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When the World Opens Up: Journeys of People with Intellectual Disabilities in Social Virtual Reality

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Figure 1: Over three scaffolded sessions, 11 adults with mild intellectual disabilities entered the open *wild* of VRChat, moving from low-stimulation scenic worlds like *Fallen Books* (left) and structured activity spaces like *Udon Bird Sanctuary* (centre) to high-traffic social hubs such as *The Black Cat* (right). Along the way, they pursued their own interests, navigated safety together, and built confidence through interdependent care. For privacy, we replace participant avatars with checkerboard silhouettes in all figures; these are conceptual placeholders rather than the avatars participants used.

Abstract

Adults with intellectual disabilities (ID) face systemic social exclusion that narrows autonomy and life opportunities. While social virtual reality (VR) offers a powerful medium for identity expression and community belonging, research often adopts a remedial



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paradigm, focusing on training functional skills in scripted environments. This paper challenges this deficit-based model by treating social VR as an open world for participation. Following 11 adults with ID across multi-session engagements with VRChat, we employed an adaptive, relational method to scaffold participant leadership. Findings reveal that participants used the platform for interest-driven discovery, sustained through interdependent care webs. Crucially, the study demonstrates how social VR supports transferable confidence and emerging digital citizenship, enabling some users to transition from novices to community leaders. We contribute six Disability Justice-aligned design principles articulating a *world-making paradigm* that reorients Human-Computer Interaction toward supporting personhood and self-determination in mainstream digital publics.

CCS Concepts

• **Social and professional topics** → **People with disabilities**; • **Computing methodologies** → **Virtual reality**; **Perception**; • **Information systems** → **Social networking sites**; • **Security and privacy** → **Social aspects of security and privacy**; • **Human-centered computing** → **Empirical studies in accessibility**.

Keywords

Intellectual disabilities, virtual reality, VRChat, Disability Justice

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1 Introduction

Adults with intellectual disabilities (ID) face *profound social exclusion*, often feeling “left out” even from services designed for their inclusion [82]. This is not just a feeling, but a measurable reality: they are up to four times more likely to experience chronic loneliness [39], have smaller social networks [97], and are systematically under-represented in cultural and community life [42]. These outcomes are a result of persistent social and environmental barriers from the low expectations and overprotection that limit autonomy [108] to the quiet, systemic exclusions that narrow a person’s chances to build a connected and meaningful life.

Unfortunately, technology design and research in Human-Computer Interaction (HCI) often reproduce these same exclusionary patterns. Despite calls for more justice-oriented approaches, the field’s engagement with the ID community remains sparse and narrowly focused. A survey of top accessibility venues (CHI/ASSETS, 2010–2019) found that only 2.8% of papers addressed ID, with aims skewed toward “increasing independence” through skills-training and behaviour change [76]. This remedial bias positions people with ID as subjects to be corrected rather than as whole persons with inherent worth, experiences, and the right to lead conversations about their own lives [14]. A Disability Justice approach challenges this, demanding that we target the social arrangements that produce

exclusion and instead centre self-determination and the leadership of those most impacted [94].

This *tension between remediation and self-determination* is starkly visible in research on virtual reality (VR). The dominant approach applies VR for people with ID as a tool for training functional life skills in simplified, scripted environments, such as cooking [70], shopping [29], or transport [83]. Such studies cast VR as a padded corner for practising deficits, prioritising control over agency. As Bennett and Rosner [10] critiqued, these methods create a harmful power dynamic in which designers’ interpretations of disability override the expertise of disabled people themselves. Across extended reality (XR) more broadly, critical syntheses similarly argue that “disability inclusion” is still too often framed as remediation toward normative functioning, and call for approaches that centre disabled people’s own ways of living, sensing, and relating [101, 104].

In contrast, research with other marginalised communities shows what VR can become when users are in control. Work in social VR has documented how platforms such as VRChat function as *third places* where LGBTQ+ users build safer spaces for identity expression and mutual support that may be unavailable offline [1, 71]. Disabled people are likewise already present in these worlds: they use avatars and social norms to negotiate visibility, manage stigma, and experiment with more affirming self-presentations, sometimes in ways that spill over into greater confidence and sustained social support beyond the headset [28, 31, 36, 47, 114]. These studies suggest that when VR is treated as an open, interest-driven social world rather than a closed training tool, it can support identity, community, and care.

The divide between using VR as a deficit-focused training tool and embracing it as a platform for social participation points to a persistent gap in how HCI has imagined the role of VR in the lives of people with ID. To challenge this, our study explores what becomes possible when we stop designing for deficits and instead design for agency. We take up this question in social VR, a compelling site for this work for several reasons. Unlike the sterile, controlled environments common in remedial studies, it is an unscripted, public world where interaction is socially negotiated. Crucially, its affordances like avatar embodiment allow for new forms of identity expression and self-presentation, while the virtual space removes many of the logistical and physical barriers that can limit participation in offline life.

Our work extends accessibility and social VR research in three ways. *First*, we centre adults with mild ID, a population largely absent from social VR accessibility research. *Second*, we report a multi-session qualitative study in the mainstream platform VRChat, tracing participants’ entry into, exploration of, and (for one participant) ongoing habitation of the platform’s *wild* (Figure 1). *Third*, we interpret these trajectories through a Disability Justice-aligned *world-making* lens that foregrounds digital citizenship, personhood, agency, and interdependence.

Our contributions are twofold: (1) an empirical account of adults with ID engaging in a mainstream social VR platform, and an adaptive method for scaffolding and studying that engagement; and (2) six Disability Justice-aligned design principles that define a *world-making paradigm* for social VR, an alternative to prevalent remedial, skills focused VR training approaches for this population.

2 Related work

This section first reviews the remedial legacy of technology for people with ID. We then introduce the Disability Justice frameworks that challenge this paradigm, before focusing on VR as a critical site where the tension between remediation and participation is clearly visible.

2.1 The remedial legacy of technology for people with ID

Historically, society's response to disability has been dominated by a medical model. This model frames a person's cognitive, sensory, or physical difference as an individual pathology or private 'tragedy' to be 'fixed' [73, 77, 95]. By locating the 'problem' within the person, this perspective reduces the complex identity of a disabled individual to their functional limitations compared to a normal baseline, often framing their disability as synonymous with inability [21]. Much of the technology designed for people with ID echoes this model. Rooted in a well-intentioned desire to help, the goal has often been normalisation: providing support that helps individuals learn and behave in ways that minimise their perceived deficits [67]. This has led to a proliferation of tools focused on remedial training, such as cognitive software for memory skills, educational apps for repetitive practice, and even behavioural correction systems.

As critical HCI scholars like Frauenberger [46] argued, the philosophical position underlying this remedial paradigm is inherently reductionist. It presumes that the complex, lived experience of disability can be adequately understood and addressed by focusing solely on a person's functional limitations. This has shaped the field's dominant understanding of accessibility, often limiting it to a narrow, functional goal of providing a tool that enables a user to complete a specific, isolated task [38, 105, 116]. While crucial, this approach fails to account for the rich interplay of social and emotional factors that truly shape participation [96]. It overlooks fundamental human needs for community belonging and identity expression [33]. A narrow focus on task completion often neglects the crucial question of whether the experience is genuinely meaningful or empowering, thereby failing to address broader opportunities for technology to support agency in more holistic ways [13, 46].

2.2 Rethinking disability in HCI

A foundational shift in disability research has been the move from the medical model to the social model, which locates disability in the barriers created by inflexible environments and exclusionary attitudes [102]. *Disability Justice*, a framework developed by queer, Black, and Brown disabled activists such as Sins Invalid [63], extends the social model by foregrounding *intersectionality*, *collective access*, and *full humanity* [89]. A core principle is *wholeness*: the recognition that "each person is full of history and life experience" and has inherent worth outside of capitalist notions of productivity [14]. Disability scholars note that portraying people only as vulnerable dependents is objectifying and de-agencying, whereas acknowledging dynamic agency leads to more inclusive structures [85]. Another key principle is the *leadership of those most impacted*: "nothing about us without us", which challenges HCI to centre the lived expertise of people with ID themselves [102].

Building on these shifts, a growing body of justice-oriented HCI scholarship critiques the field's own remedial legacy. Researchers have noted how technologies, particularly for neurodivergent players, often adopt a medical framing that reduces engagement to a form of therapy, undermining autonomy and play for its own sake [99]. In contrast, competency-based approaches highlight how everyday digital practices can scaffold confidence and self-determination [6, 7, 98]. Reimagined co-design methods create space for genuine influence [16], while artefacts like TalkingBox surface overlooked strengths and interests [17]. As Safari et al. [93] found, participants report pride and ownership when design aligns with their interests, demonstrating that technology designed around curiosity and identity resists the de-agencying tendencies of deficit-based models.

Critical perspectives like *crip technoscience* further inform this trajectory by emphasising how disabled people creatively hack and repurpose technologies to fit their own desires [57]. Within HCI, this has inspired critiques of *independence* as a default design goal, proposing instead *interdependence* as a more realistic and just orientation [9]. Such work aligns with Bircanin et al. [16]'s notion of "co-designing in the middle," which reframes design as a relational and ongoing practice that resists the neurotypical impulse to parse complex social realities into a series of controlled events. By challenging designers to abandon fixed agendas and instead navigate the ambiguities of the *middle*, meaning is allowed to emerge from the encounter itself [16]. Together, these justice-oriented approaches in HCI connect directly with Disability Justice principles by foregrounding *wholeness*, *collective access*, and the *leadership* of those most impacted.

2.3 Virtual reality from remedial tool to a world of participation

VR is an inherently experiential technology. Its core affordances of immersion and presence offer unique opportunities for learning and interaction. For researchers working with people with ID, VR has been compelling because it provides a controllable and engaging medium to simulate real-life scenarios, offering *learning by doing* opportunities that are difficult to replicate in traditional settings. However, as Gerling et al. [51] critiqued, *accessibility research has often failed to engage with the very experiential qualities that make VR powerful*. Recent years have seen a surge in research using VR with people with ID, but as systematic reviews confirm, *this work has largely perpetuated a remedial paradigm* that reduces the technology to a tool for procedural skills-training [86, 115]. This includes training for daily living skills like cooking [29, 70], shopping [100], and transport or navigation [5, 34, 69, 83]; vocational skills like job interviews [22]; and therapeutic interventions for cognitive functions like attention [15], physical fitness [72], and emotional regulation [49]. While research has successfully demonstrated that VR is an engaging medium for these tasks, its scope is profoundly limited. The cumulative body of work essentially answers a limited question: *Can people with ID learn a procedure in a controlled virtual space?* This is no longer a sufficient goal for HCI. As Gerling et al. [51] argue in a powerful call to action, we must afford research with disabled people "the same nuance and care as when addressing non-disabled persons, placing the same emphasis on *experience* as

an outcome parameter.” To answer this call requires shifting the research context from bespoke training applications to the kinds of open-ended, social worlds where rich experiences can unfold.

2.4 Accessibility and social VR

Social VR platforms like VRChat represent such a world. For many users, they serve as *third places* that overcome geographical barriers and enable a powerful sense of co-presence for social interaction. This potential is leveraged by specific marginalised communities. Research in HCI has documented how LGBTQ+ users, for example, use social VR to find social support and create safe spaces for identity formation that may be unavailable to them offline [1, 71].

Accessibility research shows that disabled people are not waiting to be included into social VR, they are already present and actively reshaping these spaces. Because mainstream platforms often centre normative bodies and communication styles, disabled users develop rich, self-directed practices to negotiate access and safety [74]. This agency is most visible in avatar systems, which serve as a primary site for identity work. Customisation is not treated as cosmetic, studies show how disabled users leverage avatars to manage stigma, selectively disclose disability, and experiment with affirming self-presentations [55, 112]. This world-making extends beyond individual representation to the social infrastructure of the platform itself. Recent work explores how embodied interaction is made feasible through sighted or AI-powered guides, as well as haptic and audio cues that convey non-verbal signals otherwise inaccessible in virtual environments [30, 32, 64]. Together, these practices demonstrate that access in social VR is an active, ongoing negotiation of both self and the virtual space.

At the same time, social VR platforms are not utopias. The same openness that enables connection and world-building also exposes users to harassment, exclusion, and sensory overwhelm. Disability signifiers on avatars can invite targeted abuse. In response, communities have evolved tactics such as “staying mute” or carefully curating worlds to manage social anxiety and conflict [28, 112]. Because of these complexities, the dominant research paradigm has favoured keeping people with ID in tightly controlled, safe training simulations rather than open social worlds. However, disability advocates argue that such overprotection can be inherently harmful by denying disabled people the dignity of risk [88]. By moving beyond scripted environments, we uphold the right of people with ID to encounter complex social situations and to develop their own judgments, relationships, and coping strategies in the wild of a mainstream platform.

3 Methodology

We adopted a qualitative, exploratory design grounded in Disability Justice and a practice of *being with* participants to study participation in an open-ended social VR world rather than a task-based, remedial exercise. We first outline the approach, then participants/ethics, and finally data collection and analysis.

3.1 Study design and rationale

Our work explored how people with ID encounter an open-ended, socially immersive virtual environment for the first time. Unlike

most VR studies with this group, which focus on one-off, skills-based training, our methodology was designed around a three-session structure that unfolded over multiple days. This decision was a commitment to embracing temporal flexibility, a core principle of relational co-design [16]. While we began with a flexible plan of potential worlds to visit, the study’s trajectory was fundamentally shaped by the participants themselves. In conversations between sessions, we actively solicited their preferences and ideas, asking what they had enjoyed and what they might like to explore next.

Our exploratory approach was structured around commitments from accessible HCI [11], disability studies [53], and the principles of Disability Justice [14]. Unlike standardised protocols, which often filter out unpredictability, our methodology embraced participants’ unique embodied and relational styles as a central site of inquiry. It thus served a dual purpose: beyond data collection, it functioned as a practice of inclusion, deliberately designed to prioritise participant agency and embrace the contextual richness that standardised methods typically discard.

This approach was realised through a collaborative and iterative process grounded in interdisciplinary and lived expertise. Our team included researchers with backgrounds in VR and ID, a long-term VRChat user, and an autistic public contributor, who co-developed materials and piloted the full protocol. To conduct our study, we selected VRChat for its capacity to support open-ended exploration and interest-driven tailoring. Early on, we used invite-only private instances to scaffold safety. VRChat is a multi-user social VR platform in which people appear as avatars and move between user-created ‘worlds’ that vary in activities, aesthetics, and social density. Worlds can be public (open to anyone), friends-only, or private instances. Users communicate primarily through spatialised voice chat, simple gestures, and in-world objects. This structure made it possible for us to select lower-stimulation or more structured worlds for initial sessions, then gradually move towards busier public hubs as participants’ confidence grew.

3.2 Participants and ethical considerations

Here we outline how participants were recruited and deemed eligible, who took part, and the ethical safeguards put in place to enable informed, ongoing, and as-safe-as-possible engagement with VRChat.

3.2.1 Recruitment and eligibility. Participants were recruited through ID services and community organisations in the region surrounding the University of Kent in the UK. Recruitment was carried out in collaboration with local support networks and community centres in a mix of urban and coastal areas in the UK. A public-facing poster, outlining the study’s aims, procedures, inclusion criteria, and contact details in accessible language, was distributed across these networks. Researchers also visited day centres and drop-in programmes that regularly support adults with ID. During these visits, the study was introduced through short presentations and informal conversations with both staff and potential participants, enabling accessible in-person explanations of the study’s purpose and procedures. Where participants expressed interest, the team arranged in-person meetings with them and, where applicable, their



Figure 2: Gradual exposure across three scaffolded sessions in VRChat, moving from calm scenic environments to structured activities and then to more socially demanding settings.

carers or support staff. These meetings included detailed explanations of the study and demonstrations of the VR equipment to support informed decision-making. Participants were invited to involve a carer in the sessions if this reflected their usual living arrangements or support preferences. All participants received a £10 shopping voucher for each VR session they attended and for the post-study interview, in recognition of their time and contributions.

To be eligible, participants needed to: (i) be aged 18 or older; (ii) have a pre-existing diagnosis of mild intellectual disabilities as defined by IQ range of 50 to 69; and (iii) be able to communicate in English. Participants were excluded from the study if they (i) did not have the capacity to provide informed consent, or (ii) had been medically advised to avoid VR due to conditions such as epilepsy. Capacity to consent was assessed using a structured protocol adapted from Arscott et al. [4], which involved six questions designed to evaluate participants' ability to understand, retain, and communicate key aspects of the study. The questions addressed the study's purpose, duration, potential risks and benefits, the right to withdraw, and how to ask questions or raise concerns. Individuals who were unable to demonstrate sufficient understanding across all six areas were not enrolled in the study. Carers were not subject to formal eligibility criteria, as their role was to support participants and contribute contextual insight, rather than being the primary focus of the study.

3.2.2 Demographics. Thirteen volunteers participated in the study, including 11 adults with mild ID¹ and two adult carers, who accompanied two of the participants. All 11 adults with ID completed the full protocol. They ranged in age from 31 to 65 years ($M = 48.6$, $SD = 12.03$). Most were White British (10 of 11) and over half lived with family or a foster family (6 of 11). All could read and write their names, and most reported being able to read text messages (10 of 11) and emails (8 of 11). The majority had attended college-level education. Several reported co-occurring conditions, such as anxiety (4 of 11), depression (4 of 11), autism (3 of 11), and physical or motor impairments. Additionally, they were digitally active, using smartphones to access the internet (10 of 11) and engage with

mainstream platforms like YouTube, Facebook, and TikTok (7 of 11). Demographic data was not collected for carers.

3.2.3 Ethical considerations. The study received a favourable opinion from the Research Ethics Advisory Group of the School of Psychology, University of Kent and the Ethics Board of the underlying project's funding body. The study was designed with a strong emphasis on ethical safeguards, guided by best practices for working with adults with ID in digital and immersive contexts. To ensure clarity and accessibility, we co-developed *easy read* versions of the information sheet and consent form with a Patient and Public Involvement (PPI) representative. All materials were provided to and reviewed with each participant to support informed consent. Where carers were expected to attend sessions, they were also offered standard dedicated information sheets outlining their supportive role and were invited to provide written consent to participate in the activities and interviews. Participants were regularly reminded that they could pause, take breaks, or withdraw at any point without consequence.

3.3 Procedure

Our procedure was designed to enact the principles of Disability Justice in practice, creating a supportive and flexible research experience. Reflecting our commitment to temporal flexibility [16], participants took part in three VR sessions using Meta Quest 3 headsets, spaced across multiple weeks. Most participants completed all three sessions within a period of approximately 2–3 weeks with the exact timing adjusted to fit their existing routines and service schedules. Sessions took place either at the host institution or in local community centres, depending on participant preference. The first session lasted up to 90 minutes to accommodate onboarding, while subsequent sessions were approximately one hour each. All VR sessions were run with one focal participant at a time. Participants did not share the virtual environment with each other during the study. In two cases, a familiar carer joined the same world in a separate headset at the participant's request, acting as an additional source of reassurance rather than a co-participant in the research. Figure 3 summarises the study procedure, including the pre-study co-design inputs, session structure, and data collected.

Session 1. Scaffolding for agency. The first session prioritised building a foundation of comfort and competence. We began by reviewing a co-designed physical guide with each participant, which

¹To provide context for our findings and maintain research transparency, we report the following demographic information. We offer this data not to define or limit our participants, but to situate them within their specific social and diagnostic contexts, in line with the Disability Justice principle of acknowledging intersectionality.

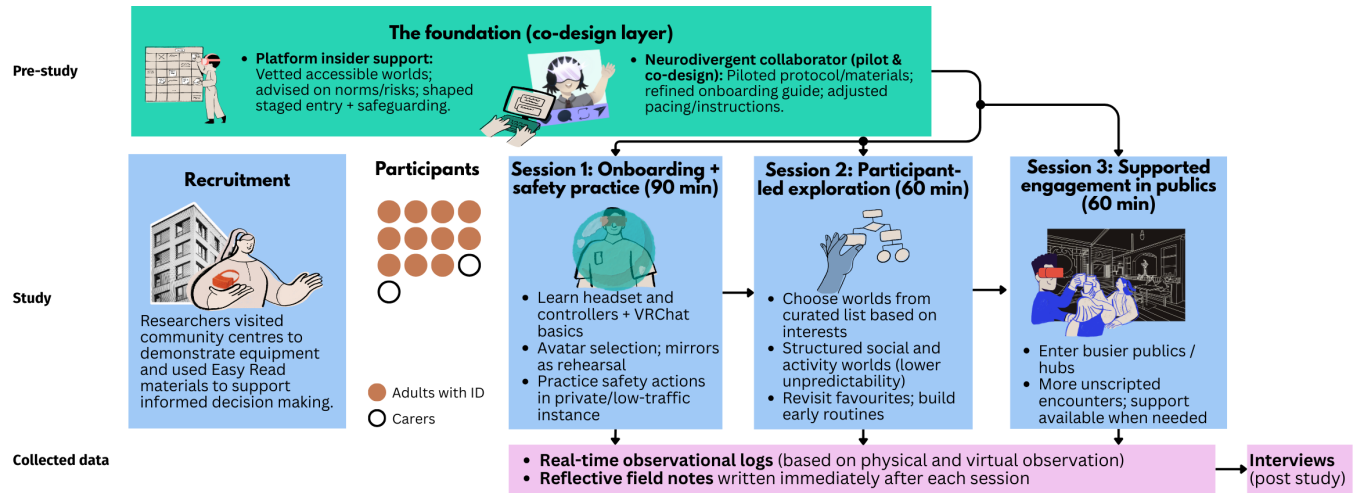


Figure 3: Overview of the study methodology: pre-study co-design inputs (pilot/co-design and platform-insider support) informed three VRChat sessions (onboarding and safety practice; participant-led exploration; supported engagement in publics). Data collected included real-time observational logs, reflective fieldnotes, and post-study interviews.

used images and simple text to explain the headset, controllers, and key VRChat menus. This guide was developed with our neurodivergent collaborator after his pilot session to ensure its clarity. Following this, the session focused on familiarisation with avatar creation, movement, and the use of safety tools in a controlled, low-pressure setting (see Figure 2 left for one of the worlds explored in this phase).

Session 2. Participant-led exploration. The focus of the second session shifted to participant leadership. Based on conversations with the researchers about their interests, participants chose from a curated list of public worlds, allowing them to guide the experience toward what they found personally meaningful (see Figure 2 middle for one of the worlds explored in this phase).

Session 3. Supporting independent engagement. The final session supported more independent engagement in active public worlds like *The Black Cat*². This was designed to provide an opportunity for participants to navigate the complexities of an unscripted social environment on their own terms, with support available but not imposed (see Figure 2 right for one of the worlds explored in this phase).

To support this gradual exposure, we developed a flexible world-selection framework. While we came to each session with a curated list of pre-vetted worlds, this list served as a starting point. The initial list was compiled by the research team and our long-term VRChat user collaborator, drawing on their knowledge of accessible, relatively stable worlds and pilot testing for sensory load and social norms. The ultimate trajectory was guided by a collaborative process, adapting to participants' in-the-moment comfort and expressed interests. Our curated worlds were grouped into categories that reflected a progression from low to high social and sensory

complexity. Each world³ was pre-tested by the research team to ensure it met baseline safety and accessibility standards:

- *orientation & familiarisation spaces*: private or default worlds for learning controls (e.g., *VRChat Home* – a common starting environment).
- *low-stimulation exploratory worlds*: quiet, often scenic environments for practising movement with minimal social pressure (e.g., *Emerald Valley*, a calm outdoor landscape).
- *structured social worlds*: environments with a clear, simple activity to scaffold interaction (e.g., *Udon Bird Sanctuary*, a bird-feeding mini-game, and *No Time Two Talk*, a timed conversation game).
- *ambient social hubs*: popular, public worlds with a relaxed atmosphere, allowing for observation and optional engagement (e.g., *Midnight Rooftop*, a laid-back rooftop hangout).
- *active social hubs*: dense, unpredictable public worlds for experiencing the full *wild* of VRChat (e.g., *The Black Cat*).

Within this framework, participants could request to revisit favourite worlds, skip or leave worlds that felt uncomfortable, and suggest new themes (e.g., “a world with animals” or “a world like a pub”), which we then used to search for additional worlds on the fly where possible. In this way, the curated list structured the experience without fixing it in advance. Throughout all sessions, the physical and virtual setup was designed to provide comprehensive support. A researcher was always physically present in the room with the participant and simultaneously co-present in VRChat as an avatar via a desktop client. This dual presence allowed for real-time monitoring of both physical comfort and in-world interactions. The researcher did not wear a headset. Instead, they sat next to or slightly in front of the participant facing both the participant

²*The Black Cat* is a popular, high-traffic bar-like hub world in VRChat that attracts a wide range of users and provides opportunities for spontaneous social encounters.

³All named worlds (e.g., *VRChat Home*, *Emerald Valley*, *Udon Bird Sanctuary*, *No Time Two Talk*, *Midnight Rooftop*, *The Black Cat*) are publicly available in VRChat and can be found via the in-platform world search.

and a monitor that displayed the desktop VRChat client. This arrangement allowed them to watch the participant's body language and physical comfort while also seeing, hearing, and responding to in-world interactions in real time. The researcher's role was intentionally adaptive: in the beginning, it was more hands-on, providing direct guidance and scaffolding. As participants grew more confident across the sessions, the researcher's intervention became progressively lighter, stepping back to allow for autonomous exploration and only intervening in specific situations when support was needed or requested. When a carer joined a session, they used a separate headset in an adjacent room with a second researcher providing dedicated support. Participants were reminded at the start of each session that they could take a break or stop at any time without consequence. After data collection ended, we held a voluntary group debrief meeting for all participants and carers. During this meeting, P2 shared that he had continued using VRChat at home and expressed an interest in talking more about his experiences. We subsequently invited him to take part in a separate, optional follow-up interview about his ongoing use.

3.4 Data collection and analysis

We now outline the procedures used to gather our data and the analytic approach we employed.

3.4.1 Data collection. The study was qualitative and exploratory in nature. We gathered data from multiple sources to create a rich, triangulated account of each participant's experience. Our data corpus included:

- (1) **Observational data.** Across all three sessions, we collected data through two complementary methods. We used real-time observational logs to capture objective details, such as participants' direct actions, verbal quotes, and interaction sequences. Immediately following each session, we expanded on these logs by writing reflective field notes, which included the researcher's subjective interpretations, analytical memos, and reflections on the research process itself.
- (2) **Data from semi-structured interviews.** Following the final session, participants took part in a 30 to 45-minute semi-structured interview to discuss their overall experience (e.g., "Which virtual place did you like the most? Why?"; "How did you choose your avatar? What do you like about it?"; "Can you tell me about a time you felt uncomfortable or unsafe? What did you do?"). Carers who attended were also interviewed to capture their unique perspective on the participant's journey and the technology's impact.
- (3) **Data from a follow-up interview.** For one participant who independently purchased a headset after the study (P2), we conducted a 60-minute follow-up interview two months later, arranged after a group debrief where he volunteered to discuss his ongoing use.

3.4.2 Data analysis. We analysed our full data corpus, comprising observational logs, reflective field notes, and interview transcripts using Reflexive Thematic Analysis (RTA), following the principles outlined by Braun and Clarke [19]. All semi-structured and follow-up interviews were audio-recorded and transcribed verbatim.

For our observational data, we wrote real-time logs during each session and expanded these into more detailed, reflective field notes immediately afterward. The entire data corpus was managed and coded in NVivo, with a collaborative whiteboard (Miro) used for visual theme development. In line with RTA principles, the analysis was led by the first author's deep and reflexive engagement with the data. They first familiarised themselves with all transcripts and notes, writing initial memos. Then, they coded the data inductively. Observational logs and field notes were coded for recurring behaviours, interaction styles, and responses to different worlds. Interview transcripts were coded for participants' accounts of their experience, their perceptions of social encounters, and their reflections on agency and comfort. In line with RTA principles, we purposefully did not calculate inter-coder reliability.

Instead, interpretive differences between the researchers were embraced as a resource for deeper reflexive discussion. After initial coding, the first author began integrating the material to identify patterns. Codes and key extracts were exported to Miro, where they were visually clustered and organised into candidate themes. During this stage, observational data was used to confirm, elaborate on, or sometimes complicate the accounts from the interviews, allowing for a richer, triangulated understanding of each participant's journey. Candidate themes, each supported by a rationale and representative extracts, were then refined through review sessions with the wider research team.

In these meetings, we checked for coherence within themes, ensured clear boundaries between them, and confirmed their alignment with our research questions. To enhance the trustworthiness of our findings, we practised triangulation throughout the refinement process. We consistently compared data across our different sources (observational logs and interview transcripts) and over time (across the three sessions) to build a coherent and multi-faceted interpretation. Through this iterative process of discussion and refinement, overlapping themes were merged and broad ones were split, resulting in the final set of themes that form the basis of our findings.

3.5 Researcher positionality and power

It is important to acknowledge that our backgrounds and experiences shaped both the conduct of this study and the interpretation of its findings. The second author who conducted all fieldwork, has a long-standing background in qualitative research with people with ID. This expertise was essential for building rapport, navigating ethical complexities, and creating a care-centred, relational approach throughout the sessions. The first author who co-led the analysis, brings expertise in immersive technologies and HCI, providing a lens to connect participant experiences back to broader HCI conversations. The wider research team further expanded our interpretive lens, contributing deep knowledge of online safety and the specific cultural norms of VRChat. This diversity was crucial for our analysis, allowing us to build a more holistic account that situated participant actions within technical, social, and disability-specific contexts.

We also acknowledge the inherent power imbalance between researchers and participants. As university-affiliated researchers, we held institutional power and acted as gatekeepers to the research

process. Our methodology was a deliberate attempt to mitigate this imbalance. By adopting a relational, participant-led approach and rejecting a rigid protocol, we sought to cede control and create a space where participants could genuinely shape the study's direction. This commitment to sharing power is a core tenet of Disability Justice and was a constant focus of our reflexive practice.

At the same time, the second author's continuous presence in both the physical room and as an avatar in VRChat inevitably shaped how participants engaged with the platform. Being accompanied by a researcher may have made some participants more cautious in their social encounters or more inclined to direct conversation towards the researcher rather than strangers. For others, this dual presence functioned as a confidence scaffold, making it feel safer to approach unfamiliar worlds and people. When we interpret participants' apparent confidence, hesitation, or ease in social VR, we therefore read these as emerging within this socio-technical and relational arrangement, rather than as properties of individuals alone. We see our subjectivity and positionality as an integral part of the knowledge-making process. Our collective expertise allowed us to interpret the findings through a dialogue between lived experience and critical design inquiry informed by disability theory. Our account is therefore intentionally situated, reflecting our commitment to a justice-oriented approach that values engaged and reflexive scholarship.

4 Results

What follows are stories and themes that show how participants made sense of VRChat: the ways they navigated safety, chose avatars, joined or left worlds, and, in some cases, carried the technology into everyday life.

4.1 Making sense of VRChat

When first trying VR, P1 laughed uneasily: *"This feels weird."* P3 described the first session as dizzying, but by the second noted improvement: *"I still got slightly dizzy this time, but I was much better."* Everyone began in the home world to learn basic movements, then moved into environments like *Udon Bird Sanctuary* where they could practise controls. With practice, the worlds started to open up. Some things remained frustrating, like remembering which button did what, or mapping the locomotion to the joystick, but repetition helped. **Learning built up gradually** for all participants, as P3 put it, *"I needed that time to process... I got used to it this week."* P4 looked back at his early struggles with the pointer and concluded, *"At first the controls were a bit difficult, but then I got there in the end with the laser points."* In these early sessions, even when other VRChat users were present in the virtual worlds, most participants focused on mastering the basics, and when conversations with others did occur, they were brief and tentative. This echoes earlier work showing that people with ID often require extended time to become comfortable with VR controls [115], yet our open setting also showed how confidence built naturally through exploration and repetition, without the tightly scaffolded tasks common in prior studies.

As familiarity grew, **attention began to turn outward**. Some participants stayed mostly within the researcher's suggested set of familiar worlds, often revisiting them across sessions. Others

(four participants) expressed curiosity for a wider range, choosing places or activities that linked to their own interests. P4 asked to visit Spain, recalling a past holiday; P2 sought out *Pokémon* and *Furry Hideout*, connecting to hobbies he talked about often; P1 chose *Harry Potter*, and P6 tried *Diluc's Tavern* from anime. Activity-based spaces also appealed: in *Zombie Survival*, P2 joined others in fighting zombies, cooperating without needing much conversation. Others gravitated toward quiet or scenic spaces. P1 described a cherry blossom world as *"very pretty"*, while P11 recalled climbing a lighthouse in *Blooming Sky* as *"my favourite one, because it was a nice adventure... looking what's around."* For many, interactable objects gave a simple way in, which also gave rhythm to their explorations: P1 found a magic book and enjoyed spotting animals in *Emerald Valley*, while P6 made a routine of picking up food and cups, miming the act of drinking tea: *"I like exploring... and picking up things."* Unlike earlier VR studies that emphasised pre-designed training or therapeutic activities [15, 45, 67], here participants oriented their explorations around personal interests, suggesting more varied routes into making sense of VR.

Free-form **encounters with other VRChat users** in busy public worlds were often complicated. Groups could be hard to break into, and conversations were sometimes overwhelming, filled with noise or profanity. P3, after trying to greet others in the *Black Cat*, was met with *"go f*** yourself,"* while P4 backed away when users role-played "eating" his avatar – a doughnut. Simple greetings sometimes went unanswered: P4 and P11 both said *"hello"* but received no reply, leaving them unsure if they were being spoken to at all. By contrast, more structured environments offered clearer ways to participate. In *No Time Two Talk*, one-to-one pairing helped sustain short conversations. P2 used the space to build and try out conversational routines, opening with *Pokémon* or *Wetherspoons*: *"I had time to think of what to talk about — my Pokémon collection and Wetherspoons."* P5 also enjoyed the chance to *"go into different worlds and talk to different people,"* though in practice their style leaned toward listening. They explained that *"sometimes it can be difficult to talk to people... it can be like that in real life,"* and valued conversations that felt slower: with one girl, *"it was quite easy,"* while another user *"just talked... quite fast,"* leaving them content to listen. P9 embraced one-to-one conversation, asking simple but genuine questions: *"Where are you from? What headset do you use? What are your plans today?"* He enjoyed seeing different avatars, mentioning in the interview: *"I like looking at new characters."*

Across exploration and social encounters, participants showed *crip technoscience* in practice [57]. Participants scaffolded their way in slowly, through familiar worlds, objects, or small conversational routines, rather than the rigid drills common in earlier interventions [29, 87]. This shows that learning in VR works best for people with ID when it moves at their own pace and follows their interests, not when it is forced to fit standardised routines [57, 84]. Carlson reminds us that expertise about ID has too often reproduced distancing and dehumanisation [24]. Our findings point toward a different possibility: when access is scaffolded slowly and participants shape their own routes into VR, authority shifts away from external experts and toward people with ID themselves.



Figure 4: Making sense of worlds together: participants and carers explored and interpreted unfamiliar VRChat spaces through shared attention and co-presence.

4.2 Care as collective practice in social VR

In our study, participants learned to navigate VRChat through **forms of collective access**: the practice of building access together through interdependence and mutual care [11, 12, 84]. This access was co-created with carers, researchers, peers, and even strangers, forming webs of support that gave hesitant learners the confidence to explore (see Figure 4). In interviews after the study, many emphasised how important this interdependence felt to them, often saying they would only return to VR if accompanied by someone they trusted. As P11 put it: “I wouldn’t want to go in on my own. I’d like to go in with mum.” P9 agreed, saying, “I’d go in again, but not by myself... only if I had someone I know with me.” Similarly, P4 shared “I’d like to go in again, but only if there’s somebody there that I know... I wouldn’t go by myself.” These reflections show that collective access was something participants themselves sought and saw as key to feeling safe and included. For participants, going into VR “with someone I know” was about more than abstract safety. It also meant having practical help with confusing controls, emotional reassurance in unfamiliar social situations, and the chance to share the experience as a joint activity rather than face it alone. Wanting to return only with a trusted other can be read as a way of setting the conditions under which participation feels workable. This resonates with the concept of *access intimacy* [84], which describes the comfort and trust that comes from knowing support will be available when needed.

One way collective access took shape was through **co-learning between participants and carers**. When P11 attended the VR session with her mother, VR became a place for co-learning. Both entered as beginners, sometimes figuring things out together, other times taking turns showing one another how to do something. In this way, the open-ended nature of VRChat turned support into a shared discovery process, where learning happened in both directions. During the interview, the carer recalled how P11 initially felt “tense” and struggled with the controls, but persisted until she relaxed and was “having fun at one stage with the ducks.” Hearing her carer describe this, P11 smiled, glad to have her progress

noticed. P11 drew reassurance from her mother’s presence, while her mother appreciated moments when her daughter managed an action on her own. Social VR made this reciprocity tangible, challenging the idea that carers only give support and disabled people only receive it. Instead, progress emerged through a back-and-forth of guidance and recognition, an instance of what Bennett et al. [9] called *simultaneous assistance*, and Piepzna-Samarasinha [89] described as a *care web in practice*.

With researchers, collective access often meant offering gentle scaffolding rather than discovery together. In the second session, P6 quietly whispered to the researcher, “I don’t know how to do this.” The researcher repeated simple actions that P6 could copy without pressure. Over time, P6 began joining interactions on their own. Some participants often turned to the researcher avatar with casual comments, questions, or to make sense of unfamiliar social cues, for instance: “Why are there so many windmills here?” (P7); “VR headsets should be available in our learning disability advocacy group” (P10). These exchanges provided support and continuity, as participants and researchers adjusted VR step by step to make it workable in practice.

Participants with ID also built access together, drawing on each other’s strengths through **mutual aid** – care rooted in collective survival, especially when formal support was limited [60, 89, 92]. P2, curious about VR, watched YouTube tutorials between sessions and, even without using a headset, explained what he had learned to P3. When they returned, P3 performed much better, a change he directly credited to P2’s help. This peer-to-peer learning highlights how disabled participants sustained one another’s access through interdependence, making visible the often-overlooked work that people with disabilities do to co-create access with and for each other [9].

Social VR platforms like VRChat are known to be mixed-ability spaces, where people with and without disabilities share environments and interact [3]. In our study, this openness enabled **participants with ID to connect with strangers** through moments of *simultaneous assistance*, involving **small, reciprocal acts** such as guiding exploration, initiating conversation, or co-creating together. For example, in one session at *The Black Cat* pub world, a stranger offered to “show P11 around”, guiding her through different areas and helping her figure out how to make her avatar stand.⁴ In the *No Time Two Talk* world, P3 started a conversation about yoga that unfolded into an exchange about flexibility and spring flowers, demonstrating how initiating social interaction can itself be a form of access support. Another user showed P1 how to draw in VR, and together they created a shared image by writing their names side by side. These small acts gave participants with ID ways to join in on their own terms, while also offering their partners companionship or shared activity.

4.3 Safety between vulnerability and agency

P4 spoke fluently about safety tools, even suggesting design improvements: “You’d have to click with the laser...but maybe have a little block button around the avatar, like where the mic is, so it’s

⁴In VRChat, if a user is seated in the physical world, their avatar will also appear seated, which can result in awkward or unnatural movement. Users can configure their avatar to appear standing through VRChat’s calibration settings.

easier.” He knew the sequence of steps and described them with confidence for both blocking and muting: *“The microphone is under the Y wasn’t it?”* Yet when confronted in practice, the tools were not used. In one session, a tiger and wolf avatar role-played “eating” his doughnut-shaped avatar. Instead of blocking, he backed away, visibly uncomfortable but silent. Later he admitted, *“I was going to try and block them but I was a bit too slow.”* The episode shows how knowledge of procedures did not translate in the moment, leaving him to fall back on embodied responses like retreat. What made him feel safe was recognisability. He said he trusted avatars more if they carried familiar cues like *“a little flag saying what country they were from [...] you might feel safer knowing you’re talking to someone from the UK”*, even while conceding *“that could be fake as well in the virtual world, but you never know.”* His chef avatar, chosen because he had worked as a kitchen porter, also felt reassuring: a character he could identify with, grounded in past experience. In interviews, he concluded he felt *“about 90% safe”* in VRChat, an oddly precise number that showed how safety, for him, rested less on formal tools than on the confidence he had built in navigating controls and the reassurance of familiar signs, while always knowing he could step away if things became uncomfortable.

Participants **described safety in VR in terms of what felt familiar and welcoming**, rather than in abstract categories such as privacy or misinformation [26]. Avatars played a central role in these judgments: P7 considered human forms more trustworthy than animal characters, while P3 argued that VR could never feel entirely safe because avatars masked who people “really were”: *“You’re not talking to a real person... if they had a picture of themselves, then I’d feel safe.”* Environments also mattered: P3 described “darker worlds” as unsafe, and friendliness itself became a marker of safety, with several participants saying it felt “mean” to turn away someone who was “kind.” Some drew boundaries differently: P9 felt safe precisely because avatars could not touch him: *“You can see them, but they’re not close to you. They’re not touching.”* P10 feared bullying in crowded spaces: *“If there’s more people in there, they’ll definitely*



Figure 5: *The Black Cat*, a high-traffic social hub in VRChat. Its fast-paced, unpredictable interactions made safety an ongoing negotiation between vulnerability and agency, supported by in-the-moment strategies (e.g., retreating, seeking reassurance, proximity management, and leaving), with platform tools (mute/block/report) often discussed but rarely used under pressure.

gang up on you... I’ve had that online before”, while P5 declared she would “never” meet strangers in VR because *“you still have to be careful.”* These concerns were especially visible in *The Black Cat*, a high-traffic social hub (see Figure 5), where fast-moving and unpredictable encounters made safety feel more like a lived negotiation than a simple matter of applying tools.

These accounts show how participants weighed the risks of embodied presence against the affordances of distance. Alongside these perceptions, participants pointed to platform tools as ways to secure themselves if needed. P2 explained: *“You don’t talk about, like, sensitive topics... if they keep on that, you just block them,”* concluding, *“I feel comfortable, and I don’t have any worries when interacting with people through VR.”* P11 echoed: *“If someone does something wrong, you just report them.”* Yet others acknowledged the limits of such protections: P10 described feeling *“safe because you got the block button, unsafe because they might hurt my feelings.”* That hesitation reflects a deeper emotional vulnerability.

In moments of harm or discomfort, participants rarely relied on the platform’s safety tools, even though they had been trained in blocking and muting and could describe them confidently in interviews. P1, who had mastered blocking during training, never used it in hostile encounters. After her view was blocked and she was sworn at, she tried a polite rebuke: *“Children, language”*, then escalated to *“F*** off,”* in evident frustration. P2 responded to unsettling behaviour (users rapping nonsensically or switching voices between a child and an adult) by *“walk[ing] out the door in the game.”* Participants’ accounts of not blocking pointed to both practical and social barriers: it felt *too slow* (P4); *unnecessary unless someone was really rude. Normally I’d just go...there are millions of people, so they’re never going to find you again* (P1’s carer); or simply *not nice* (P5, P7, P11, who worried it would seem impolite). The same gap between intention and practice surfaced for less visible risks. Several insisted they would “never” share personal information, yet personal details slipped casually into conversations: P7 told strangers, *“I live in Margate”*; P11 wrote their real name in the environment. Only P2 showed a different reflex, muting himself to speak privately with the researcher.

In this gap between **knowing safety and doing safety**, participants were not unusual. Prior work shows that adults with ID can explain privacy rules or blocking procedures, yet often fall back on avoidance or politeness in practice [26, 106]. Survey data confirm the mismatch: nearly 60% report cyberbullying, but few actually use safety tools [106]. In social VR, these vulnerabilities are amplified: harassment is embodied and proxemic, involving chasing or touching, while the platform’s safety tools demand rapid, multi-step actions that often fail in the moment [18]. At the same time, the culture of instant intimacy in VR creates an illusion of safety that can mask manipulation [37, 44]. For participants with ID, who often understand safety in surface-level terms and who, as emotion regulation research shows, draw on a narrow repertoire of coping strategies such as silence or retreat [80], this combination of opacity and pressure made them especially vulnerable. Yet vulnerability was not the whole story. Participants exercised agency by judging avatars and environments and choosing when to withdraw. P11’s carer observed that disabled people are often *“willing to please and do the right thing,”* but also insisted: *“Let the individual know, don’t take away the independence, they just need guidance.”*



Figure 6: Participants began in calm scenic worlds and gradually expanded into new VRChat worlds aligned with their interests.

4.4 (World and self)-making in VRChat

In our study, participants used VRChat to make sense of themselves and their worlds in ways that went far beyond training specific skills. **Avatars were often the starting point**, and engagement with them deepened across sessions. Early choices were sometimes quick or tentative, but over time, participants increasingly lingered at the mirror, experimenting with different bodies before settling on one that felt right. P5, for instance, moved from spending a few minutes on a tiger furry in his first session to enthusiastically trying out multiple fantastical avatars in later sessions, remarking: *“I got to try them all out.”* Mirrors worked here as safe rehearsal spaces, enabling low-risk experimentation before entering social encounters. P3 looked for avatars that matched his personality, insisting *“I am flamboyant.”* P4 linked his doughnut-chef avatar to past work in restaurants: *“Because I’ve been in the past... a kitchen porter.”* For P1, avatars created possibilities for social connection that felt difficult offline. Her carer explained: *“[Participant 1] struggles to make friends, so I think it would be really good for her... They can’t see you, they just see your character. They don’t know if you’re slim, fat, disabled.”* In this sense, avatar choice became a way of making oneself approachable, echoing earlier work on how mediated identities and alternative representations can reduce stigma and lower barriers to social participation [2, 68].

These examples show how participants engaged **avatar choice as a form of identity expression and negotiation**. Prior research suggests avatars are critical tools for impression management, allowing users to obscure or experiment with aspects of identity such as gender, age, or ability [23, 25, 75]. Our findings add that people with ID approached avatars with a range of intentions: some as long-standing aspirations (P10: *“I always wanted to be a wolf”*), some reflecting internalised social roles (P1: *“I’m going to be a little girl”*), echoing infantilising cues noted by Kittelsaa [68]), and others primarily for aesthetic or sensory appeal (P9: *“I like looking at new characters”*). This spectrum echoes earlier work showing that people with ID construct alternative identities – worker, dancer, friend – through everyday symbolic practices that emphasise competence and belonging [68]. It also highlights that avatar use unfolded less

as a single choice and more as an ongoing negotiation, where identities were tried and sometimes abandoned across sessions. In this way, avatar play resonates with Bircanin et al.’s call to remain open to evolving and situated forms of participation, where meaning is produced in the moment rather than predefined in advance [16].

Participants also **gravitated to places and routines that reflected personal interests and memories**. P1 found joy in a cherry blossom world: *“very pretty”*; P6 made a ritual of picking up cups and miming drinking tea. Participants treated the environment itself as an object of care and attention. In *Emerald Valley* (Figure 6), several spent time quietly orienting, looking around, tracing landmarks, and letting the atmosphere settle before engaging with any specific interaction. For P4, walking down a virtual beach evoked memories of holidays abroad: *“It just reminds me of going to like a different country, going down like a footpath to the sand and the sea.”* In our study, far from passive, participants showed reflective intent in how they explored VR, challenging deficit-based assumptions about ID [56]. What mattered was practising everyday freedoms [57, 84] and experimenting with agency through play [103]. These insights align with inclusive HCI research that centres strengths and interests rather than deficits [24, 93], showing how value emerges in the middle of everyday encounters, rather than in predefined training scripts [16].

4.5 Beyond the lab, into life

Two months after first entering the virtual world, P2’s initial need for a guide has completely dissolved into a deep and confident habitation. Now spending about four hours a day in VRChat, he has built a thriving social life, maintaining contact with over seventy friends on Discord. His journey refutes the remedial paradigm common in assistive technology, demonstrating instead a **profound arc of self-directed learning and community building**. He explains the platform’s appeal simply: *“Meeting random people in VRChat globally that I may never of meet in real life of all ages, having the same interest and finding people who accepts you for who you are in communities, it’s exciting and to look forward to.”* This ease of connection is the foundation upon which he has built a distinct identity, choosing a “Hyvis persona dragon” avatar with



Figure 7: Popcorn Palace, a world P2 frequently revisited after the study to relax, watch videos, explore, and quietly co-presence with others.

special features that allow him to “breathe fire” or playfully “stick your tongue out.” This is an act of identity, which allows him to be recognisable and build social capital. He has become a regular at an 18+ bar where, as he proudly notes, “everybody that goes to that world... always remembers me.”

With friends he has come to trust, he shares in *Popcorn Palace* (see Figure 7) a private YouTube link to a movie he made with a national intellectual disability charity, letting them see an important part of his life. He explains he shares it, showing them the “productions that you like created over time.” This act connects his virtual persona with his real-world history, a method of building intimacy and demonstrating a multifaceted identity far beyond what deficit-focused frameworks would assume. His curiosity also extends to the very nature of embodiment in VR. He describes learning about “phantom sense from a friend,” a phenomenon where virtual touch can evoke a physical sensation. He recounts experimenting with this, allowing a friend to hold a virtual hairdryer to his face or a virtual needle to his neck, driven by a desire to understand the limits of his own perception. This self-led, experimental learning is a powerful example of agency, a world away from the prescribed, risk-averse tasks of remedial software.

This agency is also evident in how he navigates the platform’s social complexities. He has learned to distinguish between welcoming and hostile environments, preferring worlds with “less trolls,” and has developed strategies of disengagement rather than confrontation. Yet this is balanced with an intentional openness: he keeps his user filters off to “give everyone a chance.” P2’s story also shows a clear evolution from being a recipient of help to a provider of it. He takes on the role of a cultural translator and mentor for his friends. For example, when a friend described his autistic friend as “uncanny valley,” P2 stepped in and “explained to him that he’s autistic and we don’t have a lot of expressions.” This has led to moments of profound interdependence, such as when he organised a “private meeting” with a mutual friend to create a plan to help someone who had expressed suicidal thoughts. This formation of a spontaneous *care web* demonstrates a complex social and emotional competence, affirming that participation is a collective, not just an individual, act.

Perhaps the most striking evolution is P2’s transformation into a technical expert and design critic. He speaks with fluency about linking his headset to a gaming computer for “extra features” and can explain the intricate process of calibrating software to “lay in your actual bed and then lay in a virtual bed in the game.” This mastery culminates in a clear call for better design, critiquing a user interface that is “very complicated to navigate” and lacks “icon pictures.” His enthusiastic “Yes, please” when asked if he would help design a better UI is a clear offer to act as a co-designer, embodying the *nothing about us without us* principle. P2’s deep investment is clear in his plans to get age-verified and attend Furality, a major virtual convention. He illustrates that when people with ID are given access to platforms that invite creativity, social negotiation, and even governance responsibilities, **they innovate on their own terms and lead.**

5 Discussion

Our findings show that when given access to an open, mainstream digital world, adults with ID act as agents of their own experience, engaging in interest-driven discovery and sustained by resilient webs of care. These findings present a fundamental challenge to HCI’s dominant remedial paradigm, especially in skills-focused VR and independence-oriented interventions, which is misaligned with the socially situated, negotiated, and interdependent realities we observed.

We interpret our findings through a **world-making paradigm**. Following Goodman, we treat “worlds” as configurations that people actively build through symbols, practices, and shared routines [54]. We ground this lens in critical disability scholarship on how liveable worlds are made and sustained: “disability worlds” (kinship and culture outside normative life courses) [52], “crip world-making” (generative practices for making hostile environments liveable) [81], epistemic authority for people with ID [24], and care ethics [66]. In conversation with “crip technoscience” [57], we treat participants’ use of VRChat as a collective accomplishment: building access, negotiating norms, and sustaining participation with others. We also align with ID scholarship that frames citizenship as **supported everyday citizenship**: having roles, routines, recognition, and voice in ordinary shared life [27]. In this paper, world-making names how liveable participation is composed through conditions of possibility (publics/platforms), practices of living (personhood and routine), and relations/governance (care and power-sharing), alongside an accountability lens that reframes what counts as impact (Figure 8). From this analysis, we distil six principles for social VR with adults with ID.

5.1 Principle #1: Design for participation in mainstream worlds

This principle foregrounds questions of who is recognised as belonging in mainstream social VR publics and what socio-material scaffolds, on- and offline, make that belonging liveable and safe.

In our study, adults with ID entered VRChat, a commercial, general-population platform, supported by scaffolds wrapped around the platform: private instances, curated world lists, visual guides, and co-present support. This configuration enabled *presence, participation, acceptance, and achievement* [62]: P4 finding a culturally resonant space, P2 becoming known as a regular, and P11 moving from initial tension to “a nice adventure” and “having fun with the ducks.”

This principle speaks to the *conditions of possibility dimension* of our world-making paradigm (Figure 8): participation in publics is assembled through socio-material scaffolds and platform conditions, not achieved by individuals alone. In social VR, architectural and spatial affordances shape what encounters and norms a place invites, from quieter “hangout” worlds to high-traffic hubs [58]. At the same time, work documents disability-targeted harassment, privacy risks, and accessibility failures in platforms such as VRChat and Rec Room, with abuse often intensifying when disability is visibly marked on the avatar [3, 48, 113]. This has prompted work on proactive, in-world safeguarding mechanisms, such as embodied moderator

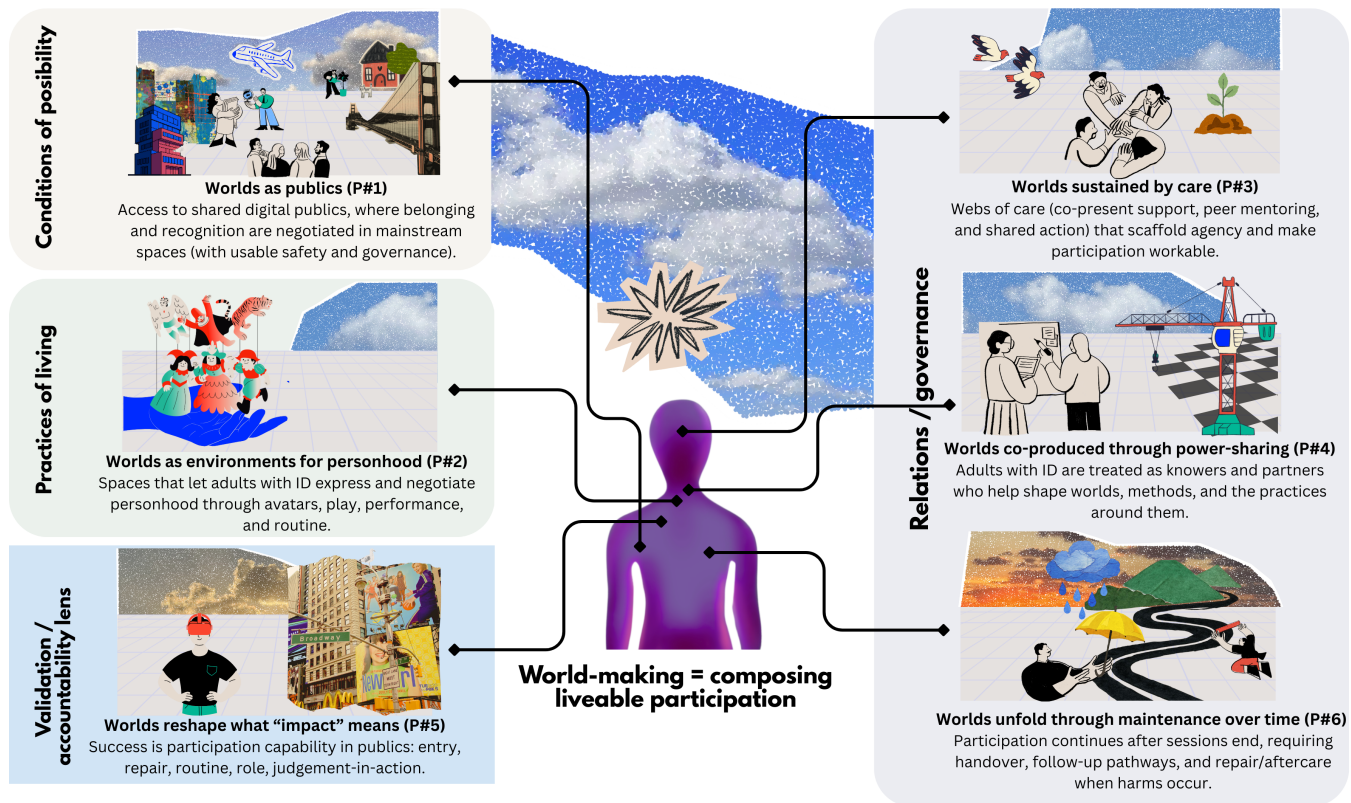


Figure 8: A world-making paradigm for social VR with adults with ID. The six principles (P#1–P#6) show how liveable participation is assembled across publics/platforms, practices of living, and relations/governance, with an evaluation lens that reframes what counts as impact and how to evidence it.

agents that can intervene during disruptive encounters and increase perceived safety [43].

These observations clarify why simply building disability-only VR is not enough. Segregated platforms, while often well-intentioned, can be exclusion by design [8, 57, 59, 65]. They may function as virtual silos where interactions are largely confined to other disabled peers and paid staff, creating a ceiling for recognition and growth through constrained public recognition [61]. Yet studies of disabled people in social VR also warn that poorly designed publics can drive users into self-protective retreat to private instances, reproducing segregation when harassment and inaccessible safety tools make open worlds unusable [50]. Our findings suggest an alternative: **organise safety around participation in mainstream spaces** by embracing a dignity of risk [88], where adults with ID encounter manageable challenges with support rather than being shielded through exclusion.

For social VR practice, this means treating mainstream platforms as the starting point, so adults with ID share the same digital publics as everyone else rather than being diverted into disability-only *walled gardens*. In our study, adults with ID entered public VRChat worlds from ordinary community settings,

supported by staged entry (private/low-traffic instances → busier publics).

Being in mainstream spaces intensifies the need for usable safety. In interview, P4 described blocking as “too complicated”, underscoring that **core safety actions must be simple and prominent**. This gap between knowing and doing safety echoes wider reports of disabled social VR users facing harassment, limited accessibility, and protection mechanisms that are hard to use in the moment [3, 107, 113]. For platform designers, this means *large, always-visible icon-based controls* for muting, blocking, and leaving; *low-text interfaces* aligned with Easy Read principles; *clear reporting routes*; and *safety-by-design protections* that do not depend on navigating multi-step settings mid-encounter. In practice, this strengthens the case for **multiple entry points** (quiet, structured, and busy) and letting participants **control pace and exposure**. Emerging regulation (e.g., the European Accessibility Act [40] and EU Digital Services Act [41]) can be read as levers for treating social VR as public infrastructure that must be accessible and safe by default.

Implications. For platforms, this principle prioritises **publics that are governable in the moment**: always-visible, low-text

safety actions (mute/block/leave), clear reporting routes, and world-level affordances that support **graduated exposure** (quiet → busy pathways). For services, it underscores that mainstream participation is enabled by **wrapping** platforms with socio-material supports (staged entry, Easy Read materials, co-present support, accessible venues) so adults with ID can enter publics as legitimate co-participants.

5.2 Principle #2: Design environments for personhood, not tools for remediation

This principle focuses on social VR as an environment where adults with ID express and negotiate personhood through avatars, performances, routines, and shared activity.

The label ‘intellectual disability’ can obscure a person’s inner world, making them subject to a remedial gaze. It produces prescriptive tools that treat identity as a stable problem to be solved, measure success as compliance, and inadvertently reproduce ableist assumptions about what constitutes valuable or appropriate use.

Instead of treating social VR as another prescriptive tool, we suggest approaching it as an **environment for personhood**. This principle corresponds to the *practices of living dimension* of our world-making paradigm (Figure 8): who someone can be in social VR is shaped by the roles, symbols, and routines the environment makes possible. In our study, VRChat functioned as such an environment. Participants chose avatars that resonated with their interests, used mirrors as rehearsal spaces, settled into favourite worlds, and took up roles as explorers, regulars, and informal hosts. These moments of preference-making and initiative can be read as self-determination in practice, acting as the causal agent of one’s own experience.

Crucially, in our data **personhood was not only represented but enacted**. It emerged through activity: wandering and lingering in worlds, joining casual games, and returning to familiar places with others. Designing social VR as an environment for personhood therefore means designing for a **legible ecology of activities** through which adults with ID can express preferences, take initiative, and develop repeatable practices with others, rather than being channelled into one correct sequence of steps.

This shift is especially consequential for adults with ID because marginalisation often constrains access to the very spaces where personhood is performed and recognised. Under supportive conditions, **open social VR can widen the repertoire of roles and publics available for personhood**: it can offer additional ways of being a fan, a regular, a friend, a host, or a curious explorer alongside others. Rather, our findings suggest that when designed and scaffolded to be liveable, social VR can provide an additional arena where adults with ID are encountered as whole people with tastes, humour, and agency, not primarily as trainees in need of remediation.

By contrast, the open worlds of VRChat offered an “open stage” instead of a narrow script: participants prioritised changes in *being* over *doing*, exploring worlds, gaining confidence in crowds, initiating conversations, and becoming “regulars.” Our argument is not to abandon skill transfer, which remains valuable for rehearsing

behaviours [20, 35, 78, 79, 91], but to situate it within a broader design goal of supporting ways of living. Table 1 sketches this analytic contrast between a dominant remedial framing in VR training with adults with ID and the forms of world-making we observed in VRChat.

Implications. Taken together, Table 1 implies that designers must see themselves less as tool-makers and more as **creators of world-like environments that support personhood for adults with ID**. Practically, this means designing environments where identity and agency are available through **legible activity**: interest-led worlds with **low-friction, low-text interactions** that minimise cognitive load and reduce the need to remember complex control sequences. It also means supporting **repeatable routines and roles** – easy ways to return to favourite worlds, revisit activities, and take up social positions such as “regular,” “guide,” or informal host – so that participation can stabilise and deepen over time.

5.3 Principle #3: View interdependence as a scaffold for agency

This principle highlights how webs of care and shared action in and around social VR scaffold individual agency and make these worlds workable in practice.

The foundational work of Bennett et al. [9] argues that **interdependence and interdependence are not a dichotomy**. Our study provides an empirical demonstration of this relationship: **a resilient care web functions as a scaffold for agency**. This principle corresponds to the *relations/governance dimension* of our world-making paradigm (Figure 8): access is a collective accomplishment shaped by who is present, what support can be mobilised, and how shared action is organised. It challenges the individualising tendency of rights-based framings and aligns with a Feminist Ethic of Care [66].

This scaffolding was particularly visible in the embodied, co-present medium of VRChat, where support could be given through shared action. The presence of P11’s mother, for instance, created the safety for P11’s own confident exploration to emerge. The care web also extended into participants’ everyday lives through acts of mutual aid, as seen when P2 independently researched VR on YouTube and then coached P3, directly improving his experience. The durability of the care web creates the conditions for people to take initiative, experiment, and grow into more independent participation.

Implications. For social VR and its surrounding services, this means designing for **movement between interdependence and independence over time**, rather than treating them as separate or competing goals. Concretely, systems can support interdependence by enabling **selective, reversible sharing of control**: letting a trusted supporter co-navigate menus, see what the user sees, or trigger safety actions when invited, while preserving private moments and spaces where the person acts alone. Platforms and services can also recognise and scaffold **peer roles** that emerge in practice. As our study showed with P2 coaching P3, some adults with ID develop strong enthusiasm and expertise around social VR; “buddy” modes, lightweight mentor signalling, or simple pathways for experienced participants to support newcomers can value this expertise

Table 1: Illustrative contrast between common VR training approaches with adults with ID and discovery-driven world-making observed in VRChat, and resulting implications for social VR design

Common VR training approaches with adults with ID (literature)	World-making in VRChat (this study)	Implications for social VR design
Structured, deficit-focused training (e.g., shopping, cooking, recycling) that positions participants as learners to be remediated [29, 83, 87, 115]	Exploratory, identity-driven play. P10: <i>“It’ll be difficult to decide on a character.”</i> P2 choosing <i>Pokémon</i> and <i>Furry Hideout</i> worlds linked to hobbies.	Design open, interest-led environments that treat adults with ID as fans, explorers, and regulars, not only as trainees in pre-defined tasks.
Repetitive practice with pre-defined outcomes [29, 87]	Gradual, interest-driven discovery. P6 repeatedly testing out food objects: <i>“I like exploring... and picking up things.”</i> P11 describing the adventure of climbing in <i>Blooming Sky</i> : <i>“my favourite one, because it was a nice adventure... looking what’s around.”</i>	Support wandering, replay, and discovery (e.g., easy ways to return to favourite worlds and follow emerging interests).
Evaluation framed as task completion or performance improvement [29, 83, 87]	Value found in play, pleasure, social contact, and meaning-making. P5: <i>“I like going into the different worlds and talking to different people.”</i> P9: <i>“It’s interesting to learn different languages in the VR you know.”</i>	Centre success on dignified, self-determined engagement (enjoyment, social contact, confidence, belonging), not only on behavioural or task performance.
Authority rests with designers and experts who define skills [24, 29]	Authority shifts toward participants, who decide what matters in the world. P2 building routines in <i>No Time Two Talk</i> : <i>“I had time to think of what to talk about – my Pokémon collection and Wetherspoons.”</i> P9 reflecting on diversity of avatars: <i>“They’re all good, different characters and different languages as well.”</i>	Share control over worlds, routines, and topics: let adults with ID choose and host worlds, set regular meetups, and shape the activities that matter to them.

while distributing care beyond staff and carers. Adjacent work on scaffolded social interaction similarly shows that mediated support can increase social connectedness while raising design questions about preserving agency and control [111].

5.4 Principle #4: Share methodological power through co-creative partnerships

This principle treats the social VR research and support setting itself as a shared world to be co-created with adults with ID, rather than a place where data are simply extracted.

Care-oriented co-creative work in immersive contexts shows how “making together” can itself be the method: meaning and ethical value emerge through relationship, reciprocity, and situated participation rather than a fixed protocol [90]. A justice-oriented approach requires ongoing negotiation of the power imbalance inherent in research. It means moving beyond short-term, extractive studies where participants are treated as data sources and toward **co-creative partnerships**. This principle sits within the *relations/governance dimension* of our world-making paradigm (Figure 8), because the research setting actively governs what forms of agency, expression, and leadership can emerge.

Aligning with Bennett and Rosner’s call to **shift empathy from “being like” to “being with”**, and echoing work on “co-designing in the middle” that emphasises flexible, ongoing engagements, we adopted an adaptive, multi-session methodology that foregrounded

reciprocity and attunement. Participants were invited to suggest worlds, comment on what was working or not, and revisit favourite places. Over time, this approach surfaced forms of expertise that a short, fixed protocol would likely miss: P4’s unsolicited interface suggestions, and participants’ judgements about which worlds worked for them and which did not, were **assertions of epistemic authority**.

Co-creative partnerships are especially important in social VR because experiences often extend beyond what researchers can see. Worlds change quickly, social encounters are unpredictable, and much of what matters for adults with ID (e.g., sensory load, safety, comfort, enjoyment) is felt in the moment rather than easily reported afterwards. In this context, it is not enough to solicit feedback within a fixed protocol; we must be willing to **co-design the methodology** itself. Many HCI methods privilege verbal, analytical accounts, which can be a misfit for participants who express themselves more through action or creation. This suggests a next step for the field: to explicitly invite adults with ID to become **methodological partners**, and, at times, design leads or facilitators, thereby honouring Disability Justice commitments to leadership by those most impacted [14].

Implications. For social VR and disability-focused work, methods should be designed as **co-creative partnerships** rather than fixed protocols, with explicit points where adults with ID can shape the inquiry as it unfolds. Practically, this includes making room for participants to set the pace, choose worlds, revise session plans, and steer what counts as “working,” so that expertise can surface in the moment (e.g., interface suggestions and judgements about

fit). It also means designing participation routes that do not depend on verbal, analytic accounts alone, so that agency, preference, and leadership can be expressed through action and making. In this view, the research/support setting is itself a shared world whose rules, roles, and decisions are negotiated, and where adults with ID can be invited into **methodological partnership** and, at times, facilitation or design leadership [14].

5.5 Principle #5: Evaluate transferable confidence

This principle is an evaluation principle: it defines what should count as success when the design goal is participation in open-ended digital publics. It shifts assessment from procedural task transfer and generic immersion metrics to participation capability evidenced across varied public conditions through entry, repair, routine, role, and judgement-in-action.

In much VR work with adults with ID, “transfer” is treated as procedural generalisation: whether practice in VR improves performance on a predefined task elsewhere. That framing is not wrong, but it is a poor fit for social VR and other open-ended digital publics where the central outcome is not mastering a procedure but becoming able to participate. For a world-making paradigm, evaluation must therefore ask a different question: “Did the person gain capacity to inhabit a public, negotiated world on their own terms?” Principle #5 functions as an *accountability lens* across the paradigm (Figure 8), making this shift concrete by specifying what evidence should count as impact.

This matters because the metrics most often used in immersive systems research are structurally misaligned with participation in publics. Presence, cybersickness, and usability scores can indicate comfort or interface friction, but they do not show whether someone can initiate, sustain, or repair social participation under real conditions of noise, pace, and unpredictability. Likewise, simple exposure measures such as time-in-platform, number of worlds visited, or friend counts can inflate without indicating improved agency or safety judgement, and can mask patterns of avoidance (e.g., remaining only in private instances) or vulnerability (e.g., enduring harm without effective repair). When the research goal is participation, the evaluation target must be participation.

We propose evaluating **participation capability** as it develops across the changing conditions that constitute publics. This deliberately moves beyond treating “confidence” as a sentiment reported at interview. Here, transferable confidence is operationalised as the ability to initiate and sustain engagement, regulate exposure, recover after discomfort, and make choices about support and boundaries in the moment, in line with self-determination scholarship that frames agency as acting as the causal agent of one’s own experience [109].

Participation capability can be evidenced through recurring markers that are observable in-session and interpretable across the staged conditions of an engagement. **Entry** concerns how a person gets into a public world and what scaffolds are required; improvement is visible when a wider range of environments becomes workable (e.g., quiet → busy) and when time-to-settle decreases

without imposing exposure. **Repair** concerns what happens after discomfort or harm; success is not the absence of negative encounters but the ability to withdraw, re-orient, and re-engage later through chosen strategies rather than permanent avoidance. **Routine** concerns whether engagement stabilises into repeatable practices such as returning to preferred places or repeating activities, which is often how participation becomes sustainable rather than episodic. **Role** concerns whether participation becomes socially legible (e.g., being recognised as a “regular,” an informal guide, or a contributor in shared activity), including casual ties that persist across sessions or platforms [110]. **Judgement-in-action** concerns safety as enacted under pressure: how participants regulate proximity, decide what to disclose, choose when to leave, and, where feasible, use platform protections or alternative coping strategies in situ.

Methodologically, these outcomes are best captured through **progressive evidence across conditions**. Practically, this means documenting how entry, repair, routines, roles, and judgement change as the engagement deliberately varies social and sensory demands (e.g., private → public; quiet → busy; structured → unstructured), triangulated through observational logs, fieldnotes, and participant accounts (and where appropriate, the perspectives of trusted supporters). Longer-term engagement can enrich these claims, but questions of continuity and support beyond the study are ethical responsibilities addressed in Principle #6.

This evaluative shift is intentionally portable beyond VRChat. The same logic applies to other mainstream digital publics where participation is open-ended and socially negotiated (e.g., online communities, social platforms, multiplayer games): when the intervention’s target is access to publics rather than rehearsal of a closed procedure, impact should be judged by evidence of participation capability under varied public conditions.

Implications. For researchers, Principle #5 provides an evidentiary standard for making claims about impact in open-ended publics: mixed evidence of participation capability (entry, repair, routine, role, judgement-in-action) across varied public conditions rather than end-point task performance or generic immersion metrics. For platform and intervention design, it implies that systems should make participation capability supportable and observable (e.g., low-friction return to places and people, legible stabilisation of routines and roles, and protections that can be enacted in the moment), so that evaluation can track whether participation is becoming more workable as conditions change.

5.6 Principle #6: Plan for ongoing responsibilities beyond the study

This principle foregrounds the ethical and temporal responsibilities that follow from introducing adults with ID to unscripted social VR publics. It focuses on continuity, handover, and safeguarding after researcher-facilitated access ends.

The **neatness of a conventional research protocol stands in tension with the messy, ongoing nature of participants’ lives**. This principle concerns the *relations and governance of participation dimension* in our world-making paradigm (Figure 8): world-making

includes how participation is sustained as structured facilitation ends, and how people regain support when challenges arise. Even when a study is designed to be care-centred and flexible, it still has an endpoint; participants, however, may continue to encounter the platform’s social complexity long after sessions end. In our case, P2 continued engaging beyond the study, highlighting a practical reality for social VR research with adults with ID: facilitation can create new possibilities, and it can also create new exposures that do not neatly end with data collection.

This raises a deeper ethical question about what it means to broker access to complex, unscripted worlds like VRChat. By facilitating entry, we help to create new opportunities and also new vulnerabilities that we cannot fully anticipate or control. Our findings on the *gap between knowing and doing safety* underscore that teaching procedural actions (e.g., how to mute, block, or leave) is not equivalent to ensuring that these protections will be enacted under pressure, or that participants will be insulated from longer-term social and emotional harms. For this population, the ethical work therefore includes planning for the period *after* researcher co-presence ends: how support will be accessed, how problems will be handled, and how participation can continue safely (or be paused) on the participant’s terms.

Implications. This principle calls for a shift from “study and depart” to **planned continuity and handover**. In practice, this can include agreeing in advance what forms of support will be available after sessions end; coordinating with carers and services about roles, boundaries, and escalation routes; signposting trusted communities, peer mentors, and platform safety resources; providing a clear route back to support if something goes wrong later; and discussing pacing, breaks, and when/how to step away from VR. It also means investing in **community stewardship**: preparing and resourcing trusted figures (including enthusiastic participants, where appropriate) to act as points of contact and facilitators once researchers have left, in line with calls to move from “being like” to “being with” [10]. For HCI, this requires ethics, funding, and governance structures that recognise the slow, relational labour of sustaining and repairing participation beyond the formal boundaries of a study.

6 Limitations

Our qualitative sample of 11 adults with mild ID, while consistent with similar exploratory studies in this area, was small and recruited through formal services and support organisations, and was predominantly White British. Consequently, our findings aim for theoretical depth and analytic generalisation rather than statistical generalisability, and may not extend to people with different support needs, limited service access, or from more diverse, intersectional communities. The logistics of the study, including the need to travel to community settings, coordinate with staff, and work within service timetables, also meant that participation was most feasible for people with relatively stable support and availability.

Engagement with social VR was uneven across participants. Most used VRChat only within facilitated sessions, and only one participant obtained their own headset and went on to experiment more extensively and build independent social networks. Our account of longer-term trajectories therefore leans heavily on this case and on

participants’ retrospective reports, not on systematic observation of unsupervised use. Furthermore, the constant co-presence of a researcher in the room and in VRChat undoubtedly influenced how participants behaved. Although the researcher was experienced in working with adults with ID and took steps to mitigate acquiescence, self-reported data were always interpreted in light of direct observations and known power dynamics.

Finally, our focus is solely on VRChat. The culture, moderation, and affordances of other social VR platforms may yield different experiences of access, safety, and world-making for adults with ID. Future research should therefore build upon this work by exploring these principles with larger and more diverse samples, across different platforms and configurations (including home-based use), and with peer-led or participant-led facilitation that can further redistribute expertise and control.

7 Conclusion

This study started as a practical question: what happens when adults with ID enter a mainstream social VR public rather than a controlled training simulation? We expected barriers, and we found them. Yet we were also struck by how quickly participants began to treat VRChat as a real place for everyday pleasures (wandering, revisiting favourites, trying on identities, and occasionally reaching out to strangers) especially when participation was scaffolded and shared. Our *world-making paradigm* reframes impact as building liveable participation in a mainstream public rather than completing trained tasks.

These experiences underline both promise and responsibility. Mainstream social VR can amplify harms, and support cannot stop at onboarding. At the same time, our findings suggest that when safety, pacing, and companionship are made workable, social VR can offer meaningful forms of participation that are otherwise hard to access. We hope this work encourages more research and design in this area: not to “fix” people, but to build conditions under which adults with ID can belong, contribute, and lead in mainstream digital worlds.

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