



Cornerstone VR in Family Support

June 2020

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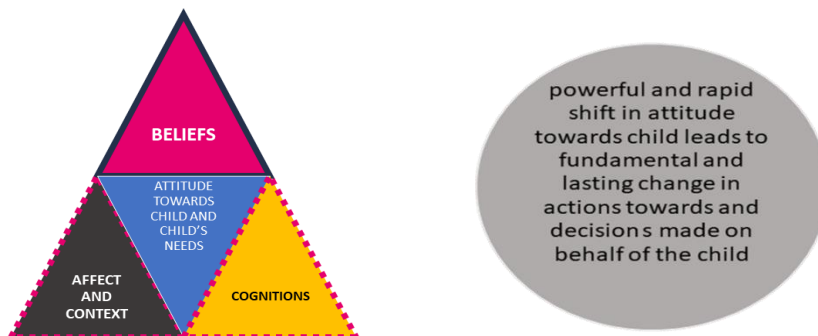
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2. Introduction to the Cornerstone Virtual Reality Programme

- 2.1 Cornerstone VR™ was born out of innovation and partnership, driven by a need to improve the life chances of children in the care system.
- 2.2 It was developed to use immersive technology, and film, to tackle the issues of adopter recruitment and training by the founders, both adoptive parents.
- 2.3 Initial evaluations indicated that this was revolutionary in social care and, as Cornerstone VR™ is more widely tried and tested, the more adaptable its use in the wider children's care sector becomes evident.
- 2.4 The interactive immersion enables parents; carers; teachers; social workers; judges; barristers; health professionals, and wider professionals to understand how trauma and abuse impacts upon children's development and behaviour.
- 2.5 As individuals, in our interactions with others we rely on the inter-relation of affect (feelings), behaviours (interactions) and cognitions (thought). Diagram 1 illustrates simply that if we are seeking to change behaviour, we must simultaneously change the individual's mood (attitude); the individual's cognitions (thinking); and create the right conditions (context - reduce stress and strains). If you provide a person with an experience that allows them to think differently and change their attitude - whilst reducing stress and strains - you can affect their underlying beliefs to secure long-lasting change.

Diagram 1



- 2.6 The evaluation, collected from users of the VR programme, shows that through using immersive VR, we can help to change an individual's thinking and interpretations of a child's behaviour. For instance, many professionals may know that children have had difficult early years experiences, but putting them into the shoes of a child in a VR experience impacts on their affect, allowing them to 'feel' the impact in a new more immediate manner. The experience provides new understanding and knowledge (cognition) as to how behaviour may develop as a result of these experiences. Consequently, impacting on how parents/carers and professionals feel about the child (and their behaviour) enabling them to respond differently because of this new understanding and felt experience.

3. Use of Cornerstone VR Programme in family support

- 3.1 There were 399,500 children in need at 31 March 2019¹, requiring an intervention from children's services.
- 3.2 Early intervention means identifying and providing support to children and young people who are at risk of poor outcomes. It can be provided at any stage of a child or young person's life. Family support services can be delivered to parents, children, or whole families, but their main focus is to improve outcomes for children. There are many children who live in households where interventions are required, although the level of need may not reach the threshold for statutory intervention. Nevertheless, their lived experience can have an adverse impact on their overall well-being.
- 3.3 Cornerstone's VR Programme was established as a tool to increase adopter recruitment and ensure prospective adopters could have the opportunity to walk in the footsteps of the children they were seeking to adopt. Following its success, it has been tried and tested in multiple settings in the children's sector. Consequently, it is now being used regularly by a broad range of professionals, including those in front line early help services, who are reporting it is a tool which adds value to preventative services at the front-door of children's services.
- 3.4 The use of the VR Programme in early help services supports the ethos of Cornerstone, of getting children onto the best path *as soon as possible*, as the programme is able to support interventions, such as parenting programmes, to enable parents/care-givers to provide good-enough and consistent care for their children.
- 3.5 The Cornerstone VR Programme is being used in early help teams as an additional tool to help parents/care-givers understand the impact of trauma and abuse on children. Through parents/care-givers developing their understandings, in turn, we will increase their insights and, thus, accelerate behaviour changes that will support their children to thrive.
- 3.6 Early interventions where safeguarding concerns are raised, in relation to harmful parental conflict and domestic abuse, are crucial for children as there is extensive research to show the adverse, long-term, emotional impacts upon children who are continuously exposed to these abusive behaviours. The Cornerstone VR™ Programme is being used in a RESPECT accredited Domestic Abuse perpetrator Programme which seeks to change the attitude and behaviour of male perpetrators, to reduce the risk that they pose to their partner and children.

4. How we evaluate the efficacy of Cornerstone VR™

- 4.1 Cornerstone uses meta-analysis, pooling data from our partners. The report will be updated as we gather new evidence but as at August 2020, this report captures data from November 2018 onwards.
- 4.2 Evaluations are integral to providing an objective evidence base for any product/service which seeks to make a difference. Cornerstone implements an evaluation strategy which uses feedback postcards to capture the use of the VR Programme and its efficacy in four key areas:

¹ <https://www.gov.uk/government/statistics/characteristics-of-children-in-need-2018-to-2019>

- a. **Understanding** – do adults understand how their behaviours and responses affect children?
 - b. **Empathy** – do adults get an insight into a child’s perspective?
 - c. **Behaviour** – will adults think differently about their behaviours towards children?
 - d. **Attitude** - will adults consider alternative ways to behave towards children?
- 4.3 Data is collected using the five-point Likert scale to measure the perception of changes in the four areas from the new user’s perspective. The evaluation uses quantitative and qualitative feedback to measure the changes - in the short and long-term - in the above areas.
- 4.4 Independent evaluation has also been carried out: Alma Economics carried out a *Preliminary Evaluation of the Cornerstone VR Pilot Programme*; and Goldsmiths, University of London, are currently evaluating the use in domestic abuse programmes (April 2020).

5. Summary of quantitative and qualitative findings

- 5.1 Cornerstone have worked in partnership with family support/early help teams since 2018. A few examples of participants responses are captured below, from several Certification Courses² run across the sector from November 2018 onwards, capturing the VR’s tendency to produce changes, short and long-term, in understanding; empathy; behaviour and attitude³.
- 5.2 85% of participants agreed the VR would improve the quality of their direct work with people and their assessments.

"The entire course was informative and it enabled me to recognise the different tools that are available by different means to understand the carer/child."

- 5.3 80% of participants agreed that the VR would enable them to connect with people who had not responded to other types of learning/ training.
- 5.4 86% of parents who viewed the VR on a Parenting Programme agreed the VR experience helped them to understand how their behaviour/responses affect children⁴.

"Pay more attention to my own underlying issues so I can be emotionally available to my child."

6. Case studies

- 5.1 This section contains two case examples evidencing the use of Cornerstone VR in different ways across the early help/family support⁵.

² Summary data is collated from four certification courses comprising of 21 participants.

³ Individual session findings can be found in the Evaluation: Using Cornerstone VR in Family Support - Event Log.

⁴ Strengthening Families Strengthening Communities Parenting Programme consisted of 7 parents.

⁵ Cornerstone have developed a Case Studies document which evidences the use of Cornerstone VR in a wide range of sectors

Case Study 1: Developing parents' understanding of the impact of harmful behaviours

A Family Support Worker (FSW) used the Cornerstone VR Programme with parents after the family were referred to their service from school following the children making a disclosure of physical and emotional harm towards their mother, with their father being the perpetrator. The FSW identified the purpose of using the VR experiences with the parents were to help the father to understand the impact on the children of witnessing abusive behaviour and to dispel the idea that children cannot witness abuse if they are not in the same room. Mother appeared to have more of an understanding as she has engaged with her midwife and they have had discussions centred on children's development pre- and post-birth.

The FSW provided each parent with a VR headset to enable them to experience the VR simultaneously. After the VR experience, the father shared that he had never been able to see his behaviour through the 'eyes of the child'. He was able to reflect and question why he was arguing in the first place and identify strategies which would minimise his behaviour escalating. He stated '*This is amazing, I was unsure of this however I am shocked... this is what all 3 of my children feel and I think its ok?*'.

The FSW found that although the mother had some understanding, it was helpful for her to experience the VR to further embed her learning but also so that both parents could have discussions about what they have experienced, which will support any positive change in behaviours they can achieve as a family whose primary aim is to remain together.

Case study 2: Increasing parents' awareness of harmful parental conflict

A family were referred to the Early help team after father reported to the police that his ex-partner who he lives with along with their child had punched him in the chest. There has been parental conflict in relation to differences regarding co-parenting and the pressure of sorting out financial matters as part of their separation. The FSW identified through direct work that the child was caught in the middle of her parent's conflict, had become withdrawn and had torn loyalties between her parents as a result.

The FSW had a pre-session with the parents to discuss the concerns in relation to their behaviour and the impact of this on their child. The VR was introduced at the next session. The aim of the session was to enable the parents to understand that children do get affected by observing toxic arguments in the family home. Also, for the parents to have a clear understanding of the early stages of childhood trauma to later adulthood and take responsibility for their behaviour.

The parents viewed the VR experiences at the same time and were given time to reflect before discussing what they had seen and felt. The FSW observed that the mother was really upset; the father was tearful and shook his head quite a lot during the session and quoted "Wow I didn't realise how my daughter would experience so much pain from observing such horrific bad behaviour".

The FSW shared that the VR experience was an excellent tool for the family because, often, they would not listen during discussions regarding their behaviour and would place the blame on the other parent. The FSW concluded that using the VR experience to facilitate the above discussions allowed the parents to have a clearer understanding of the concerns raised and the impact of their behaviour on their daughter, as they had experienced it first-hand through the immersive technology.

Case study 3: Perpetrator Programme

A father (Mr. A) attended a Respect accredited domestic abuse Programme after being referred due to perpetrating domestic abuse against his partner. The Programme consisted of group work and 1:1 sessions. One of the sessions uses the VR Programme. One of the attendees was interviewed by our trainer about the VR, the individual's – Mr. A's -responses are captured below:

How did you find the VR content?

Mr A was moved by the content he experienced and spoke about the reality of the immersion and the feeling of being in the middle of an abusive environment.

"It was great, the VR moved me. It put me in the place of the child."

What kind of impact did it have on you?

Mr. A demonstrated the level of impact that the VR had on him as the experience made him reflect on his own childhood experiences of witnessing domestic abuse. He identified that he had blocked out this experience and the feelings attached to it. The VR brought back those memories however he was able to recall those feelings and became tearful when thinking that his children would have had the same experiences. He described the impact as "incredible and very powerful".

Mr. A identified that viewing the VR content changed his previous beliefs and clearly stated that he wanted to ensure his children would have a different experience, as abuse creates "monsters". The VR Programme motivated him to make a change to his behaviour and, alongside the rest of the course, he pointed out that the VR cemented his need to change.

Mr. A felt that the course started off easy in terms of the materials/ exercises that they had to complete. As the course progressed, the learning became clearer and the VR Programme pulled the learning together in a stark way and reinforced the learning on the entire Programme.

Mr A believes that the VR Programme, as part of the course, is very good in helping people to make better choices regarding their behaviour and he would recommend others in the same position to experience it.

