



Using Virtual Worlds & VR/AR for Telehealth

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About Me

- Work in both the academic and private sectors



- Previous Tech & Media Industry Experience



Overview

- 1. Discuss and explain how 3D spaces can bridge the gap between distant participants by bringing them together into a shared space for collaboration, conversation and brainstorming.
- 2. Define the risks and rewards of behavioral health initiatives and practices within 3D spaces.
- 3. Share case studies of how behavioral health practitioners are using virtual worlds and VR to reach rural and/or remote clients, as well as how self-care initiatives can effectively find expanded audiences within anonymous (but social) 3D spaces.

The Need for Telehealth as a Workforce Extender

- Many local and rural communities do not have access to credible behavioral health resources or support groups
- Lack of proximity to good practitioners may be a deterrent to seeking or maintaining needed help
- In some small communities, there may be a stigma against seeking help due to perceived or real lack of privacy and/or discretion
- Some individuals may not feel “safe” or they may not feel that they are ready to commit to going to therapy in person
- Specialized forms of therapy may not be readily accessible locally

Thinking “Outside the Box”: Virtual Worlds & VR/AR

- Easy access anywhere to:
 - “In-game/inworld” counseling
 - Effective therapeutic exercises and simulations
 - Social support & recovery groups
 - Expert lectures, annual conferences and other behavioral health-themed social events
- Offers a strong “telepresence” and embodiment phenomena for participants
- Strong player-avatar identification and emotional involvement



Background on Virtual Worlds

- Use voice and text chat
- Individuals represented by a 3D persona that they choose (“avatar”)
- Comprised of user-created 3D social spaces/environments
- Enables a strong sense of embodiment and telepresence
- Home to several health-related and group therapy 3D experiences
- The largest virtual world is Second Life



Pros

- **Anonymous** – Ability to get help without the constraints of your “real world” identity
- **Accessible** – Easy to access help without leaving your home
- **Creative** – Allows for individual expression in a way that might be complicated by “in person” sessions; can change gender, ethnicity, human vs. non-human, etc.; Also, the creativity removes some of the stigma and anxiety surrounding treatment
- **Cost** – Free and/or low cost counseling and support groups
- **Safe** - Testing ground to “try” therapy before seeking additional outside help
- **Social** – Virtual worlds add a sense of social presence that can be used to support multiple user formats and group discussions

Concerns

- Who is your practitioner? Are they qualified and licensed?
- Role-playing as armchair therapists = game for some people with serious consequences
- No oversight, guidelines or verification process to confirm credentials
- Is your session private? In some virtual world spaces, others can eavesdrop if they are in close proximity. What happens to the transcripts of your session – ripe for HIPAA abuse
- Will patients and/or insurance companies pay for virtual world initiatives?
- Requires access to a mid-range computer and some tech knowledge
- Requires broadband access (which is often lacking in rural areas)

Case Studies

▪ Virtual Mental Health

- A behavioral health resource center founded by a licensed psychotherapist and educator
- Provides a non-threatening space for reading, learning and group meetings



▪ New Ways Counseling

- “Netherlands-based licensed and certified psychotherapist”
- Holds “inworld” sessions for a low fee
- Includes “Sunshine Therapy Garden” as a 3D place for “meditation, relaxation and healing”



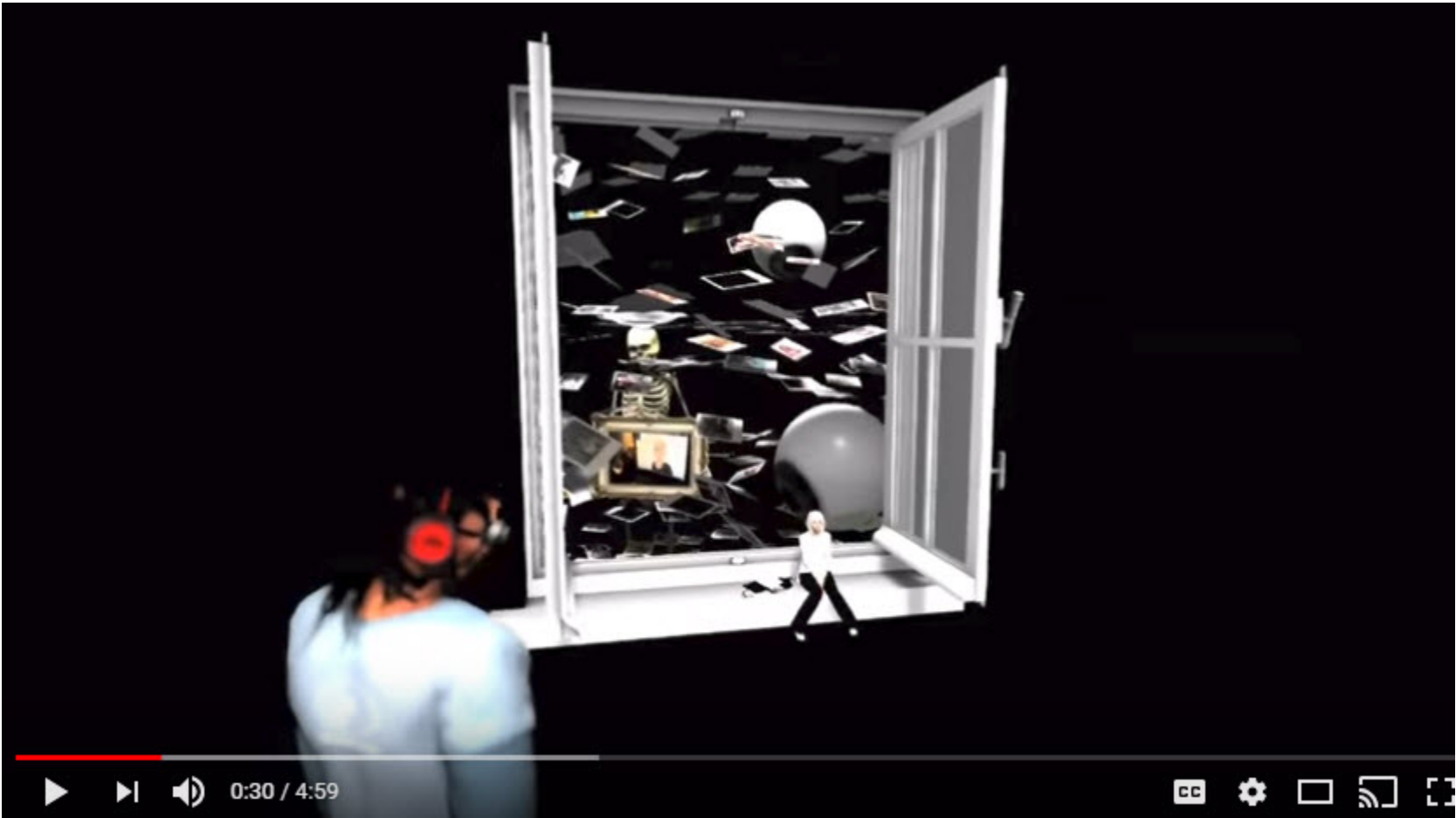
Examples of Tele-Health Environments



Virtual Worlds as a Creative Outlet for Healing

- Participants/Patients can use virtual worlds as a creative and healing outlet from the safety of their home to:
 - Work through issues in a non-threatening, anonymous environment
 - Connect with others who share their struggles
 - Explore their identity without fear of “real world” consequences

Example: Virtual Worlds & Treating Depression



“Becoming Jamie” Documentary



Becoming Jamie



Shock & Joy

Best Practices in Virtual World/VR/AR Telehealth

- ***FOR CONSUMERS***

- Do your research - Ask for “physical world” credentials and double-check them out outside the virtual environments to ensure that they are legitimate
- Ask about their Code of Ethics

- ***FOR PRACTITIONERS***

- Be transparent about your qualifications
- Use privacy controls!

What's Next? Virtual Reality & Augmented Reality

- There are significant investments and development in the emerging Virtual Reality and Augmented Reality markets
- These offer even more opportunities for connecting clients to behavioral healthcare in both social and solo 3D environments

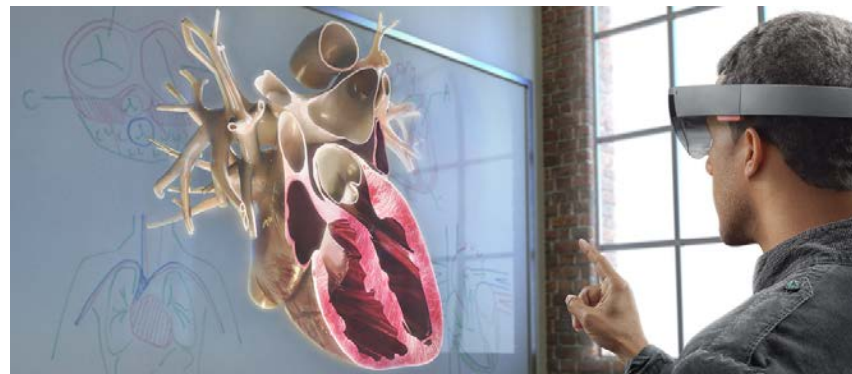
Virtual Reality Overview

- Entire physical world replaced with a closed “virtual reality” environment with sealed headset
- About 36 million Virtual Reality users in 2018
- Most VR users are mobile-phone based
- Major tech companies are investing in this sector
 - Google = Daydream
 - Facebook = Oculus
 - Amazon = Sumerian
 - HTC = Vive
- Users skew heavily male
- Fast-evolving format for health-related AI initiatives – many of which are experimental and geared toward exposure therapy



Augmented Reality (AR) Overview

- A variation of VR wherein the user sees the real world augmented by virtual elements
- Dedicated platforms are emerging
 - Microsoft HoloLens
 - Magic Leap Lightwear
- Mobile AR apps are mainstream
 - Pokemon Go
 - Google Translate
 - SnapChat filters
- Reduced distinction between game and “real life” imagery may amplify “Game Transfer Phenomena”



Our Digital Selves Documentary





Questions?

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