ACEs, Cultural Considerations and 'Common Sense' in Aotearoa New Zealand

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The ACEs checklist is not yet widely used as a diagnostic tool within Aotearoa New Zealand child welfare services but its relatively low visibility at this point does not mean that some of the science behind this tool, and comparable tools and evidence, are not being used. This article will consider the ramifications of using this sort of tool within the cultural context of Aotearoa New Zealand, a country with a specific history of colonisation of Māori, and more recently a shifting demographic that has been influenced by successive waves of immigration of large numbers of Pacific Island and Asian families. This article will ask if the use of deceptively 'common sense' tools, like the ACEs checklist, can take into consideration structural factors such as racism, colonisation and poverty.

Keywords: Child welfare, child protection, ACEs checklist

Introduction

Child protection in Aotearoa New Zealand¹ is the responsibility of a single state agency, (until 2017 Child Youth and Family, now the Ministry for Children Oranga Tamariki) with many related services contracted out to non-government and private sector organisations. Comparable to many similar agencies elsewhere it has developed and adapted assessment tools for practice in determining risk to children. Aotearoa New Zealand is a country with a specific history of colonisation of Māori, and more recently a shifting demographic that has been influenced by successive waves of immigration of large numbers of Pacific Island and Asian families. In this context, for child welfare systems to be culturally appropriate to the children and families they serve, there is a need to critically explore imported tools. One such tool, the Adverse Childhood Experiences or ACEs checklist (Felitti et al., 1998), is gaining attention. While not widely utilised before 2018, the ACEs checklist is becoming better known in Aotearoa New Zealand, through a focus on models of trauma informed social work practice, expedited by a significant focus on trauma in a recent government review of child protection (Ministry of Social Development, 2015). This article will explore whether the use of such a deceptively 'common sense' tool, such as the ACEs checklist, can take into consideration structural factors such as racism, colonisation and poverty. In particular, we will examine one item captured in the checklist: parental incarceration and childhood outcomes.

Background and sociocultural context

It is generally understood that prior to colonisation of Aotearoa New Zealand Māori children were raised in an extended rather than nuclear family. Cooper and Wharewera-Mika (2011) note Māori parenting was thought to be indulgent and caring with customary beliefs and practices valuing family and children being regarded as treasures. Taonui (2010: 192) notes that 'traditional whakatauki' (aphorisms) expressing values and codes of conduct speak of the importance of children and the bond between parents and children. It is strongly held by many that contemporary child welfare statistics reflect the severe downstream and ongoing impacts of land and language loss, cultural and political alienation, racism and deeply entrenched inequalities that accompanied colonisation (Taonui, 2010; Ware et al., 2017). While Maori comprise 28 per cent of the child population, they account for 40 per cent of those notified to the statutory social work agency and made up 60 per cent of the children in care in 2015 (Ministry of Social Development, 2015). These disparities mean that many Maori families are deeply suspicious of the statutory agency, especially given a history of racism and abuse in state care (Ministerial Advisory Committee, 1984; Stanley, 2016). Ware et al. (2017: 515) note that further differences in health and education outcomes, colonialism and negative beliefs about young Māori parents in particular go on to 'produce the "problems" of social exclusion, such as intergenerational welfare dependency and negative outcomes' for families.

In Aotearoa New Zealand one particular child abuse tragedy (the death of twin babies in a Māori family) led to a series of political events (Beddoe, 2014; Hackell, 2016) in which welfare austerity policies came together with a demand for a more authoritarian and surveillant approach to child protection. This demand resulted in shifts to a more individualised approach which privileges personal responsibility and psychological dysfunction over structural accounts of cycles of poverty and historical trauma (Pihama *et al.*, 2014). Hyslop and Keddell (2018: 5) argue that the disproportionate number of Māori children who figure in these events, and in all parts of the child protection system, 'has been a significant driver in shifting the narrative away from family empowerment and towards a child rescue paradigm'. The aforementioned case brought together racism, conservative concerns about welfare dependency and gendered violence (men) and moral failing (women), with Māori men and women a particular target (Beddoe, 2014; Hackell, 2016).

The politics of child protection: common sense

The main focus of this article, the ACEs checklist, is not yet widely used as a diagnostic tool within Aotearoa New Zealand. Anecdotally we do know that social workers are starting to be given the checklist as part of training on 'trauma informed practice' which is being delivered across both statutory and NGO sector child welfare services.

Child protection does not happen in a politically neutral vacuum. Politicians with responsibility for children's services face a challenging task as each child death tests the very idea that child protection can work. It is increasingly argued that it is perhaps an unattainable mission:

the original mission of promoting child welfare and preventing abuse and neglect has been broadened to the point of excluding little by way of harm to children, with child protection organizations being given a remit that is unattainable and unsustainable (Lonne *et al.*, 2009: 57).

Surely it is just common sense, keeping children safe?

Common sense is often invoked in child welfare and protection, especially by politicians wanting to appear strong in the face of public outcry over child deaths. In the UK, Warner (2014: 1645) cites a comment by then Leader of the Opposition David Cameron (2008) where social workers are 'blameworthy specifically for following bureaucratic procedures and failing to act on "common sense". The use of common sense as a trope reinforces a divide between professionals and the public. Hall and O'Shea (2013: 8–9) however ask:

But what exactly is common sense? It is a form of 'everyday thinking' which offers us frameworks of meaning with which to make sense of the world. It is a form of popular, easily-available knowledge which contains no complicated ideas, requires no sophisticated argument and does not depend on deep thought or wide reading. It works intuitively, without forethought or reflection. It is pragmatic and empirical, giving the illusion of arising directly from experience, reflecting only the realities of daily life and answering the needs of 'the common people' for practical guidance and advice.

In this reading 'common sense' is also persuasive because it arises in 'nature' (Hall and O'Shea, 2013). It is thus neatly positioned as a discourse of the common citizens against expert (and bureaucratised) knowledge in which professional judgement is applied in each unique situation and each decision is grounded in knowledge and tacit expertise.

It is a paradox that keeping children safe from abuse and neglect is seen as common sense, whilst the policing of professionals has become more rigorous and the policy arm of governments in many Western countries has favoured the development of checklists and assessments tools. When this simplistic approach is dominant it is often posed as a solution to variable decision making rather than instilling the kind of in-action and onaction critical thinking skills that underpin professional practice.

Adverse childhood experiences: the ACEs checklist

The ACEs checklist was first conceptualised as the result of an attempt to understand links between childhood experiences and long-term health outcomes (Felitti *et al.*, 1998). It is important to understand that this initial research was undertaken with a US based population sample consisting of, mostly, white, average to well off, insured patients within a medical setting (Wade Jr *et al.*, 2016), and that the questions developed for the checklist were not the result of a rigorous review to select those variables most likely to predict health outcomes (Finkelhor, 2017). Using such populations, with limited samples, as a 'norm' from which to judge global populations is a noted problem (Henrich *et al.*, 2010), and despite a growing body of research showing some global generalisability for the ACEs checklist (Stoltenborgh *et al.*, 2015; Hughes *et al.*, 2017), we would add our voices to the calls from others in this themed section that the ACEs checklist often fails to consider wider societal pressures. Of particular concern for us in Aotearoa New Zealand is that the ACEs checklist fails to adequately account for the (often) entangled effects of poverty, racism, and colonisation.

A critique of ACEs through considering incarceration rates

There have been calls to consider expanding the ACEs checklist to incorporate other, more societally based factors, such as bullying, neighbourhood, schooling and socioeconomic status (Finkelhor *et al.*, 2013); however, to our knowledge, no one has considered the list with regard to colonisation and indigenous peoples. It is important to note that parenting assessment frameworks are often another tool of colonisation reifying Western notions of family and children (Choate and Lindstrom, 2017), and whilst the ACEs checklist is not specifically a parenting assessment, it does ask questions that assess parenting behaviours and assumes certain family structures. It is not our intention here to provide a *comprehensive* overview of what a critique of ACEs from a colonisation or even decolonisation perspective might look like (and arguably as Pākehā (New Zealand European) women our views on this are limited). However, we would like to sketch out some concerns we have by using one of the questions in the original checklist by way of example.

Within the original ACEs checklist, respondents are asked 'Did a household member go to prison?' (Felitti *et al.*, 1998). We note there are substantial associations between parental incarceration and childhood outcomes (Bell *et al.*, 2018). However, we want to trouble the notion that analysis of the relationship between parental incarceration and childhood outcomes should stop there. Incarceration rates are differentially impacted by ethnicity, a point that Allen and Abresch (2018: 286) note in cautioning that 'social determinants often lie upstream from ACE variables'. Thus, we suggest that a concentration on incarceration as a question obscures the impact of racism in considering what might be adverse childhood experiences; and, critically, it individualises a larger societal problem.

In Aotearoa New Zealand, much like many other colonised nations, our indigenous population, Māori, experience differential incarceration rates (Morrison, 2009). These differential rates are not limited to convictions: rather, we know that, in comparison to Pākehā, Māori are four to five times more likely to be apprehended, prosecuted and convicted, seven and a half times more likely to receive a custodial sentence, and eleven times more likely to be remanded in custody (Morrison, 2009). For Māori women, in comparison to Pākehā women, the figures are more stark, with them being five and a half times more likely to be apprehended and ten times more likely to be given a custodial sentence (Morrison, 2009).

Whilst the ACEs question, as it is framed in the checklist, asks about 'prison', the subheading states this is a measure of 'criminal behaviour in the household': a small but not insignificant distinction that demonstrates lack of rigour. Whilst it could be argued that prison is a measure of criminal behaviour, as a question this is limiting. This can be illustrated through examining the differential rates for less serious sentences: Māori are more likely than Pākehā to be given community service and/or periodic detention than a monetary fine, something Triggs (1999) notes is likely due to financial resources. Thus poverty (and presumably poverty exacerbated by racism) impacts on whether a person is able to avoid certain sentences despite the initial crime being similar. The inevitable result, in terms of the ACEs checklist, is that the criminal activities of Pākehā parents are significantly less likely to be captured than those of Māori parents, thus creating 'false negatives' in addition to failing to capture the impact of institutional racism. In both examples, what is done in response to the information gathered through surveillant data collection is a crucial question – but one beyond the limits of this brief article. Therefore, the question itself, set up to measure the impact of parental criminal behaviour (through parental incarceration) on children, often measures the impact of racism (in the case of Māori children) and relative privilege (in the case of Pākehā children).

We would also note this is not a problem that is likely to be confined to those countries with indigenous populations and a history of colonisation, as differential incarceration rates can be seen across other minority populations in other countries (Mitchell, 2005). For example, we hypothesise that the increased surveillance of Muslim families for radicalisation, something that social workers are being drawn into (Stanley and Guru, 2015), could well result in differential incarceration rates across Western nations, again with the ACEs question set up to measure the impact of parental incarceration on children, instead demonstrating the impact of racism, thus creating similar challenges to those we have discussed. These approaches while superficially appearing to be 'common sense' mask deep inequalities and ongoing harm.

By way of example, recent attempts to introduce a data driven risk checklist in Aotearoa New Zealand have seen the development of a predictive risk model that uses existing government data to generate 'scores' of risk for any given individual child (Keddell, 2015). An analysis of the performance of the model found that Māori families were over-represented in the results, with the researchers unsure of the reasons for this (Rea and Erasmus, 2017). However, the recommendation from the researchers were that the model should still be deployed (Rea and Erasmus, 2017). To date the model has not been implemented, with the new Minister stating she has no immediate plans to do so (Martin, 2018). However, this has not stopped derivations of the Aotearoa New Zealand model being used in other areas².

Finally, whilst we note that there is some acknowledgement by the police in Aotearoa New Zealand that racism, at least of the implicit kind, is a problem (Bush, 2015) and there is therefore a move to change attitudes, change is likely to be slow and does not mitigate against harms already done. Further, given the ACEs framework is one based on retrospective experiences, it is likely to be years before one could conceivably, and even ethically, ask a question about parental incarceration without considering the impact of racism (for either Māori *or* Pākehā children).

Conclusion

In conclusion then, through considering one part of the ACEs checklist, we have troubled the notion that it is capable of being used across multiple populations with little regard for systemic issues. We are concerned that the deployment of such a crude assessment tool invisibilises structural explanations for adult problems. This invisibilisation is invoked under the rubric of 'common sense', a rubric that highlights the individual at the expense of the societal through seemingly comprehensive risk assessments and checklists, and, at least in this instance, reifies Western and white-centric structures of family and ways of parenting. In particular, we are worried that a tool developed with no consideration for colonisation, poverty and racism might be deployed and used against populations that have a long history of having such tools used against them. We would prefer to see an Aotearoa New Zealand model of what Featherstone *et al.* (2018: 164) describe as a 'serious holistic approach to support that reduces the multiple intersecting harms that children suffer'.

Notes

- 1 Aotearoa is the Māori name for New Zealand.
- 2 For a discussion of how the model has been adapted for use in the United States, see Eubanks (2017).

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