Sample Question Formats For Hispanic Origin, Race, Class And Gender. Sexual Orientation, Disability, Veteran Status

INSTITUTE FOR THE STUDY OF "RACE" & SOCIAL JUSTICE NM STATEWIDE RACE, GENDER, CLASS DATA POLICY CONSORTIUM PLEASE SEND SUGGESTIONS TO DR. NANCY LOPEZ, (<u>nlopez@unm.edu</u>) FOR MORE INFORMATION VISIT: <u>race.unm.edu</u>

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1. Hispanic Origin: Are you of Hispanic, Latino or Spanish origin? (check all that apply)

No, not of Hispanic or Latino origin

Yes, Mexican, Mexican American, Chicano

Yes, Puerto Rican

Yes, Cuban

Yes, another Hispanic, Latino or Spanish Group (e.g. Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, etc.) SPECIFY GROUP (S):

2. Race: What is your race or color? (You may mark more than one; however please keep in mind that this information is used to detect if there is discrimination in housing, voting, education and other social outcomes based on race or color, which is usually based on how others perceive your race, skin color and other physical attributes that are related to what you look like)

____ White (Non Hispanic/Latina/o/x)

_____ Black, African American, or Negro (Non Hispanic/Latina/o/x)

_____ American Indian or Alaska Native, (Non Hispanic/Latina/o/x) NAME OF ENROLLED TRIBE: _____

_ Asian or Asian American, (Non Hispanic/Latina/o/x)

NAME OF NATIONAL ORIGIN:_____

- _____ Hispanic/Latina(o) White
- _____ Hispanic/Latina(o) Afro-Latina(o)/Black
- _____ Hispanic/Latina(o) Mestiza(o)/Brown
- _____ Hispanic/Latina(o) Indígena / Indigenous Pueblo of Latin America/Brown
- _____ Middle Eastern / Arab / Brown (Non Hispanic/Latina/o/x)
- _____ Some other Race: (Please write in: ______)

ANCESTRY OR ETHNICITY

3. What is your ethnicity, national origin (s) or distant ancestry? (Write in:______ For example: German, Haitian, Italian, Arab, Chinese, Somali, Italian, etc.)

EDUCATIONAL ATTAINMENT

- 4. What is the highest degree or level of school that you completed? (Mark one box).
- ____ Less than high school
- _____ High School Graduate; high school DIPLOMA or the equivalent (for example: GED)
- ____ Some college credit one or more year of college, no degree
- ____ Associates degree (for example: AA, AS)
- ____ Bachelor's degree (for example: BA, AB, BS)
- ____ Master's degree (for example: MA, MS, MEng, EEd, MSW, MBA)
- ____ Professional Degree (for example: MD, DDS, DVM, LLB, JD)
- ____ Doctorate Degree (for example: PhD, EdD)
- ____ Unknown/Don't Know
- 5. Was this in the U.S. or somewhere else? If somewhere else write in: _____

OCCUPATIONAL STATUS

6. Think back to the last three jobs you had. Starting from your current occupation and working backwards, Please list occupations and job titles.

a.) Current Occupation_____ Job Title:_____

 b.) Previous Occupation
 Job Title:

 c.) Previous Occupation
 Job Title:

CLASS ORIGINS: PARENTAL EDUCATIONAL ATTAINMENT AND OCCUPATIONAL STATUS

7. The next questions are about your childhood. Think back to when you were 16 years old. What is the highest degree or level of school that parent or legal guardian #1 completed? (Mark one box).

- ____ Less than high school
- _____ High School Graduate; high school DIPLOMA or the equivalent (for example: GED)
- ____ Some college credit one or more year of college, no degree
- ____ Associates degree (for example: AA, AS)
- ____ Bachelor's degree (for example: BA, AB, BS)
- ____ Master's degree (for example: MA, MS, MEng, EEd, MSW, MBA)
- ____ Professional Degree (for example: MD, DDS, DVM, LLB, JD)
- ____ Doctorate Degree (for example: PhD, EdD)
- ____ Unknown/Don't Know

8. Was this in the U.S. or somewhere else? If somewhere else write in:

9. Think back to when you were 16 years old. What is the highest degree or level of school that parent or legal guardian #2 completed? (Mark one box).

- ____ Less than high school
- ____ High School Graduate; high school DIPLOMA or the equivalent (for example: GED)
- ____ Some college credit one or more year of college, no degree
- ____ Associates degree (for example: AA, AS)
- ____ Bachelor's degree (for example: BA, AB, BS)
- ____ Master's degree (for example: MA, MS, MEng, EEd, MSW, MBA)
- ____ Professional Degree (for example: MD, DDS, DVM, LLB, JD)
- ____ Doctorate Degree (for example: PhD, EdD)

10. Was this in the U.S. or somewhere else? If somewhere else write in:

GENERATIONAL STATUS (NOT TO BE ASKED ON DECCENIAL CENSUS AS THIS WILL HARM THE ACCURACY OF A FULL COUNT AND RESOURCES FOR VULNERABLE COMMUNITIES); COULD BE INCLUDED IN AMERICAN COMMUNITY SURVEY)

11. What is your place of birth? _____(City, State, Country)

a.) If born abroad, at what age did you come to the U.S.?

12. What is the place of birth of parent 1/legal guardian 1? _____(City, State, Country)

13. What is the place of birth of parent 2/legal guardian 2? _____(City, State, Country)

PARENTAL STATUS

- 14. Are you a parent? _____
- 15. How many children do you have? _____
 - a.) Of these, how many are under age 18?_____
 - b.) Of these, how many are 18 or older?_____

PARTNER STATUS

16. Are you married, partnered, divorced, widowed?

IF PARTNERED/MARRIED/DOMESTIC PARTNERSHIP PLEASE PROVIDE EDUCATIONAL ATTAINMENT AND OCCUPATION OF PARTNER

- 17. What is the highest degree or level of school that partner/spouse completed? (Mark one box).
- ____ Less than high school
- _____ High School Graduate; high school DIPLOMA or the equivalent (for example: GED)
- ____ Some college credit one or more year of college, no degree
- ____ Associates degree (for example: AA, AS)
- ____ Bachelor's degree (for example: BA, AB, BS)
- ____ Master's degree (for example: MA, MS, MEng, EEd, MSW, MBA)
- ____ Professional Degree (for example: MD, DDS, DVM, LLB, JD)
- ____ Doctorate Degree (for example: PhD, EdD)
- ____ Unknown/Don't Know

18. TOTAL HOUSEHOLD INCOME

What was your total combined household income in 2016 before taxes. This question is completely confidential and just used to help classify the responses, but it is very important for our research. Please circle the appropriate response.

Less than \$20,000 1
8

Over \$250,000	
9	
Don't Know	
10	
11	

19. HOUSEHOLD COMPOSITION

How many people live in your household? Total: _____

Of these please breakdown the numbers by age category

Write in #: _____ Adults Ages 18-64

Write in #: _____ Children 0-17

Write in #: _____ Elderly over the age of 65

20. What is your current age: _____

I am required to ask this next question. Again all of these responses are voluntary. You may skip over any question.

<u>GENDER</u>

21.	Are you a man or woman?		
Woma	n	•••••	1
Man			2
Transg	ender	.3	
Refuse	d	99	

SEXUAL IDENTITY Source: National Health Interview Survey (NHIS, 2014)

Which of the following best describes how you think of yourself? (for adults18+)

- 1. Lesbian or gay
- 2. Straight, that is not lesbian or gay
- 3. Bisexual
- 4. Something else, Write in: _____
- 5. Don't Know

6. Refused

Preferred Identity (in addition to or not listed above) Write in:

SEX ASSIGNED AT BIRTH

What sex were you assigned at birth, on your original birth certificate?

- 1. Female
- 2. Male

Just to confirm, you mentioned that on your original birth certificate your sex was assigned as ______, but know you identify as (man, woman, transgendered)?

DISABILITY

Do you have a disability? ____ Yes ____No ____Refused

VETERAN STATUS

- 1. Have you served in the military?
YesNoRefused
- 2. How long?____
- 3. Have you experienced an injury, which has resulted in a disability?
- 4. Are you using your GI or Veterans benefits to finance your education?

VALUE ADDED QUESTIONS FOR ASSESSING DISCRIMINATION AGAINST VISIBLE MINORITIES IN VOTING, EMPLOYMENT, HOUSING/POVERTY, EDUCATION, ETC.

- 1. STREET RACE: If you were walking down the street, what race do you think others who do not know you personally would automatically assume you were, based on what you look like? (choose one)
- _____ White (Non-Hispanic)
- _____ Black (Non-Hispanic)
- _____ Native American
- _____ Asian
- _____ Arab/Middle Eastern
- _____ Hispanic/Latino(a)
- _____ Some other Race: (Please write in: _____)

2. SKIN COLOR: We are interested in how you would describe your appearance. How would you describe your skin color with 1 being very light and 5 being very dark or some number in between? How would you describe your skin color?

Very light1
Light2
Medium
Dark4
Very dark5
Don't know88
Refused99

- 3. RACIALIZATION: Have you ever been mistaken as being another race based on what you look like? If so, list the top three in order of frequency, starting with the race that you are most often assumed to be.
 - a. b.
 - c.

4. **STREET GENDER:** If you were walking down the street, how would other Americans who do not know you personally identify your gender based on what you look like? Would you say:

____ Man ___ Woman ____ Transgender ____ Other? Write in: _____

5. STREET SEXUALITY: If you were walking down the street, how would other Americans who do not know you personally identify your sexual orientation? Would you say: ____ Straight/Heterosexual __ Gay/Queer ___ Transgender ___ Other? Write in: _____