

Finding Your ACE Score

Name: _____

Date: _____

While you were growing up, during your first 18 years of life:

1. Did a parent or other adult in the household **often** or **very often**...
 >Swear at you, insult you, put you down, or humiliate you?
 OR
 >Act in a way that made you afraid that you might be physically hurt?
 Yes No If Yes, enter 1 _____

2. Did a parent or other adult in the household **often** or **very often**...
 >Push, grab, or slap, or throw something at you?
 OR
 >**EVER** hit you so hard that you had marks or were injured?
 Yes No If Yes, enter 1 _____

3. Did an adult or person at least 5 years older than you **ever**...
 >Touch or fondle you or have you touch their body in sexual way?
 OR
 >Attempt or actually have oral, anal, or vaginal intercourse with you?
 Yes No If Yes, enter 1 _____

4. Did you **often** or **very often** feel that...
 >No one in your family loved you or thought you were important or special?
 OR
 >Your family didn't look out for each other, feel close to each other, or support each other?
 Yes No If Yes, enter 1 _____

5. Did you **often** or **very often** feel that...
 >You didn't have enough to eat, had to wear dirty clothes, and had no one to protect you?
 OR
 >Your parents were too drunk or high to take care of you or take you to the doctor if you needed it?
 Yes No If Yes, enter 1 _____

6. Were your parents **ever** separated or divorced?
 Yes No If Yes, enter 1 _____

7. Was your mother or stepmother:
 >**Often** or **very often** pushed, grabbed, slapped, or had something thrown at her?
 OR
 >**Sometimes, often, or very often** kicked, bitten, hit with a fist or hit with something hard?
 OR
 >**Ever** repeatedly hit at least a few minutes or threatened with a gun or knife?
 Yes No If Yes, enter 1 _____

8. Did you live with anyone who was a problem drinker or alcoholic or who used street drugs?
 Yes No If Yes, enter 1 _____

9. Was a household member depressed or mentally ill, or did a household member attempt suicide?
 Yes No If Yes, enter 1 _____

10. Did a household member go to prison?
 Yes No If Yes, enter 1 _____

Now add up your "Yes" answers: _____ This is your ACE Score.