

HANDOUT 70.1

Utilising the ACE questionnaire in EMDR (notes and questionnaire)

(This handout consists of clinician notes – page 1 and the questionnaire on page 2 which has been very slightly modified for use in EMDR Phase 1, by David Blore PhD 2014).

Questions are arising in EMDR supervision concerning the relevance of, utility of, and issues concerning the Adversive Childhood Experiences or ('ACE') study. The following notes are not intended to be exhaustive. Each client is unique and what follows below is information that may be helpful...

Important notes for EMDR clinicians:

Please read the notes on this page first before administering the ACE questionnaire to your client. Please *do not* merely read the notes below out to clients but remember to thoroughly prepare your client first...

Adversive Childhood Experiences the cumulative nature of which, is now becoming widely acknowledged as the underlying causes for all manner of 'whole of life' ongoing health problems, including chronic mental health problems. In EMDR terms, the implication of these findings effectively acknowledges the role of the 'linear formulation' (i.e. problem development) espoused by Adaptive Information Processing (AIP) the model that underpins EMDR.

The ACE *questionnaire* (page 2 of this handout) can also be freely downloaded from http://acestudy.org/ace_score and is available in English, French, German, Icelandic, Norwegian, Spanish, and Swedish. (Please note the comments lower down on that webpage concerning fidelity of translations.)

Because of the amount of material, references, statistics etc. it is well worth visiting: http://acestudy.org/files/Review_of_ACE_Study_with_references_summary_table_2_.pdf for background to the ACE study. Carefully selected material from these pages are potentially useful in conducting EMDR, if for instance, where there is a lack of knowledge, and processing blocks or loops because of this lack of knowledge.

Utilise the ACE questionnaire in relation to Phase 1 History taking (see also Handout 3). Events relating to the answers below can be charted chronologically on time-line sheets (see also Handout 10). Please be aware of the following points:

- 1 You may need to install resources such as a safe place/calm place etc. beforehand – merely for your client to cope with answering the questions themselves.
- 2 It is possible that the sight of a completed time-line history may be the first occasion that a client has seen their life 'laid out in front of them'. It has been known for this experience to become a treatment target in its own right.

Remember the questionnaire was devised in the USA and cultural differences may occur. Experience suggests to a need to be a little wary of Q7 as there are plenty of examples of this applying to male relatives too, however, the original questionnaire focussed on female victims of domestic violence. (Several sources cite 'around 40%' of victims are male – see e.g. www.mankind.org.uk/pdfs/25%20Key%20Facts_Aug%202014%20%28final%29.pdf .)

The most important thing to remember is that *the ACE score is meant as a guideline*. If your client experienced other types of significant and enduring stress over months or years, then those would likely increase your client's risk of health consequences. Using the DES (Handout 34) and the relevant scoregrid (Handout 33) can help provide answers as to *how clients have coped with individual items on the ACE questionnaire*.

Do not omit to assess clients' existing strengths/resources in Phase 1 (see Blore 2012, p282) for suggested questions in this area.

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Client _____ Case ref _____ Date _____

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 / Yes 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 / Yes 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 / Yes 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 / Yes if Yes, enter 1 >__
5. Did you often or very often feel that ... You didn't have enough to eat, had to wear dirty 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 / Yes if Yes, enter 1 >__
6. Was a biological parent ever lost to you through divorce, abandonment, or other reason ?

No / Yes if Yes, enter 1 >__
7. Was your mother or stepmother:
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 / Yes if Yes, enter 1 >__
8. Did you live with anyone who was a problem drinker or alcoholic, or who used street drugs?

No / Yes if Yes, enter 1 >__
9. Was a household member depressed or mentally ill, or did a household member attempt suicide?

No / Yes if Yes, enter 1 >__
10. Did a household member go to prison?

No / Yes if Yes, enter 1 >__

Score
