

Adverse Childhood Experiences International Questionnaire (ACE-IQ)

Rationale for ACE-IQ

Background The consequences of adverse childhood experiences (ACEs) such as child maltreatment and other traumatic stressors for health risk behaviours and long-term chronic diseases has been the focus of a growing number of studies.

However many countries have yet to appreciate the major public health implications of ACEs and their lifelong consequences. For this recognition to spread requires that data on ACEs are collected as part of broader health and health risk behaviour surveys, and that the findings are used to advocate for and inform policies and programmes designed to reduce ACEs and promote safe, stable and nurturing relationships between children and their parent or caregivers.

Aim The International ACE Research Network has produced the ACE-IQ which will enable the measurement of childhood adversities in all countries and comparisons of such adversities between them; the drawing of associations between childhood adversities and health risk behaviours and health outcomes in later life; advocacy for increased investments to reduce childhood adversities, and scientific information to inform the design of prevention programmes.

Implementation

ACE-IQ should always be integrated into broader health surveys. Although data about adversities on their own may be useful for some purposes, the real value of ACE-IQ lies in demonstrating the associations between early exposures to ACEs and subsequent risk behaviours and health outcomes. It is only by integrating ACE-IQ into broader health surveys that such associations can be measured.

When the ACE-IQ is administered as part of broader health surveys it should be included in the middle of the instrument to ensure that an adequate level of rapport between the interviewer and respondent can be established before asking the sensitive questions it contains. As some of the questions in the ACE-IQ may cause upset for a participant it is strongly recommended that wherever the ACE-IQ is implemented a list of [reputable](#), reliable and responsible [local](#) services should be available, so that the interviewer can direct the participant to the appropriate source of help or support.

The ACE-IQ can be translated into the appropriate language for use in the country where it's being delivered, but the normal procedures of translation and back translation must be followed in order to ensure the fidelity of the translation.

Testing The current stage in the development of the ACE-IQ instrument, following international field-testing (2009-2011), is to test the **reliability and validity** of ACE-IQ by implementing it as part of broader health surveys in 6-8 countries. These surveys should aim to produce data that can be used to test the psychometric properties of the tool, compare findings across sites and with other studies, and check internal consistencies.