



mhca's e-Newsletter

Vol. 2, Issue 5
Published November 2017

Virtual Reality Poised to Disrupt Behavioral Health

The concept of virtual reality (VR) has been around since the 60s; but, for decades, major advancements in the technology were hampered by the six-figure cost of essential components. In recent years, the overwhelming popularity of smartphones has made key VR components like accelerometers and gyroscopic chips better and cheaper, while also advancing screen quality. Affordable components, coupled with developments like powerful graphic processing units, Big Data and the Internet of Things, have fueled a VR renaissance that could significantly disrupt sectors from education and entertainment to research and healthcare.



While there are a wide range of possible applications for VR, it has shown extraordinary potential to revolutionize the field of behavioral health. Researches are looking into a variety of ways VR can be

employed to improve assessments, provide training, and deliver treatments. Some examples in the literature include assessing persecutory ideation in individuals exposed to neutral avatars in social settings, providing individuals with high-functioning autism a way to practice their interpersonal skills to perform better during job interviews, and helping people overcome PTSD through realistic exposure therapy that doesn't require leaving the office.

Researchers have been investigating the effectiveness of VR as a medium for delivering exposure therapy for phobias and post-traumatic stress since the 90s. Situations that are impossible or impractical to build into a course of therapy, such as battle zone scenarios or trans-Atlantic flights, can be delivered in a precisely-controlled environment through VR in an office setting, and the simulations can be tailored to the patient and repeated as often as necessary at increasing levels of difficulty.

VR is especially well-suited for treating patients for which avoidance and isolation are symptoms of their conditions. VR allows therapists to present individuals with the life-like scenarios that cause them distress while helping them process the experience in constructive ways. Although the computer-generated environments are artificial, patients' minds and bodies respond as though they are real, which means that the lessons learned in VR easily transfer to the real world.

Daniel Freeman, professor of clinical psychology at the University of Oxford and one of the world's pioneers in the field of VR says, "There are very few conditions VR can't help because, in the end, every mental health problem is about dealing with a problem in the real world, and VR can produce that troubling situation for you." According to Freeman, it is the ability of VR to present social environments that trigger responses equivalent to real-world experiences that offers promise in the diagnosis and treatment of psychosis.

Psychiatrist and researcher Alexandre Dumais is currently testing the efficacy of VR in treating schizophrenia by using it to help patients confront realistic depictions of their inner demons and develop defense mechanisms and coping strategies that help them remain engaged in social situations even when symptoms occur in the real world. To date, 15 of the 19 patients treated have reported significant improvement in their symptoms.

Other potential uses of VR currently being investigated include treating chronic pain, substance abuse and eating disorders. So far, VR treatments seem to perform comparably to traditional interventions, with benefits persisting over time; but, researchers still urge caution.

Researchers must watch for side effects related to the type of equipment used, the VR environment presented and the length of immersion. Some studies have shown VR immersion could be harmful to the development of children, and certain types of VR treatment may exacerbate delusions in some patients.

While current VR treatments require a trained therapist to be present, some researchers envision VR will eventually be made widely available via prescriptions.

Despite previous false starts, VR is likely to be much more mainstream in the very near future. How do you envision using this new tool to improve client experiences and outcomes while reducing your operational costs?

Save the Dates for mhca's 2018 Conferences!



Winter Conference

Join us in Clearwater Beach **February 27 - March 1** for our Winter Conference and Annual Meeting. This is our most well-attended meeting of the year and our hotel block will sell out quickly. For conference and hotel information,

[Click Here](#)



Spring Conference

Experience southern hospitality at its best! Join us in Savannah, Georgia, **May 15-17**. The conference agenda and online registration will be available in February. To make your hotel reservation,

[Click Here](#)



Summer Conference

mhca will explore the Motor City this summer. Join us in Detroit **August 14-17**. The conference agenda and online registration will be available in May. To make your hotel reservation,

[Click Here](#)



Fall Conference

Get your groove on in Austin **October 30 - Nov. 1!** The conference agenda and online registration will be available in August. For hotel information,

[Click Here](#)

[Member News](#)



To stay up-to-date on the latest **mhca** news, follow us on [Facebook](#) or [Twitter](#), or read the member news feed on our website.

[Read More](#)

If you are interested in submitting an article or advertisement for publication in this monthly e-newsletter, contact Lonnie Parizek at lparizek@mhca.com.

[Unsubscribe from Monthly Minute Newsletter](#)



1876 Eider Court, Suite A

Tallahassee, FL 32308

mhca

1876 Eider Court, Suite A
Tallahassee, FL 32308

TEL: (850) 942-4900

If you don't want to get similar messages from us in the future, you can [Unsubscribe here](#):

<https://mhca.com/index.php?>

[option=com_civCRM&task=civCRM/mailling/unsubscribe&reset=1&jid=&qid=&h=](https://mhca.com/index.php?option=com_civCRM&task=civCRM/mailling/unsubscribe&reset=1&jid=&qid=&h=)