Parental Adverse Childhood Experiences (ACEs) Questionnaire
User Guide for Healthcare Professionals
Introduction
This user’s guide was created to assist healthcare professionals in utilizing the Parental ACEs Questionnaire, created by R. J. Gillespie, MD, MHPE, FAAP based on the original ten ACEs from Vincent Felitti and Robert Anda. Parenting can be stressful. Parents/caregivers who have experienced trauma may have more challenges responding to stressful situations. Do parents who have experienced trauma have the appropriate skills to care for themselves or their children or identify when they need help? Do they know how to model appropriate conflict resolution or discipline that is developmentally appropriate? Do they know how to play with their child?

The Parental ACE Questionnaire can also serve as a tool to better understand parents and caregivers of children in your practice. How can we better prepare them for these inevitable moments?

Instrument Description
The Parental ACE Questionnaire is a clinical screening tool that calculates cumulative exposure to ACEs in parents/caregivers (biological, adoptive, foster parents and other caregivers). Respondents are asked to report how many experience types (or categories) apply to them during their first 18 years of life, not which experiences apply (eg, it is deidentified). The screening tool is being piloted for use in the pediatric and family practice settings to identify parents/caregivers at increased risk for child abuse and neglect. The tool is available in both English and Spanish. It takes approximately 3-5 minutes to complete.

Parental ACE Questionnaire
14-item instrument completed by the parent/caregiver

Structure
The instrument is comprised of three sections: Sections 1 and 2 of the Parental ACE Questionnaire consists of the traditional ten ACEs for which we have population-level data for disease risk in adults. Section 3 includes four additional items assessing exposure to additional early life stressors that have been identified by experts and community stakeholders. These items are hypothesized to also lead to disruption of the neuro-endocrine-immune axis, but are not yet correlated with population level data about risk of disease. They include involvement in the foster care system, bullying, exposure to community violence and discrimination.

The second page of the screening tool includes space for parents/caregivers to note any comments, questions and concerns. Parents/caregivers can also identify if they are interested in services/supports.

Section 1 & 2
Ten items assessing exposure to the original ten ACEs

Section 3
Four items assessing for exposure to additional early life stressors
**Scoring**
This instrument calculates cumulative exposure to categories to adversity. The respondent is asked to report how many categories apply to them during their first 18 years of life. Respondents tally the number or each section and write the total in the box provided. Each completed Parental ACE Questionnaire generates a score.

**Note:** As a clinical tool, the Parental ACE Questionnaire uses the total score to identify parents/caregivers at increased risk of child abuse and neglect.

**Administration**
The Parental ACE Questionnaire is a self-report instrument. It is presented to the parent/caregiver upon check-in for standard medical appointments. It is administered to parents/caregivers at all new patient or well child visits, and yearly thereafter. See Table 1 for Administration Schedule. **Note:** The schedule below includes guidance for administering the ACE-Q Child and Teen (Self-report and Parent/Caregiver report).

<table>
<thead>
<tr>
<th>Screening Tool</th>
<th>Birth – 5 yrs</th>
<th>6 – 12 years</th>
<th>13 – 18 years</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parental ACE-Q</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ACE-Q Child (Parent/Care-giver Report)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ACE-Q Teen (Self-Report)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ACE-Q Teen (Parent/Caregiver Report)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*See steps on pages 11-12 of the CYW ACE Q User Guide for detailed steps on how to administer the screening tools in the practice setting.

**Interpretation of Results**
The completed Parental ACE Questionnaire will have two scores: one for Sections 1 and 2 (original ten ACEs), and another for Section 3 (supplementary items). The second page of the tool will provide additional information including comments, questions, and concerns that the parent/caregiver has as well as resources to which the parent/caregiver wishes to be referred. Interpretation of the total score should serve as an opportunity for you to open the dialogue with the parent/caregiver by asking “How do you think this affects your parenting?” Parents may not be entirely aware of how their own experiences affect how they handle parenting, stressful situations, or work-life balance.

Results should be reviewed with the parent/caregiver. See pages 13-14 of the CYW ACE-Q User Guide for detailed guidance.

**Communication Strategies**
Most parents/caregivers come to the conversation about their ACEs with incredibly strengths, despite past adversity. Again, the key message here is: You are not alone. It is not your fault. I will help you.
General conversation starters

“As you probably know, if bad things happen to you as a child, it can impact your health for the rest of your life. Research shows that kids who experience physical abuse or live with an alcoholic parent are much more likely to have cancer as an adult. They are more likely to attempt suicide. And they are more likely to drop out of school or end up in prison. The good news is that there are doctors, teachers, social workers, judges, parents, and others who are using this research (known as the Adverse Childhood Experiences study) to create new tools to protect kids and families early and give anyone who suffers the chance to heal.”

“How well do you remember your childhood?”

“Are there things that happened to you when you were a child that shouldn’t have happened to you or anyone?”

“Would you like your children to grow up as you did?”

For parents/caregivers with 0-3 ACEs:

“It looks like you had pretty supportive family, so you’re going to be a pretty good parent without even having to think about it.”

For parents/caregivers with 4+ ACEs:

“It looks like you had some very difficult experiences during your childhood. Most parents I talk with similar experiences feel they have worked through some of these experiences but still get tripped up by others. I am wondering if that is the case for you?”

“How do you think this affects your parenting?”

“What kind of support do you need?”