

A Critical Review of Sexuality, Technology and Disability

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Abstract

The investigation of technologies facilitating sexual interactions and sexuality-related explorations is becoming more established in Human-Computer Interaction (HCI), albeit with little systematic attention to the sexual lives of disabled people. In this space, we undertook a literature review utilising feminist content analysis to take stock and critically analyse the domains of sexuality, technology and disability when they intersect. Our approach aligns with the broader goals of promoting inclusivity, diversity, and equity in technology design and application. We present a descriptive and analytical outline of existing research on sexuality, technology and disability through which we identified unmarked norms governing research. These include a focus on individualised technologies oriented on heteronormative assumptions on sexual desires. In addition, we focus on common methods employed and describe the involvement, or lack thereof, of disabled people in research practice. This highlights gaps in our collective knowledge from which we can derive areas for future work.

CCS Concepts

• **Social and professional topics** → **People with disabilities**; *Sexual orientation*; *Assistive technologies*; • **Human-centered computing** → *HCI theory, concepts and models*.

Keywords

Disability, Sexuality, Technology, Critical Review, Inclusivity, Access

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1 Introduction

Despite the call to action in Mankoff's foundational paper in 2010, arguing for the active participation of disabled people in research about them [91], the need for inclusivity persists, echoing the same imperative as it did more than ten years ago [164]. We are still seeing technology for disabled people being produced without their active participation, resulting in representations of disabled people's non-normative needs as medicalised or interventional [140, 141, 145].

HCI research in the area of sexual health, menstruation, reproductive health, sexuality, and intimacy [29, 51, 104, 126, 136, 163] engages with both medical and social considerations, and is increasingly incorporating feminist and intersectional approaches [13]. While there have been recent efforts to de-medicalise sex and sexuality research in HCI, [33, 112, 151], it is unclear whether this effort extends to the overlap of sexuality and disability (especially given that research on sex and disability in general continues to be largely medicalised [119]). Moreover, disabled individuals have historically been portrayed as desexualised, and asexual [130, 143], and the continuation of gaps in HCI research regarding disability risks further reinforcing these harmful narratives.

Approaches to explore technology and sexuality in HCI have included studies on sexual health and/or wellbeing [43, 73], design practices and values around embodiment, pleasure, intimacy and desire [11, 75, 151, 161], users re-purposing online networks to create intimate and sexually charged niches [12, 111], or intimate user-artifact relations [144]. Subsumed under the term 'technosexuality', a subset of these studies not only examines how technologies facilitate sexual interactions, pleasures, and fantasies, but also acknowledges the transformative capacity of sex-technologies and their potential to generate novel practices, sexualities, and desires [14, 74, 156]. However, HCI research on technology and sexuality remains scarce, especially as it is laden with prejudice, controversy, and taboo [74]. While in recent years scholars have increasingly drawn attention to the sexualities of the excluded (e.g., older people [76, 127] or sex workers [17]), sexualities of marginalised groups remain largely understudied – including the ethical ramifications thereof [72].

We propose that limiting our research to focus on disability when exploring impairments or accessibility is not true inclusive design. Only exploring sexual wellbeing and disability in the context of health leads to the focus on clinical and medical needs and risks

omitting experiences of pleasure, intimacy, and identity. Focusing on technology as a solution to be developed and evaluated without active participation of disabled people can lead to disability dongles [89], which are agnostic of need.

By exploring the literature on disability and sexuality within the HCI field, we can take stock and critically analyse how the field is currently engaging with these three intersectional domains. We aim to contribute an understanding of how the field can harness accessible technology that is sensitive to the diverse needs and experiences of disabled individuals. This approach aligns with the broader goals of promoting inclusivity, diversity, and equity in technology design and application.

We present a descriptive and analytical outline of existing research on disability, sexuality, and HCI, highlighting gaps in our collective knowledge to guide future research.

2 Background and Related Work

Our work draws on different theoretical lenses for analysis and builds on existing prior work positioned at the intersection of disability studies and crip theory, queer theory, and sexuality studies. In the following we present the concepts and discourses that have shaped and motivated this critical review. Firstly, we present different disability models and where we position ourselves (section 2.1). Secondly, we introduce the five circles of sexuality as one of our analytic lenses, and outline how disabled intimacies and sexualities have been represented in related literature (section 2.2). Lastly, we conclude this section with an alternative to dominant understandings of disability and sexuality by discussing how disabled sexualities relate to queerness (section 2.3).

2.1 Disability Models

Disability, broadly, encompasses a wide range of impairments and social barriers that can affect an individual's participation in society. There are several theoretical models, frameworks, and perspectives used to explain and interpret the experience of disability. These models have evolved over time, reflecting different understandings of disability within society.

The **medical model** views disability as a individual impairment or medical condition to be diagnosed, treated, or cured. This model tends to focus on the individual's deficits rather than the social context [92]. Conversely, the **social model** of disability (in response to the limitations of the medical model) emphasises the role of societal barriers, discrimination, and exclusion in creating disability. According to this model, disability is not only an individual problem, but also a result of inaccessible environments and attitudes [15]. The **biopsychosocial model** integrates biological, psychological, and social factors in understanding disability. It acknowledges the interplay between individual characteristics, environmental factors, and societal attitudes in shaping the experience of disability [115]. The **rights-based model** of disability, grounded on human rights, emphasises and calls for the rights, dignity, and full participation of disabled people in all aspects of life [103].

We position our work within the **political/relational model** posed by Kafer [70]. This model understands disability as constantly co-constituted by situated aspects. In this understanding, what makes people disabled is the circumstance that some bodies

have to find out that they are not following assumed norms more often than others. "Anxiety about ageing, for example, can be seen as a symptom of compulsory able-bodiedness/able-mindedness, as an attempt to 'treat' children who are slightly shorter than average with growth hormones; in neither case are the people involved necessarily disabled, but they are certainly affected by cultural ideals of normalcy and ideal form and function" [70]. Correspondingly, we come from an understanding that disability constitutes a *mere* difference occurring in a minority of a given population [16].

Each model has its relevance and offers valuable insight into the complex nature of disability. Multiple models can be used in combination to inform policies, practices, and advocacy efforts aimed at promoting inclusion and equity. Regardless, positioning a main thrust serves the purpose of clarifying not just a conceptualisation of disability but also the intent of a given piece of work.

2.2 Sex, Intimacy and Disabilities

The five circles of sexuality present a holistic model encompassing many aspects of being. They include **Sexual Health and Reproduction, Sexualisation, Sensuality, Intimacy and Sexual Identity**; all are underpinned through values [39]. These circles are not distinct and can be influenced by society, family, culture, and politics. For this review, the five circles serve as an analytical lens through which we critically interrogate existing representations of disabled sexualities. By utilising this model, we intend to uncover those areas of disabled sexualities that HCI research currently is concerned with (and those areas that are absent). The field of HCI has historically not attended to the sexual needs and desires of disabled individuals, potentially leading to the development of technologies that may not adequately address the needs and desires of disabled users. As detailed in the following, this analytic sensitivity is corroborated by the exclusions and misrepresentations of disabled sexualities in society at large.

Despite the importance that intimacy, sex, and reproductive health have on one's life, access or even dialogue surrounding these topics have been historically denied to disabled people [28]. Scholarly work by disabled researchers, activists, and their allies has highlighted countless examples demonstrating the systemic marginalisation and oppression faced by sexual disabled bodies [1, 18, 147, 157].

Regarding sexualisation, the way in which one's sexuality is leveraged, perceived, and portrayed, it is clear how much prominent narratives are shaped by stereotypical polarised views. Although disability is most prominently associated with asexuality [40, 47, 86, 99], people with intellectual disabilities, and women in particular, are often portrayed as hypersexual and promiscuous [1, 38, 94]. These widespread misconceptions have harmful consequences. An analysis of the public debate surrounding the television show "The undateables", about the dating life of disabled guests, highlighted a series of common discriminatory prejudices amongst the audience [154]. Some comments were hostile, rooted in a desire for segregation articulated as the idea that disabled people could only date each other [154]. Others accused the show of exploiting disabled participants, who were thus portrayed as vulnerable and devoid of agency [154].

Thanks largely to the work of disabled scholars and allies, counter-narratives are emerging to highlight the extent denial and objectification of their sexuality affect sensuality, described as the awareness, acceptance and enjoyment of respective bodies in sexual encounters [39, 84]. Personal stories shared by participants in Liddiard's book [84] exemplify how disabled people can feel restricted in their ability to find a partner who will fully appreciate and embrace the sexuality of their own bodies, pressuring them to accept unsatisfactory and exploitative situations as the only viable option to have a sexual life. This is further compounded by systemic discrimination, unawareness, and reduced access to sexual rights, which increases vulnerability to abuse [131]. Despite these challenges, disabled people push back against ableist, and often heteronormative, notions of sensuality by creating their own rules of how sexual encounters can play out to become a source of joy, pleasure, and satisfaction for themselves and their partners [52, 85, 149].

Intimacy is a key pillar of positive sexual relationships. While not only concerning disabled people, several studies have pointed out the increased complexities faced due to the entanglement of intimacy with aspects such as care and power [21, 22, 128, 150]. Accounts from people with lived experience of disability show how while the desire for intimacy is almost universal, it is deeply entangled with fear that comes with the need for early disclosure of one's most personal aspects of life [21, 22, 128]. Unfortunately, this expectation for, often unrealistic and nonreciprocal, early disclosure from a disabled person is widely present amongst non-disabled singles. Porter et al.'s [116] survey of 58 self-identified disabled people and 33 non-disabled who regularly used dating platforms to understand preferences and experiences around disability disclosure, showed how the nature of the disability and its "severity" were the main factors affecting people's behaviours and expectations of disclosure. In particular, those with visible disabilities were seen as having a responsibility to mark themselves as soon as possible. Not doing so could be seen as a sign of untrustworthiness [116]. Disabled respondents also mentioned that they often proactively disclose their identity early on dating platforms. However, the decision was independent of the nature of the disability but represented a strategy to "weed out" those who would react negatively to it before investing time and effort in the interaction [116]. The responsibility of filtering unsuitable partners is thus placed on the disabled user rather than being facilitated by a system that helps to identify those with ableist attitudes [63, 116, 152].

Unfortunately, disabled people must develop their own strategies for finding a partner and seeking sexual and reproductive health advice [8, 44, 55, 67, 153]. Evidence from multiple countries has shown how health professionals, as well as parents of young disabled people, often lack the knowledge or willingness to provide information about sex and disability [8, 44, 55, 67, 106, 153]. This often results from the infantilisation of disabled people, limiting their sexual activity to masturbation, as their only acceptable practice [54]. In turn, the lack of access to reliable and understandable information about sexuality increases the likelihood of disabled people engaging in risky sexual behaviours that can lead to unplanned pregnancies [56, 107, 146] contracting sexually transmitted diseases [56, 105] and reducing satisfaction with sex life or access to family planning and fertility services [8, 53, 56, 105].

Finally, disabled people are also restricted from expressing their sexual identities [7, 19, 135, 148]. The social stigma that renders disabled identities the only aspect based on which those around them tend to "define them", makes it harder to explore their preferences concerning gender and sexuality. Moreover, it pressures them to conform to notions of *normality* to which, as a paradox, they are never allowed to fully belong [158]. Those who push for the acknowledgment of their non-normative expected gender and sexual preferences are often faced with the refusal to respect the maturity of their own identities, perpetuating paternalistic tendencies [148]. In recent years, scholars noted shared challenges for disabled and queer individuals affirming their sexual identities, suggesting the potential for collective liberation strategies. In the following subsection, we look at how the overlaps between critical disability, crip theory, and queer sexuality can offer an equitable lens for research and practice.

2.3 Queering Disabled Sexualities

If, as articulated in Section 2.1, we recognise disability as a difference in being affecting a subset of a population that is marginalised as a result of perceived status as an outsider of social normalcy [70], the similarities existing with the experiences of queer individuals become apparent [71, 98, 121]. McRuer [98] highlights how, when it comes to gender and sexuality, heterosexual identities are seen as the sole possible dominant norm, with lesbian and other queer identities becoming not only marginal but subordinated and undesirable. The same value system is applied when able-bodiedness is portrayed as the ideal normal, automatically labelling disabled bodies as an inferior minority [98].

The marginalisation experienced by queer and disabled bodies has huge implications for one's sexual life. Establishing criteria that determine which bodies are desirable or not directly impacts the ability to find a partner and access information and services related to sexual well-being [8, 116, 129, 130]. Furthermore, it also alters the relationship with the body itself, often due to internalising of messages that perpetrate the idea of difference from normative standards as inferior, which can at best be tolerated, but never considered in parity with heterosexual able-bodies [97, 98, 129]. To push back against these arbitrary notions of normalcy, queer and disabled scholars have pointed out the overlapping of crip and queer theory and activism as a potential roads towards collective liberation [34, 71, 124, 138].

Participants interviewed by Shakespeare and Richardson [132] highlight how the changes in standards of idealised sexual bodies and ways to have sex occurring as we age contributed to their ability to enjoy a more fulfilling sex life. This is largely thanks to the recognition that able-bodiedness is for the majority, no more than a transitory state [69]. After all, as Kafer [71] points out in recalling Piepzna-Samarasinha's monologue, recognising queer and disabled sexuality as vibrant possibility, rather than undesirable non-choice for those who do not conform to normative expectation, could help us discover new meaningful and enjoyable aspects of sexual wellbeing, which might otherwise be overlooked. Thus, we position our work within the framing of disabled sexualities as queer.

In summary, while there are various understandings pertaining to disability and sexuality, many of them are prevailed by harmful narratives and stereotypes. It is therefore critical to assess how these understandings translate into technology research addressing disabled sexualities. This includes an investigation of both the representations of disabled people and their sexualities in HCI and adjacent works, as well as the methodological and ethical underpinnings of such research. The latter is especially sensitive as researchers working on this topic need to be attentive to prevailing power relations with their participants, and institutional structures (e.g., recommendations of ethical review boards) often fall short in holistically addressing the situated contexts of marginalised participants [3, 58, 93, 134].

3 Methodology

In this section, we outline how we assembled our corpus and describe, in detail, the analytical backdrop of our work, Feminist Content Analysis [81], to critically explore how topics of disability, sexuality, and technology have been conceptualised together so far. Central to Feminist Content Analysis is interrogating how culturally hegemonic narratives are constructed and perpetuated through representations [81]. This methodological approach facilitates reflexivity throughout the entire research process and is critical of the notion of generalizable, universal categories. Instead, knowledge is approached as situated into specific subject positions and power relations (cf. [61]), taking into account who is speaking about whom/what in a given setting and who is not [81]. This methodology has been previously used in HCI to critically identify normative approaches in existing literature [137] as well as applications [142]. For these reasons, we considered it especially suitable to assess the norms and narratives governing this specific research area and address our research objectives (section 3.1) for this critical review.

This approach requires us to 1) specify a *research purpose statement*, 2) describe the process of *assembling the source material*, 3) immerse ourselves into the corpus material with the focus of *refining the scope of the research*, 4) closely engaging with the corpus material using *inductive and deductive coding* iteratively, 5) construct a multi-dimensional narrative beyond the initial themes while acknowledging *researchers' positionalities*, and 6) *present the established findings*, largely through written text, albeit others are imaginable. Steps 1-5 are described in the following whereas the final step is presented in our Results section.

3.1 Research Purpose Statement

Through this review, our objectives are threefold. Firstly, to understand the progress and gaps at the intersection of disability, sexuality, and technology, we critically analyse existing research. This will highlight areas where research is needed to better comprehend the specific needs, barriers, and experiences in this domain. Secondly, to focus on advocacy and awareness through providing evidence-based information that supports the rights and needs of disabled individuals in the context of sexuality and well-being. Knowledge gained from this synthesis of research can validate disabled people's experiences and shed light on common challenges. Thus, highlighting inclusive approaches and practices when researching disability,

sexuality, and technology. Finally, we aim to provide an ethical understanding of considerations related to research in this field. Understanding these ethical dimensions is crucial for ensuring that the rights and autonomy of disabled individuals are respected.

3.2 Corpus Assembly

To allocate our material, we searched the Guide to Computing Literature of the ACM Digital Library, as well as a number of domain specialised journals, including, *Disability & Rehabilitation*, *Disability & Rehabilitation: Assistive Technology*, *Disability & Society*, *Sexuality and Disability*, *Sexualities*, *The Journal of Sex Research*, *Culture, Health & Sexuality*, *Sexuality & Culture*, *Porn Studies*, and *Journal of Lesbian and Gay Studies*. An illustration of the works extracted into the initial corpus and the percentage in the final corpus can be found in Figure 1.

We utilised the following search terms across all information sources. Keywords needed to be present in the abstract to be included in the initial review, as through iterating the search, we found this to be the most accurate process to assemble relevant results. Including additional fields (e.g., within the main text or author keywords) did not result in additional relevant papers. (“*sexual***” OR “*fertility*” OR “*reproductive health*” OR “*intimacy*” OR “*pleasure*” OR “*porn***” OR “*dating*”) AND (“*disability*” OR “*disabled*” OR “*neurodiv***” OR “*crip*” OR “*impair***” OR “*handicap***” OR “*disorder*” OR “*special need***”) AND (“*tech***” OR “*Mobile*” OR “*online*” OR “*ICT*” OR “*information science***” OR “*haptic*” OR “*virtual*” OR “*platform***”).

3.3 Scope Refinement

We were interested in research papers that explored accessibility, inclusivity or utilised a disability lens in the context of HCI research or involved technology on sex, sexual and reproductive health, sexual wellbeing, including but not limited to sexual pleasure, intimacy, contraception, menstruation, pregnancy, fertility, menopause, reproductive function, sex toys and sexual assistive technology (e.g., vibrators, dildos, haptic devices, etc.), sex dolls, sex robots.

Title and abstracts stemming from our initial corpus assembly were first screened before a final full-text review. Each paper was reviewed by at least two authors, and any marginal cases were discussed and resolved at fortnightly research team meetings. Papers were included if they made some analytical conclusions based on sexuality, technology and disability, but they were not required to go into the same depth about all three topics. Further, we worked with relatively broad understandings of these three areas (e.g., “technology” included everything from an established artefact or platform to prototypes to design speculations). After internal discussions, we excluded papers that focused on media, such as those examining the portrayal of disabled people's sexuality on movies and TV programmes, on the reasoning that they did not incorporate considerations about interactions, which is central to the HCI discourse. On the other hand, we decided to include papers that featured empirical work involving both disabled and non-disabled people, as long as disability was treated as an important topic within the paper. Regarding sexuality we also adopted a broader conceptualisation that captured the various aspects of the five circles, to ensure the inclusion of the various facets of the topic. We excluded papers that did not feature all three intersections of sex, technology, and

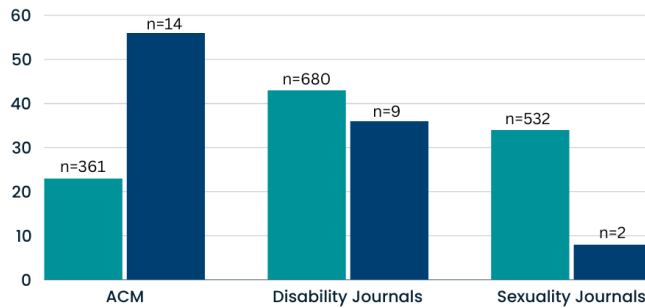


Figure 1: Percentage of works in sources on initial corpus assembly (left) and in final corpus (right)

disability and were not in English, as the shared language among the authors. Additionally, we removed monographs and PhD theses due to not being assessed in double anonymous peer reviews, retracted works, workshop proposals (no empirical work), and very short papers (due to them not necessarily presenting fully-fledged works).

Combining information sources and search terms, 1576 papers were returned, of which 25 met the inclusion criteria; the remaining excluded papers did not focus on all three aspects of interest. Papers were published between 2001-2024. We noticed that papers from the ACM were often excluded for not bringing disability and sexuality together. In contrast, papers from disability journals were excluded for not dealing with either technology or sexuality. Finally, publications in sexuality related journals seem to focus on either technologies or disabilities, but rarely combine them together.

In the final corpus, two papers reviewed online content to assess its appropriateness for disabled people (cf. Table 2, one reviewed online videos for sexual health [2], and the other reviewed dating websites for disabled people [122]). Six papers were scoping reviews or essays (cf. Table 1), presenting a narrative of existing research in the area, whilst 16 papers were of primary qualitative research of online surveys, interview studies or focus group discussions, of which 11 applied empirical research methods (cf. Table 3) and the remaining five actively engaged with designs (cf. Table 4).

3.4 Coding Procedure

In our analysis, we combined deductive and inductive approaches, corresponding with the method [81]. We first extracted data from the included papers to define the methodology, participant descriptions, outcomes and how disability, sex/sexuality and technology were operationalised (deductive). In the next round of in-depth coding, we examined the framing of disability and sexuality and the discourse on technology. We did so by first inductively coding each section of a paper, and subsequently categorizing the obtained codes into overarching themes [31, 81]. This process was guided by overarching analytic questions related to representations and how these correspond to societally dominant framings (including those discussed in section 2). For example, this included questions regarding what problems/gaps the papers postulate, what words, concepts and understandings are drawn on when talking about sexuality and disability, or what role technology plays in the overall argument. Moreover, we were also attentive to what was absent within

a paper's framing and what implicit assumptions its argument built on.

As we were interested in how inclusive the work in this field was, we then coded the used methodologies in more depth. We examined whether it was clear who was involved in the research, from developing the problem statement and planning the studies to who was the target population. We also explicitly coded whether and how disabled people were involved in the research, whether there were any reflections on author positionality and reflexivity, and what research ethics measures were taken in the study.

The two first-authors undertook the initial coding. They discussed their codes and notes with one another, then with the rest of the team and iteratively refined the narrative. Our positionality was continually discussed and how it impacted interpretations, specifically when it came to papers that framed disability or sexuality in a way that did not align with our beliefs or priorities. Through discussion and iteration, the final four themes were developed, which were then discussed with the research team and defined through iteration of writing.

3.5 Researcher Positionalities

We undertake this work as experts in the field of disability, accessibility, gender, and HCI. Each of us has worked in academia with between two and ten years of experience researching and writing within cross-disciplinary domains. We have additional experience stemming from the healthcare context and active involvement in consultations in advising on safety in sex after injury. Some authors found in this collaboration that their experience with the topic was so far focused on matters of sexual health, from which they felt the need to expand their focus into sexuality more broadly.

We approach this work with our own experiences as a team of mixed lived experiences informed by disability, chronic illness, neurodivergence and/or able-bodiedness. Subsequently, we are reviewing work in this area with the agreement among us that sexuality is a natural desire and should be understood as a normalised experience for disabled people and not a special or political event. We all oppose the desexualisation of disabled people.

4 Results

In engaging with the material in our corpus, we found references to multiple disability models. Papers spanned from exploring sex as a health concern or condition, a wellbeing concern, or exploring intimacy and pleasure. Technology was explored as a solution to engage or include disabled people, often as an information dissemination platform, or how existing design excludes or is inaccessible for disabled people. To understand the positional backdrops of the reviewed works, we now present the different framings encountered regarding sexualities, disabilities and technologies, as well as the positionalities of authors and the involvement of disabled people.

4.1 Framing of Sex and Sexuality

The reviewed works encompass different terms, conceptions, and aspects of sex and sexuality. Several findings can be mapped in or across the five circles of sexuality (cf. section 2.2 and Figure 2).

Table 1: Papers conducting a literature review or theoretical exploration of sexuality, disability and technology

Author(s)	Year	Venue	Method	Objective	Source
Döring [42]	2009	Computers in Human Behavior	Literature review	Providing an overview of research pertaining to Internet sexuality	ACM
Fosch-Villaronga & Poulsen[50]	2021	HRI '21	Essay	Discussing whether sex robots could serve as a step forward in realising the sexual rights of disabled people	ACM
Hough [64]	2024	Sexuality and Disability	Essay	Discussing how AI technologies can enhance access to sexuality and intimacy for disabled people	Disability Journals
Miron et al. [101]	2023	Sexuality and Disability	Scoping Review	Exploring barriers and facilitators to online dating	Disability Journals
Iarskaia-Smirnova & Verbilovich [68]	2020	Sexuality & Culture	Essay	How disability and sexuality narratives are represented in Russian media	Sexuality Journals
Mackenzie [90]	2014	ACE '14 Workshops	Essay	Evaluating the ethical considerations of sex robots replacing sex workers	ACM

Table 2: Papers conducting analyses of documents or other textual/visual data

Author(s)	Year	Venue	Material	Method	Objective	Source
Akyüz et al. [2]	2023	Sexuality and Disability	50 videos	Cross-sectional review of online videos	Review of online videos on Sexual Dysfunction after Spinal Cord Injury	Disability Journals
Santinele Martino & Moumos [122]	2022	Sexuality and Disability	26 websites	Content Analysis of websites	Examining online dating websites catered to disabled people to understand the language and imagery employed in these niche sexual fields	Disability Journals

Papers pertaining to **sexual health and reproduction** primarily focus on **sex education** and **sexual health**, specifically concerning systemic access barriers to information [2, 10, 35, 37, 113] and services [64, 102]. The motivations for these studies present sexual health and sex education as a human right [37] or means of empowerment of disabled individuals often facing discrimination[113]. Three studies include **consent and boundary setting** in their conception of sex education [6, 10, 35]. Conde specifically designed a serious game that people with developmental disabilities can use to reflect and learn about their boundaries in sexual interactions [35]. Further, Fosch-Villaronga and Poulsen refer to **sexual wellbeing** as a right, concretely the WHO definition for “physical, mental, and social well-being concerning sexuality” [50, p. 2]. Aşık and Karaca focused on sex education with the rationale that “adolescents with disabilities may experience more psychosocial and psychosexual problems” and not providing educational resources for this population is a disservice [6, p. 2].

Sensuality was found in research centred around (**self-)****pleasure and masturbation** [10, 48, 64–66]. For instance, Fels et al. include pleasure, experimentation, creativity, and alternative forms of sexual experience in discussing how dedicated technologies could facilitate sexuality for disabled people [48]. Two studies specifically focus on women’s masturbation and self-pleasure [65, 66]. Hua et al. specifically builds on **pleasure activism** that mobilises pleasure as a catalyst to social justice and liberation [24]. Therewith, Hua et al. “recognise masturbation as a remarkable source of pleasure and joy for women that is legitimate to be pursued for itself rather than for its utility to something else deemed more ‘legitimate,’ such as sexual health or wellbeing” [65, p. 12]. While we acknowledge that pleasure and sexual health are not mutually exclusive, we concur

with this notion as it challenges the frequently optimization-driven approach to sexuality-related technology design [49, 80, 109, 162].

Different aspects of **sexualisation**, such as flirting, messaging, sharing media and seduction amongst others, were included in papers centered on **online dating**. These papers varied from exploring specific online dating platforms designed for (unclear if designed by) disabled people [122], how disabled people use online dating sites [32, 95, 101] or how and whether they choose to disclose their disability [116, 120]. These works underscore the necessity of online platforms to address loneliness, and present disabled people as those who often encounter challenges in finding partners or forming relationships, (cf. section 4.2). Lunde et al. focus on **sexting** comparing adolescents who self-identify with ADHD and autism to those without a diagnosis, exploring pressures felt to send sexually explicit media, posing that autistic adolescents or adolescents with ADHD are more vulnerable and less likely to be able to develop social competencies [87]. However, no difference is reported between the two groups.

Further, on the theme of sexualisation is Barbareschi and Wu’s inclusion of **porn** as a potentially beneficial sex education resource among their findings [10]. Mazurek et al.’s study on autistic adults’ perspectives on video games subsumes one theme of their findings under ‘**sexual content**’ reporting on their participants’ dislike of such [96]. However, contrary to sexual content in general, as the term suggests, the findings specifically relate to objectifying and misogynistic sexualised representations.

The only paper relating to the theme of **intimacy** was Hough’s discussion on the potential of Artificial Intelligence (AI) technologies to improve sexuality for disabled people by addressing communication, relationships and physical access to intimate experiences

Table 3: Papers applying qualitative and/or quantitative methods

Author(s)	Year	Venue	Method	Sample	Objective	Source
Aşık & Karaca [6]	2024	Sexuality and Disability	Randomised control trial	55 adolescents aged 12-15	Testing the effectiveness of an online sexual health psychoeducation program on the sexual health attitudes of adolescents with physical disabilities	Disability Journals
Barbareschi & Wu [10]	2022	CHI EA '22	Interview Study	five disabled persons; different backgrounds, ages and genders	Exploring needs and practices of accessing relevant and reliable information about disability and sexuality	ACM
Cheslik & Wright [32]	2021	Sexuality & Culture	Interview Study	7 Deaf gay men	Exploring the impact of geo-social networking apps on dating rituals for Deaf gay men	Sexuality Journals
Gunarhadi et al. [57]	2022	ICLIQE '21	Interview Study	3 parents of autistic children	Exploring lived experiences and coping strategies of parents with regard to the sexual development of their children	ACM
Hamilton et al. [59]	2023	CHI '23	Interview Study	22 OnlyFans creators; different backgrounds and genders; some of them disabled	Exploring motivations of OnlyFans creators to use the platform	ACM
Lunde et al. [87]	2023	Computers in Human Behavior	Online Survey	1063 persons with self-reported autism and/or ADHD diagnoses	Exploring experiences and motivations among autistic and/or ADHD people	ACM
Mazur [95]	2022	Sexuality and Disability	Online Survey	27 disabled persons, with varied impairments	Exploring online dating experiences of LGBTQ+ adults with disabilities	Disability Journals
Mazurek et al. [96]	2015	Computers in Human Behavior	Interview Study	58 autistic adults	Exploring reasons why autistic adults play video games	ACM
Mooney & Patel [102]	2023	ASSETS '23	Interview Study	7 Blind and Partially Sighted People	Developing design recommendations of an online sexual health platform	ACM
Pendergrass & Holcomb [113]	2001	Sexuality and Disability	Time-series Survey	26 disabled women	Testing use of websites to inform women with mobility impairments on Sexual and Reproductive Health	Disability Journals
Porter et al. [116]	2017	CSCW	Online Survey	58 disabled and 33 non-disabled persons	Exploring preferences and experiences around disability disclosure	ACM
Saltes [120]	2011	Disability & Society	Online Survey	108 disabled persons	Exploring factors involved in disclosing disability in online dating profiles	Disability Journals

Table 4: Papers applying design methods

Author(s)	Year	Venue	Method	Sample	Objective	Source
Conde [35]	2020	ASSETS '20	Game design and testing by disabled participants	10 persons with developmental disabilities	Exploration whether a serious game can serve as a sexual education resource for people with developmental disabilities	ACM
Curtiss et al. [37]	2023	Sexuality and Disability	Interview Study and Participatory Research	nine people including some disabled persons (undisclosed how many)	Exploring value of participatory content development for sex education and information	Disability Journals
Fels et al. [48]	2015	GI '15	Design of an IIS prototype and assessment via a focus group discussion	4 persons with a variety of mobility disabilities	Attitudes towards sex and cybersex by disabled people and design recommendations	ACM
Hua et al. [66]	2022	DIS '22	Design exploration	n/a	Identifying and critiquing norms and marginalisations inherent in design of vibrators	ACM
Hua et al. [65]	2023	TEI '23	Autoethnographic design exploration	First author, who identifies as a woman with an invisible disability	Design for women's masturbation from a somaesthetic and pleasure activism perspective	ACM

[64]. While not making the operationalisation of sex and intimacy explicit, the paper appears to be based on normative understandings of embodiment, communication, and intimate practices. This becomes, for instance, evident in the suggestion that AI-powered robotic exoskeletons “enable some users with spinal cord injuries to stand, walk, and perform other physical actions that are crucial for social and intimate experiences” (p. 2). However, this assumption,

is arguably rooted in a medicalised understanding of disability (cf. section 4.3.1) with the ableist implication that only bodies with certain physical abilities are capable of cultivating successful intimate interactions. While commending a technology developed with the ambition to ‘fix’ disabled bodies according to an ableist norm [133], the paper disregards the tinkering with and adjustment of intimate practices disabled people (and their partners) regularly

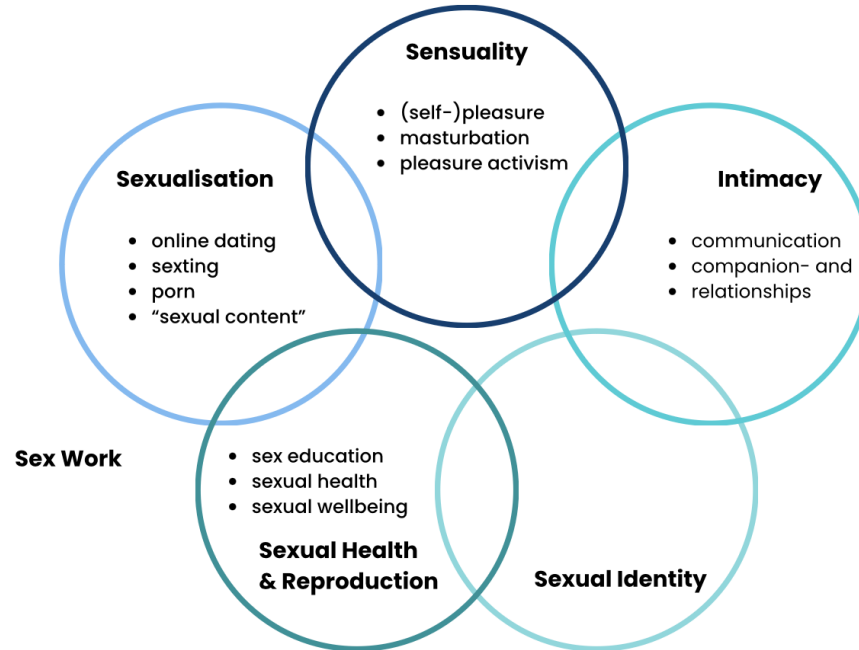


Figure 2: Identified themes mapped along the five circles of sexuality. Within the corpus we identified themes pertaining to Sexual Health & Reproduction [2, 6, 35, 37, 50, 57, 64, 113], Sexualisation [10, 32, 87, 95, 96, 101, 116, 120, 122], Sensuality [10, 48, 64–66], and Intimacy [64]. A theme not included in the five-circles model but discussed in some of the papers was Sex Work [50, 59, 90]. Further, while two papers discuss themes that arguably span over several of the circles (i.e., “Internet sexuality” [42] and “Media narratives on disability & sexuality” [68]), their focus was too broad to distinctly assign them on the map.

engage in to make them pleasurable for their embodiments [84]. Likewise, suggesting speech recognition systems, predictive text, and augmented and alternative communication (AAC) devices to improve communication with partners, the paper excludes communication forms beyond a vocalisation-oriented, audist¹ modality. Overall, the paper’s framing ignores that a significant part of interpersonal (disabled) intimacies involves negotiation of practices that are attainable and comfortable for everyone involved in the intimate encounter [5].

A paper [68] spanning multiple circles explores the manifestation of sex and disability in the media. Sharing discourses from the public forum on representations of fantasies, body image, flirting, expression and identity, the paper advocates for the agency of disabled people in “*their endeavours to advocate their rights and dismantle the barriers set by socio-political structures*” (p430). Interestingly this paper discusses the difficulty in linking queer experiences with disability initiatives, thus disregarding people’s intersectional identities by presenting disability as “privileged” as “*the state takes care of disabled people*” (p.440), excluding the LGBT community

from a beneficial “*crip network of care*” but exposed to oppressive homophobic stereotypes.

A theme not explicitly included in the five circles that we identified is **sex work** [50, 59, 90]. While Hamilton et al. explores motivations of novice OnlyFans creators in general, their sample includes disabled sex workers [59]. Some of them reported how the platform can be a more accessible workspace, while others described exclusions and obstacles due to intersecting marginalisations like race, class, or body type. Fosch-Villaronga and Poulsen employ a more negative view of sex work conflating multiple activities and services referenced with the terms human trafficking and related crimes [50]. Contrary to Hamilton et al. that present sex work as something done *by* disabled people, Fosch-Villaronga and Poulsen discuss sex work (and proposed technological alternatives) as something *for* disabled people.

Döring’s literature review works with a definition of **internet sexuality** that overlaps with many of the above-discussed areas [42]. Döring operationalises “internet sexuality” as “sexual-related content and activities observable on the Internet [...] designat[ing] a variety of sexual phenomena (e.g., pornography, sex education) related to a wide spectrum of online services and applications (e.g., websites, online chat rooms).” (p. 1090). Others discuss the internet as a source of education on sexual health and sexuality [113]

¹Audism refers to the specific oppression created by audiocentric privilege and most often experienced by deaf people [45].

leveraging its ubiquitous nature and pervasive accessibility to disseminate and access information typically considered sensitive.

Overall we observed that most papers discuss sex and sexuality as an unmarked norm [23]. According to Brekhuis, unmarked norms describe those characteristics, categories or behaviours that are considered neutral or ‘normal’ in a given society and hence, are not explicitly acknowledged (these are commonly associated with dominant societal groups). Conversely, anything that deviates from that assumed norm is actively highlighted, and thus, ‘marked’. In the case of the analysed corpus it means that most authors do not explicitly qualify what they mean by sex and/or sexuality, but rather work with a presumed common understanding. Such framing, however, comes with the pitfall that disabled sexualities stand out in contrast to this discursive norm, which affords medicalised or pathologised representations as found in some of the reviewed papers. While there are further inquiries into disabled people’s experiences of pleasure and exploration, what we are still not seeing is work on disabled people’s own embodied experiences of sex(uality) beyond singular instances [65, 66], nor significant exploration into the impacts of marginalisation of queer disabled bodies and sexualities.

4.2 Framing of Technology

We mapped the technologies discussed in the reviewed works to the five circles of sexuality (Figure 3) and expand on their framing (Table 5) in the following.

Several papers highlight technologies’ **access barriers**, i.e., how technologies currently obstruct access to sex(uality) for disabled people [10, 66, 102, 116]. A noteworthy shared ambition is that these works explore how to reduce access barriers and/or call for further research on these matters. For instance, engaging with the norms and marginalisations inherent in the design of vibrators on a speculative and theoretical level, Hua et al. [66] critique how design decisions exclude disabled women from autonomous and self-determined sexual pleasure. Based on their research insights, the authors suggest a range of recommendations, including re-imagining sexual practices beyond heteronormative coital intercourse to design technologies affording sexual autonomy and pleasure of disabled, older, and queer people. Moreover, positing online resources as potentially beneficial to disabled people, two studies [10, 102] conducted with disabled people identify accessibility barriers and formulate recommendations for inclusive sex education resources and sexual health services. The study by Porter et al. highlights the additional labour disabled people have to perform when using online dating platforms that are designed without considering their needs [116]. A handful of papers [6, 42, 59, 87, 96] approach technology as a **subject of inquiry**. These works analyse the role of specific technologies more openly via broader questions (e.g., ‘what are the preferences and motivations for game play among autistic adults?’ [96] or ‘what are the sexting experiences of autistic and ADHD adolescents and do these differ from adolescents without such diagnoses?’ [87]). As a result, these studies identify and draw attention to both positive and negative aspects related to a technology and disabled sexualities.

Another line of work primarily highlights the **potential benefits** of technologies for disabled sexualities and explores how these

potentials could be realised by putting the needs of disabled people at the centre of design [2, 35, 37, 48, 113]. Fels et al., for instance, base their design exploration of an Intimate Interface System (IIS) on the potential of virtual worlds for crossing the taboo-isation of disability and sexuality [48]. Conde discusses the potential of serious games to raise awareness of disabled people’s personal boundaries [35]. We note positively that the game is presented as a tool that could be *incorporated* in therapeutic interventions rather than replacing sex education services. Others [120, 122] recognise how digital spaces can help limit the impacts of societal bias and physical restrictions by facilitating presentation of disembodied interactions, thus giving disabled people the power to negotiate if, how and when they disclose their disability to others – a choice often absent in offline interactions. However, one study specifically [122] builds the implication that disclosing a disability is challenging in face-to-face meetings upon the premise that some websites “...suggest that ‘self-pity’ is keeping disabled people from intimate relationships” (p. 466).

Some works investigating the positive potentials of technologies for disabled sexualities do so in a **techno-solutionist** manner [50, 120]. This is exemplified by the arguments Fosch-Villaronga and Poulsen use to contextualise their study [50]. While acknowledging sex work and sex care as means to realise the sexual rights of disabled people, the authors argue that given societal stigma, further research is scarce and receives limited funding. Consequently, this argument implies that societal issues can be solved by technological means. In the same vein, their argument on sex robots compensating the lack of care and support for queer disabled persons ignores the societal influence of this issue. Similarly, Hough’s paper proposes AI technologies as solutions to access barriers that “can be physical, social, emotional, or attitudinal, leading to a perceived existence in degrees of isolation, unmet needs, and opportunities.” [64, p. 1] without acknowledging systemic and societal causes of such barriers. Further, while hailing AI as “hold[ing] enormous promise in transforming the experience of sexuality for individuals” (p. 3), the paper omits any discussion of AI’s numerous risks (e.g., related to bias, privacy and surveillance [82, 125, 165]) and their potential detriment towards disabled sexualities. Others present techno-solutions in the form of vital information sources that disabled people can access with ease as it is void of physical access barriers, disregarding online inaccessibility. These papers tend to present information as power and online platforms as facilitators of such empowerment [2, 37, 113].

Conversely, Mackenzie employs a strongly **techno-pessimistic** view on sex robots with regard to moral and ethical issues, especially their risk of challenging the boundaries of ‘acceptable’ sexual practices [90]. Mackenzie specifically attributes this risk to the possibility of customising sex robots to cater to personal, ‘extreme’ fetishes and calls for more legal and ethical regulation of this technology. However, by so strongly focusing on this issue, the paper omits how customisation can also be an important feature when designing accessibly (e.g., [78]).

Hua et al.’s pleasure activism informed study approaches **technology as a method**. Concretely, they work with artistic crafts with embroidery to explore and articulate lived bodily experiences and generate novel design insights for women’s masturbation [65].

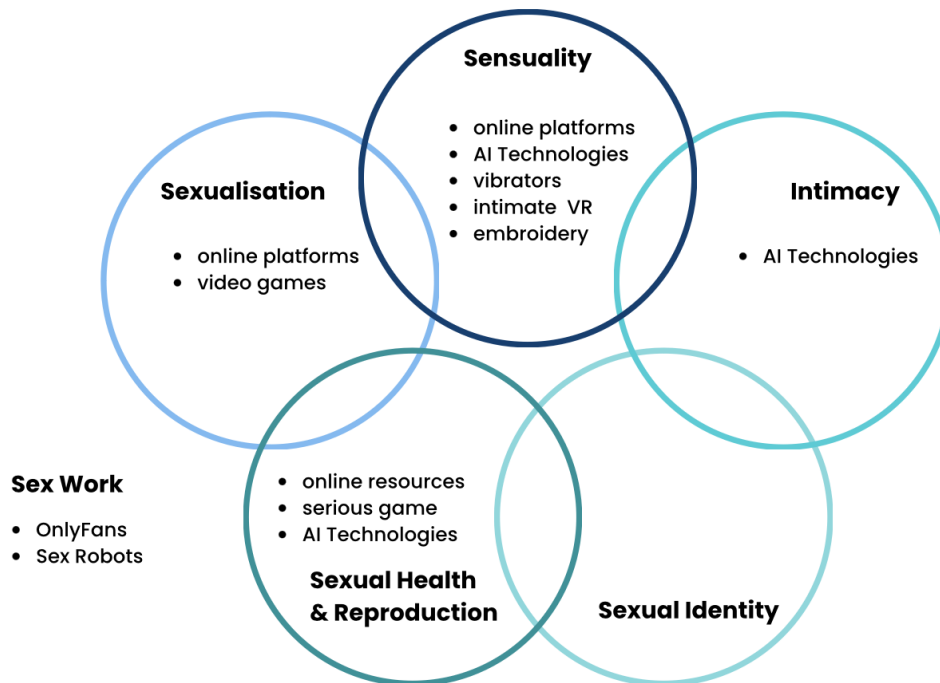


Figure 3: Technologies found in the corpus mapped along the five circles of sexuality. The identified technologies discussed along the theme of Sensuality were online platforms [10], AI technologies [64], vibrators [66], intimate interactive systems (IIS) [48] and embroidery [65]. Sexualisation included online platforms [10, 87, 116, 120, 122] and video games [96]. The technologies pertaining to Sexual Health & Reproduction were online resources [2, 6, 10, 37, 102, 113], a serious game [35] and AI technologies [64]. AI technologies were also discussed with regard to Intimacy [64]. Sex Work included OnlyFans [59] and sex robots [50, 90]. While the Internet [42] was also featured as technology the application areas discussed in the corresponding paper were too broad to assign them visually on the map. Similarly, the work on “Media narratives on disability & sexuality” [68] cannot be assigned to any specific technology or circle.

Corresponding with the identified framing of sex and sexuality (sect. 4.1), technology in these works primarily plays a functional role. While some studies foreground both positive and negative experiences of disabled people with specific technologies [59, 87, 96], the majority still view technology as a tool to facilitate sex(uality) for disabled people—essentially, as a means to an end. Regarding the five circles of sexuality, Table 5 indicates how most technological investigations are conducted in relation to sexual health, reproduction, sexualisation, sensuality, and sex work. The lack of research pertaining to intimacy or sexual identity is likely a result of focusing chiefly on function. While most reviewed works approach technologies and/or more accessible design of such as a potential solution to the lack of access disabled people have to sexuality, they omit (with few exceptions [59, 65]) exploring how disabled people actually appropriate technologies for sexual intimacy, pleasure, and exploration both individually and with others. Unfortunately, (albeit not necessarily intentionally) this further obscures disabled people’s agency and self-determination in shaping their sexualities. One factor contributing to the framing of disabled sexualities as

queer (sect. 2.3), is the necessity for disabled individuals to subvert and modify intimate practices to render them accessible (e.g., [84, 155]). Hence, we would have expected to find more studies looking into disabled embodiments and practices going beyond sexual norms. The narrow focus leaves little space for exploring how specific technologies relate to disabled people’s sexual identities. Taking these gaps together, what is, further, mostly missing (beyond approaches in this direction [48, 65]) are studies pertaining to the concept of technosexuality (cf. Section 1), e.g., studies that empirically or designly explore what novel forms of sexual practices and identities disabled people (can) experience in their interactions with technologies.

4.3 Framing of Disability and Disabled People

In our analysis, we categorised the findings along the models of disability (cf. section 2.1). Notably, most of the reviewed articles did not provide an explicit definition or model of disability as a foundation of their work. For a distribution of identified models in the corpus, please refer to Figure 4.

Table 5: Technologies in focus of the reviewed works

Framing	Technology	Circle(s) of sexuality	Proposed implications/solutions regarding sexuality & disability
Access barriers	Online sex education resources [10] and sexual health services [102]	Sexual health & reproduction, sexualisation, sensuality	Online resources can serve as important sex education sources for disabled people; formulation of recommendations for how sex education resources could be designed more inclusively
	Vibrators [66]	Sensuality	Most vibrators embody norms around female sexuality in their design and marginalise disabled women; Formulation of recommendations for designing vibrators
	Online dating platforms [116]	Sexualisation	Many disabled people have to perform additional labour (proactively disclosing their disability) in pursuing connections on online dating platforms
Subject of inquiry	The Internet [42]	Internet sexuality	Among the reviewed literature are a few studies indicating how the internet is used to access porn or sexual information by disabled people
	OnlyFans [59]	Sex Work	OnlyFans can be a more accessible work space for disabled sex workers, however they also face exclusions on this platform; analysis of how platform features limit/support online sex work
	Online platforms (sexting) [87]	Sexualisation	Identified both differences and similarities between neurodivergent and neurotypical participants in their sexting behaviour, although increased vulnerability of neurodivergent people in relation to sexting is indicated
	Video games [96]	Sexualisation	Participants highlighted both positive and negative features in video game design
Potential benefits	Serious game [35]	Sexual health & reproduction	Serious games can be effective tools for people with learning disabilities to reflect on and increase awareness of their own sexual boundaries
	Online resources for sex education [2, 6, 37, 113]	Sexual health & reproduction	Online sexual information can support disabled people's sexual autonomy; sex education by and for disabled people is important
	Intimate interactive system [48]	Sensuality	Virtual environments and corresponding interactive systems could support/encourage intimacy of disabled people
	Online dating platforms [120, 122]	Sexualisation	Disembodied interactions provided by online dating platforms can afford disabled people intimate encounters
	AI technologies [64]	Intimacy, sexual health & reproduction, sensuality	AI tools and technologies promise to enhance different areas key to disabled people's sexuality (including communication, physical access, companionship, mental health and sex education)
	Sex robots [50]	Sex work	Sex robots bear potential to realise the sexual rights of disabled people, although potential risks need to be considered and more research on this matter is necessary
Pessimistic	Sex robots [90]	Sex work	Call for legal and ethical regulations given the potential moral issues regarding 'acceptable' sexual practices
Method	Embroidery [65]	Sensuality	Exploration of novel ways of generating design insights

4.3.1 *Medical model, pathologising and stereotypical views.* A number of papers operationalised disability in line with the medical model, referring to disabilities as 'disorders', strongly drawing on medical descriptions, or ascribing (potential) access barriers related to sexuality to physical or mental 'deficits' of disabled individuals [2, 6, 57, 64, 87, 90, 96, 113].

This framing was especially notable in papers focusing on neurodivergence², specifically autism, ADHD and intellectual disabilities. These studies draw on medical literature and DSM-5 definitions to discuss difficulties neurodivergent persons might encounter as occurring *because of* their traits [57, 87, 96]. Referring to the DSM-5,

²Broadly, "neurodivergence refers to the experience of significant difference from what is understood as the norm of cognitive functioning and expression (neurotypical)" [141, p. 1]. It is commonly used as an umbrella term for a range of medical labels, including (to name a few) autism, ADHD, epilepsy, dyslexia, traumatic brain injury, post-traumatic stress disorder, or intellectual disabilities [77].

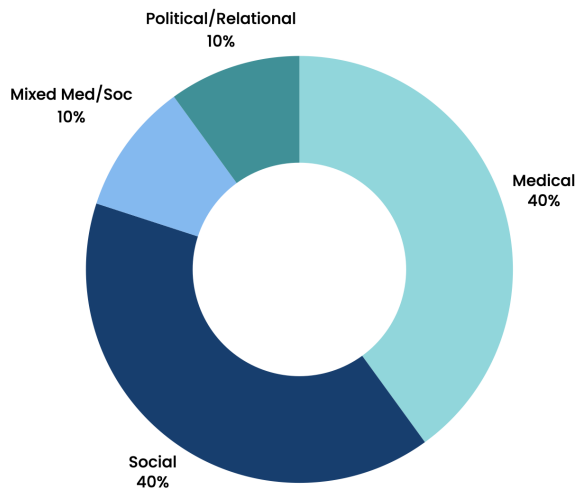


Figure 4: Percentage of prominence of different disability models in the corpus (where indicated or discernible)

Lunde et al., for instance state “ADHD is a neurodevelopmental condition characterised by inattention and hyperactivity/impulsivity symptoms while autism, also a neurodevelopmental condition, is defined as involving difficulties with social communication and restricted patterns of behaviour, interests and/or activities” [87, p. 2]. A more explicit example can be found in the paper by Gunarhadi et al. who describe autistic people as “often showing social oddity and stiffness, emotionally motivated, focused on themselves, unable to understand social signs in the form of nonverbal, inflexible, less empathetic and weak understanding” [57, p. 2], which are characterisations based on outdated terms and concepts [27, 79, 100, 117, 123]. The paper primarily focuses on parents’ ‘challenges’ with their autistic children’s sexual development, effectively framing the children as a burden requiring parents to develop “coping strategies” and emphasising “urgent therapeutic treatment” for autism in the absence of a known cure [57, p. 2].

Akyüz et al. focus on the need to maintain sexual function as vital after spinal-cord injury representing sexual needs as “concern[ing] patients’ private lives that they cannot easily explain” [2, p. 600], while Fosch-Villaronga and Poulsen, describe disabled people as “often not in the position to fully experience the joys of life in the same manner as abled people” [50, p. 1]. Consequently, disabled people are portrayed as lacking function or ability—a problem residing with them, while other aspects of sexuality are not considered by these framings.

Across the works, we noticed that papers referencing a medical model of disability, be it implicitly or explicitly, problematise sexual behaviours or access to information on sex and sexualities. They consider difficulties as inherently tied to disabled people’s non-normative embodiment and propose technologies that operate on an individualised scale, albeit rarely used by disabled people themselves.

4.3.2 Social model and self-identified framing. A number of papers operationalise disability in line with the social model, i.e., they discuss access issues as stemming from ableist societal structures [10, 35, 42, 59, 101, 102, 116, 120]. Those studies involving participants often couple this framing with disabled people’s self-identification [10, 59, 102, 116, 120]. As we identified, these works primarily problematise technologies as obstructing access to sex(uality), and explore how they could be designed more accessibly.

4.3.3 Combination of medical and social model. Some papers refer to both the medical and social model of disability. Iarskaia-Smirnova and Verbilovich [68] reference the medical model in how others in their population context often perceive disability, but contrast this heteronomous portrayal by building on the social model through first-hand narratives from disabled people. Discussing both risks and potentials of sex robots in facilitating disabled people’s sexual wellbeing, Fosch-Villaronga and Poulsen [50] present a review of academic studies from medical, social science and HCI referring to multiple models of disability. Although they discuss social access barriers, some of the arguments frame disability as a burden in need to be alleviated by technological means, as can be inferred in the statement below “[p]eople with severe physical and mental health disabilities that lack social skills require patience from those who socially interact with them [...]. Disabled persons might find a robot’s intrinsic patience valuable, as they could converse with a sex robot as much as they need/want to without the robot losing patience.” [50, p. 5].

4.3.4 Political/relational model. The works by Hua [65, 66] align with the political/relational model of disability. Aside from discussing access barriers embedded in societal structures (similar to the social model (cf. 4.3.2)) the authors analyse historical/political norms around disability, sexuality and design. In doing so, they actively challenge ideas of normalcy inherent in these structures (and thus, existing technologies). Beyond merely amending inaccessible technologies, in the speculative study [65], the first author’s disabled body and masturbation experiments are directly part of the design process. Thereby (disabled) embodiment becomes part of the technology’s materiality, contextualising it within the relational space created through the interaction.

4.4 Author Positionality and Involvement of Disabled People

How authors position themselves towards disability and sexuality is as relevant as the research setting that frames the interaction with disabled people (external to the academy).

4.4.1 Author Positionality. Four papers include a discussion on how the authors position themselves to the topic [32, 59, 65, 66]. In one paper the first author explicitly positions herself as a “woman with an invisible disability” [65, p. 1]. Another discusses authors’ positionality as identifying as part of the community researched, albeit slightly hidden within the paper [32]. The majority of the reviewed papers did not discuss author positionality or framing of their research. This was particularly striking in those works primarily focusing on health where needs [113], design of interventions and evaluations were seemingly identified without disabled people [2].

This is not to say, that authors have to disclose their identity or disability status (cf. [83]). However, given the historical and presently ongoing epistemic injustice and epistemic violence when it comes to research on disabled people's lives [164], it would comprise an ethically responsible and rigorous research practice to critically reflect on the motivations for conducting research, the epistemic sources informing it, the reflexive processes and limitations thereof.

4.4.2 Disabled People as Researchers. In one paper the first author incorporates her own body in the design approach [65, p. 1]. The community participation approach conducted by Curtiss et al. involves many participants as researchers and describes an inclusive approach without identifying or disclosing disability status [37]. This approach benefits from not defining people by a disability but also runs the risk of their voices being drowned out. However, disabled people leading and directing research in accordance to "Nothing about us without us", relies on participation and disclosure by disabled people. These instances are unsurprisingly rare given the low number of disabled academics [25] and the limited opportunities to actively involve disabled partners from outside the academy in equitable research projects.

4.4.3 Disabled People as Experts. While not being directly involved as researchers, a small number of studies draw on disabled people's expertise regarding their own lives. Barbareschi and Wu explicitly interviewed disabled participants in their role as experts "on what knowledge and information about sex and sexuality are important for disabled people in general" rather than having to disclose potentially sensitive information [10, p. 2]. Two other studies [35, 48] involve disabled people as reviewers of prototypes intended to support sexuality. However, the basis for some design choices remains unclear. For instance, Fels et al. [48] emphasise the importance of including disabled people from the beginning of the development process but note design motivations without clearly explaining how and why they resulted in the specific prototype. The involvement of Deaf individuals in designing the "Emoti-Chair," a component of the presented IIS utilising vibro-tactile stimuli, lacks clarity regarding their level of participation and whether design considerations were informed by Deaf culture or solely focused on addressing hearing impairments. Additionally, concerns, interests, and design recommendations primarily reflect experiences of mobility disabilities due to the small and narrow sample, despite the authors' general references to "people with disabilities." This ambiguity extends to examples of visual representations and accessibility in the virtual realm, despite acknowledging the significance of sign languages as a primary communication method. While Fels et al. critically reflect on the limitations of this sample and the difficulties of recruiting disabled people in such studies, this finding points to the need to develop approaches for engaging disabled people in and to lead design research.

4.4.4 Disabled People as Participants. Several papers [6, 32, 59, 95, 96, 102, 113, 116, 120] engage disabled individuals as participants, primarily through online surveys, design walk-throughs, or qualitative interviews focused on their disability experiences. They were mostly recruited through sharing calls for participation in online platforms in specific groups or channels aimed at disabled people.

Requiring participants to self-identify to participate assumes an absence of coercion, intimidation or relying on having a formal medical diagnosis, which not all disabled people possess, nonetheless, it would be preferable for ethical considerations to be explicit how inclusion criteria are verified without duress. However, not all studies clearly declared their ethical considerations in recruitment practices, (cf. Section 4.4.7) preventing us from fully reviewing which principled or ethical guidelines informed them. Overall, disabled people are involved as direct epistemic sources in these studies.

4.4.5 Disabled People as Implicit Epistemic Sources. Other papers more implicitly include knowledge and experiences of disabled people from literature or other media in their study design. The first author of Hua et al.'s paper (additionally to her experience as a disabled woman), incorporates descriptions of disabled people's masturbation practices from other resources into the design process [65]. Similarly, Iarskaia-Smirnova and Verbilovich draw on disabled people's voices and narratives in the public space [68] to discuss how disability and sexuality is represented in media. Reviews of existing works, such as Miron et al. [101], leverage the expertise shared by disabled individuals to support their claims regarding disability experiences. While these works generally acknowledge their sources, to minimising the risk of silencing disabled voices, we caution against instances where inferences are made without transparent member-checking processes. We advocate for the adoption of member-checking methodologies in such cases to bolster the legitimacy of interpretations and mitigate potential biases. Examples of implementations of these strategies are becoming more prominent amongst researchers working with marginalised populations including, but not only people with disabilities [9, 118, 159]. Such approaches can span from more in-depth collaborations [159], consultation about data quality [118], and verification of the representativeness of themes conceptualised by researchers without lived experience [9].

4.4.6 Disabled People as Hypotheticals. Several works [2, 32, 42, 50, 57, 64, 90, 122], mention disabled people with regard to technology and sexuality without directly involving disabled people in the research or merely mention technology's potential implications for disabled people as thought experiments. The former includes a study developing a system/information that disabled people need while neither involving disabled people in the identification of needs nor in developing or evaluating the system [2]. Another study evaluates dating websites developed for disabled people, although without clarifying the positionality or reflexivity of the author performing the analysis [122].

Other papers discuss technology and sexuality without a specific focus on disability but draw on disabled people to exemplify an argument [42, 90]. For instance, when discussing potential harms of technology, Döring [42] mentions disabled people as a group that might be excluded from its use. More strikingly, the paper by Mackenzie discussing ethical implications of the design of sex robots states: "Sexbots could be manufactured who gained pleasure from pain, or who wanted to be tortured or killed, or to manifest qualities which specialist websites show have fetishistic appeal, e.g. to cater for sex with those at the extremes of obesity, anorexia, age, disability, non-humans etc." [90, p. 1], thereby framing disabled people as 'extreme' sexual fetishes. This was felt and reported in

other papers [32, 68], where users shared their feelings of being only used for fulfilling a fetish simply by being disabled: “It seems that there is a Deaf fetish out there. People want to sleep with Deaf people” (p. 1034), which exemplifies how this belief is manifested in disabled people’s realities.

While structurally involving research participants, the study by Gunarhadi et al. falls in this category as parents are speaking on behalf of their autistic children [57]. The autistic children referenced are not only hypotheticals; they are presented as a cause of stress that parents are forced to battle with. Hence, the disabled people supposedly at the centre of the investigation are not only not directly involved in it (epistemic injustice [30]), but are framed as concerns for their environment without having their own voices taken into account.

4.4.7 Research Ethics Measures for Involving Disabled People. Regarding the research ethical measures taken in the involvement of disabled participants, we observed that most papers either merely state to have received approval from an ethics committee and/or comment on minimal ethical measures required for studies with participants (e.g., anonymity or informed consent) [6, 32, 48, 68, 95, 102, 113, 120], while some do not mention research ethics at all [35, 57, 96, 116]. This approach does not provide sufficient information to ensure that the research or the participants were treated with acceptable ethical considerations.

More positively, Barbareschi and Wu ensured not to ask about participants’ personal experiences with sexuality, but rather their expert opinion on disability and sexuality in general [10]. However, further measures to handle potentially harmful effects of the interviews (e.g., inadvertently triggering traumatic personal experiences by discussing topics around sex(uality)) were not described. Mooney et al., [102] similarly do not mention considerations of the impact of discussing access to sexual health. Only Hamilton et al.’s study involving sex workers provides an extensive section discussing its ethics, impact, and research justice [59]. The authors applied additional ethical measures for research justice, such as employing a sex worker to transcribe their data, providing accessible ways to disseminate the results among the studied group and reflecting on potential harms their research might cause. Although their study includes only some disabled sex workers, it exemplifies an ethically sensitive approach to researching marginalised groups.

When conducting research with marginalised groups like disabled people on sensitive topics like sexuality, it is essential to employ careful, ethical measures throughout the entire course of research and disclose the considerations followed [26, 46, 139]. Further, whilst we acknowledge that some venues impose limitations on paper length, it is nevertheless crucial that the research purpose, methods and the presentation of results are designed and conducted in a way that is informed by the voices and knowledge of disabled people themselves. These practices are fundamental to research ethics as they are sensitive to the power imbalance between researcher and participants, and thus, aim to avoid perpetuating epistemic injustice [81].

In sum, we identified multiple models and conceptions of disability and sexuality. We found that disabled people were framed as

being discriminated against, their sexual needs assumed, with minimal focus on pleasure, or marginalisation of queer disabled bodies. Technology was often posed as a probe or a tool to solve problems of inaccessibility. In these contexts, design recommendations or technological passages towards reducing societal bias and physical restrictions were proffered contributions.

5 Discussion

Through our review of literature combining the topics of sexuality, technology, and disability, we identified different normative framings as well as critical notions of how participation is practised in relevant research. We found a *mechanistic* understanding of sex(uality) focused on (heteronormatively structured) intercourse, the proposal of technologies in a *solutionist* function, with disabled people largely conceptualised from a *socio-medical* perspective, identifying their embodiment as problematic as well as their social environment.

Simultaneously, most did not articulate whether research objectives had been derived from disabled people. Where involvement was specified, they tended to be relegated as sources of information or mere hypotheticals in research supposedly about them. We posit that the dearth of robust research in this field may stem from the under-representation of disabled people in research leadership roles.

We now illustrate how this limits knowledge-making in this space and provide insights into potentials we see currently not taken up in this space.

5.1 Limited Imaginaries – Normative Tendencies on Sexualities, Technologies and Disabilities

Before engaging with the research, we had not expected to find a substantial number of publications at the intersection of topics to warrant a literature review. Hence, from the start, we were surprised to identify so many relevant works. We also expected the language around the topic to be less direct and more flowery than we found, but sex and sexualities were overall engaged with explicit enough language to not exacerbate existing stigmatas around sexuality and disability [47]. Herein, however, we engaged with a range of differently framed papers. One extreme is posed by the works by Gunarhadi et al. [57], which did not directly engage with disabled people’s sexualities but rather how their carers framed it as problematic; a framing met with little to no critical contextualisation. This type of research is not unexpected given how works, particularly related to the sexuality of disabled adolescents, more generally tend to focus on the support needs of parents over those of disabled people themselves [4]. An almost opposite framing, we encountered in the works by Hua et al. [65, 66]. Although the focus is not directly on disability, the investigation into self-pleasure is *disability-lead*. Given the systematic exclusion of disabled people from academic knowledge-making [25, 41], such work is difficult to conduct as it requires disabled people to make themselves even more vulnerable in this position than they already are [164].

Overall, the prevalent assumption of asexuality of disabled people [40, 99] paired with a portrayal of hypersexuality of others [38] identified in more general literature on sexuality and disability was

rarely encountered in the corpus (beyond the above-mentioned example). The candid and generally respectfully phrased investigation of such topics aligns broadly with activists' demands for honest conversations about sexuality and disability in technological contexts. However, in more detail, this alignment shifts when looked at more closely, given the lack of investigations into the normative assumptions and co-shapings of desires through technical possibilities. Hence, we concur with Porter et al., "[w]e advocate that the social computing research community consider how these processes are driven by both societal expectation and the constraints of [technologies]" [116].

When assembling the corpus, we had also hoped to find works spanning all areas of the five circles of sexuality [39]. However, aspects of *intimacy* and *sexual identity* have received almost no attention within this literature so far. This is relevant since, given the barriers to information and education on sexuality and sexual health, disabled youth find it difficult to ask for needed information [143]. This is partly due to other medical needs (seemingly) taking precedence when speaking to health care professionals, but also because the latter often feel inadequately equipped to have these conversations and provide information on sexually relevant content [ibid]. Hence, disabled people are kept from exploring, identifying and articulating their sexual needs and wants (and what the differences might be), which is even more relevant considering that *crip theory* postulates that disabled sex is necessarily queer in and of itself as it subverts the heteronormative expectations and purposes embedded in normative assumptions on sexualities [130]. It should be noted that expanding the research to include other scholarly work such as workshop proposals, doctoral consortium, and position papers, or even broadening the review to encompass white literature such as reports from NGOs, news pieces, or dissertations could help capture additional work in some of the missing circles. However, the scope of our research was to understand how topics at the intersection of disability, sexuality, and technology are engaged with in peer-reviewed scholarly work that directly engaged with disabled participants (such as empirical studies described in full papers and late-breaking work), or that reports on previous studies doing the same (such as literature reviews).

All in all, we identified several unmarked norms [23] governing this research area. For *sexuality*, we found a somewhat mechanistic focus on sexualisation, sensuality and sexual health, that is implicitly framed around heteronormative desires. Meanwhile, *technologies* are propositioned as solution-oriented tools [109] without addressing the societal contexts they are shaping in a reciprocating fashion. Finally, *disability* is largely contextualised within a medical model, especially in consideration of the individualised approaches of most technologies that assume the necessity of interventions for disabled individuals. Subsequently, we find little knowledge making on the desires of disabled people and how they could be technologically realised, augmented or supported. Particularly, we identified a lack of research into **self-determined access to explorations of crip sexualities**, preferably with a focus on negotiation and consent. This obscures the many creative ways disabled people appropriate existing technologies on an everyday basis to seize access in a world that is largely not built for them [20, 60, 155].

5.2 Understanding the Potentials for Design & Research

Investigations in this area will require development of adequate methods that involve disabled people in research and design beyond cultivating access [88] towards cultivating a culture of collaboration. The potential for designs is likely to be most relevant in this area if developed from a position that is curious to understand disabled people's desires while avoiding a voyeuristic or extractive perspective. This requires delineating whether and how disabled people are involved in research on assistive (sex) technologies.

Given the instances of blatant epistemic injustice we identified, we encourage researchers and collaborators to actively articulate and continuously reflect on their ethical stances. This should include considerations of potential harms and the prevention or mitigation thereof while considering reciprocal relationships between researchers and collaborators. Here, it could provide a novel perspective to discontinue medically framed narratives in this domain, but rather centre on the lived experiences of disabled people and make space for them to frame these experiences. This might require creating spaces in which access to information and possibilities previously not encountered is provided. Otherwise, by excluding inclusive design principles from our work, processes may hinder 'design for all' [114], and we risk undermining efforts towards "equitable and agential technology use for disabled people" [108, 114, 160].

We find it particularly fruitful to consider disabled people as a heterogeneous group with differing needs and wants, not just related to differing embodiments but also different sexualities and desires. Due to limited information on additional demographic data describing participants, we could not identify how the works relate to other demographic factors such as race and disability. Hence, we follow others such as Harrington et al. in their calls to consider intersectional characteristics such as race as a fundamental factor shaping disabled people's experiences overall [62], but also and particularly their sexual experiences [36].

Moreover, we encourage HCI researchers to adopt broader conceptualizations of disability and sexuality. A potential approach herein could be a lens of disabled sexualities as queer (as introduced in section 2.3). This lens not only supports a critical engagement with prevailing, ableist narratives on sexuality and the body, but also poses an opportunity to capture a wider range of disabled lived realities. As such, it could expand current understandings of disabled sexualities with regard to technologies (e.g., towards playfulness [110] or exploration [12]).

In summary, we find that next to investigating sexualities, technologies and disabilities outside of the realm of the existing unmarked norms of the research we analysed, we propose that strong collaboration with disabled people could realise the potentials that lie in designing sex technologies that are not just accessible, but also relevant and desired.

5.3 Limitations

As acknowledged by Feminist Content Analysis [81], knowledge is situated and hence always partial [61]. In the case of our critical review the methodological approach we chose necessarily shaped our analytic insights from the corpus material. We primarily focused on papers that employed a disability lens and thus, likely

excluded studies that did not work with this lens (e.g., because the cultural discourse on disability is different from the primarily Western frameworks we draw on). Further, we focused on instances where the topics of sexualities, technologies and disabilities merged, drawing on specific sources, particularly academic sources. This excludes accounts of disabled people being creative and making technologies oriented on sexual pleasure for themselves, if disability is not disclosed. An expanded scope including non-academic accounts of disabled people (i.e., in literature, social media, blog posts, videos, etc.) discussing sexuality could have broadened this perspective and potentially identified a mis/match between research and practice. Additionally, our epistemic positionality shapes the framing of our analysis, meaning insights we missed that might come more easily to investigations from a different position. Hence, we encourage others to take on their own investigations into this space.

6 Conclusion

We conducted a literature review on research investigating the combination of sexuality, technology, and disability. We identified unmarked norms governing these research domains as well as the methods and involvement of disabled people, allowing us to highlight gaps in our collective knowledge from which we can derive areas for future work. We identified the need for research to explore the desires of different disabled populations along notions of plurality. Additionally, we encourage researchers to more tightly collaborate with disabled people while acknowledging that such a project requires the field to develop adequate matters for involvement and an ongoing discussion of ethical standards.

For now, we provide an overview of where research on sexuality, technology and disability currently stands, and which unmarked norms are shaping the field. Researchers interested in entering this field can take inspiration and guidance in how to potentially work towards technologies that support disabled people in the sex lives they articulate [84] and desire.

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