

**Adverse Childhood Experiences International Questionnaire (ACE-IQ)**

| <b>0</b>    |  | <b>DEMOGRAPHIC INFORMATION</b>            |  |
|-------------|--|---|--|
| 0.1<br>[C1] | Sex ( <i>Record Male / Female as observed</i> )  | Male                                      | Female   |
| 0.2<br>[C2] | What is your date of birth?  | Day [ ][ ] Month [ ][ ] Year [ ][ ][ ][ ] | Unknown ( <i>Go to Q.C3</i> )  |
| 0.3<br>[C3] | How old are you?   | [ ][ ]                                    |  |
| 0.4<br>[C4] | What is your [ <i>insert relevant ethnic group / racial group / cultural group / others</i> ] background?                            | [ <i>Locally defined</i> ]                | [ <i>Locally defined</i> ]<br>[ <i>Locally defined</i> ]<br>Refused  |
| 0.5<br>[C5] | What is the highest level of education you have completed?   | No formal schooling                       | Less than primary school<br>Primary school completed<br>Secondary/High school completed<br>College/University completed<br>Post graduate degree<br>Refused     |
| 0.6<br>[C6] | Which of the following best describes your <u>main</u> work status over the last 12 months?  | Government employee                       | Non-government employee<br>Self-employed<br>Non-paid<br>Student<br>Homemaker<br>Retired<br>Unemployed (able to work)<br>Unemployed (unable to work)<br>Refused |
| 0.7<br>[C7] | What is your civic status?   | Married ( <i>Go to Q.M2</i> )             | Living as couple<br>Divorced or separated<br>Single<br>Widowed ( <i>Go to Q.M2</i> )<br>Other<br>Refused   |
| <b>1</b>    |  | <b>MARRIAGE</b>                           |  |
| 1.1<br>[M1] | Have you ever been married?  | Yes                                       | No ( <i>Go to Q.M5</i> )<br>Refused  |
| 1.2<br>[M2] | At what age were you first married?  | Age [ ][ ]                                | Refused  |
| 1.3<br>[M3] | At the time of your first marriage did you yourself choose your husband/wife?  | Yes ( <i>Go to Q.M5</i> )                 | No<br>Don't know / Not sure<br>Refused   |
| 1.4<br>[M4] | At the time of your first marriage if you did <u>not</u> choose your husband/wife yourself, did you give your consent to the choice? | Yes                                       | No<br>Refused  |
| 1.5<br>[M5] | If you are a mother or father what was your age when your first child was born?  | Age [ ][ ]                                | Not applicable<br>Refused  |

| <b>2</b>  |  | <b>RELATIONSHIP WITH PARENTS/GUARDIANS</b> |                  |
|---|--|--|------------------|
| <b>When you were growing up, during the first 18 years of your life . . .</b>   |  |  |                  |
| 2.1<br>[P1]   | Did your parents/guardians understand your problems and worries?   | Always                                     | Most of the time |
|   |  | Sometimes                                  | Rarely           |
|   |  | Never                                      | Refused          |
| 2.2<br>[P2]   | Did your parents/guardians <b>really</b> know what you were doing with your free time when you were not at school or work? | Always                                     | Most of the time |
|   |  | Sometimes                                  | Rarely           |
|   |  | Never                                      | Refused          |
| <b>3</b>  |  |  |                  |
| 3.1<br>[P3]   | How often did your parents/guardians <b>not</b> give you enough food even when they could easily have done so?             | Many times                                 | A few times      |
|   |  | Once                                       | Never            |
|   |  | Refused                                    |                  |
| 3.2<br>[P4]   | Were your parents/guardians too drunk or intoxicated by drugs to take care of you?   | Many times                                 | A few times      |
|   |  | Once                                       | Never            |
|   |  | Refused                                    |                  |
| 3.3<br>[P5]   | How often did your parents/guardians <b>not</b> send you to school even when it was available?                             | Many times                                 | A few times      |
|   |  | Once                                       | Never            |
|   |  | Refused                                    |                  |
| <b>4</b>  |  | <b>FAMILY ENVIRONMENT</b>                  |                  |
| <b>When you were growing up, during the first 18 years of your life . . .</b>   |  |  |                  |
| 4.1<br>[F1]   | Did you live with a household member who was a problem drinker or alcoholic, or misused street or prescription drugs?      | Yes  | No               |
|   |  | Refused                                    |                  |
| 4.2<br>[F2]   | Did you live with a household member who was depressed, mentally ill or suicidal?  | Yes  | No               |
|   |  | Refused                                    |                  |
| 4.3<br>[F3]   | Did you live with a household member who was ever sent to jail or prison?  | Yes  | No               |
|   |  | Refused                                    |                  |
| 4.4<br>[F4]   | Were your parents ever separated or divorced?  | Yes  | No               |
|   |  | Not applicable                             | Refused          |
| 4.5<br>[F5]   | Did your mother, father or guardian die?   | Yes  | No               |
|   |  | Don't know / Not sure                      | Refused          |
| <b>These next questions are about certain things you may actually have heard or seen IN YOUR HOME. These are things that may have been done to another household member but not necessarily to you.</b> |  |  |                  |

| When you were growing up, during the first 18 years of your life . . .  |   |             |
|---|---|-------------|
| 4.6<br>[F6]   | Did you see or hear a parent or household member in your home being yelled at, screamed at, sworn at, insulted or humiliated?                             | Many times  |
|   |   | A few times |
|   |   | Once        |
|   |   | Never       |
| 4.7<br>[F7]   | Did you see or hear a parent or household member in your home being slapped, kicked, punched or beaten up?  | Refused     |
|   |   | Many times  |
|   |   | A few times |
|   |   | Once        |
| 4.8<br>[F8]   | Did you see or hear a parent or household member in your home being hit or cut with an object, such as a stick (or cane), bottle, club, knife, whip etc.? | Never       |
|   |   | Refused     |
|   |   | Many times  |
|   |   | A few times |
| <b>These next questions are about certain things YOU may have experienced.</b><br><b>When you were growing up, during the first 18 years of your life . . .</b> |   |             |
| <b>5</b>  |   |             |
| 5.1<br>[A1]   | Did a parent, guardian or other household member yell, scream or swear at you, insult or humiliate you?   | Many times  |
|   |   | A few times |
|   |   | Once        |
|   |   | Never       |
| 5.2<br>[A2]   | Did a parent, guardian or other household member threaten to, or actually, abandon you or throw you out of the house?                                     | Refused     |
|   |   | Many times  |
|   |   | A few times |
|   |   | Once        |
| 5.3<br>[A3]   | Did a parent, guardian or other household member spank, slap, kick, punch or beat you up?   | Never       |
|   |   | Refused     |
|   |   | Many times  |
|   |   | A few times |
| 5.4<br>[A4]   | Did a parent, guardian or other household member hit or cut you with an object, such as a stick (or cane), bottle, club, knife, whip etc?                 | Once        |
|   |   | Never       |
|   |   | Refused     |
|   |   | Many times  |
| 5.5<br>[A5]   | Did someone touch or fondle you in a sexual way when you did not want them to?  | A few times |
|   |   | Once        |
|   |   | Never       |
|   |   | Refused     |
| 5.6<br>[A6]   | Did someone make you touch their body in a sexual way when you did not want them to?  | Many times  |
|   |   | A few times |
|   |   | Once        |
|   |   | Never       |
| 5.7<br>[A7]   | Did someone attempt oral, anal, or vaginal intercourse with you when you did not want them to?  | Refused     |
|   |   | Many times  |
|   |   | A few times |
|   |   | Once        |



|              |   |             |
|--------------|---|-------------|
| [V5]         | or shot in real life?   | A few times |
|              |   | Once        |
|              |   | Never       |
|              |   | Refused     |
| 7.3<br>[V6]  | Did you see or hear someone being threatened with a knife or gun in real life?  | Many times  |
|              |   | A few times |
|              |   | Once        |
|              |   | Never       |
|              |   | Refused     |
| <b>8</b>     | <b>EXPOSURE TO WAR/COLLECTIVE VIOLENCE</b>  |             |
|              | <p><b>These questions are about whether YOU did or did not experience any of the following events when you were a child. The events are all to do with collective violence, including wars, terrorism, political or ethnic conflicts, genocide, repression, disappearances, torture and organized violent crime such as banditry and gang warfare.</b></p> <p><b>When you were growing up, during the first 18 years of your life . . .</b></p> |             |
| 8.1<br>[V7]  | Were you forced to go and live in another place due to any of these events?   | Many times  |
|              |   | A few times |
|              |   | Once        |
|              |   | Never       |
|              |   | Refused     |
| 8.2<br>[V8]  | Did you experience the deliberate destruction of your home due to any of these events?  | Many times  |
|              |   | A few times |
|              |   | Once        |
|              |   | Never       |
|              |   | Refused     |
| 8.3<br>[V9]  | Were you beaten up by soldiers, police, militia, or gangs?  | Many times  |
|              |   | A few times |
|              |   | Once        |
|              |   | Never       |
|              |   | Refused     |
| 8.4<br>[V10] | Was a family member or friend killed or beaten up by soldiers, police, militia, or gangs?   | Many times  |
|              |   | A few times |
|              |   | Once        |
|              |   | Never       |
|              |   | Refused     |