Sample Demographic Questions

Self-identification of Ethnic/Racial background

Which of the following reflect your ethnic/racial background? (Select all that apply)

- 1. East Asian
- 2. South Asian
- 3. South East Asian
- 4. Asian, Other background
- 5. Black African
- 6. Black Caribbean
- 7. Black North American
- 8. Black, Other background
- 9. Indo-Caribbean
- 10. Latin American
- 11. Middle Eastern
- 12. White European
- 13. White North American
- 14. White, Other background
- 15. An ethnic/racial background not listed here
- 16. Don't know
- 17. Prefer not to answer

Self-identification of Indigenous ancestry and/or identity

Select the description(s) that you self-identify with: (Select all that apply)

- 1. First Nation (Status/Non-Status)
- 2. Métis
- 3. Inuk (Inuit)
- 4. I use an alternative term to describe my Indigenous ancestry and/or identity (for example, Anishinaabe, Kanien'kehá:ka, Treaty #3, etc.)
- 5. Prefer not to answer

Note: You may want to add an option for "Indigenous North American", especially if you are not using a separate section for self-identification of Indigenous ancestry and/or identity.

Self-identification Gender Identity

Which term best describes your gender identity?

- 1. Woman / Girl
- 2. Man / Boy
- 3. Transgender
- 4. Two Spirit
- 5. Non-binary
- 6. Gender fluid
- 7. Gender queer
- 8. Gender non-conforming
- 9. A gender identity not listed here
- 10. Prefer not to answer

Self-Identification Sex

What sex were you assigned at birth?

- 1. Male
- 2. Female
- 3. Intersex
- 4. Prefer not to answer

Self-Identification Sexual Orientation

Which term best describes your sexual orientation/attraction?

- 1. Asexual
- 2. Bisexual
- 3. Fluid
- 4. Heterosexual (straight)
- 5. Homosexual (gay or lesbian)
- 6. Pansexual
- 7. Queer
- 8. Questioning
- 9. Two Spirit
- 10. A sexual orientation not listed here
- 11. Prefer not to answer

Self-Identification Disability

Would you describe yourself as having any disabilities or long-term conditions? (Select all that apply)

- 1. Physical disability
- 2. Chronic (long-term) physical condition or disease
- 3. Intellectual or learning disability
- 4. Mental health condition
- 5. No
- 6. Prefer not to answer