



Data Collection Worksheet

Please Note: The Data Collection Worksheet (DCW) is a tool to aid integration of a PhenX protocol into a study. The PhenX DCW is not designed to be a data collection instrument. Investigators will need to decide the best way to collect data for the PhenX protocol in their study. Variables captured in the DCW, along with variable names and unique PhenX variable identifiers, are included in the PhenX Data Dictionary (DD) files.

Major Experiences of Discrimination

"In the following questions, we are interested in the way other people have treated you or your *beliefs* about how other people have treated you. Can you tell me if *any* of the following has ever happened to you:"

1. At any time in your life, have you ever been **unfairly** fired?

Yes

No

1.1. If "yes" follow-up with: What do you think was the **main** reason for this experience?

1 Your ancestry or national origin

2 Your gender

3 Your race

4 Your age

5 Your religion

6 Your height

7 Your weight

8 Some other aspect of your physical appearance

9 Your sexual orientation

10 Your education or income level

OTHER POSSIBLE CATEGORIES TO CONSIDER

1 A physical disability

2 [] Your shade of skin color

3 [] Your tribe

Other (SPECIFY) _____

1.2. When was the last time this happened?

1 [] Past week

2 [] Past month

3 [] Past year

4 [] More than a year ago

1.3. How many times has this happened during your lifetime?

2. For **unfair** reasons, have you ever not been hired for a job?

[] Yes

[] No

2.1. If "yes" follow-up with: What do you think was the **main** reason for this experience?

1 [] Your ancestry or national origin

2 [] Your gender

3 [] Your race

4 [] Your age

5 [] Your religion

6 [] Your height

7 [] Your weight

8 [] Some other aspect of your physical appearance

9 [] Your sexual orientation

10 [] Your education or income level

OTHER POSSIBLE CATEGORIES TO CONSIDER

1 [] A physical disability

2 [] Your shade of skin color

3 Your tribe

Other (SPECIFY) _____

2.2. When was the last time this happened?

1 Past week

2 Past month

3 Past year

4 More than a year ago

2.3. How many times has this happened during your lifetime?

3. Have you ever been **unfairly** denied a promotion?

Yes

No

3.1. If "yes" follow-up with: What do you think was the **main** reason for this experience?

1 Your ancestry or national origin

2 Your gender

3 Your race

4 Your age

5 Your religion

6 Your height

7 Your weight

8 Some other aspect of your physical appearance

9 Your sexual orientation

10 Your education or income level

OTHER POSSIBLE CATEGORIES TO CONSIDER

1 A physical disability

2 Your shade of skin color

3 Your tribe

Other (SPECIFY) _____

3.2. When was the last time this happened?

- 1 Past week
- 2 Past month
- 3 Past year
- 4 More than a year ago

3.3. How many times has this happened during your lifetime?

4. Have you ever been **unfairly** stopped, searched, questioned, physically threatened or abused by the police?

- Yes
- No

4.1. If "yes" follow-up with: What do you think was the **main** reason for this experience?

- 1 Your ancestry or national origin
- 2 Your gender
- 3 Your race
- 4 Your age
- 5 Your religion
- 6 Your height
- 7 Your weight
- 8 Some other aspect of your physical appearance
- 9 Your sexual orientation
- 10 Your education or income level

OTHER POSSIBLE CATEGORIES TO CONSIDER

- 1 A physical disability
- 2 Your shade of skin color
- 3 Your tribe

Other (SPECIFY) _____

4.2. When was the last time this happened?

1 Past week

2 Past month

3 Past year

4 More than a year ago

4.3. How many times has this happened during your lifetime?

5. Have you ever been **unfairly** discouraged by a teacher or advisor from continuing your education?

Yes

No

5.1. If "yes" follow-up with: What do you think was the **main** reason for this experience?

1 Your ancestry or national origin

2 Your gender

3 Your race

4 Your age

5 Your religion

6 Your height

7 Your weight

8 Some other aspect of your physical appearance

9 Your sexual orientation

10 Your education or income level

OTHER POSSIBLE CATEGORIES TO CONSIDER

1 A physical disability

2 Your shade of skin color

3 Your tribe

Other (SPECIFY) _____

5.2. When was the last time this happened?

- 1 Past week
- 2 Past month
- 3 Past year
- 4 More than a year ago

5.3. How many times has this happened during your lifetime?

6. Have you ever been **unfairly** prevented from moving into a neighborhood because the landlord or a realtor refused to sell or rent you a house or apartment?

- Yes
- No

6.1. If "yes" follow-up with: What do you think was the **main** reason for this experience?

- 1 Your ancestry or national origin
- 2 Your gender
- 3 Your race
- 4 Your age
- 5 Your religion
- 6 Your height
- 7 Your weight
- 8 Some other aspect of your physical appearance
- 9 Your sexual orientation
- 10 Your education or income level

OTHER POSSIBLE CATEGORIES TO CONSIDER

- 1 A physical disability
- 2 Your shade of skin color
- 3 Your tribe

Other (SPECIFY) _____

6.2. When was the last time this happened?

- 1 Past week
- 2 Past month
- 3 Past year
- 4 More than a year ago

6.3. How many times has this happened during your lifetime?

7. Have you ever moved into a neighborhood where neighbors made life difficult for you or your family?

- Yes
- No

7.1. If "yes" follow-up with: What do you think was the **main** reason for this experience?

- 1 Your ancestry or national origin
- 2 Your gender
- 3 Your race
- 4 Your age
- 5 Your religion
- 6 Your height
- 7 Your weight
- 8 Some other aspect of your physical appearance
- 9 Your sexual orientation
- 10 Your education or income level

OTHER POSSIBLE CATEGORIES TO CONSIDER

- 1 A physical disability
- 2 Your shade of skin color
- 3 Your tribe

Other (SPECIFY) _____

7.2. When was the last time this happened?

- 1 Past week
- 2 Past month
- 3 Past year
- 4 More than a year ago

7.3. How many times has this happened during your lifetime?

8. Have you ever been **unfairly** denied a bank loan?

- Yes
- No

8.1. If "yes" follow-up with: What do you think was the **main** reason for this experience?

- 1 Your ancestry or national origin
- 2 Your gender
- 3 Your race
- 4 Your age
- 5 Your religion
- 6 Your height
- 7 Your weight
- 8 Some other aspect of your physical appearance
- 9 Your sexual orientation
- 10 Your education or income level

OTHER POSSIBLE CATEGORIES TO CONSIDER

- 1 A physical disability
- 2 Your shade of skin color
- 3 Your tribe

Other (SPECIFY) _____

8.2. When was the last time this happened?

- 1 Past week
- 2 Past month
- 3 Past year
- 4 More than a year ago

8.3. How many times has this happened during your lifetime?

9. Have you ever received service from someone such as a plumber or car mechanic that was worse than what other people get?

- Yes
- No

9.1. If “yes” follow-up with: What do you think was the **main** reason for this experience?

- 1 Your ancestry or national origin
- 2 Your gender
- 3 Your race
- 4 Your age
- 5 Your religion
- 6 Your height
- 7 Your weight
- 8 Some other aspect of your physical appearance
- 9 Your sexual orientation
- 10 Your education or income level

OTHER POSSIBLE CATEGORIES TO CONSIDER

- 1 A physical disability
- 2 Your shade of skin color
- 3 Your tribe

Other (SPECIFY) _____

9.2. When was the last time this happened?

- 1 Past week
- 2 Past month
- 3 Past year
- 4 More than a year ago

9.3. How many times has this happened during your lifetime?

The Everyday Discrimination Scale

In your day-to-day life, how often do any of the following things happen to you?

10. You are treated with less courtesy than other people are.

- 1 Almost every day
- 2 At least once a week
- 3 A few times a month
- 4 A few times a year
- 5 Less than once a year
- 6 Never

10.1. If "A few times a year" or more frequently, follow-up with: What do you think is the **main** reason for this experience?

- 1 Your ancestry or national origin
- 2 Your gender
- 3 Your race
- 4 Your age
- 5 Your religion
- 6 Your height
- 7 Your weight
- 8 Some other aspect of your physical appearance
- 9 Your sexual orientation
- 10 Your education or income level

OTHER POSSIBLE CATEGORIES TO CONSIDER

- 1 A physical disability
- 2 Your shade of skin color
- 3 Your tribe

Other (SPECIFY) _____

11. You are treated with less respect than other people are.

- 1 Almost every day
- 2 At least once a week
- 3 A few times a month
- 4 A few times a year
- 5 Less than once a year
- 6 Never

11.1. If "A few times a year" or more frequently, follow-up with: What do you think was the **main** reason for this experience?

- 1 Your ancestry or national origin
- 2 Your gender
- 3 Your race
- 4 Your age
- 5 Your religion
- 6 Your height
- 7 Your weight
- 8 Some other aspect of your physical appearance
- 9 Your sexual orientation
- 10 Your education or income level

OTHER POSSIBLE CATEGORIES TO CONSIDER

- 1 A physical disability
- 2 Your shade of skin color

3 [] Your tribe

Other (SPECIFY) _____

12. You receive poorer service than other people at restaurants or stores.

1 [] Almost every day

2 [] At least once a week

3 [] A few times a month

4 [] A few times a year

5 [] Less than once a year

6 [] Never

12.1. If "A few times a year" or more frequently, follow-up with: What do you think is the **main** reason for this experience?

1 [] Your ancestry or national origin

2 [] Your gender

3 [] Your race

4 [] Your age

5 [] Your religion

6 [] Your height

7 [] Your weight

8 [] Some other aspect of your physical appearance

9 [] Your sexual orientation

10 [] Your education or income level

OTHER POSSIBLE CATEGORIES TO CONSIDER

1 [] A physical disability

2 [] Your shade of skin color

3 [] Your tribe

Other (SPECIFY) _____

13. People act as if they think you are not smart.

- 1 Almost every day
- 2 At least once a week
- 3 A few times a month
- 4 A few times a year
- 5 Less than once a year
- 6 Never

13.1. If "A few times a year" or more frequently, follow-up with: What do you think is the **main** reason for this experience?

- 1 Your ancestry or national origin
- 2 Your gender
- 3 Your race
- 4 Your age
- 5 Your religion
- 6 Your height
- 7 Your weight
- 8 Some other aspect of your physical appearance
- 9 Your sexual orientation
- 10 Your education or income level

OTHER POSSIBLE CATEGORIES TO CONSIDER

- 1 A physical disability
- 2 Your shade of skin color
- 3 Your tribe

Other (SPECIFY) _____

14. People act as if they are afraid of you.

- 1 Almost every day
- 2 At least once a week
- 3 A few times a month

4 A few times a year

5 Less than once a year

6 Never

14.1. If "A few times a year" or more frequently, follow-up with: What do you think is the **main** reason for this experience?

1 Your ancestry or national origin

2 Your gender

3 Your race

4 Your age

5 Your religion

6 Your height

7 Your weight

8 Some other aspect of your physical appearance

9 Your sexual orientation

10 Your education or income level

OTHER POSSIBLE CATEGORIES TO CONSIDER

1 A physical disability

2 Your shade of skin color

3 Your tribe

Other (SPECIFY) _____

15. People act as if they think you are dishonest.

1 Almost every day

2 At least once a week

3 A few times a month

4 A few times a year

5 Less than once a year

6 Never

15.1. If "A few times a year" or more frequently, follow-up with: What do you think is the **main** reason for this experience?

- 1 [] Your ancestry or national origin
- 2 [] Your gender
- 3 [] Your race
- 4 [] Your age
- 5 [] Your religion
- 6 [] Your height
- 7 [] Your weight
- 8 [] Some other aspect of your physical appearance
- 9 [] Your sexual orientation
- 10 [] Your education or income level

OTHER POSSIBLE CATEGORIES TO CONSIDER

- 1 [] A physical disability
- 2 [] Your shade of skin color
- 3 [] Your tribe

Other (SPECIFY) _____

16. People act as if they're better than you are.

- 1 [] Almost everyday
- 2 [] At least once a week
- 3 [] A few times a month
- 4 [] A few times a year
- 5 [] Less than once a year
- 6 [] Never

16.1. If "A few times a year" or more frequently, follow-up with: What do you think is the **main** reason for this experience?

- 1 [] Your ancestry or national origin

- 2 [] Your gender
- 3 [] Your race
- 4 [] Your age
- 5 [] Your religion
- 6 [] Your height
- 7 [] Your weight
- 8 [] Some other aspect of your physical appearance
- 9 [] Your sexual orientation
- 10 [] Your education or income level

OTHER POSSIBLE CATEGORIES TO CONSIDER

- 1 [] A physical disability
- 2 [] Your shade of skin color
- 3 [] Your tribe

Other (SPECIFY) _____

17. You are called names or insulted.

- 1 [] Almost every day
- 2 [] At least once a week
- 3 [] A few times a month
- 4 [] A few times a year
- 5 [] Less than once a year
- 6 [] Never

17.1. If "A few times a year" or more frequently, follow-up with: What do you think is the **main reason for this experience?**

- 1 [] Your ancestry or national origin
- 2 [] Your gender
- 3 [] Your race
- 4 [] Your age

- 5 [] Your religion
- 6 [] Your height
- 7 [] Your weight
- 8 [] Some other aspect of your physical appearance
- 9 [] Your sexual orientation
- 10 [] Your education or income level

OTHER POSSIBLE CATEGORIES TO CONSIDER

- 1 [] A physical disability
- 2 [] Your shade of skin color
- 3 [] Your tribe

Other (SPECIFY) _____

18. You are threatened or harassed.

- 1 [] Almost every day
- 2 [] At least once a week
- 3 [] A few times a month
- 4 [] A few times a year
- 5 [] Less than once a year
- 6 [] Never

18.1. If "A few times a year" or more frequently, follow-up with: What do you think is the **main reason for this experience?**

- 1 [] Your ancestry or national origin
- 2 [] Your gender
- 3 [] Your race
- 4 [] Your age
- 5 [] Your religion
- 6 [] Your height
- 7 [] Your weight

8 Some other aspect of your physical appearance

9 Your sexual orientation

10 Your education or income level

OTHER POSSIBLE CATEGORIES TO CONSIDER

1 A physical disability

2 Your shade of skin color

3 Your tribe

Other (SPECIFY) _____

19. You are followed around in stores.

1 Almost every day

2 At least once a week

3 A few times a month

4 A few times a year

5 Less than once a year

6 Never

19.1. If "A few times a year" or more frequently, follow-up with: What do you think is the **main** reason for this experience?

1 Your ancestry or national origin

2 Your gender

3 Your race

4 Your age

5 Your religion

6 Your height

7 Your weight

8 Some other aspect of your physical appearance

9 Your sexual orientation

10 Your education or income level

OTHER POSSIBLE CATEGORIES TO CONSIDER

1 A physical disability

2 Your shade of skin color

3 Your tribe

Other (SPECIFY) _____

Protocol source: <https://www.phenxtoolkit.org/protocols/view/210302>