ACES Quiz/Survey (taken from: https://acestoohigh.com/got-your-ace-score/)

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
٠.	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	Were your parents ever separated or divorced?
٥.	NoIf Yes, enter 1
7	Was your mother or stepmother:
٠.	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
0.	drugs?
	No If Yes, enter 1
9	Was a household member depressed or mentally ill, or did a household member attempt
٦.	suicide? No If Yes, enter 1
10	Did a household member go to prison?
10.	No_ If Yes, enter 1
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Now add up your "Yes" answers: _ This is your ACE Score (Enter it into the menti survey on the screen).