Some may believe that Virtual Reality (VR) technology is a novelty for entertainment purposes alone. Instead, VR has a great many practical applications: For example, night vision helmet displays for combat pilots (Miller, 2014), augmented vision for the visually impaired (Hwang & Peli, 2014), and VR training for police officers (Griffin, 2009). Perhaps the most unusual use of VR, and the one I will discuss, is for exposure therapy (“Virtual Reality Therapy for Phobias”, n.d.). Traditionally, phobias have been treated by having the patient imagine the feared stimulus or to actually expose the patient to the feared stimulus in a real environment. With VR treatment, patients can be exposed to the feared stimulus in a 3-D, fully immersive environment. The main benefit of this over a real environment is that the therapist has more control over the environment and, therefore, the patient’s experiences. In order to desensitize the patient to the feared stimulus, a therapist may expose the patient to the stimulus in increasing degrees. This method is often easier in a VR environment than in the real environment. For example, a person afraid of flying in airplanes may benefit from exposure to several take-offs and landings, but the monetary cost of doing this in the real environment is prohibitive. Other benefits include the convenience of scheduling treatments, which no longer requires a field visit by the therapist. Considering the benefit that VR can provide exposure therapy patients in addition to its many other uses, its is no wonder that VR technology is a growing field.

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