

FACES Assessment Guidance for Colleges and Universities

Overview

The FACES Assessment is a universal, population-level screening tool designed to identify the most commonly experienced adversities among college students, staff, or faculty. Administering this assessment allows institutions to align wellness resources with campus needs, strategically allocate mental health funding, and partner with relevant community organizations.

Background: Expanded ACEs

The FACES Assessment, developed in 2017, expands on the original 10-item ACEs questionnaire created by Felitti et al. (1998) and adapted by Ande (2011). This expanded tool includes 24 items that reflect a wide range of potentially traumatic experiences, such as exposure to community violence, housing instability, discrimination, incarceration, and academic pressure—making it more relevant for diverse campus populations.

Understanding Adverse Childhood Experiences (ACEs)

ACEs are traumatic events occurring before age 18 that can have long-term effects on a person's mental, physical, and emotional well-being. While college students may have aged beyond these experiences, the lingering impact of unresolved trauma can manifest in academic performance, interpersonal relationships, and mental health during college years. Recognizing and supporting students affected by ACEs helps institutions create inclusive, healing-centered learning environments.

The Value of Universal Screening in Higher Education

Universal ACEs screening in college settings can:

- Identify students in need of mental health and wellness support
- Guide the design of trauma-informed services and supports
- Promote equity by ensuring interventions are driven by need, not behavior
- Inform institutional policy, wellness planning, and partnership development
- Help track the effectiveness of programs over time



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Survey Administration

Delivery Methods

- Online (preferred for accessibility and ease of data management)
- Paper (optional for smaller focus groups or retreats)

Sample Size

Whenever possible, aim to reach the broadest population possible (e.g., incoming freshmen, student leaders, or departments). Larger sample sizes improve representativeness. If a smaller sample is used, analyze for patterns and be cautious about generalizing results.

Scoring and Interpretation

Total ACE Score

Each 'Yes' counts as one point. Scores range from 0 to 24. Questions with sub-items (e.g., 2a, 14a–14f) are not counted in the total score but offer helpful context.

Frequency of ACEs

Rank ACE items by how often they were reported. This can inform specific supports, trainings, or collaborations with student health, diversity offices, or external providers.

Frequency of Scores

Identify the distribution of total ACE scores across participants. Use this data to determine level of need and target campus-wide, group-level, or individual supports.

Interpreting High Scores

A score of 4 or more is considered a threshold indicating increased risk for adverse health, behavioral, and academic outcomes. This benchmark can guide tiered supports and referrals.



Tiered Recommendations for Colleges and Universities

Tier 1: Universal Supports

- Integrate trauma-informed practices in classrooms and residence life
- Offer wellness education, mindfulness, and coping workshops
- Normalize help-seeking through campus campaigns and peer support

Tier 2: Targeted Supports

- Facilitate small group counseling or peer discussion circles
- Develop mentoring programs, especially for first-gen or underserved students
- Provide academic coaching for students facing stress-related performance challenges

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Tier 3: Intensive Supports

- Expand access to individual therapy or psychiatric services
- Establish student assistance or crisis response teams
- Partner with community agencies to provide wraparound support (e.g., housing, legal aid, trauma recovery)

Contact

For questions or implementation support, contact Jamie Freeny, DrPH, MPH at jfreeny@gmail.com

Citations

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