Adverse Childhood Experiences (ACE)

Prior to your 18th birthday:

1.	Swear	at you, insult you, p	ut you	household often or very often down, or humiliate you? or I that you might be physically hurt? No
2.	Push,	grab, slap, or throw	someth	household often or very often… hing at you? or I marks or were injured? No
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 a sexual way? or Attempt or actually have oral or anal intercourse with you? ☐ Yes ☐ No			
4.	No on		d you o	nat or thought you were important or special? or ch other, feel close to each other, or support each other? No
5.	You di		eat, ha	nat ad to wear dirty clothes, and had no one to protect you? or igh to take care of you or take you to the doctor if you needed No
6.				to you through divorced, abandonment, or other reason?
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 over at least a few minutes or threatened with a gun or knife? ☐ Yes ☐ No			
8.	Did yo	ou live with anyone w Yes	/ho was □	s a problem drinker or alcoholic or who used street drugs? No
9.		household member household member a Yes	•	ssed or mentally ill? or t suicide? No
10	.Did a∃	household member (Yes	go to pi □	rison? No DDTT

