

## Demographic Data Collection Project - DRAFT

### Demographic Data Collection Project

As you complete the questions below, we encourage you to keep in mind the following:

- All questions are optional, and a “prefer not to answer” is available throughout.
- While response options are designed to be as inclusive as possible, they are not exhaustive. Write-in fields are provided for all options.

### Race and Ethnicity

**Do you identify as First Nations, Métis and/or Inuit?**

- Yes
- No
- *(Open comment box)*
- I prefer not to answer

**If you answered yes, please select the identity/identities that feel most accurate for you.**

You may choose more than one or choose to write your own.

- Yes, First Nations
- Yes, Métis
- Yes, Inuit
- Yes, I identify with a group(s) not listed – *(Open comment box)*
- I prefer not to answer

**What is your ethnic or cultural origin(s)?**

Ethnic or cultural origin refers to the background of your ancestors and may differ from your citizenship, nationality, language, or place of birth. Many individuals may identify with multiple origins. For examples, please refer to the [Anti-Racism Data Standards](#).

Please list as many ethnic or cultural origins that feel the most accurate to you.

- *(Open comment box)*
- I prefer not to answer

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### Which race category best describes you?

Please select all options that apply to you. You may choose more than one or write your own.

In our society, race is often used to describe people based principally on physical traits (phenotypes) such as skin colour. Racial categories are not based on science or biology but on differences that society has created (i.e. “socially constructed”), with significant consequences for people’s lives. Racial categories can overlap with ethnic, cultural or religious identities.

Please select all options that apply to you or write in your own.

- Black
- Caribbean

(Additional selection box)

What were the racial origins of your ancestors? You may choose more than one response or write your own.

- Afro-Caribbean
  - Black
  - East Asian
  - Indigenous
  - Indo-Caribbean
  - Latinx
  - South Asian
  - Southeast Asian
  - I identify with a group(s) not listed - *(Open comment box)*
  - I prefer not to answer
- 
- East Asian
  - Indigenous
  - Latinx
  - Middle Eastern
  - Multiracial – please write in how you identify - *(Open comment box)*
  - South Asian
  - Southeast Asian
  - White
  - I identify with a group(s) not listed - *(Open Text Box)*
  - I prefer not to answer

## Demographic Data Collection Project - DRAFT

### Religion and/or Spiritual Affiliation

#### What is your religion and/or spiritual affiliation?

Please select all options that apply to you. You may choose more than one or write your own.

- Atheist
- Buddhist
- Christian
- Hindu
- Indigenous spirituality
- Jewish
- Multifaith – please write in how you identify – (*Open Text Box*)
- Muslim
- Sikh
- No religion/agnostic
- I identify with other religion(s) or spiritual affiliation(s) not listed – (*Open comment box*)
- I prefer not to answer

## Demographic Data Collection Project - DRAFT

### Languages Spoken

**What language(s), other than English or French, can you speak well enough to conduct a conversation?**

Please select one response.

- None
- Please write in other language(s) you speak- (*Open comment box*)
- I prefer not to answer

## Demographic Data Collection Project - DRAFT

### Disability

A formal diagnosis is not required to identify as a person living with a disability.

#### **Do you identify as a person with a disability?**

Please select all options that apply to you. You may choose more than one or write your own.

- No
- Yes, physical disability
- Yes, mental health disability
- Yes, neurodivergent
- Yes, I identify with a group(s) not listed - (*Open comment box*)
- I prefer not to answer

#### **If you answered “yes”, please select all options that apply to you.**

You may choose more than one or write your own.

- Attention-deficit hyperactivity disorder (ADHD)
- Autism spectrum disorder (ASD)
- Chronic health condition (e.g., Auto immune conditions, Crohn’s disease, diabetes, cancer, etc.).
- Concussion/head injury
- Learning disability (LD)
- Mental health condition (e.g., schizophrenia, depression, anxiety disorder, bipolar disorder, PTSD, etc.)
- Mobility disability (e.g., Cerebral palsy, arthritis)
- Sensory disability (e.g., vision or hearing)
- Temporary disability/injury (e.g., broken bone)
- I identify with a disability or disabilities not listed - (*Open comment box*)
- I prefer not to answer

## Demographic Data Collection Project - DRAFT

### Gender Identity

Please select the option(s) that best describes your gender identity.

You may choose more than one or write in your own.

- Agender
- Cisgender
- Genderfluid
- Genderqueer
- Man
- Nonbinary
- Questioning
- Trans
- Two-Spirit
- Woman
- I identify with an identity/ies not listed - (*Open comment box*)
- I prefer not to answer

**Do you identify as trans or consider yourself to be a part of a trans community?**

Please select one response.

- Yes
- No
- Not sure
- (*Open comment box*)
- I prefer not to answer

## Demographic Data Collection Project - DRAFT

### Sexually Diverse Inclusion

Please select the option(s) that you feel most accurately describe your sexual orientation.

You may choose more than one or write your own.

- Asexual
- Bisexual
- Gay
- Heterosexual/Straight
- Lesbian
- Pansexual
- Queer
- Questioning
- Two-Spirit
- I identify with an identity/ies not listed - (*Open comment box*)
- I prefer not to answer