While you were growing up, during your first 18 years of life:

10. Did	a household me	Yes	No	If yes enter 1
	a hayaahald ma	ambar a	o to pricon?	
9. Was	a household me	ember d Yes	epressed or mentally ill, No	or did a household member attempt s If yes enter 1
8. Did y	ou live with any	one who Yes	was a problem drinker No	or alcoholic or who used street drugs If yes enter 1
	Ever repeatedly	y hit at I Yes	east a few minutes or th No	reatened with a gun or knife? If yes enter 1
		or	•	_
	_	or		n, hit with a fist, or hit with something
7. Was	your mother or s			, or had something thrown at her?
6. Were	e your parents e v	ver sepa Yes	arated or divorced? No	If yes enter 1
		Yes	No	If yes enter 1
	Your parents w needed it?		-	re of you or take you to the doctor if y
5. Did y		enougl or	n to eat, had to wear dirt	y clothes, and had no one to protect y
	rour ramily didi	Yes	No	lose to each other, or support each o If yes enter 1
		or		were important or special?
4. Did y	ou often or ver			
	Allempt or actu	Yes	e oral, anal, or vaginal ii No	If yes enter 1
3. Did a	Touch or fondle	you or or	st 5 years older than you have you touch their bo	dy in a sexual way?
	Ever hit you so	hard th Yes	at you had marks or wei No	e injured? If yes enter 1
2. DIQ 8	Push, grab, sla	p, or thr or	the household often or ow something at you?	•
0 D:-I -		Yes	No	If yes enter 1
	Act in a way that		you afraid that you migl	
		or		