

Adverse Childhood Experiences Study (ACE) While you were growing up, during your first 18 years of life		Yes
1	Did a parent or other adult in the household <b>often or very often</b> ... Swear at you, insult you, put you down, or humiliate you? <b>or</b> Act in a way that made you afraid that you might be physically hurt?	
2	Did a parent or other adult in the household <b>often or very often</b> ... Push, grab, slap, or throw something at you? <b>or</b> <b>Ever</b> hit you so hard that you had marks or were injured?	
3	Did an adult or person at least 5 years older than you <b>ever</b> ... Touch or fondle you or have you touch their body in a sexual way? <b>or</b> Attempt or actually have oral, anal, or vaginal intercourse with you?	
4	Did you <b>often or very often</b> feel that ... No one in your family loved you or thought you were important or special? <b>or</b> Your family didn't look out for each other, feel close to each other, or support each other?	
5	Did you <b>often or very often</b> feel that ... You didn't have enough to eat, had to wear dirty clothes, and had no one to protect you? <b>or</b> Your parents were too drunk or high to take care of you or take you to the doctor if you needed it?	
6	Were your parents <b>ever</b> separated or divorced?	
7	Was your parent, step-parent or anyone in the family: <b>Often or very often</b> pushed, grabbed, slapped, or had something thrown at him or her? <b>or</b> <b>Sometimes, often, or very often</b> kicked, bitten, hit with a fist, or hit with something hard? <b>or</b> <b>Ever</b> repeatedly hit at least a few minutes or threatened with a gun or knife?	
8	Did you live with anyone who was a problem drinker or alcoholic or who used street drugs?	
9	Was a household member depressed or mentally ill, or did a household member attempt suicide?	
10	Did a household member go to prison?	
Add up the 'yes' points — This is your ACE score		

Reviewed by  
Notes

Signature

Date

Time

## ACE Scale