.

Authorized persons from the Institutional Review Board have the legal right to review research records and will protect the confidentiality of those records to the extent permitted by law. If the research project is sponsored then the sponsors also have the legal right to review your research records. Otherwise, your research records will not be released without your consent unless required by law or a court order.

**Will the researchers benefit from your participation in this study?**

There is no benefit to researchers participating in this study beyond publishing or presenting the results**.**

Participation is voluntary and participants may withdraw from the study at anytime without prejudice or jeopardy to their standing with the University and any other relevant organization/entity with which the participants is associated. Participants may choose to not answer any question(s) for any reason. Pertinent questions about the research, research participants’ rights, and/or research-related injuries to participants should be directed to the IRB chair, Dr. Jon Lasser ([512-245-3413-lasser@txstate.edu](mailto:512-245-3413-lasser@txstate.edu)), or to Ms. Becky Northcut, Compliance Specialist (512-245-2102).

**Signatures:**

You have been informed about this study’s purpose, procedures, possible benefits and risks, and you have received a copy of this Form. You have been given the opportunity to ask questions before you sign, and you have been told that you can ask other questions at any time. You voluntarily agree to participate in this study. By signing this form, you are not waiving any of your legal rights.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Printed Name of Participant Date**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Participant Date**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Principal Investigator Date**