

Virginia State-Added 1: Adverse Childhood Experience

I'd like to ask you some questions about events that happened during your childhood. This information will allow us to better understand problems that may occur early in life, and may help others in the future. This is a sensitive topic and some people may feel uncomfortable with these questions. At the end of this section, I will give you a phone number for an organization that can provide information and referral for these issues. Please keep in mind that you can ask me to skip any question you do not want to answer.

All questions refer to the time period before you were 18 years of age. Now, looking back before you were 18 years of age—

VA1.1 Did you live with anyone who was depressed, mentally ill, or suicidal?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

VA1.2 Did you live with anyone who was a problem drinker or alcoholic?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

VA1.3 Did you live with anyone who used illegal street drugs or who abused prescription medications?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

VA1.4 Did you live with anyone who served time or was sentenced to serve time in a prison, jail, or other correctional facility?

- 1 Yes
- 2 No
- 7 Don't know / Not sure
- 9 Refused

VA1.5 Were your parents separated or divorced?

- 1 Yes
- 2 No
- 8 Parents not married
- 7 Don't know / Not sure
- 9 Refused

VA1.6 How often did your parents or adults in your home ever slap, hit, kick, punch, or beat each other up?

- 1 Never
- 2 Once
- 3 More than once

Do not read:

- 7 Don't know / Not sure
- 9 Refused

VA1.7 Before age 18, how often did a parent or adult in your home ever hit, beat, kick, or physically hurt you in any way? Do not include spanking. Would you say---

- 1 Never
- 2 Once
- 3 More than once

Do not read:

- 7 Don't know / Not sure
- 9 Refused

VA1.8 How often did a parent or adult in your home ever swear at you, insult you, or put you down?

- 1 Never
- 2 Once
- 3 More than once

Do not read:

- 7 Don't know / Not sure
- 9 Refused

VA1.9 How often did anyone at least 5 years older than you or an adult touch you sexually?

- 1 Never
- 2 Once
- 3 More than once

Do not read:

- 7 Don't know / Not sure
- 9 Refused

VA1.10 How often did anyone at least 5 years older than you or an adult try to make you touch them sexually?)

- 1 Never
- 2 Once
- 3 More than once

Do not read:

7 Don't know / Not sure

9 Refused

VA1.11

How often did anyone at least 5 years older than you or an adult force you to have sex?

1 Never

2 Once

3 More than once

Do not read:

7 Don't know / Not sure

9 Refused

As I mentioned when we started this section, I would give you a phone number for an organization that can provide information and referral for these issues. You can dial (place state or local hotline here) to reach a referral service to locate an agency in your area. **[Note: if no local or state hotline is available, give respondent the National Hotline for child abuse 1-800-422-4-A-CHILD (1-800-422-4453).**