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Realising children's rights in an ACE-aware nation

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Emma Davidson and Laura H.V. Wright

Abstract

An established body of multi-disciplinary evidence demonstrates that children and young people's lived experiences and spheres of influence are fundamental to their wellbeing and realisation of rights, with adversity suggested to have significant and long-term consequences. For the past two decades the Scottish Government has responded with a sustained strategic commitment to children and preventive policy measures. Only recently have Adverse Childhood Experiences (ACEs) assumed a prominent role in this context. A corresponding policy development in Scotland has been on children's rights, with significant steps taken towards implementing the United Nations Convention on the Rights of the Child (CRC). This has involved a focus on incorporation, with the tag line 'making rights real'. By analysing key literature and policy documents, this article considers the extent and shape of the interconnections between these policy areas. Informed by Carol Bacchi's problem representation framework, we identify evidence of conceptual pairing. However, deep engagement in children's rights appears to be lacking, as is children and young people's active role in national ACE-policy review and development.

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Introduction

An established body of multi-disciplinary evidence demonstrates children and young people's lived experiences and spheres of influence are fundamental to their wellbeing and realisation of rights, with early life adversity suggested to have significant and long-term consequences. These concerns are at the forefront of Scottish policy through sustained strategic commitment to the early years and preventive policy measures. Recently Adverse Childhood Experiences (ACEs) have assumed a prominent role in this context, employing a public health approach to preventative action on childhood adversity.

ACE-critical research has responded, voicing concerns that ACE-policy assumes family, parenting, and more specifically mothering practices, to be the source (and solution) to adversity. Others have pointed to the neglect of material factors and structural processes (Edwards et al., 2019; see also https://blogs.ed.ac.uk/CRFRresilience/). While recent policy has sought to contexualise ACEs within an inequalities framework (Public Health Scotland, 2020), a gap has been the consideration of children's rights within the emergent ACE-policy. This article addresses this absence. Informed by Carol Bacchi's (1999; 2009) 'what's the problem represented to be' (WPR) approach, we examine key Scottish ACE-policy documents, interrogating the relationship between ACEs and children's rights. By shifting the focus from 'problem' solving to 'problem' questioning, we reflect on the way constructions of public policy can leave other issues – such as children's rights – underexplored or neglected.

We begin by discussing our methods of analysis and interpretation. This is followed by an examination of how and when ACEs developed, and their emergence as a social policy issue in Scotland. This origin story is contrasted with the concurrent development of Scottish children's rights. A brief policy analysis follows which explores the representations of ACEs and their conceptual pairing with children's rights. Embedding a child rights-based approach, we argue, can helpfully shift the individualised problem-based critique of ACE-policy to a collective strengths-based approach. Our aim is to begin a nuanced conversation on the complex interconnections between ACEs and children's rights, and to highlight the possibilities that can come from engaging children and young people meaningfully in this process.

Methods of analysis and interpretation

Bacchi (1999; 2009) notes that often, when a policy problem is being discussed, it is written as *the* only possible interpretation of the issue. Macvarish and Lee (2019) have argued that such a presumption exists in relation to ACE-policy development in the UK (specifically England and Wales) with the link between ACEs and long-term negative outcomes having been prematurely accepted as the necessary policy solution. Similarly, White and colleagues (2019:458) note that despite significant gaps, the evidence 'deployed by the 'ACE movement' advocates and by policy-makers is promoted as scientifically definitive'. Bacchi's (1999:1-2) work is significant to this understanding since it reminds us that 'any description of an issue or a 'problem' is an interpretation, and interpretations involve judgement and choices'. Children's rights, we argue, are another equally credible and potentially more

effective way of framing a policy response to childhood adversity. They have not, however, garnered the same momentum as ACEs.

To interrogate the engagement of ACE-policy development with children's rights, we studied ACE-literature and a sample of Scottish reports and policy documents identified as having a key role in establishing ACEs and associated interventions within the policy lexicon. These include the National Programme for Government, publications by the NHS Health Scotland, Public Health Scotland and Education Scotland, as well as reports by national third sector organisations. Several children's rights organisations and academics were contacted for their knowledge on initiatives or published documents on ACEs which include a consideration of children's rights. While there are some policies that interconnect these two areas, or allude to them, there is a dearth of literature that directly explores their relationship.

As mentioned above, our analysis has been informed by Bacchi's 'what's the problem represented to be' (WPR) approach (1999; 2009). The task in a 'WPR' analysis is to read policies with a specific focus on examining how the 'problem' is represented and to subject this problem representation to critical scrutiny. This approach also attends to the silences and, in turn, how the problem might be thought about differently (Bacchi, 1999:4). Our first analytical step was to search each document for keywords that intimated children's rights, including right(s), participation, and the CRC. Our aim was to identify those ACE-policies which included a reference to children's rights. Those that did were recorded and examined to determine the nature of the connection made. Next, we examined how the 'problem' of ACEs was represented with respect to children and young people. Are they conceptualised as passive 'becomings' or active social beings in the construction of their own social lives; are they considered 'beings' or as future adults? Finally, we examined documents for evidence of children and young people's active, meaningful participation, whether in related-research or in policy development.

It should be emphasised that the analysis is not a systematic review. As such we recognise document selection is selective and subjective. The expressed intent is to provide an initial step towards deeper reflection on the conceptual pairing of ACEs and children's rights and provoke a much-needed conversation on how the two fields can be better connected.

ACEs and their emergence in Scotland

ACEs were first documented in the CDC-Kaiser ACE Study (Felitti et al., 1998) and are used, broadly, to refer to stressful events occurring before the age of 18 that diminish health and wellbeing across the life course and generations. The original study, based in the United States, identified ten such adversities, including different forms of abuse, neglect and household circumstances (including substance misuse, mental health problems, domestic abuse and parental separation) and concluded that the more of these a child experiences, the more likely they will suffer long-term, negative effects on learning, behaviour and health. Recent ACE-informed research has been concerned with the links between ACEs and epidemiology, neurobiology, and the biomedical and epigenetic consequences of 'toxic stress' (defined as prolonged activation of stress response systems in the absence of

protective relationships). Childhood adversities and toxic stress are described as having a lasting consequence on the genetic predispositions affecting the 'architecture' of the developing brain (Shonkoff, 2016). A key finding from this body of work is that supportive relationships with significant adults and the wider community can act as a 'buffer' against adversity and its negative effects.

The impact of the original ACE study and its associated body of work has gained momentum internationally as a compelling public health movement (World Health Organisation, 2009; Strompolis et al., 2019). Only in the last few years have ACEs assumed a critical role in the Scottish Government's strategic commitments. The Programme for Government, 'A Nation with Ambition' was the first national strategy to include a reference to ACEs, with the commitment to 'embed a focus on preventing ACEs and supporting the resilience of children and adults in overcoming early life adversity across all areas of public service, including education, health, justice and social work' (Scottish Government, 2017:73). While public services are attributed a role in tackling ACEs, the key site for intervention is the early years. Interventions at this stage hold a promise of reducing ACEs occurring later in the adult population.

The strategic commitment given in 2017 was followed by other key developments including a ministerial event on ACEs in March 2018, the establishment of a Scottish ACEs Hub based within NHS Health Scotland and appointment of a full-time Scottish Government post to lead the ACE agenda. Investment in national trauma training was announced in 2018, while local community-led ACEs 'hubs' developed across Scotland. Public Health Scotland's childhood adversity team has hosted over 48 events on ACEs since 2017 (Public Health Scotland, 2020:34) and published several reports. Most notably 'Polishing the Diamonds' (Couper & Mackie, 2016), and 'Adverse Childhood Experiences in Context' (Public Health Scotland, 2019) have established ACEs in Scottish public health policy. Public Health Scotland (2020:10) contend that this work has brought ACE research to different fields of practice, many of whom had not previously utilised health-based research. In this regard, Trevor Spratt and colleagues (2019) have conceptualised ACE research as a critical bridge between professions, supporting a shared understanding of how early life can impact on later social, health and economic life outcomes.

At the same time as 'ACE science' was becoming of interest to Scottish Government and policy makers, an independent self-declared ACE-movement emerged, spearheaded by organisations connected baby and TIGERS (see http://aceawarescotland.com). With the 'making Scotland the world's first ACE aware nation' tagline, this campaign has delivered extensive public awareness events across Scotland and a national tour of the documentary, Resilience, an offering from the United States which explores the 'insidious effects' of toxic stress (see https://kpjrfilms.co/resilience). Film screenings and panel discussions took place in every local authority in Scotland. TIGERS and connected baby co-hosted a national conference on ACEs in 2018 at which both the First Minister and Deputy First Minister spoke, attracting over 2,500 delegates.

Problematising ACE-informed policy

While ACEs have been mainstreamed, the approach, and more significantly, the ideology, has faced critical analysis. The narrow definitional focus of ACEs and the resultant exclusion of forms of adversity relating to material and social conditions has been central to this critique (see https://blogs.ed.ac.uk/CRFRresilience/). While some studies and surveys have examined structural inequalities in their analysis (NHS Health Scotland, 2017; Marryat & Frank, 2019), it has been argued that making ACEs the foundational policy concept comes 'at the expense of considering poverty and hardship as causal in poor health and education outcomes' (Edwards et al., 2019:413). While subsequent Scottish policy has expressly cautioned against such definitional narrowing (NHS Health Scotland, 2019; Public Health Scotland, 2020), critiques maintain that ACEs conflate different issues, and thus remain conceptually chaotic (White et al., 2019). Others have interrogated the specific application of ACE questionnaires, routine ACE screening and ACE scores, judging such approaches as simplistic, having limiting item coverage and collapsing items and response options (McLennan et al, 2020; Finkelhor, 2018). The Children's Commissioner for Wales (2017:1) position paper on ACEs echoes these concerns, stating: 'There could be some real issues around labelling children in terms of '3 ACEs', '5 ACEs', etc., which is a fairly crude way to measure trauma'. Barret (2018) has similarly stressed the need for caution in the use of ACE-scores as a means of determining the extent of trauma, or the best form of intervention. Children's own understandings of trauma, she argues, are neglected in ACE-aware approaches, while focus on negative events can leave children disempowered.

The loose conceptualisation of ACEs, and ACE-work, has also resulted in concerns over them being used as a tool in a punitive public health agenda concerned with identifying and targeting 'dysfunctional families' suitable for intervention (Edwards, Gillies & White, 2019:411). Blaisdell (2018) has argued that the ACE agenda in Scotland has the potential to reinforce what Tuck (2009) refers to as a 'damage narrative'. Rather than holding those in power to account, these narratives can reinforce particular ideas about children and society: where the 'poor' child is a site of damage to self and society; where professionals labels children and seek to 'fix' them; and where structures of oppression remain unchallenged and unchanged. These are reinforced by the lack of consultation and collaboration with children and young people when collecting ACEs data and assessing their 'ACE scores' and failure to explore, in partnership with children and young people, their perspectives on the impact of said scores on their lives. Solutions for 'fixing' the problem have been critiqued for their alignment to individualised, neoliberal notions of resilience, an approach that differs from social, ecological and relational forms of resilience that connect with social inequalities (Davidson & Carlin, 2019).

Policy solutions established in ACE-literature cannot be considered novel. Early years pioneers have long recognised the significant and enduring impact of childhood experiences on our adult lives (Bowlby, 1968; Aisworth, 1978), although attachment theory can also be critiqued and disrupted (see White et al, 2020). Social work and youth work have historically been guided by a commitment to relational-based practice (Ingram & Smith, 2018). That the ACE public health movement has enabled existing solutions to gain wide traction raises the issue central to this paper: that policy cannot only be understood as a 'response to existing conditions and problems, but more as a discourse in which both problems and solutions are

created' (Goodwin, 1996:67). The 'success' of ACEs can be attributed to their alignment to positivism and problem definition, exemplified by its association to medical and health based scientific knowledge, representative population studies and evidence-based solutions. This is not to deny their relevance or contribution, but it is an accomplished example of packaging well practiced solutions in a credible, digestible and definitive way. As Burnley (2020) in this issue explains, viewing solutions through an ACEs lens enables a common language between services that were previously disparate and siloed.

The question remains, where do children and young people's own views and experiences feature in this 'common language' and to what extent are there opportunities for them to shape and inform policy in relation to their wellbeing and rights?

Children's rights policy development in Scotland

While children's rights policy in Scotland developed over a similar period to ACEs, its foundational principles are much older. The United Nations Convention on the Rights of the Child (CRC) was ratified in the United Kingdom in 1991, establishing the social, economic, cultural, civil, and political rights of children. The CRC was subsequently enshrined in Scots law through the Children and Young people (Scotland) Act 2014 which included commitment to 'ensure children's rights properly influence the design and delivery of policies and services by placing new duties on the Scottish Ministers and the public sector' (Scottish Parliament, 2013:1).While it places clear responsibilities on ministers and government, the Act has vague and non-binding duties, an issue which led to criticism that it 'lacked the teeth' for holding minsters and public authorities to legal account. Scotland's National Practice Model, 'Getting it Right for Every Child' (GIRFEC), seeks to combine children's rights and wellbeing to make Scotland the best place in the world to grow up, and has made laudable contributions to young people across the nation. Yet it also has no legal CRC implications. While the aspirations of the Scottish Government are supported by a myriad of progressive acts, in 2015, scholars such as Tisdall and Davis, stressed that policies were still not radical enough.

Since then, a passion and commitment to children's rights has grown rapidly with the government using the tagline 'making rights real' for children as a policy promise (Gadda et al., 2019) and placing an emphasis on integrating children's rights into policy and legislation. The 2018-2019 Programme for Government included, for example, a commitment to incorporating the principles of the CRC into Scottish domestic law (Scottish Government, 2019). Additionally, Scotland's First Minister established an independent Advisory Group on Human Rights Leadership to make recommendations for Scotland to lead by example in human rights. The government also enhanced its emphasis on Article 12 (children's participation), striving to act as an international leader in meaningful child participation. Given that the Article 12 has been considered 'radical and far reaching' and as a CRC article that is 'most widely violated and disregarded in almost every sphere of children's lives' (Shier 2001:108), Scotland's commitment to participation is profound. In 2018, Scotland hosted a 'Year of Young People' to create space for children and young people to take leadership through diverse creative and innovative forms across the country. This, alongside actions to involve Children's Parliament, the Youth Parliament, and other bodies

in parliamentary and ministerial dialogue, as well as documents to support integration, highlights an enhanced recognition of the need to embed children's rights into legislation and practice (Gadda et al, 2019:10). Never before, Gadda and colleagues (2019:393) conclude has children's rights, and particularly the CRC, held such promise in Scottish national policy.

The representation of children's rights policy

In contrast to the individualised, deficit-based approach often associated with ACE-work, children's rights in Scotland tend to operate from a strengths-based approach. Policies that use a child rights based approach (CRBA) embed the four general principles of the CRC: non-discrimination, best interests of the child, maximum survival and development, and child participation (articles 2, 3 (1), 6, and 12 respectively). A CRBA also 'takes account of the relational dimension of rights' recognising human rights are about relationships as well as entitlements (Collins and Wright, Forthcoming). Relational rights respect rights as 'elements of children's everyday relationships and interactions' and as tools that children can be used to participate in shaping their social worlds (Kenneally, 2017:336). With participation being central to children's rights policy, the Scottish government has committed to 'continue to listen to young people's views, making sure they can contribute to our society and help us build inclusive and strong communities' (National Programme for Government, 2019:183). In contrast children's voices are 'noticeably absent from the ACE agenda' with young people rarely invited to engage in conversation in 'what would help them' (White et al., 2019:463). Furthermore, White and colleagues (2019:463) critique the focus ACE-work gives to the vulnerable victim narrative, in which young people are subject to monitoring, diagnosis and risk.

Within Scotland, the rhetoric of 'Making Scotland an ACE-aware Nation' has arguably done the same, since it emphasises the role of the adult as expert, with little room for children and young people themselves. This child-saving narrative, which considers the child as simply innocent and a victim, is 'inherently restrictive and disrespectful of rights' (Collins and Wright, Forthcoming).While this prioritisation of child protection over child participation has also been critiqued from within the children's rights sector, there is a concerted effort and commitment by children's rights activists globally and by the Scottish government to prioritise children's meaningful participation and to recognise the universal and interrelated nature of children's rights.

Through embedding children's rights into written policies, the Children's Commissioner of Wales (2018) argues that we can move 'the conversation on from ACEs being about a deficit in children' or something wrong with them to a more 'positive message about children's rights to receive services' that address systemic social inequalities and support children to thrive. Taking such a position could help dissolve the prevailing damage-based narrative associated with ACEs. Moreover, strengthening the relationship between children's rights and ACEs can shift the narrative to a strengths-based, relational and interconnected dialogue that respects children and young people's engagement *and* embraces the complex realities of their everyday lives, spheres of influence and the services around them. Child rights-based organisations in Scotland, such as Together Scotland, argue that efforts to

mitigate ACEs can and should be 'fundamentally underpinned by a national, legally-embedded commitment to upholding children's human rights in Scotland' (Together Scotland, 2018).

The conceptual pairing of ACEs and children's rights

To understand the extent to which ACEs are underpinned by a commitment to upholding children's rights, we have examined a selection of policies and reports guiding ACE-policy development in Scotland.

While not exclusively concerned with ACEs, 'The National Programme of Government' is illuminating since it establishes the actions that the Scottish Government plans for the following year. In the plan for 2016-17, early intervention, prevention and the GIRFEC model are central to the government's strategy for supporting children and families. Neither childhood adversity, nor children's rights, are mentioned (Scottish Government, 2016). There was a change in discourse the following year (Scottish Government, 2017). Several references to ACEs and childhood adversity were observed, all in relation to early intervention, prevention and the metaphorical notion of 'building' a strong foundation for children, young people and wider society. Children's rights also emerge as a core facet of strategy. The Year of Young People 2018, a global first, is presented as the flagship for a range of commitments towards embedding children's rights within the fabric of Scottish society, notably in the form of intergenerational partnerships and the possible incorporation of the CRC into Scots law. Direct connections are made between adversity and children's rights. This includes a general commitment to rights as a means through which to 'drive better decisions that prevent harm and encourage development of our young people', while more explicitly, children's rights are considered central to mitigating the impact of ACEs:

> Our focus on prevention from the earliest years of a child's life, including improving the rights of young people, will reduce the impact of adverse childhood experiences and ensure our young people begin their adult lives from strong foundations. (Scottish Government 2017:71)

Policy focus on ACEs continued in 2018-19, with action against them judged as a 'moral imperative'. Public Health Scotland were tasked with progressing action, which included 'awareness raising' by the Scottish ACEs Hub, national trauma training and funding development and testing of routine enquiry of ACEs in Scotland (Scottish Government 2018:14). It was stated that societal awareness of ACEs will be increased through 'progressing work on children's rights in Scotland', however, references to children's rights were largely focused on incorporation and legislative change with the promise to:

> listen to the voices of children and young people in the decisions that affect them now and will incorporate the principles of the UN Convention on the Rights of the Child into domestic law (Scottish Government 2018:75).

Commitment to preventing ACEs is rehearsed again in the most recent plan by addressing ACEs and their role in ensuring that children and young people can fulfil their rights (Scottish Government, 2019).

The public health perspective on ACEs, as noted above, has been progressed primarily by Public Health Scotland and the Scottish Public Health Network, with several flagship papers on ACEs. Over time the public health perspective has evolved, with recent reports reflecting a more complex understanding of ACEs in the context of structural factors such as poverty, inequality and discrimination (Public Health Scotland, 2019; 2020). The importance of multiple perspectives is stressed, with recognition that ACEs can be understood as a rights or social justice issue (Public Health Scotland, 2019:3). In Public Health Scotland's recent publication, 'Ending childhood adversity: A public health approach' (2020), we find a welcome emphasis on children's rights. The report begins by stating that it is 'not acceptable nor inevitable that children's opportunities and rights should be limited by adversity' (2020:6). The public health approach to ACEs, it argues, has the potential to energise engagement with children's rights. Moreover, it emphasises that strategies aimed at respecting, protecting and fulfilling children's rights are in themselves likely to reduce childhood adversity. It concludes by advocating for a children's-rights approach 'to listen to the views and experiences of children and young people when developing policy and practice which impact on children and young people's lives' (2020:39).

Children's rights also feature in documents concerned with the attainment gap. A report by The Scottish Adverse Childhood Experiences Hub (2017:6) emphasises children's rights by advocating for a 'child-centred, ACE-informed, rights-based approach, which is founded on an understanding of brain development and attachment theory'. It goes on to stress the role of the Children and Young People's Act in strengthening children's rights and the need for schools to create a nurturing and caring learning environment with children's rights underpinning their work. Education Scotland's (2018) contribution to ACE-work reports on the commonalities between a nurturing approach, ACEs awareness and trauma informed practice in an educational context. While there is no specific reference to children's rights, the report highlights the importance of building on the child development frameworks already established by GIRFEC.

Although children's rights were discussed in several of the policies examined, overall, there was a dearth of literature, policy and practice which included children and young people's participatory engagement in ACEs policy or practice development. A few notable examples include the Scottish Youth Parliament's (SYP) 'Rights: The Missing Pieces of Childhood Adversity', a resource designed by young people to 'raise awareness of a rights-based approach to tacking childhood adversity' (Scottish Youth Parliament, 2019). In the report, the SYP advocated for stronger rights protection and greater awareness on rights in policy and practice on adversity and invited children and young people to share their perspectives. Another key document identified included research conducted by Brady and Lester (2018). Based in England, the research engaged seven young people (ages 16 to 24) in the early phases of an ACEs systematic review to assess relevancy of the evidence to the UK context and young people's lived experiences. While we acknowledge that there may be additional examples taking place in local spaces, such as in schools or within research, the practice does not appear to be commonplace, nor it is part of the overarching strategic level dialogue.

Discussion

We have interrogated ACEs policy to identify those sections of text where 'children's rights', in some form, are referred to. With key exceptions, the majority cite children's rights explicitly, albeit briefly, as a component of ACE-work. These typically conceptualise the fulfilment of children's rights as a consequence of addressing ACEs. In other words, tackle childhood adversity; realise rights. One of the most explicit examples of children's rights cited features in NHS Highland's Director of Public Health Annual Report (2018:38). Here, the ACEs described in the film 'Resilience' are mapped onto specific articles of the CRC. As Stinson (2017) observes, this exercise demonstrates clearly the commonalities that exist between ACE-work and the promotion of children's rights. However, in this example, and in the policies examined more generally, references to children's rights in ACE-policies tend to be broad and non-specific. While this appears be a subtle point, the distinction between referring to children's rights nominally and it forming part of a rights-based approach has implications for the realisation of children's rights.

Further insight can be gained by examining the way in which children and young people are conceptualised in ACE policy. The popular narrative can be summarised in the description of children as 'like diamonds: their potential is inherent, but they need to be polished with care and attention' (Couper and Mackie, 2016:5). Here and elsewhere, children are primarily recognised in relation to the principles of protection and provision. Adults, and society more generally, are assigned the role of expert and the moral responsibility for action to protect the future health of society: 'Our driving principle is simple: if we invest in our young people now, everyone will benefit' (Scottish Government, 2017).

The conceptual construction of children within ACE-policy tends to emphasise the fragile 'becoming child' (Uprichard, 2008), where adult professionals provide solutions for putting them on the path to becoming a 'completed being' (Lee, 2002). This conceptualisation not only limits the scope for children, young people *and* adults to be seen as in the process of 'becoming', but it makes children and young people relatively powerless in informing the policies shaping their social worlds. The examples demonstrate limited participatory engagement with children and young people on the 'problem' of ACEs. There are notable exceptions (Scottish Youth Parliament, 2019; Lester et al, 2019), yet on the whole children remain passive to adversity and to the solutions constructed on their behalf. Adults' concerns about children and 'young people's best interests and protection' are 'squeeze[ing] out children and young people's right to participate' (McMellon & Tisdall, 2020:160).

The language of ACE-policy actions and interventions can also be problematised in terms their alignment to individualised, solution focused approaches. 'Polishing the Diamonds' (Couper &Mackie, 2016) suggests more effective use of scientific knowledge, 'serve and return' interactions, adaptive coping, sound decision-making and effective self-regulation. Such technical, 'expert' terminology fails to take account of those aspects of everyday life children and young people see as important, such as safety, fairness, respect, inclusion, environment, play, relationships, bullying, money, transport and involvement in decisions (Walsh, 2019).

There are, nonetheless, significant and positive indications that children's rights are increasingly being considered within ACE-work. This shift is most notably identifiable in Public Health Scotland's report, 'Ending Childhood Adversity: A Public Health Approach' (2020) where children's rights are explicitly stated and where the approach moves beyond narrow ACE rhetoric. This is encouraging progress. But to return to Bacchi, what is left unproblematic in this problem representation? Where are the silences? And can the 'problem' be thought about differently?

ACE-critical research has expressed concern over the neo-liberal individualisation inherent within ACE policy. It has also been suggested that ACEs run the risk of defining our youngest cohort by their deficits. Furthermore, it risks defining children and young people by 'deficits' that are pre-determined by adults without dialogue on how experiences have impacted their lives and whether they themselves consider the process and result of their experiences as deficits or strengths (for example, divorce of parents). Services will correspondingly respond by 'fixing' the problem, rather than engaging with children as active agents. There is also the issue of conceptual chaos given the ACE lens can be applied in many ways, as Public Health Scotland (2020) attest. Barret (2018:n.p) notes that there is a massive difference between being 'ACE-aware' and 'trauma-informed practice', concluding that 'no matter how well-intentioned this movement may be, we need to be extremely mindful that we are not further traumatising the very children and families this movement is claiming to be helping.'

Despite some examples of children and young people being consulted on ACE-policy, there is a lacuna of active participation that goes beyond tokenistic gestures of engagement. We argue that further gains can be made by aligning ACEs more squarely within a child rights-based approach. Working in partnership with children and young people to explore their lived experiences, and making a commitment to engaging them in the policy development process, offers the potential to remove hierarchal positioning of rights and embrace children's protection, provision, and participation as relational and of equal value.

Conclusion

Bacchi's approach to policy analysis encourages deeper reflection on the 'contours' of a policy issue. It reminds us that descriptions and 'definitions' of issues or problems are interpretations that 'involve judgement and choices' (1999:1-2) and should not be merely accepted without critical reflection. We note the shift in Scottish policy discourse which increasingly acknowledges the complex, contextual and multi-dimensional nature of adversity. There is also encouraging indications that children's rights are being embedded more consistently in Scottish ACE-policy. However, the concerns over the individualised, deficit focus on ACEs are justified, as is the concern that a focus on ACEs overlooks material and structural conditions. There is, we suggest, potential in exploring a child rights-based approach in the context of ACEs in Scottish policy. Such an approach could move beyond a narrow scoping of the 'problem' and embed children and young people's own views, experiences, and critically their strengths, into policy solutions.

The current COVID-19 pandemic has heightened pre-existing systemic and structural inequities and discrimination. Scotland could quite easily resort to identifying a narrow problem to fix children and young people and add COVID-19 related factors to the ACE scoring. However, Scotland's distinctive policy landscape provides potential to operate from a child rights-based approach that forefronts children and young people's meaningful and active participation, in reflecting on their own lived experiences and as partners in policies and practices that impact their lives. Several of Scotland's child and young people centred organisations, such as the Children's Parliament and Young Scot, are working with children to share their experiences of COVID-19 and make recommendations for services, supports, and actions needed for their rights to be realised at present and in the future. The Scottish government and the Observatory for Children's Human Rights in Scotland developed Children's Rights Impact Assessments on COVID-19 with a child friendly version to engage children and young people in the conversations going forward (Observatory of Children's Human Rights Scotland and Children and Young People's Commissioner Scotland, 2020). A growing respect for and prioritisation of children's rights in the nation is evident. There is, therefore, both the opportunity and enthusiasm to continue to develop a more holistic position on ACEs which truly embeds children's rights. As Stinson (2017) states:

> Children's rights aren't 'yet another programme' we have to fit in. The UNCRC provides a framework to underpin all the agendas and initiatives we are currently taking forward in Scotland, including ACEs. (Stinson, 2017: n.p)

As shifts are beginning to occur in policy documents, with the Scottish government having committed to full incorporation of the UNCRC into Scotland's domestic law by 2021, this is a pivotal time to actively push forward a uniquely Scottish national child-rights based policy approach that can recognise adversity and move towards fulfilling rights of children and young people.

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