

More than metaverse madness? The potential of immersive technologies for mental health

EFPA PG eHealth - 2023 Webinar series - Webinar 2

12 SEPTEMBER
2023

The webinar will
commence at 10am CET.



eHealth workstream - SC on Psychology in Health

The eHealth Workstream is involved in activities to survey, monitor, investigate and evaluate eHealth applications as well as in efforts to guarantee the quality of applications and guidelines on proper use of eHealth applications. This work is done in international collaboration between experts and together with other health professions.



ehealth.efpa.eu



Resources from this working group



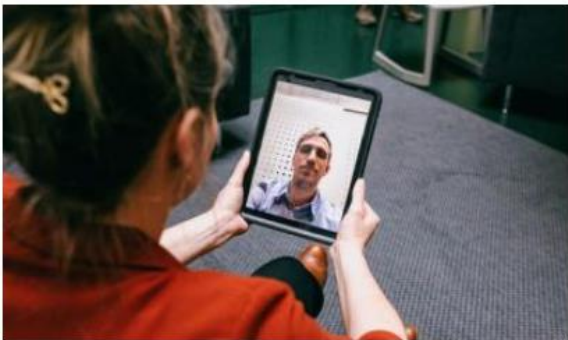
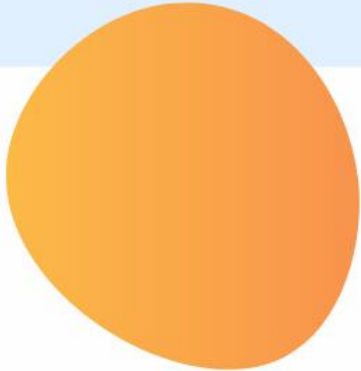
Webinar series on the potential of technology for psychology



Psychological services via internet and other digital means: recommendations for ethical practice



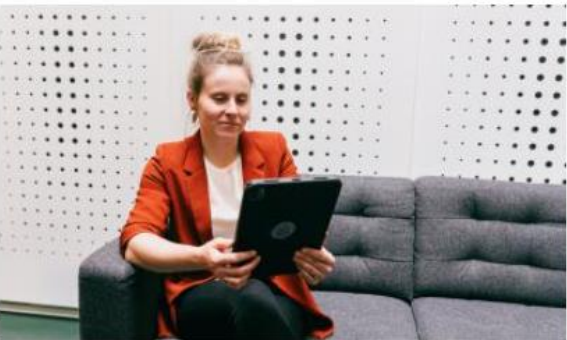
Webinar: " From theory to practice: how can you make use of the potential of technology for psychology?"



Online consultations and psychologists' use and experience



Online consultations and psychologists' perspectives



Webinar on online consultations

2023 webinars - save the dates

26 September – 10am CET

EMA & just-in time interventions

Andreas Schwerdtfeger

17 October – 5pm CET

The Promises and Pitfalls of using **Machine Learning** in Mental Health

David Gosar

26 October – 4pm CET

Global Online Classrooms in How to Train Caregivers of Abandoned Children

Niels Peter Rygaard



Program for today



Tom Van Daele – Thomas More University of Applied Sciences

Head of Expertise Unit Psychology, Technology & Society
at Thomas More, Belgium.

Practice and policy oriented,
multidisciplinary research
on technology in mental healthcare

Representative of the Belgian Federation
of Psychologists in the EFPA eHealth workstream.



**THOMAS
MORE** | UNIVERSITY
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More than Metaverse Madness

**The Potential of Immersive
Technologies For Mental Health**

**12 September 2023
EFPA eHealth webinar series
Tom Van Daele**

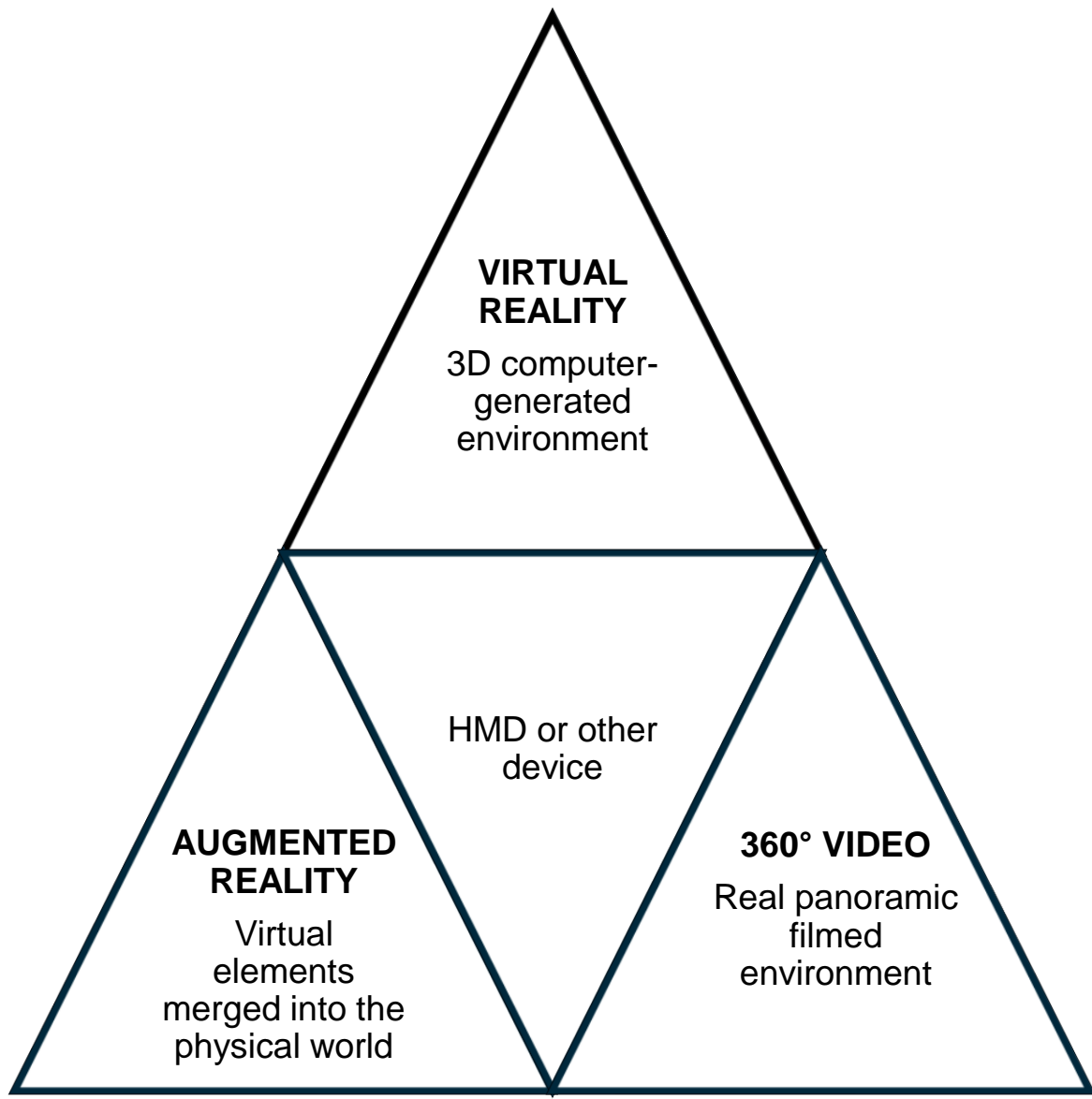


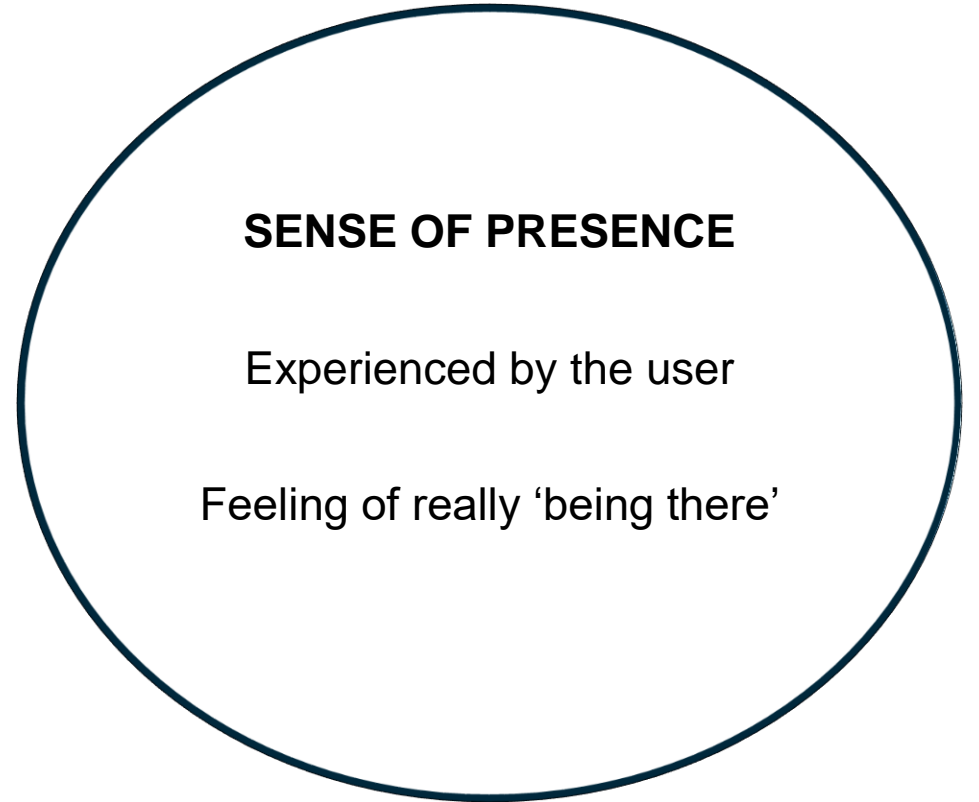
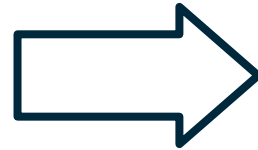
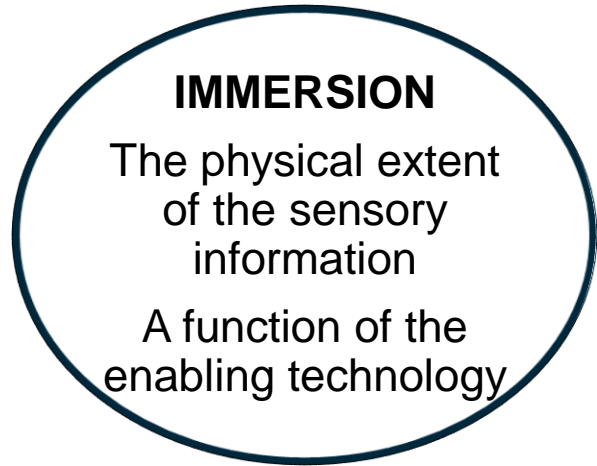
Overview

1. Background on immersive technology
2. Advantages and disadvantages/challenges
3. Intervention techniques
4. Existing solutions
5. Future perspectives

What it is & how it all started

1. background





1962 - Sensorama

Immersive image

Stereo sound

Aromas

Wind

Vibrations



sensorama

MOVIES
SOUND
ATIONS
MAS

2023 – Meta Quest 3



Why we should(n't) use XR

2. advantages & disadvantages

Advantages

Virtual Reality

Safe & naturalistic, easy replication & high levels of control

Multiple interaction opportunities

Adjust environment for specific interventions

Augmented Reality

Helps to translate gains in real life, with virtual elements grounded in reality

Immersive 360° Video

Realistic images, which can produce a feeling of presence

Easily accessible

Easy and fast to create

Affordable technology

Disadvantages / challenges

Virtual Reality

Lack of standardization in devices & software

Increasingly affordable, but still initial start-up cost

Motion sickness

Augmented Reality

Limited number of applications, due to novelty

Immersive 360° Video

Lack of standardized procedures

Limited interaction possibilities

Cyber-sickness

what & for whom?

3. current use & evidence-base

Long-standing research on 2 intervention techniques

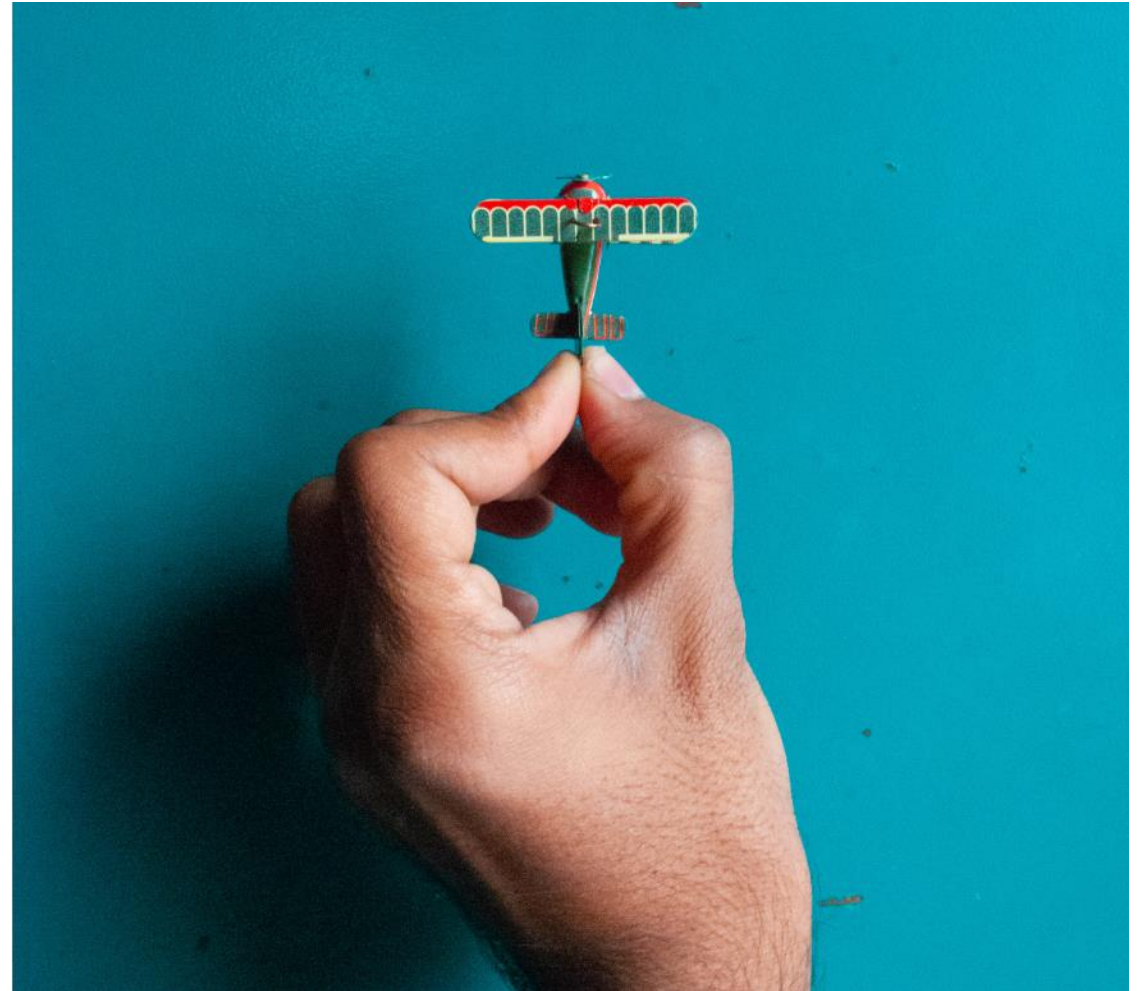
Exposure therapy

Prolonged exposure

Exposure therapy

Fear of flying, animal phobias
and other specific phobias

- Exposure in real-life settings is effective, but often difficult and time-intensive to organize.



Exposure therapy

VRET

- Using either flooding or systematic desensitization.
- Selecting relevant parts of a feared experience.
- Easy re-using of these environments, while manipulating their intensity.

Czerniak et al., 2016



Prolonged exposure

PTSD

- In the US, 13 % of infantry met overall criteria for PTSD, with incidence rising to 25 - 30 % after experiencing direct combat.
- Prolonged exposure therapy = well established in multiple studies with diverse trauma populations.

Rizzo et al. (2014)



Prolonged exposure

PTSD

- Unwilling or unable to visualize traumatic event → treatment failure.
- Virtual prolonged exposure = immersion in trauma simulations, with graded & repeated imaginal reliving and narrative recounting.
- Clinicians control scene's emotional intensity while customizing pace & relevance.

Rizzo et al. (2014)



Bravemind



Long-standing research on 2 intervention techniques

Exposure therapy

Prolonged exposure

But also

Distraction

Relaxation

Psychoeducation

Behavioral activation

Cognition challenging

Dealing with auditory hallucinations

Distraction

SnowWorld

- Dedicated to reducing pain.
- For patients undergoing painful medical interventions.
- Maintains its analgesic effect when used repeatedly, unlike opioid analgesics.

Hoffman et al. (2019)



Relaxation

VR Relax

- Self-help relaxation tool.
- Assessed for ambulatory patients with anxiety, psychotic, depressive, or bipolar disorder.
- Immersive 360° videos with nature content, and interactive animated elements.
- Better than standard relaxation exercises in reducing momentary anxiety and sadness, & increasing cheerfulness.

Veling et al. (2019)



Psychoeducation

VRight

- Virtual reality-based intervention, using psychoeducation.
- “Peer-avatar” interaction, aiming to increase awareness about depressive symptoms.
- Used under clinician’s supervision.
- Assessed for patients with depressive symptoms.

Migoya-Borja et al. (2020)



Behavioural activation

- Pandemic context – case study.
- 360° YouTube videos.
- Modified behavioral activation protocol.
- Patient with major depressive disorder.

Paul et al. (2020)



Cognition challenging

Distorted body image
in anorexia nervosa.

'Illusion' in VR helps
perceive a slim, virtual
body as their own.

Afterwards, body parts
more realistically estimated.

Effect lasted up to 3 hours.

Serino et al. (2016)





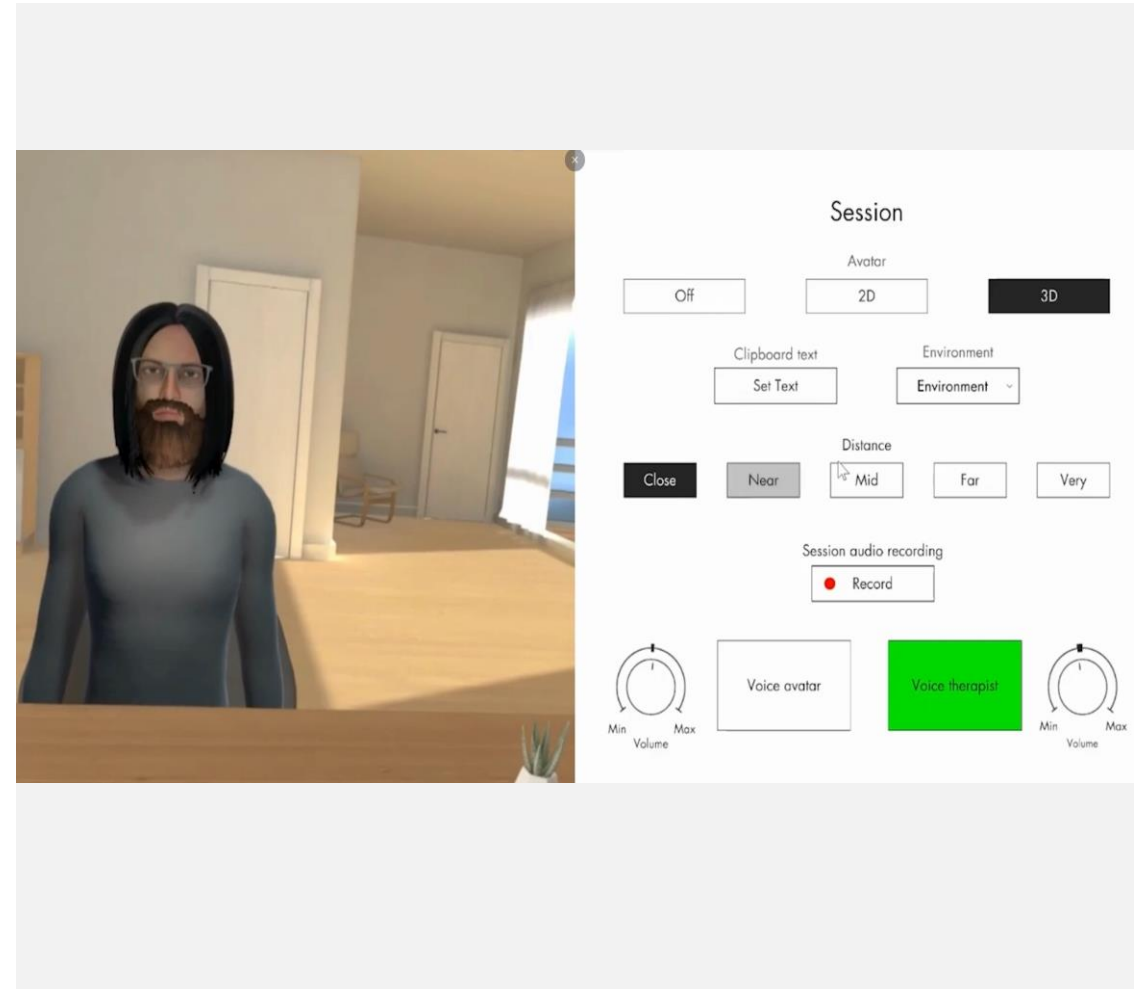
Dealing with auditory hallucinations

Hearing voices in patients suffering from schizophrenia.

HEKA VR = platform which allows to design avatars looking like inner voices, with therapists being able to recreate exact voice(s) heard by patients.

Considered beneficial based on preliminary clinical trial results.

Vernal et al. (2023)



**what is currently
out there?**

4. existing solutions

Some basic points of attention

Matching positions in VR.

Limiting interruptions.

Added value of headphones or multisensory stimulation.

Legal: depending on context and use to be considered as a medical device!

XR platforms

Several tools or modules.

Complete solutions with proprietary hardware.

Costs may vary (substantially).

Support frequently included as well.

oxfordvr

Immersive technology for mental health



VIRTUO
CUTTING EDGE VR & SIMULATION SOLUTIONS

vrendle



HEKA VR



(YouTube) 360°

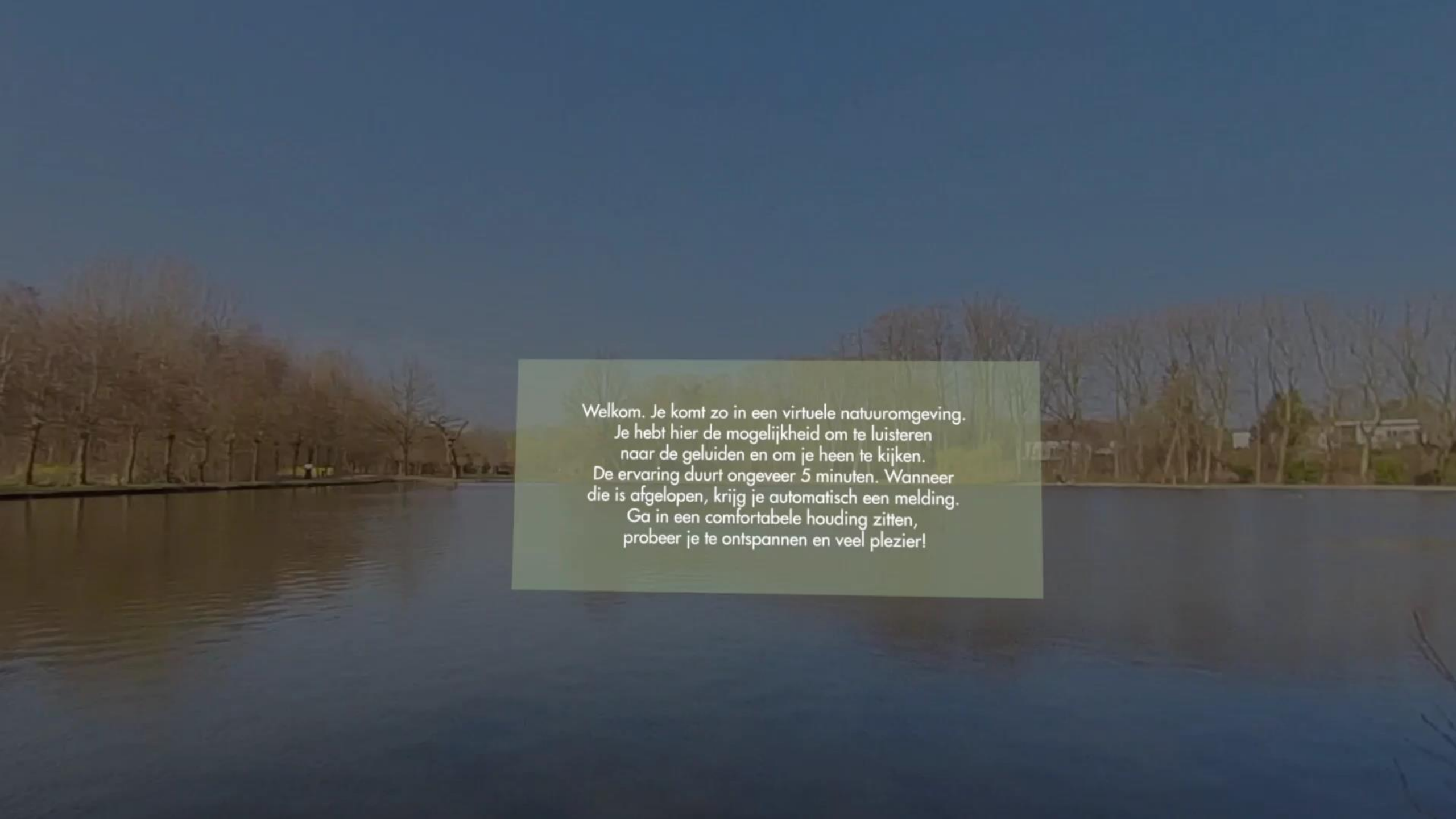
Broad range of freely available experiences.

Sometimes difficult to find suitable experiences, e.g. fear of heights.

Easy to use on most HMDs, or even with a smartphone, using Google Cardboard.

[youtube.com/@digitalmentalhealth](https://www.youtube.com/@digitalmentalhealth)





Welkom. Je komt zo in een virtuele naturomgeving.
Je hebt hier de mogelijkheid om te luisteren
naar de geluiden en om je heen te kijken.
De ervaring duurt ongeveer 5 minuten. Wanneer
die is afgelopen, krijg je automatisch een melding.
Ga in een comfortabele houding zitten,
probeer je te ontspannen en veel plezier!

Zerophobia

Research

JAMA Psychiatry | [Original Investigation](#)

Effectiveness of Self-guided App-Based Virtual Reality Cognitive Behavior Therapy for Acrophobia A Randomized Clinical Trial

Tara Donker, PhD; Ilja Cornelisz, PhD; Chris van Klaveren, PhD; Annemieke van Straten, PhD; Per Carlbring, PhD;
Pim Cuijpers, PhD; Jean-Louis van Gelder, PhD

- Heights
- Fear of flying
- Spiders (AR)





SpeakAPP!-Kids!

- 360° video for public speaking
- Enhanced with an interface
- Reduced state anxiety during actual talk & state anxiety in general



Sülter et al. (2022)

Flowborne

Phobys

- AR for spider phobia
- Embedded within a broader self-help intervention
- Proven effective

Zimmer et al. (2021)



what's next?

5. future perspectives

Applications being explored in research



Fully immersive ARET in spider phobia
(De Witte et al., 2020;2022)



VR Photoscan for PTSD
(Best et al., in press)

HoloLens 2



Apple Vision Pro



VR Photoscan



QUEEN'S
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BELFAST



VR Photoscan



DoorUpdated

DoorUpdated

Transform

Location X	0 m
Y	0 m
Z	0 m
Rotation X	90°
Y	0°
Z	0°

Mode: XYZ Euler

Scale X	1.000
Y	1.000
Z	1.000

Delta Transform

Relations

Collections

Instancing

Motion Paths

Visibility

Viewport Display

Custom Properties



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VR Photoscan



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References

Best, P. Kupeli-Holt, S., Elliot, A., Duffy, M., D'Arcy, J., & Van Daele, T. (in press). Low-Cost Virtual Reality to support imaginal exposure within PTSD treatment: A case report study within a community mental healthcare setting. *Cognitive and Behavioral Practice*.

Czerniak, E., Caspi, A., Litvin, M., Amiaz, R., Bahat, Y., Baransi, H., ... & Plotnik, M. (2016). A novel treatment of fear of flying using a large virtual reality system. *Aerospace medicine and human performance*, 87(4), 411-416. <https://doi.org/10.3357/AMHP.4485.2016>

De Witte, N. A. J., Scheveneels, S., Sels, R., Debard, G., Hermans, D., & Van Daele, T. (2020). Augmenting exposure therapy: mobile augmented reality for specific phobia. *Frontiers in Virtual Reality*, 1, 8. <https://doi.org/10.3389/frvir.2020.00008>

Hoffman H.G. et al. (2019) Virtual Reality Distraction to Help Control Acute Pain during Medical Procedures. In: Rizzo A., Bouchard S. (eds) *Virtual Reality for Psychological and Neurocognitive Interventions. Virtual Reality Technologies for Health and Clinical Applications*. Springer, New York, NY.

https://doi.org/10.1007/978-1-4939-9482-3_8

Migoya-Borja, M., Delgado-Gómez, D., Carmona-Camacho, R., Porrás-Segovia, A., López-Moriñigo, J.D., Sánchez-Alonso, M., . . . Baca-García, E. (2020). Feasibility of a Virtual Reality-Based Psychoeducational Tool (VRright) for Depressive Patients. *Cyberpsychology, Behavior and Social Networking*, 23(4), 246-252. <https://doi.org/10.1089/cyber.2019.0497>

References

- Paul, M., Bullock, K., & Bailenson, J. (2020). Virtual Reality Behavioral Activation as an Intervention for Major Depressive Disorder: Case Report. *JMIR mental health*, 7(11), e24331. <https://doi.org/10.2196/24331>
- Rizzo, A., Hartholt, A., Grimani, M., Leeds, A., & Liewer, M. (2014). Virtual reality exposure therapy for combat-related posttraumatic stress disorder. *Computer*, 47(7), 31-37. <https://doi.org/10.1109/MC.2014.199>
- Serino, S., Pedroli, E., Keizer, A., Triberti, S., Dakanalis, A., Pallavicini, F., ... & Riva, G. (2016). Virtual reality body swapping: a tool for modifying the allocentric memory of the body. *Cyberpsychology, Behavior, and Social Networking*, 19(2), 127-133. <https://doi.org/10.1089/cyber.2015.0229>
- Veling W, Lestestuiver B, Jongma M, Hoenders HJR, van Driel C. (2021). Virtual Reality Relaxation for Patients With a Psychiatric Disorder: Crossover Randomized Controlled Trial. *Journal of Medical Internet Research*, 23(1):e17233; <https://doi.org/10.2196/17233>
- Zimmer, A., Wang, N., Ibach, M. K., Fehlmann, B., Schicktanz, N. S., Bentz, D., ... & de Quervain, D. J. (2021). Effectiveness of a smartphone-based, augmented reality exposure app to reduce fear of spiders in real-life: A randomized controlled trial. *Journal of anxiety disorders*, 82, 102442. <https://doi.org/10.1016/j.janxdis.2021.102442>

References

- De Witte, N. A. J., Scheveneels, S., Sels, R., Debard, G., Hermans, D. & Van Daele, T. (2020) Augmenting Exposure Therapy: Mobile Augmented Reality for Specific Phobia. *Frontiers in Virtual reality*, 1(8). <https://doi.org/10.3389/frvir.2020.00008>
- Eaton, W.W., Bienvenu, O.J., & Miloyan, B. (2018). Specific phobias. *Lancet Psychiatry*, 5, 678–686. [https://doi.org/10.1016/S2215-0366\(18\)30169-X](https://doi.org/10.1016/S2215-0366(18)30169-X)
- Flavián, C., Ibáñez-Sánchez, S., & Orús, C. (2019). The impact of virtual, augmented and mixed reality technologies on the customer experience. *Journal of Business Research*, 100, 547-560. <https://doi.org/10.1016/j.jbusres.2018.10.050>
- Suso-Ribera, C., Fernández-Álvarez, J., García-Palacios, A., Hoffman, H. G., Bretón-López, J., Baños, R. M., et al. (2019). Virtual reality, augmented reality, and in vivo exposure therapy: a preliminary comparison of treatment efficacy in small animal phobia. *Cyberpsychology, Behavior, and Social Networking*, 22, 31–38. <https://doi.org/10.1089/cyber.2017.0672>
- Tarnogol, F. M. (2018). Phobos AR (Version 1.3.3) [Mobile Application Software]. Retrieved from: <http://itunes.apple.com> (accessed May 5, 2021).
- Vernal, D. L., Nordentoft, M., Christensen, M. J., Smith, L. C., Mariegaard, L., Mainz, J., & Glenthøj, L. B. (2023). Status and Clinical Experiences from the Challenge Trial—A Randomized Controlled Trial Investigating Virtual Reality-based Therapy for Auditory Hallucinations. *World Social Psychiatry*, 5(1), 71.