



Role for Alternative Realities in Social Work?

I feel it is important to say up front that I'm not a Clinical Social Worker by trade, though I am currently working on that licensure. Below are some ideas and thoughts that came from reading a *New York Times* article about virtual reality (<https://mobile.nytimes.com/2017/07/30/technology/virtual-reality-limbix-mental-health.html>) primarily for psychologists. Please filter my thoughts through your own professional lenses and let's have a conversation about this in the NACSW Facebook group.

The above-referenced *New York Times* article reports on research that has been done in using a technique called Virtual Reality for Exposure Therapy. Virtual Reality (VR) is a technology that is quickly becoming easier to access for everyone. A simple definition of VR is "an artificial environment which is experienced through sensory stimuli (such as sights and sounds) provided by a computer and in which one's actions partially determine what happens in the environment" (Merriam Webster <https://www.merriam-webster.com/dictionary/virtual%20reality>). VR ranges from using goggles and gloves to manipulate the environment to simply using your phone to spin around in a 360 degree picture.

The price for these devices range from relatively cheap to very expensive, though the price point continues to come down.

The article reported that practitioners using Virtual Reality for Exposure Therapy are having success in reducing symptoms related to phobias and post-traumatic stress disorders. I was actually surprised to see that VR has been used since the 1990's for Exposure Therapy. One of the benefits of VR is that you and the client don't actually leave the comfort of your office, which increases the feeling of client safety. Another benefit is that you can end the experience immediately if needed. VR produces a more dramatic experience than just verbally talking someone through a scenario because VR also adds another layer of, well, reality to an experience of role-playing with a client.

If using VR goggles seems a little extreme (and cost prohibitive), there are other ways to use technology for similar ends. Google Street View allows you to find specific buildings and streetscapes to put you and your client at a different location. Similarly, you can search for almost anything and find a picture of it on the Internet, often even the inside of businesses, buildings, etc. I've written previously for NACSW about using technologies like Skype or FaceTime to enhance practice. These types of apps could also have value in Exposure Therapy. Another idea could be to use videos found online related to your needs. I would guess that people have taken 360 degree pictures of a lot of places now that the technology is so inexpensive. 360 degree pictures enable you to turn and scan through an environment, though not actually walk through it. One of the companies mentioned in the article, Virtually Better Inc. (VBI), has videos for veterans of Iraq and Afghanistan and videos of old bridges over a canyon, plus much more. VBI also has some of their research available online and has some interesting ongoing research working with children.

As with any technology there will be ethical implications for using Virtual Reality in your practice. And these might change as the technology continues to improve. It will be important to think about the value of using Virtual Reality versus any negative impacts it might have on your client. I think a high-level of trust would be needed before a client would let you hook them up to a pair of VR goggles in your office! I could also see that using some of the simpler technologies like searching for an image might allow your client to look for images outside of session time which might be detrimental.

What are your thoughts about Virtual Reality? Are you using it? I'd love to hear your experiences, positive or negative, with VR. In wrapping up this article, I'll leave you with a couple of links. I am not endorsing any of these organizations, but they were the ones mentioned in the *New York Times* article.

Limbox - <https://www.limbix.com/>

Virtually Better Inc. - <http://www.virtuallybetter.com>

Albert Rizzo's Medical Virtual Reality Page - <http://medvr.ict.usc.edu/?author=3>