

Got Your ACE Score?

What's Your ACE Score? (And, What's Your Resilience Score?)

There are 10 types of childhood trauma measured in the ACE Study. Five are personal — physical abuse, verbal abuse, sexual abuse, physical neglect, and emotional neglect. Five are related to other family members: a parent who's an alcoholic, a mother who's a victim of domestic violence, a family member in jail, a family member diagnosed with a mental illness, and the disappearance of a parent through divorce, death or abandonment. Each type of trauma counts as one. So a person who's been physically abused, with one alcoholic parent, and a mother was a victim of domestic violence has an ACE score of three.

There are, of course, many other types of childhood trauma — watching a sibling being abused, losing a caregiver (grandmother, mother, grandfather, etc.), homelessness, surviving and recovering from a severe accident, witnessing a father being abused by a mother, witnessing a grandmother abusing a father, etc. The ACE Study included only those 10 childhood traumas because those were mentioned as most common by a group of about 300 Kaiser members; those traumas were also well studied individually in the research literature.

The most important thing to remember is that the ACE score is meant as a guideline: If you experienced other types of toxic stress over months or years, then those would likely increase your risk of health consequences.

What's Your Resilience Score?

This questionnaire was developed by the early childhood service providers, pediatricians, psychologists, and health advocates of Southern Kennebec Healthy Start, Augusta, Maine, in 2006, and updated in February 2013. Two psychologists in the group, Mark Rains and Kate McClinn, came up with the 14 statements with editing suggestions by the other members of the group. The scoring system was modeled after the ACE Study questions. The content of the questions was based on a number of research studies from the literature over the past 40 years including that of Emmy Werner and others. Its purpose is limited to parenting education. It was not developed for research.

Take these surveys on line at: <https://katercst.typeform.com/to/zgRCiI>

See: www.acestoohigh.com

Don't miss this 15-minute Ted Talk: Nadine Burke Harris, MD, Pediatrician - How Childhood Trauma Affects Health Across a Lifetime

http://www.ted.com/talks/nadine_burke_harris_how_childhood_trauma_affects_health_across_a_lifetime?language=en

ACES ASSESSMENT FOR ADVERSE CHILDHOOD EXPERIENCES

Prior to your 18th birthday:

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? No If Yes, enter 1

2. Did a parent or other adult in the household often or very often... Push, grab, slap, or throw something at you? or Ever hit you so hard that you had marks or were injured?
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 a sexual way? or Attempt or actually have oral, anal, or vaginal intercourse with you?
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?
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?
No If Yes, enter 1

6. Was a biological parent ever lost to you through divorce, abandonment, or other reason ?
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 over at least a few minutes or threatened with a gun or knife?
No If Yes, enter 1

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

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

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

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

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ADVERSE EARLY EXPERIENCES
Prenatal, Perinatal and Early Infancy

This questionnaire is drawn from decades of research and practice in the field of prenatal and perinatal psychology. The issues highlighted here are often foundational to ACES and contribute to later physical and mental disorders.

1. Were you unwanted? Did your mother have active thoughts of ending the pregnancy? Did she attempt to end the pregnancy? Have you heard stories of how she hated being pregnant?

No _____ Yes _____

2. Were you conceived using Assisted Reproductive Technology (ART)?

No _____ Yes _____

3. Were you a survivor of multiples in which one or more of your siblings was miscarried or "reduced" if connected to ART?

No _____ Yes _____

4. Did your mother experience on going or periods of elevated anxiety and / or depression, or other mental illness or mood disorder?

No _____ Yes _____

5. Did your mother smoke cigarettes or consume alcohol or other harmful substances during pregnancy?

No _____ Yes _____

6. Was your mother subjected to domestic violence (yelling, fighting, physical abuse) during pregnancy?

No _____ Yes _____

7. Did your mother experience the loss of your father or the death of a close family member during pregnancy?

No _____ Yes _____

8. Did your mother lose a child or experience one or more miscarriages prior to your birth?

No _____ Yes _____

9. Was your birth considered long, unusual or traumatic? (Caesarian section, forceps, vacuum extraction, mother unconscious, other complications)

No _____ Yes _____

10. Did you spend time in the neonatal intensive care unit following your birth?

No _____ Yes _____

11. Were you separated from your mother for an extended period of time after birth or during the first year? (This includes adoption, hospitalization, being left with a caregiver for an extended period of time.)
No _____ Yes _____

12. Did you have a surgery during your first year of life such as circumcision, heart surgery, or tongue tie clip? No _____ Yes _____

13. Were you hospitalized for any reason during the first year?

No _____ Yes _____

Add your yes answers. _____ This is your AEE Score.

What's Your RESILIENCE Score?

Please circle the most accurate answer under each statement:

1. I believe that my mother loved me when I was little.

Definitely true Probably true Not sure Probably Not True Definitely Not True

2. I believe that my father loved me when I was little.

Definitely true Probably true Not sure Probably Not True Definitely Not True

3. When I was little, other people helped my mother and father take care of me and they seemed to love me.

Definitely true Probably true Not sure Probably Not True Definitely Not True

4. I've heard that when I was an infant someone in my family enjoyed playing with me, and I enjoyed it, too.

Definitely true Probably true Not sure Probably Not True Definitely Not True

5. When I was a child, there were relatives in my family who made me feel better if I was sad or worried.

Definitely true Probably true Not sure Probably Not True Definitely Not True

6. When I was a child, neighbors or my friends' parents seemed to like me.

Definitely true Probably true Not sure Probably Not True Definitely Not True

7. When I was a child, teachers, coaches, youth leaders or ministers were there to help me.

Definitely true Probably true Not sure Probably Not True Definitely Not True

8. Someone in my family cared about how I was doing in school.

Definitely true Probably true Not sure Probably Not True Definitely Not True

9. My family, neighbors and friends talked often about making our lives better.

Definitely true Probably true Not sure Probably Not True Definitely Not True

10. We had rules in our house and were expected to keep them.

Definitely true Probably true Not sure Probably Not True Definitely Not True

11. When I felt really bad, I could almost always find someone I trusted to talk to.

Definitely true Probably true Not sure Probably Not True Definitely Not True

12. As a youth, people noticed that I was capable and could get things done.

Definitely true Probably true Not sure Probably Not True Definitely Not True

13. I was independent and a go-getter.

Definitely true Probably true Not sure Probably Not True Definitely Not True

14. I believed that life is what you make it.

Definitely true Probably true Not sure Probably Not True Definitely Not True

How many of these 14 protective factors were circled "Definitely True" or "Probably True"?)

Of these circled, how many are still true for me?

See www.acestoohigh.com

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Prenatal and Perinatal Resiliency Score

Please circle which of the responses works best for you: Definitely True, Probably True, Not Sure, Probably Not True, and Definitely Not True.

1. I feel welcomed and wanted by someone or a pet animal in the present or in the past.
Definitely True Probably True Not Sure Probably Not True Definitely Not True
2. I feel seen and heard by someone in the present or in the past.
Definitely True Probably True Not Probably Not True Definitely Not True
3. I feel included and a part of something, a group like family, friends or work, in the present or I felt that way in the past.
Definitely True Probably True Not Probably Not True Definitely Not True
4. I feel safe, secure and grounded in the present or I felt that way in the past.
Definitely True Probably True Not Probably Not True Definitely Not True
5. I feel or felt protected by someone or a pet at least once in my life.
Definitely True Probably True Not Probably Not True Definitely Not True
6. I feel that there is someone who really "gets" me in the past or present. I felt/feel understood and accurately reflected. This could also be a pet.
Definitely True Probably True Not Probably Not True Definitely Not True
7. I felt or feel loved in my life by a person or an animal, and I can notice feelings of "lovable."
Definitely True Probably True Not Probably Not True Definitely Not True
8. I feel curious about my life, my history, or my relationships in the past or the present.
Definitely True Probably True Not Sure Probably Not True Definitely Not True
9. I have a person or a group that is a layer of support for me who make themselves available when I need them even if it is just to talk, and I can receive this support. They are really there for me.
Definitely True Probably True Not Probably Not True Definitely Not True
10. I feel that I have or had at one time a purpose for my life.
Definitely True Probably True Not Probably Not True Definitely Not True
11. Even though life is difficult, I can find something to be grateful for in the present or in the past.
Definitely True Probably True Not Probably Not True Definitely Not True
12. I can imagine that something or someone in my life is part of the reason for being alive.
Definitely True Probably True Not Probably Not True Definitely Not True
13. There is a place where I feel most "at home" in the present or I felt that way in the past.
Definitely True Probably True Not Probably Not True Definitely Not True
14. I feel have "made sense" of my life, and the events of the past do not affect the present very strongly any more.
Definitely True Probably True Not Sure Probably Not True Definitely Not True

How many of these 14 protective factors were marked "Definitely True" or "Probably True"?
Of these circled, how many are still true for me?