Everyday Discrimination Scale and Heightened Vigilance Scales

Read the following questions carefully, and respond with the choice(s) that most accurately represents you. Please answer all the questions.

In your day-to-day life how often have any of the following things happened to you?											
,,,	Almost everyday	At least once a week		A few times a year	Less than once a year	Never					
You are treated with less courtesy or respect than other people.	0	0	0	0	0	0					
You receive poorer service than other people at restaurants or stores.	0	0	0	0	0	0					
People act as if they think you are not smart.	0	0	0	0	0	0					
People act as if they are afraid of you.	\circ	0	0	0	0	0					
You are threatened or harassed.	0	0	0	0	0	0					
If you answered "A few times a year frequently to at least one question" What do you think is the main reas experiences? (Check all that apply)	☐ Your gen ☐ Your race ☐ Your age ☐ Your heig ☐ Your wei ☐ Some otl ☐ Your sex ☐ Your edu ☐ A physice ☐ Your sha	Your ancestry or national origins Your gender Your race Your age Your religion Your height Your weight Some other aspect of your physical appearance Your sexual orientation Your education or income level A physical disability Your shade of skin color Other (SPECIFY)									
In dealing with these day-to	-day aynar	iences that	vou just told	d me about	how often c	–					
in dealing with these day-to	Very often	Fairly oft	•		dly ever	Never					
Think in advance about the kinds of problems you are likely to experience?	0	0	C		0	0					
Try to prepare for possible insults before leaving home?	0	\circ	C)	0	0					

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Feel that you always have to be very careful about your appearance to get good service or avoid being harassed?	0	0	0	0	0
Carefully watch what you say and how you say it?	0	0	0	0	0
Carefully observe what happens around you?	0	0	0	0	0
Try to avoid certain social situations and places?	\circ	0	0	0	0

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