

Supplemental Online Content

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This supplemental material has been provided by the authors to give readers additional information about their work.

eTable 1. Interview Guide

Category	Example questions	Example follow-up questions
Background	1. Please tell me about yourself (i.e., your work, your medical condition that led you to participating in a clinical research study, etc.) 2. What has been your overall experience navigating the healthcare system in general? 3. What's one word you would use to describe what it's like being a person of color in clinical research?	
Experience in clinical research	How did you learn about the study you participated in?	- Could you tell me more about that study? - Who referred you? - What was the recruitment process like? - How would you describe your interaction with the healthcare provider? The staff?
	What types of racial dynamics have you encountered <i>while navigating the clinical research space, leading up to a study</i> ? What types of racial microaggressions have you experienced <i>while participating in a clinical research study</i> ?	- What were the circumstances? When did this happen? Who was the person? (Healthcare provider, staff, etc.)
Effects	How did this interaction(s) affect you? Future interactions with this person?	- How does this affect your perception toward clinical research? Willingness to participate in a similar study in the future? - How does this interaction(s) impact how you interact with this person? (i.e., communication, trust, etc.) -What did you do in response? (i.e., intervene? What was the response?)
Buffers	What would have made your life easier navigating the clinical research space as a person of color?	What do you want sponsors and organizations to know

eTable 2. Themes and Sample Quotations

Theme	Sample quotation
2 nd class citizen	It wasn't until my name wasn't called. I didn't get called pretty much until the end, and it was mostly, you know, Caucasian people in the waiting room and there was one other minority. I think he was Hispanic and it was just me. So, it was me and him left. They called everybody in, everybody got processed...got the instructions and everything like that. And when it was time, maybe 2 hours or like two 2 1/2 hours ...and we still didn't get called. <i>African American man, 27</i>
	I went there a little before 3:00PM. I was probably 10 minutes early. Unfortunately, they let other people cut in line ahead of me. People who had appointment times after me were being seen by the doctor. If you want me to wait 10-20 minutes, that's fine. But 40 minutes or beyond? No way. That's too much, right? <i>Asian American man, 63</i>
Assumptions incompetence	One particular staff member... I've worked in corporate America, so I understand microaggressions ...I call it closet racism...She was overly explaining simple things, as if I didn't comprehend, to the point that I had to say. "I get it. I understand. It's common sense, like some things are. I read over everything. I got it. If I have questions I will reach out." But it was this overexplaining things and not study-related just basic things, as if I didn't understand. <i>African American woman, 46</i>
	The infusion nurse [who I normally see] went on vacation. So, another nurse arrives and I get my IL2 and I get my Benadryl and another nurse comes in, and they have to sign off on what's happening. They announce it. We're about to give [participant] IL2 whatever millimeters or ounces of IL2 at this rate, and it was half an hour, and I woke up out of my Benadryl stupor, and I said, "No, no, that isn't correct. It's supposed to be an hour." And she said "Well, that's not what it says here" and I said, "I've been doing this for almost 2 years. It's supposed to be an hour." ...Turn those machines off and go see the doctor...see the doctor, and then you come back. Sure, enough they go to the doctor, the principal investigator, and he probably barked up. "Yeah, she's right." And then, you know, she starts again, and she didn't say anything to me. She said it to the delivery nurse "It's supposed to be an hour." She didn't apologize or anything. <i>African American woman, 58</i>
Assumption of foreignness	And one would, you know, it was all done through email and everything. And then, when I was doing the zoom conversation, she asked if I needed someone. So, she's like, "We'll just wait for a

	little bit, you know, for the translator. She's not here yet." I'm like, "Well, I don't need one. I'm fully bilingual. You just made me feel kind of uncomfortable." <i>Latino American man, 48</i>
Assumptions of monolith	For the most part, it was pretty open and minimal interaction.... The only thing that I thought was kind of different--I don't think that other participants had specifically, [conversations about] nutrition plans, or [had] comments like, you know, "I know you guys like your Tacos." That's always something that goes to referencing Latino culture, which I'm like Latino culture is very vast, ...I mean, I like Tacos, but that doesn't mean my particular background eats tacos like that. But that's often the go-to, right? <i>Latina American woman, 45</i>
	This was 2020 so we still have COVID right? So, I don't want to take subway because I don't feel safe. And of course, when I mentioned this 3 years ago at the start of the study, the project manager said "OK. No problem." The [project manager] must've taken the day off. It's his assistant, the guy and he kind of made a big deal, said "Hey. Why don't you take [the] subway? People like you should just take the subway." I didn't want to make a big deal, but I'm thinking, it's not money coming out of his pocket. I've been coming to the clinic for my follow-ups with my car. This was the 3rd or 4th time, so it's clearly in my file that I have done this before. <i>Asian American man, 63</i>
Boundary creation	I was kind of a little bit discouraged because I remember what happened then. We were placed in a different room. And the White guys were placed in another room and they were all attended to at once. Meanwhile, we were attended to ...later on, after which they were through with those White guys. <i>African American man, 36</i>
	In the actual trial, we go to a room in the back like a bathroom, and certain bathrooms were being used only by African Americans in that place, only. I felt like I was back in 1960s. You know, one of those slave time movies I've been seeing on TV. I'm like man, there's a colored bathroom type scenario, though I ain't seen that before. But it was like that they were asking the African Americans to [use] this bathroom. And, you know, Caucasian for this [other] bathroom. <i>African American man, 42</i>

eMethods 1. Item Generation for Scale Development

Prior to item generation, the interviews were transcribed and analyzed using NVivo 12. We used an inductive thematic approach for coding and analysis, allowing for emergence of unique themes and items.¹⁹ Data was analyzed by the Primary Investigator (PI), an experienced mixed-methods scholar, and 2 research analysts who had prior experience conducting mixed-methods research. All three authors kept research memos and regularly met to discuss emerging themes, iterating between the themes and the extant literature to allow for reflexivity and reflection into item generation.²⁰

From the codes, a total of 5 themes emerged: 1) assumption of lack of competence; 2) assumption of monolith; 3) assumption of foreignness; 4) 2nd class citizen; and 5) boundary creation, capturing interactions that were experienced by all racial minorities (i.e., 2nd class citizen treatment), as well as examples that are likely to be more unique to specific groups (i.e., physical separation for Black patients; assumptions of foreignness for Asian and Latino patients).

After working independently to create individual items, the team met to discuss each item. Repetitive items were removed as well as items that the team collectively decided should be removed. The core team worked to discuss the stylistic and grammatical structure of the items. This resulted in a final list of 44 items.

eMethods 2. Clinical Research Interaction Scale
(0 times; 1-3 times; 4-6 times; 7-9 times; 10 or more times)

The following questions will ask about your experience while participating in a clinical trial study. There are no correct answers. Please answer them as honestly as possible. All responses are confidential.

1. Someone told me that my pain is imagined
2. Someone did not believe me when I told them about the symptoms I was experiencing
3. Someone assumed that I did not know about my medical condition
4. Someone assumed that I would not have basic medical knowledge
5. Someone assumed that I was unintelligent (i.e., asking me the same question multiple times)
6. Someone told me to ignore my symptoms
7. Someone expressed impatience with me when I asked questions about a medical procedure
8. Someone did not explain the details of my treatment such as details regarding the medical procedure, possible side effects, etc.
9. Someone dismissed my request to see a specialist doctor (i.e., oncologist, cardiologist)
10. Someone assumed that I couldn't speak English
11. Someone assumed that I needed an interpreter even though I did not ask for one
12. Someone told me that I complain about race too much
13. Someone avoided eye contact with me while speaking with me
14. Someone referred to me as "You people"
15. Someone assumed that all people in my racial group look alike
16. Someone told me he/she does not "see" race
17. Someone told me that people should not think about race anymore
18. I waited significantly longer to be seen than patients of other racial groups
19. Someone made me wait longer than patients of other racial groups who had appointment times after me
20. I received substandard service compared to patients of other racial groups
21. I was denied entry into a clinical study due to my race
22. Someone told me to use separate facilities because of my race (i.e., bathroom, waiting room)