

FOR Qs1-4: While you were growing up, that is during your first 18 years of life...)

- Did you feel safe in your neighborhood (READ LIST)?
 (IF RESPONDENT MENTIONS HAVING LIVED IN MULTIPLE NEIGHBORHOODS WHILE GROWING UP ASK: Overall, did you feel safe in the neighborhoods you grew up in?)
 - 1 All of the time
 - 2 Most of the time
 - 3 Some of the time, or
 - 4 None of the time
 - D (DO NOT READ) Don't know
 - R (DO NOT READ) Refused
- Did you feel people in your neighborhood looked out for each other, stood up for each other, and could be trusted (READ LIST, IF NECESSARY)?
 (IF RESPONDENT MENTIONS HAVING LIVED IN MULTIPLE NEIGHBORHOODS WHILE GROWING UP ASK: Overall, did you feel people in the neighborhoods you grew up in looked out for each other...?)
 - 1 All of the time
 - 2 Most of the time
 - 3 Some of the time, or
 - 4 None of the time
 - D (DO NOT READ) Don't know
 - R (DO NOT READ) Refused
- 3. How often were you bullied by a peer or classmate? (READ LIST, IF NECESSARY)?
 - 1 All of the time
 - 2 Most of the time
 - 3 Some of the time, or
 - 4 None of the time
 - D (DO NOT READ) Don't know
 - R (DO NOT READ) Refused
- 4. How often, if ever did you see or hear someone being beaten up, stabbed, or shot in real life? Would you say (READ LIST)?
 - 1 Many times
 - 2 A few times
 - 3 Once, or
 - 4 Never
 - R (DO NOT READ) Refused

Now please think about your childhood, in general, not just your neighborhood or community.

FOR Q5-6: While you were growing up, during your first 18 years of life, how true were each of the following statements?

- 5. There was someone in your life who helped you feel important or special. Was this (READ LIST)?
 - 1 Very often true
 - 2 Often true
 - 3 Sometimes true
 - 4 Rarely true, or
 - 5 Never true
 - D (DO NOT READ) Don't know
 - R (DO NOT READ) Refused
- 6. Your family sometimes cut the size of meals or skipped meals because there was not enough money in the budget for food. Was this (READ LIST)?
 - 1 Very often true
 - 2 Often true
 - 3 Sometimes true
 - 4 Rarely true, or
 - 5 Never true
 - D (DO NOT READ) Don't know
 - R (DO NOT READ) Refused

Sometimes people are treated badly, not given respect, or are considered inferior because of the color of their skin, because they speak a different language or have an accent, or because they come from a different country or culture.

- 7. While you were growing up during your first 18 years of life how often did you feel that you were treated badly or unfairly because of your race or ethnicity? Would you say...? (READ LIST)
 - 1 Very often true
 - 2 Often true
 - 3 Sometimes true
 - 4 Rarely true, or
 - 5 Never true
 - D (DO NOT READ) Don't know
 - R (DO NOT READ) Refused

Again, I want to remind you that the next questions refer to the time period while you were growing up in your first 18 years of life. During your first 18 years of life:

- 8. Did you live with anyone who was depressed or mentally ill?
 - 1 Yes
 - 2 No
 - D (DO NOT READ) Don't know/Not Sure
 - R (DO NOT READ) Refused
- 9. Did you live with anyone who was suicidal (IF NECESSARY: during your first 18 years of life)?
 - 1 Yes
 - 2 No
 - D (DO NOT READ) Don't know/Not Sure
 - R (DO NOT READ) Refused
- 10. Did you live with anyone who was a problem drinker or alcoholic (IF NECESSARY: during your first 18 years of life)?
 - 1 Yes
 - 2 No
 - D (DO NOT READ) Don't know/Not Sure
 - R (DO NOT READ) Refused

Still looking back to your first 18 years of life...

- 11. Did you live with anyone who used illegal street drugs or who abused prescription medications?
 - 1 Yes
 - 2 No
 - D (DO NOT READ) Don't know/Not Sure
 - R (DO NOT READ) Refused
- 12. 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
 - D (DO NOT READ) Don't know/Not Sure
 - R (DO NOT READ) Refused

- 13. Were you ever in foster care? (IF NECESSARY: during your first 18 years of life)?
 - 1 Yes
 - 2 No
 - D (DO NOT READ) Don't know/Not Sure
 - R (DO NOT READ) Refused

Sometimes physical blows occur between parents or other adults in the house. FOR Q14-Q16: While you were growing up, that is during your first 18 years of life...

- 14. How often, if ever, did you see or hear a parent, step parent or another adult who was helping to raise you being yelled at, screamed at, sworn at, insulted or humiliated? Would you say...(READ LIST)
 - 1 Many times
 - 2 A few times
 - 3 Once, or
 - 4 Never
 - D (DO NOT READ) Don't know/Not Sure
 - R (DO NOT READ) Refused
- 15. How often, if ever, did you see or hear in your home a parent, step parent or another adult who was helping raise you being slapped, kicked, punched or beaten up? (READ LIST)
 - 1 Many times
 - 2 A few times
 - 3 Once, or
 - 4 Never
 - D (DO NOT READ) Don't know/Not Sure
 - R (DO NOT READ) Refused
- 16. How often, if ever, did you see or hear a parent, step parent or another adult who was helping to raise you being hit or cut with an object, such as a stick or cane, bottle, club, knife, or gun? (READ LIST, IF NECESSARY)
 - 1 Many times
 - 2 A few times
 - 3 Once, or
 - 4 Never
 - D (DO NOT READ) Don't know/Not Sure
 - R (DO NOT READ) Refused

Sometimes parents or other adults hurt children.

While you were growing up, that is during your first 18 years of life, how often, if ever, did a parent, stepparent, or another adult living in your home...

- 17. Swear at you, insult you, or put you down? (READ LIST)
 - 1 More than once
 - 2 Once, or
 - 3 Never
 - D (DO NOT READ) Don't know/Not Sure
 - R (DO NOT READ) Refused

How often, if ever, did a parent, step-parent, or another adult living in your home...

- 18. Push, grab, shove, or slap you? (READ LIST)
 - 1 More than once
 - 2 Once, or
 - 3 Never
 - D (DO NOT READ) Don't know/Not Sure
 - R (DO NOT READ) Refused
- 19. Hit you so hard that you had marks or were injured? (READ LIST)
 - 1 More than once
 - 2 Once, or
 - 3 Never
 - D (DO NOT READ) Don't know/Not Sure
 - R (DO NOT READ) Refused
- 20. Act in a way that made you afraid that you would be physically hurt? (READ LIST)
 - 1 More than once
 - 2 Once, or
 - 3 Never
 - D (DO NOT READ) Don't know/Not Sure
 - R (DO NOT READ) Refused

Some people, while growing up in their first 18 years of life, had a sexual experience with an adult or someone at least five years older than themselves. These experiences may have involved a relative, family friend, or stranger.

During the first 18 years of life, did an adult or older relative, family friend or stranger who was **at least five** years older than yourself ever...?

- 21. Touch or fondle you in a sexual way or have you touch their body in a sexual way?
 - 1 Yes
 - 2 No
 - D (DO NOT READ) Don't know/Not Sure
 - R (DO NOT READ) Refused
- 22. Attempt to have or actually have any type of sexual intercourse, oral, anal, or vaginal, with you?
 - 1 Yes
 - 2 No
 - D (DO NOT READ) Don't know/Not Sure
 - R (DO NOT READ) Refused

We are almost done with the interview but have a few more questions about your health and well-being over your entire lifetime.

Have you EVER been told by a doctor or other health professional that you have or had any of these medical conditions or illnesses?

How about...?

- 23. Angina, coronary heart disease, or a heart attack also called a myocardial infarction?
 - 1 Yes
 - 2 No
 - D (DO NOT READ) Don't know
 - R (DO NOT READ) Refused
 - 24. A stroke or "small stroke?"
 - 1 Yes
 - 2 No
 - D (DO NOT READ) Don't know
 - R (DO NOT READ) Refused

- 1 Yes 2 No D (DO NOT READ) Don't know (DO NOT READ) Refused 26. Broken any bones? 1 Yes 2 No D (DO NOT READ) Don't know R (DO NOT READ) Refused
 - 27. Yellow jaundice, hepatitis, or any liver trouble?

Chronic bronchitis or emphysema?

1 Yes

25.

- 2 No
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused
- 28. A sexually transmitted infection, such as chlamydia, gonorrhea, syphilis, or trichamoniasis (also known as Trich)?
 - 1 Yes
 - 2 No
 - D (DO NOT READ) Don't know
 - R (DO NOT READ) Refused

Our next few questions are about your sexual relationships and practices. Remember that your answers will be kept strictly confidential. When we talk about a sex partner, we mean any person, male or female, with whom you had sex, even if it was just once. By sex, we mean oral sex, vaginal sex, or anal sex. The next questions are about your VOLUNTARY sex experiences.

29. How old were you the first time you had sex?

_____(age 9-60)

- N (DO NOT READ) Never had sex(GO TO Q.35)
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused
- 31. How many different sex partners have you ever had? Remember, we are talking about people you had oral, vaginal or anal sex with. If you don't know the exact number, please give your best estimate.

_____ (RANGE 1-100)

101 More than 100

- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused
- 31a. I am going to read some ranges. You can just stop me when I get to the right category.

Can you tell me if you have had:

- 1 Five or fewer
- 2 Six to ten
- 3 Eleven to 29, or
- 4 Thirty or more sexual partners
- D(DO NOT READ) Don't know
- R(DO NOT READ) Refused

Again I want to remind you that these questions are asking about your sexual relationships and practices over your entire lifetime.

- 32. Female: Have you ever been pregnant?/Male: Have you ever gotten someone pregnant?
 - 1 Yes
 - 2 No
 - D (DO NOT READ) Don't know
 - R (DO NOT READ) Refused

(ASK Q33 IF Q32 = 1)

- 33. Female: When your first pregnancy began, did you intend to get pregnant at that time in your life?/ Male: When you got someone pregnant for the first time, did you intend to get them pregnant at that time in your life?
 - 1 Yes
 - 2 No
 - D (DO NOT READ) Don't know
 - R (DO NOT READ) Refused

(ASK Q34 IF Q32 = 1)

34. Female: How old were you when you first became pregnant?/ Male: How old were you when you first got someone pregnant?

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_____ (age 9-60)
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- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(ASK Q34a IF Q34 = D)

- 34a. We understand that you may not remember your exact age. Please try to recall your age range. Were you...(READ LIST)?
 - 1 Less than 15 years old
 - 2 Between 15 and 19 years
 - 3 Between 20 and 24 years
 - 4 Between 25 and 29 years
 - 5 Between 30 and 34 years
 - 6 35 years or older
 - D (DO NOT READ) Don't know
 - R (DO NOT READ) Refused

Now, a few questions about various personal health behaviors.

- 35. Have you ever used or injected illicit drugs, such as marijuana, cocaine, including crack, hallucinogens, inhalants, heroin, or prescription drugs that were not prescribed for you, including OxyContin, Xanax, or Adderall?
 - 1 Yes
 - 2 No
 - D (DO NOT READ) Don't know
 - R (DO NOT READ) Refused
- 36. In the past year, have you had two or more weeks of being in a depressed mood, that is feeling down, depressed, or hopeless, or had little interest in doing things?
 - 1 Yes

- 2 No
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused
- 37. Have you ever attempted to commit suicide?
 - 1 Yes
 - 2 No
 - D (DO NOT READ) Don't know
 - R (DO NOT READ) Refused

And now, a couple general questions:

- 38. Did you grow up in the city of Philadelphia? (PROBE, IF RESPONDENT IS UNSURE: Did you live in Philadelphia for at least a significant amount of time, when you were growing up, during the first 18 years of your life?)
 - 1 Yes, grew up or spent a significant part of first 18 years of life in Philadelphia
 - 2 No
 - D (DO NOT READ) Don't know/Not Sure
 - R (DO NOT READ) Refused

(ASK Q39 IF Q38 = 2,D,R)

39. What State did you grow up in?

(PROBE, IF RESPONDENT IS UNSURE: What state did you live in for most of the first 18 years of your life?)

01	(State)
6	(DO NOT READ) Grew up in another country (Specify)
Ν	(DO NOT READ) Moved around all of the time – didn't grow up any particular place
D	(DO NOT READ) Don't know
R	(DO NOT READ) Refused

- 40. And what city or county did you grow up in?
 - 01 Baltimore, MD
 - 02 Boston, MA
 - 03 Camden, NJ
 - 04 Chicago, IL
 - 05 Las Vegas, NV
 - 06 Los Angeles, CA
 - 07 New York, NJ
 - 08 Newark, NJ
 - 09 Norristown, PA
 - 10 Seattle, WA
 - 11 Trenton, NJ
 - 12 Wilmington, DE
 - 13 Washington, DC
 - 97 _____ (Specify city or county)
 - NN Moved around all of the time didn't grow up any particular city or county
 - DD don't know
 - RR refused

For information about the Philadelphia ACE Survey, contact:

Carolyn Smith-Brown
Philadelphia ACE Project
Health Federation of Philadelphia
801 Chestnut Street, Suite 801
Philadelphia, PA 19107
215-567-8001 x3058
csmith-brown@healthfederation.org
www.healthfederation.org

If you are interested in using the survey, please let us know and advise us of your planned use. Documenting the use of the survey helps support future developments of ACE Surveys.

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