EDUSCHOOL INTERNATIONAL JOURNAL OF SOCIOLOGY AND SOCIAL WORK (EIJSSW)
(Open Access, Double-Blind Peer Reviewed Journal)
ISSN Online: ISSN Print

Social Work Practice In The Metaverse

Vincent

Assistant Professor of English, Lakshmi College of Education, Gandhigram Dindigul, Tamilnadu, India.

Article information

Received: 15th November 2025
Received in revised form: 20th December 2025
Accepted: 24th January 2026
Available online: 27th February 2026

Volume:1
Issue: 1
DOI: https://doi.org/10.5281/zenodo.18800311

Abstract

The emergence of the metaverse presents unprecedented opportunities and challenges for social work practice, particularly in mental health service delivery. This paper explores ethical frameworks and intervention strategies for providing mental health services in virtual reality (VR) environments. Through a comprehensive literature review and theoretical analysis, we examine the intersection of social work values, VR technology, and ethical considerations specific to immersive digital environments. Key findings reveal that while VR-based interventions offer enhanced accessibility, therapeutic presence, and innovative treatment modalities, they also introduce complex ethical dilemmas regarding privacy, informed consent, professional boundaries, and digital equity. This study proposes an integrated ethical decision-making framework that addresses VR-specific challenges while maintaining adherence to established social work principles. The analysis identifies critical intervention strategies including trauma-informed VR therapy, avatar-mediated counseling, and virtual support groups. Implications for social work education, policy development, and future research are discussed, emphasizing the need for digital competency standards and updated ethical guidelines for metaverse practice.

Keywords:- Metaverse, Virtual Reality, Social Work Ethics, Mental Health Services, Digital Intervention Strategies, VR Therapy

Introduction

The rapid advancement of immersive technologies has ushered in a new era of digital interaction, collectively known as the metaverse a persistent, shared virtual environment where users interact through avatars in real-time (Mystakidis, 2022). As these technologies become increasingly sophisticated and accessible, social work professionals face the imperative to adapt their practice to meet clients where they are, including in virtual spaces. The COVID-19 pandemic accelerated the adoption of telehealth services, demonstrating both the viability and limitations of digital mental health interventions (Békés & Aafjes-van Doorn, 2020). The metaverse represents the next evolution of this digital transformation, offering immersive environments that transcend the constraints of traditional video conferencing platforms.

Virtual reality environments present unique therapeutic affordances, including enhanced sense of presence, controlled exposure to anxiety-inducing stimuli, and opportunities for embodied therapeutic interventions through avatar interactions (Freeman et al., 2017). Research indicates that VR-based interventions have shown efficacy in treating anxiety disorders, phobias, post-traumatic stress disorder, and social anxiety (Maples-Keller et al., 2017). However, the integration of social work practice into these immersive digital spaces raises profound ethical questions that existing professional guidelines may inadequately address. Issues such as avatar representation, data privacy in persistent virtual worlds, boundary management in always-accessible environments, and the psychological impacts of immersive presence require systematic examination.

This paper addresses the critical question: How can social workers ethically and effectively provide mental health services within metaverse environments while upholding professional standards and maximizing client welfare?

The research objectives are threefold:

- To synthesize existing literature on VR interventions and digital ethics in social work,
- To develop an ethical framework specific to metaverse practice,
- To identify evidence-informed intervention strategies suitable for virtual reality mental health services.

This inquiry is particularly salient given projections that the metaverse will reach 1.73 billion users by 2030, representing a substantial population potentially seeking mental health support in these spaces (Statista, 2023).

Literature Review

Virtual Reality in Mental Health Treatment

The application of VR technology in mental health treatment has evolved significantly over the past two decades. Systematic reviews demonstrate moderate to large effect sizes for VR-based exposure therapy in treating specific phobias, with outcomes comparable to in-vivo exposure (Carl et al., 2019). Riva et al. (2020) identified three therapeutic mechanisms through which VR facilitates psychological change: embodiment (experiencing a virtual body as one's own), presence (the sense of 'being there' in the virtual environment), and ecological validity (realistic simulation of real-world scenarios). These mechanisms enable clinicians to create controlled, graduated exposure hierarchies while maintaining therapeutic presence.

Recent studies have expanded VR applications beyond anxiety disorders. Gorisse et al. (2022) demonstrated that avatar customization in VR environments can positively influence self-perception and reduce social anxiety symptoms. Geraets et al. (2021) found that VR-based cognitive behavioral therapy for paranoia showed significant improvements in participant symptoms with effects sustained at six-month follow-up. Additionally, Lindner et al. (2023) highlighted the potential of VR interventions for increasing access to mental health care in underserved rural communities, where geographic barriers often limit service availability.

Ethical Considerations in Digital Social Work

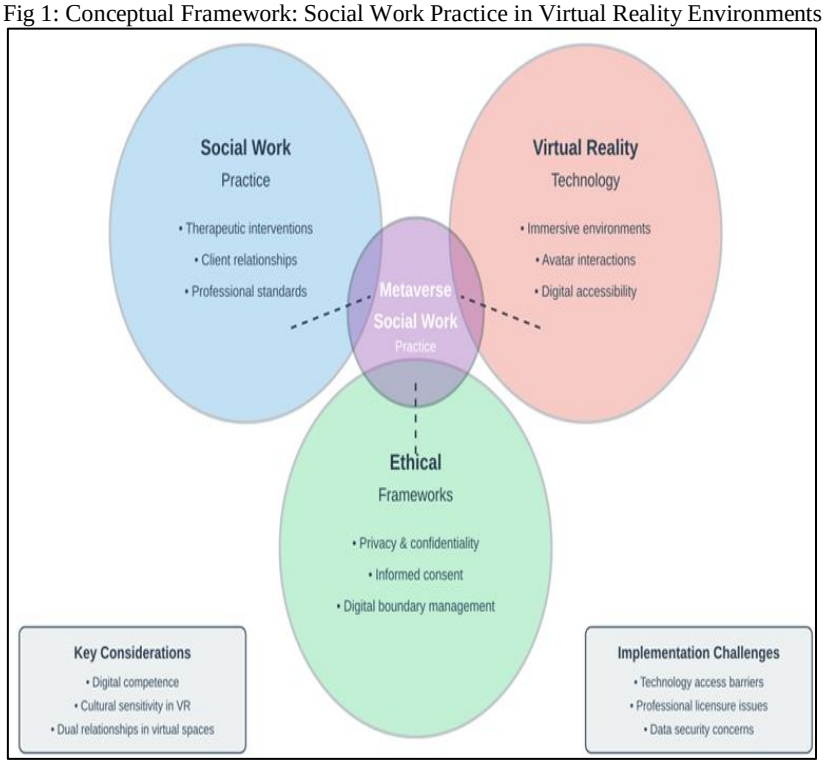
The National Association of Social Workers (NASW) established technology standards for social work practice in 2017, addressing teletherapy, electronic record-keeping, and digital communication (NASW, 2017). However, these guidelines predate the current metaverse developments and do not adequately address immersive virtual environments. Reamer (2015) identified key ethical challenges in digital practice including informed consent for technology use, confidentiality in cloud-based systems, competence with emerging technologies, and managing boundaries in always-accessible digital spaces.

Kersting and Schlicht-Schmälzle (2021) examined privacy concerns specific to VR mental health applications, noting that biometric data collected through VR headsets including eye movement, physiological arousal, and behavioral patterns—creates unprecedented privacy vulnerabilities. The persistent nature of metaverse environments raises questions about data retention, third-party platform access to therapeutic interactions, and cross-jurisdictional legal frameworks. Furthermore, the use of avatars introduces identity-related ethical questions: Should clients be required to use realistic representations? How does avatar appearance affect therapeutic alliance? What are the implications of clients presenting idealized or alternative identities in therapy? (Eichenberg & Auerswald, 2023).

Social Work Values in Virtual Spaces

Core social work values service, social justice, dignity and worth of the person, importance of human relationships, integrity, and competence must translate to virtual practice contexts (Boddy et al., 2020). Digital equity emerges as a critical social justice concern; disparities in technology access, digital literacy, and broadband availability create barriers that may exacerbate existing inequalities (Reamer, 2021). The question of cultural competence in virtual environments requires attention: How do cultural norms around personal space, eye contact, and physical presence translate to avatar interactions? How can social workers ensure culturally responsive practice when clients' physical appearances may be obscured by avatar representations?

Fig 1: Conceptual Framework: Social Work Practice in Virtual Reality Environments



Theoretical Framework

This analysis draws on three theoretical perspectives:

- Ecological systems theory,
- Person-in-environment framework, and
- Virtue ethics. Bronfenbrenner's ecological systems theory provides a lens for understanding how individuals interact within nested environmental contexts (Bronfenbrenner, 1979).

The metaverse represents a novel microsystem where therapeutic relationships unfold, embedded within mesosystems (connections between virtual and physical worlds), exosystems (platform governance policies), and macrosystems (societal norms around technology use). This framework illuminates how virtual environments both mirror and diverge from traditional therapeutic contexts.

The person-in-environment perspective emphasizes the reciprocal relationship between individuals and their contexts (Kondrat, 2021). In metaverse practice, this framework prompts examination of how virtual environments shape client experiences and how practitioners can modify these digital spaces to enhance therapeutic outcomes. Unlike traditional office settings, VR environments offer unprecedented control over environmental stimuli, enabling practitioners to create therapeutic spaces tailored to individual client needs while considering potential iatrogenic effects of immersive technologies.

Virtue ethics, particularly as articulated by Banks and Gallagher (2009) for social work contexts, emphasizes character-based rather than rule-based ethical reasoning. This framework is particularly relevant to metaverse practice where existing rules may be ambiguous or absent. Virtue ethics directs practitioners to cultivate professional virtues wisdom, courage, compassion, justice, and professional integrity that guide ethical decision-making in novel situations. This approach complements principle-based frameworks (autonomy, beneficence, non-maleficence, justice) by addressing the motivational and dispositional dimensions of ethical practice.

Figure 1 illustrates the conceptual framework synthesizing these theoretical perspectives. The model depicts the intersection of three domains: social work practice principles, virtual reality technological affordances, and ethical frameworks. At the center lies metaverse social work practice, which must integrate considerations from all three domains while addressing implementation challenges and key practice considerations unique to virtual environments.

Methodological Approach

This study employs a theoretical synthesis methodology, integrating interdisciplinary literature from social work, cyberpsychology, bioethics, and human-computer interaction. A systematic literature search was

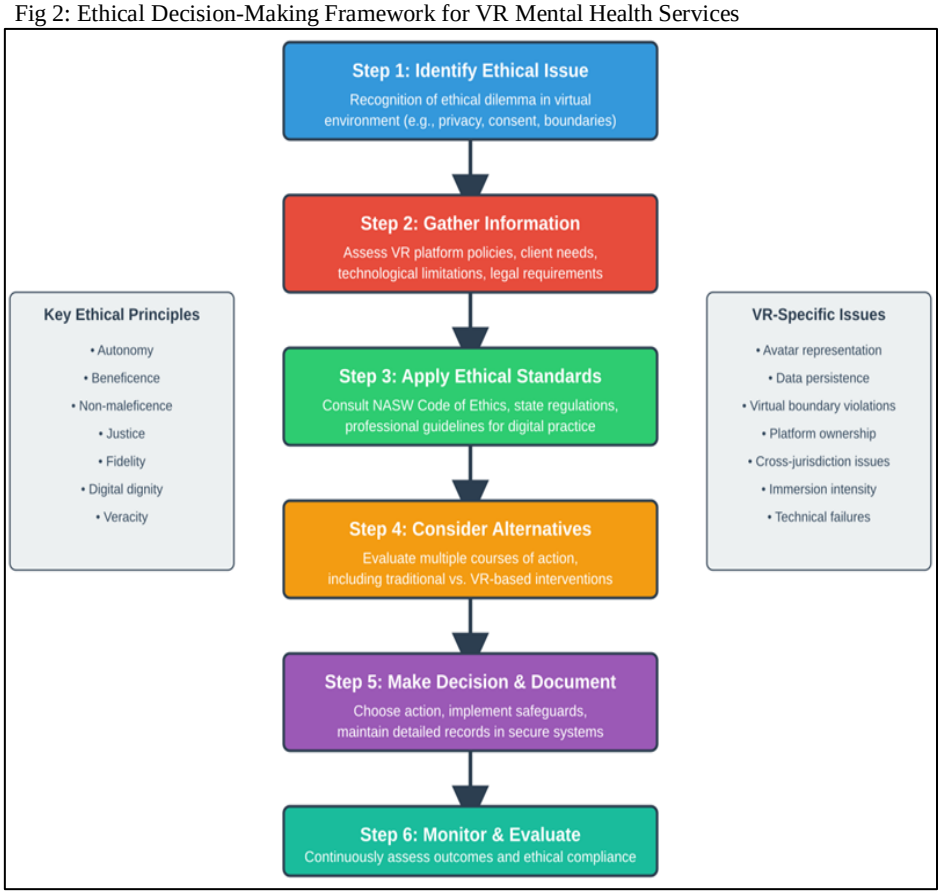
conducted across databases including Social Work Abstracts, PsycINFO, MEDLINE, and ACM Digital Library, covering publications from 2017 to 2024. Search terms included combinations of: 'virtual reality,' 'metaverse,' 'social work,' 'mental health,' 'ethics,' 'digital therapy,' and 'immersive technology.' Inclusion criteria required peer-reviewed empirical studies, theoretical papers, or professional guidelines addressing VR/metaverse applications in mental health or social work contexts.

The analysis followed a thematic synthesis approach, identifying recurring themes across the literature related to ethical challenges and intervention strategies. Critical discourse analysis was applied to examine how existing ethical frameworks address or fail to address metaverse-specific considerations. The proposed ethical decision-making framework and intervention strategies were developed through iterative refinement, ensuring alignment with NASW Code of Ethics while extending principles to accommodate VR-specific contexts.

Ethical Framework for Metaverse Social Work

Based on the literature synthesis and theoretical analysis, a six-step ethical decision-making framework specific to VR mental health practice is proposed (Figure 2). This framework extends traditional bioethical decision-making models to incorporate metaverse-specific considerations while maintaining consistency with social work ethical principles.

Fig 2: Ethical Decision-Making Framework for VR Mental Health Services



Key Ethical Principles Extended to Virtual Practice

Informed Consent

Informed consent in VR contexts must address unique technological dimensions. Clients require clear information about data collection practices specific to VR platforms, including biometric data harvesting, behavioral tracking, and data persistence. Consent processes should explicitly address avatar use, recording policies in virtual spaces, and potential risks specific to immersive technologies (e.g., simulator sickness, dissociation risks for trauma survivors). Documentation must clarify which entities have access to session data the practitioner, platform provider, and any third parties.

Confidentiality and Privacy

Traditional confidentiality frameworks assume controlled physical spaces and discrete communication

channels. Metaverse environments complicate these assumptions through persistent digital presence, potential for unauthorized recording by other users, and platform-level data access. Social workers must conduct thorough privacy assessments of VR platforms, selecting those with end-to-end encryption and clear data governance policies. Practitioners should establish protocols for discussing sensitive information (using text channels vs. voice, private virtual rooms vs. semi-public spaces) and educate clients about limitations to confidentiality in digital environments.

Professional Boundaries

The always-accessible nature of metaverse platforms creates boundary management challenges. Unlike traditional practice where physical office hours delineate availability, virtual presence can blur these boundaries. Clear policies regarding practitioner availability, appropriate communication channels, and emergency protocols are essential. Avatar interactions introduce additional boundary considerations: physical proximity norms in virtual space, appropriate forms of virtual touch or gesture, and management of dual relationships when practitioners and clients occupy the same virtual communities outside therapeutic contexts.

Competence

Ethical practice mandates competence in three domains: clinical skills, technological proficiency, and ethical reasoning specific to digital contexts. Social workers must understand VR technology capabilities and limitations, develop skills in avatar-mediated therapeutic relationships, and stay current with evolving platform features and associated risks. Supervision and consultation become particularly important when navigating novel ethical dilemmas without established precedent.

Table 1. Ethical Challenges and Mitigation Strategies in Metaverse Social Work

Ethical Challenge	VR-Specific Risks	Mitigation Strategy
Data Privacy	Biometric data collection, persistent digital footprints, platform data access	Use end-to-end encrypted platforms; conduct privacy impact assessments; minimize data collection; obtain explicit consent for biometric data use
Informed Consent	Complex platform terms of service, multiple data custodians, immersive technology risks	Develop VR-specific consent forms; provide demonstrations of technology; discuss simulator sickness and dissociation risks; ongoing consent verification
Professional Boundaries	Always-accessible platforms, chance encounters in shared virtual spaces, avatar proximity norms	Establish clear availability schedules; use separate professional avatars; create private therapeutic virtual spaces; address boundary scenarios in advance
Digital Equity	High equipment costs, broadband requirements, digital literacy barriers, disability accessibility	Offer device lending programs; provide training and support; maintain non-VR alternatives; advocate for platform accessibility standards
Cultural Competence	Avatar representation may obscure cultural identity; different cultural norms for virtual interaction; Western-centric platform design	Discuss avatar preferences with clients; learn cultural norms for virtual space; provide culturally diverse virtual environments; ongoing cultural humility training

Note. This table synthesizes key ethical challenges identified in the literature review with proposed mitigation strategies aligned with NASW ethical standards.

Intervention Strategies for Virtual Reality Mental Health Services

Drawing from the evidence base and ethical framework, several intervention strategies emerge as particularly suited to VR mental health practice. These strategies leverage the unique affordances of immersive technology while maintaining therapeutic integrity.

VR-Enhanced Exposure Therapy

Virtual reality provides unprecedented control over exposure hierarchies for anxiety-related disorders. Practitioners can gradually introduce anxiety-provoking stimuli while maintaining client safety and therapeutic control. For social anxiety, customizable virtual audiences allow systematic desensitization to public speaking or social situations. For PTSD, trauma-focused VR interventions enable controlled exposure to traumatic memories in safe, therapeutic contexts. Critical considerations include trauma-informed practice principles, careful pacing of exposure intensity, and immediate access to grounding techniques. Practitioners must be prepared to manage

intense emotional responses and should have protocols for transitioning clients from virtual to physical environments post-session.

Avatar-Mediated Therapy

The use of avatars introduces novel therapeutic possibilities. Research suggests avatar customization can influence self-perception, with implications for body image work, identity exploration, and self-compassion interventions. Practitioners can utilize avatar-based role-playing for social skills training, perspective-taking exercises through 'becoming' different avatars, and exploration of alternative self-presentations for identity development work. Ethical practice requires explicit discussion of avatar use in informed consent, attention to potential dissociative effects, and careful consideration of how avatar appearance might affect therapeutic alliance and client self-perception.

Virtual Support Groups and Peer Networks

Metaverse platforms enable support group facilitation that transcends geographic barriers while providing sense of presence stronger than traditional video conferencing. Virtual support groups can serve populations with mobility limitations, rare conditions that make local groups impractical, or those who experience stigma barriers to in-person attendance. Facilitation strategies must address group norms specific to virtual spaces, manage technological disruptions, and establish protocols for handling participant distress when physical intervention is not possible. Privacy considerations are paramount when multiple participants occupy shared virtual spaces.

Mindfulness and Relaxation Interventions

VR environments excel at creating immersive mindfulness and relaxation experiences. Nature-based virtual environments can provide restorative experiences for clients without access to natural settings. Guided meditation in customizable sensory environments allows practitioners to tailor interventions to individual preferences and needs. Biofeedback integration, where available, enables real-time monitoring of physiological responses during relaxation exercises. These interventions are particularly valuable for stress management, sleep difficulties, and as adjuncts to other therapeutic modalities.

Discussion

This analysis reveals both the promise and complexity of integrating social work practice into metaverse environments. The therapeutic affordances of VR technology enhanced presence, controlled exposure, embodied interventions align well with evidence-based mental health interventions. However, realizing this potential requires careful attention to ethical frameworks that extend beyond traditional practice guidelines to address digital-specific challenges.

The proposed ethical decision-making framework emphasizes systematic consideration of VR-specific issues while maintaining grounding in core social work values. Key implications include the need for enhanced informed consent processes that address technological complexities, proactive privacy protection strategies given the data-intensive nature of VR platforms, and boundary management protocols adapted to always-accessible virtual environments. The framework's emphasis on continuous monitoring reflects the reality that metaverse practice is evolving; ethical challenges that are not yet apparent may emerge as these technologies mature.

Implementation of VR-based interventions must address significant equity concerns. The digital divide encompassing device access, broadband availability, and digital literacy creates potential for exacerbating existing disparities in mental health service access. Social work's commitment to social justice demands intentional strategies to mitigate these barriers, including device lending programs, sliding scale fees that account for technology costs, and maintenance of non-VR service alternatives. Additionally, platform design often reflects Western cultural norms; practitioners must critically examine these assumptions and advocate for culturally diverse and inclusive virtual environments.

Professional competence emerges as a critical consideration. Current social work education programs rarely include immersive technology training, leaving practitioners unprepared for metaverse practice. Continuing education programs, supervision models adapted to digital practice, and competency standards specific to VR interventions are urgently needed. Professional organizations must develop updated ethical guidelines, practice standards, and risk management strategies that address metaverse-specific considerations.

Limitations and Future Directions

This theoretical analysis is limited by the nascent state of metaverse mental health practice; empirical evidence remains limited, and long-term outcomes are unknown. The proposed framework requires empirical

validation through case studies and outcome research. Additionally, the rapid pace of technological change means recommendations may require frequent revision. Future research should examine: comparative effectiveness of VR versus traditional interventions for specific populations and conditions; long-term psychological impacts of avatar-mediated therapeutic relationships; optimal training models for developing practitioner competence in VR interventions; and the experiences of diverse client populations accessing mental health services in virtual environments. Participatory research involving clients with lived experience of VR mental health services would provide valuable insights for refining practice approaches.

Conclusion

The metaverse represents a paradigm shift in how mental health services may be delivered, offering opportunities to enhance accessibility, therapeutic presence, and intervention efficacy. However, these opportunities come with ethical complexities that demand thoughtful frameworks and intentional strategies. This paper has synthesized emerging scholarship to propose an ethical decision-making framework and intervention strategies specific to VR-based social work practice.

Core social work values service, social justice, dignity and worth of persons, importance of relationships, integrity, and competence remain foundational even as practice contexts evolve. The challenge lies in translating these values to digital contexts that present novel ethical dilemmas around privacy, consent, boundaries, and equity. The frameworks and strategies proposed here provide initial guidance, yet they represent the beginning rather than conclusion of professional discourse on metaverse practice.

As social workers increasingly encounter clients in virtual environments, the profession must proactively establish ethical guidelines, competency standards, and evidence-based practices for this emerging domain. This requires collaboration among practitioners, educators, researchers, and professional organizations to ensure that metaverse practice upholds the highest standards of ethical care while leveraging technology's potential to enhance client wellbeing. The imperative is clear: social workers must be prepared to meet clients where they are including in the metaverse with competence, ethical integrity, and commitment to social justice.

References

Banks, Sarah, and Anne Gallagher. Ethics in Professional Life: Virtues for Health and Social Care. London: Palgrave Macmillan, 2009.

Békés, Vera, and Katie Aafjes-van Doorn. “Psychotherapists’ Attitudes toward Online Therapy during the COVID-19 Pandemic.” Journal of Psychotherapy Integration 30, no. 2 (2020): 238–247. https://doi.org/10.1037/int0000214

Boddy, Janet, Lena Dominelli, and Anna Gupta. “Social Work Values and Ethics in the Era of Digital Mental Health.” British Journal of Social Work 50, no. 6 (2020): 1910–1928

Bronfenbrenner, Urie. The Ecology of Human Development: Experiments by Nature and Design. Cambridge, MA: Harvard University Press, 1979.

Carl, Erik, Alexander T. Stein, Allison Levihn-Coon, James R. Pogue, Barbara Rothbaum, Paul Emmelkamp, Gordon J. G. Asmundson, Per Carlbring, and Mark B. Powers. “Virtual Reality Exposure Therapy for Anxiety and Related Disorders: A Meta-Analysis of Randomized Controlled Trials.” Journal of Anxiety Disorders 61 (2019): 27–36. https://doi.org/10.1016/j.janxdis.2018.08.003

Eichenberg, Christiane, and Miriam Auerswald. “Avatar Representation and Identity in Virtual Reality Mental Health Interventions: Ethical Considerations.” Cyberpsychology, Behavior, and Social Networking 26, no. 4 (2023): 248–256.

Freeman, Daniel, Sophie Reeve, Andrew Robinson, Anke Ehlers, David Clark, Bernhard Spanlang, and Mel Slater. “Virtual Reality in the Assessment, Understanding, and Treatment of Mental Health Disorders.” Psychological Medicine 47, no. 14 (2017): 2393–2400. https://doi.org/10.1017/S003329171700040X

Geraets, Christiaan N. W., Elke C. D. van der Stouwe, Roos Pot-Kolder, and Wim Veling. “Advances in Immersive Virtual Reality Interventions for Mental Disorders: A New Reality?” Current Opinion in Psychology 41 (2021): 40–45. https://doi.org/10.1016/j.copsyc.2021.02.004

Gorisse, Geoffrey, Olivier Christmann, Enrico A. Amato, and Simon Richir. “First- and Third-Person Perspectives in Immersive Virtual Environments: Presence and Performance Analysis of Embodied Users.” Frontiers in Robotics and AI 4 (2017): 33. https://doi.org/10.3389/frobt.2017.00033

Kersting, Karin, and Renate Schlicht-Schmälzle. “Privacy Paradoxes in Digital Psychotherapy: Anonymity versus Personalization in VR Mental Health Care.” Journal of Medical Internet Research 23, no. 8 (2021): e28765.

Kondrat, Mary Ellen. “Person-in-Environment.” In Encyclopedia of Social Work. Washington, DC: National Association of Social Workers and Oxford University Press, 2021. https://doi.org/10.1093/acrefore/9780199975839.013.285

Lindner, Philip, Alexander Miloff, Sofia Fagernäs, Johan Andersen, Martin Sigeman, Gerhard Andersson, Tomas Furmark, and Per Carlbring. “Therapist-Led and Self-Led One-Session Virtual Reality Exposure Therapy for Public Speaking Anxiety with Consumer Hardware: A Randomized Controlled Trial.” Journal of Anxiety Disorders 87 (2023): 102551.

Maples-Keller, J. L., B. E. Bunnell, S. J. Kim, and B. O. Rothbaum. “The Use of Virtual Reality Technology in the Treatment of Anxiety and Other Psychiatric Disorders.” Harvard Review of Psychiatry 25, no. 3 (2017): 103–113. https://doi.org/10.1097/HRP.0000000000000138

Mystakidis, Stylianos. “Metaverse.” Encyclopedia 2, no. 1 (2022): 486–497. https://doi.org/10.3390/encyclopedia2010031

National Association of Social Workers. NASW, ASWB, CSWE, and CSWA Standards for Technology in Social Work Practice. Washington, DC: Author, 2017.

Reamer, Frederic G. “Clinical Social Work in a Digital Environment: Ethical and Risk-Management Challenges.” Clinical Social Work Journal 43, no. 2 (2015): 120–132. https://doi.org/10.1007/s10615-014-0495-0

Reamer, Frederic G. “Social Work in a Digital Age: Ethical and Risk Management Challenges.” Social Work 66, no. 2 (2021): 171–173.

Riva, Giuseppe, Rosa M. Baños, Cristina Botella, Fabrizia Mantovani, and Andrea Gaggioli. “Transforming Experience: The Potential of Augmented Reality and Virtual Reality for Enhancing Personal and Clinical Change.” Frontiers in Psychiatry 7 (2016): 164. https://doi.org/10.3389/fpsyt.2016.00164

Statista. “Number of Metaverse Users Worldwide from 2020 to 2030.” 2023.