

Adverse Childhood Experience (ACE) Questionnaire

Finding your ACE Score ra hbr 10 24 06

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

1. Did a parent or other adult in the household 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 ...

Push, grab, 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 a sexual way?

or

Try to or actually have oral, anal, or vaginal sex with you?

Yes No

If yes enter 1 _____

4. Did you 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 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 pushed, grabbed, slapped, or had something thrown at her?

or

Sometimes or 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

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

Tips for Teachers and School Staff from Students with Mental Health and Behavioral Challenges

Youth with mental health and behavior challenges are often sensitive about their disabilities and may be uncomfortable talking directly to school professionals about the challenges they face. Members of PACER's Mental Health Youth Advisory Board have developed the following ideas to share with school staff.

Please treat me with respect:

- I learn more by what you do than what you say. Please model the attitude and behavior you would like me to follow. When I hear positive things about myself and feel respected, I treat others the same way. I learn from positive examples how to be patient and resolve conflicts.
- Privacy is important to me. I feel embarrassed if someone points out my disability and need for special accommodations or medication in front of my peers, and I worry that an adult will ask, "Did you take your medication today?" when I'm with other students.
- If I receive special education services, it is because qualified professionals, through evaluation, have determined that I am eligible for them. Please consider data and documentation, rather than personal opinion, as we develop my Individualized Education Program (IEP).
- Your encouragement builds me up. Criticism and harsh words can hurt and affect me. When I lack self-esteem, it is easy for me to believe others' negative remarks about me—even if they are untrue.

Please take to time to know me:

- Keep an open mind as we become acquainted. Sometimes statements in records or others' opinions are based on the past, and they may not accurately portray who I am now. Everyone needs a second chance; help me to develop a positive image.
- Tell me what you like about me and what you see me doing correctly. I am already very aware of my faults and what I do wrong.
- If there is an incident in school, please listen to me. Let me tell my story before making a judgment.
- Try to understand my mental health and behavior challenges. Learning about my challenges through

training or other resources will equip you to assist me with empathy.

- The medications I take may cause side effects such as dizziness, sleepiness, or needing to use the bathroom more frequently. I appreciate your understanding as I deal with the issues.
- Sometimes my disability makes me feel like I am out of control. I probably need structure, but please allow me some choices or participation in making decisions.
- Usually I am not trying to misbehave. Sometimes I have simply not learned the right way to handle things. My mental health challenges can have an impact on how my brain works, and I may have difficulty controlling my thoughts, emotions, or actions. I need to learn behavioral skills, much as I learn math. With your help, I want to improve things!

Please help me feel safe:

- Advocate for me at school. I really need an adult at school who will support me and look out for my best interests.
- If I come to you and say that I am being teased, bullied, or harassed, please help me right away.
- You have the influence to provide a positive school environment among students and school staff. Two suggestions: respect confidential information and discourage gossip about individual students.

Please help me learn:

- Remember that I DO want to learn, feel successful, and be liked by others. Sometimes my disability and resulting lack of skills interfere.
- The accommodations on my IEP or Section 504 plan affect us both. Together with my positive behavior intervention plan (if I have one), they are designed to help us succeed together.
- I usually learn more through positive instruction than through punishment. I know there are consequences for my actions, but please teach me how to replace unacceptable behavior with what is appropriate.
- Work with me to create learning or coping strategies. Include me in developing interventions.