

# How to Induce a Physical and Virtual Rubber Hand Illusion

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Understanding body ownership is essential when creating virtual reality (VR) applications using avatars. One of the most widely-used paradigm to investigate body ownership is the rubber hand illusion (RHI). When a real hand and a rubber hand are stroked synchronously, participants can experience the rubber hand as their own hand. Although the knowledge from RHI experiments in the real world is applied to when users embody avatars in VR, it is still unclear whether the illusory ownership of a virtual and physical body produce the same effects. In addition, conducting RHI studies in VR would allow gaining a range of novel experiments that are not possible in the real world. With this demonstration, we therefore present a system and approach to investigate the RHI in the real world and in VR.

CCS Concepts: • **Human-centered computing** → **HCI theory, concepts and models**.

Additional Key Words and Phrases: rubber hand illusion, virtual reality, virtual embodiment

## ACM Reference Format:

Alexander Kalus, Martin Kocur, Johanna Bogon, Niels Henze, and Valentin Schwind. 2022. How to Induce a Physical and Virtual Rubber Hand Illusion. In *Mensch und Computer 2022 (MuC '22)*, September 4–7, 2022, Darmstadt, Germany. ACM, New York, NY, USA, 6 pages. <https://doi.org/10.1145/3543758.3547512>

## 1 INTRODUCTION AND BACKGROUND

In VR, users can experience a sense of ownership of a virtual body—a phenomenon known as the body ownership illusion (BOI) [15]. Previous work found that embodying an avatar—the digital self-representation of the user— increases the sense of presence [31] and improves depth perception [11]. Therefore, VR developers and researchers aim to induce a strong BOI of avatars to create a natural and realistic interaction in the virtual environment (VE). Thus, deeper knowledge of BOIs and the underlying mechanisms is vital to creating embodied VR experiences.

One of the key instruments to study BOIs [28] is the RHI paradigm that was first introduced by Botvinick and Cohen [6]. In the RHI, a rubber hand is placed on a table, anatomically congruent to a participant’s hand, while the real hand is hidden. An experimenter then strokes both hands synchronously with a brush. The multisensory cues of seeing the rubber hand being touched and feeling a congruent touch on the own hand then cause the participant to experience the rubber hand as their own. Asynchronous stroking breaks the illusion, which is why it is frequently used as control condition [26]. The RHI has developed into a widely-used instrument to study the mechanisms underlying a BOI [26] and has been applied in clinical applications to treat psychiatric and neurological conditions [8, 14, 29].

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Manuscript submitted to ACM

Besides subjective measures to quantify the RHI using questionnaires (e.g., [23]), research also used the proprioceptive drift describing a shift in the perceived location of the participants' real hand [26]: If participants are instructed to localize their own hand after the RHI, they typically misperceive the location of the own hand towards the rubber hand (e.g., [6, 15, 26]). Furthermore, physiological responses in the real hand have been observed, such as decreased motor excitability [10], an increase in histamine reactivity [3], and a decrease in skin temperature [24].

From a human-computer interaction perspective, the question arises whether the effects of the RHI correspond to ownership sensations of avatars experienced in VR. VR enables users to experience a full-body illusion (FBI) of the avatar (e.g., [17, 19, 20]). When users perceive the avatar from a first-person perspective while experiencing visuo-tactile or visuo-motor stimulation using motion tracking technologies (i.e. moving the physical body and seeing the avatar mimicking the motion), they can feel ownership of the avatar and accept it as the own body in VR [28]. However, FBI and limb ownership (as occurring in the RHI) are two distinct illusions [4, 5, 22]. Additionally, FBIs induced by visuo-motor synchrony evoke a sense of agency of the virtual body that, in turn, can affect users' behavior and interaction [7, 18, 21]. Hence, it has not been validated whether a RHI and a BOI in VR produce comparable effects. A comparison is further complicated by the fact that in a FBI, the artificial body is in a congruent position, eliminating proprioceptive drift as a measurement.

Apart from experiments involving FBIs, a variety of VR studies have focused on virtual ownership of body parts such as virtual hands [16]. However, the induction methods deviated from the classic RHI procedure, e.g., by displaying the hand in an empty void [1], allowing participants to move the embodied hand using trackers [32], or applying tactile stimulation using a vibro-tactile stimulator, while presenting it visually as a moving ball [25]. These methodological inconsistencies and the lack of a physical RHI-setup acting as control condition limit a comparison to the effects of the RHI in the real world. A missing standardized method for the physical [26] and virtual RHI further complicates a comparison between the experiments. Hence, it is unclear if the principles gained from research on the RHI translate to VR, and whether and how illusory ownership of a virtual limb differs from illusory ownership of a physical limb.

A setup that enables to conduct RHI experiments in VR, as well as under equal conditions in the real world could shed light on differences between VR and the real world, as it allows to directly compare virtual body ownership and ownership of a physical entity. Additionally, the flexibility of VR environments that allow for systematically manipulating variables of the RHI paradigm (e.g., the appearance of the hand) would enable novel studies that increase our understanding of BOI or improve RHI-based therapies. With this demonstration, we present a system to systematically conduct the RHI in or outside of VR under equal conditions. Therefore, we implemented a VR environment, in which participants can experience the RHI procedure according to the original protocol [6]. The setting is designed to keep all factors between the RHI in VR and RHI in the real world constant. These include visual cues, synchronous and asynchronous visuo-tactile stimulation, social factors, as well as the assessment of proprioceptive drift and hand skin temperature.

## 2 SYSTEM

### RHI Setup

As we set up the RHI in VR, as well as in a real environment, all objects mentioned in the following are placed in both, the real and the VE, unless stated otherwise. Their positions and dimensions therefore refer to both, the RHI in and outside VR and are depicted in Fig. 1.

Participants are seated at a table (surface of 140 cm × 70 cm, 76 cm in height), with the body and table midline being aligned. To the participant's right, there is a rubber model of a right human forearm, with the hand measuring 16 cm

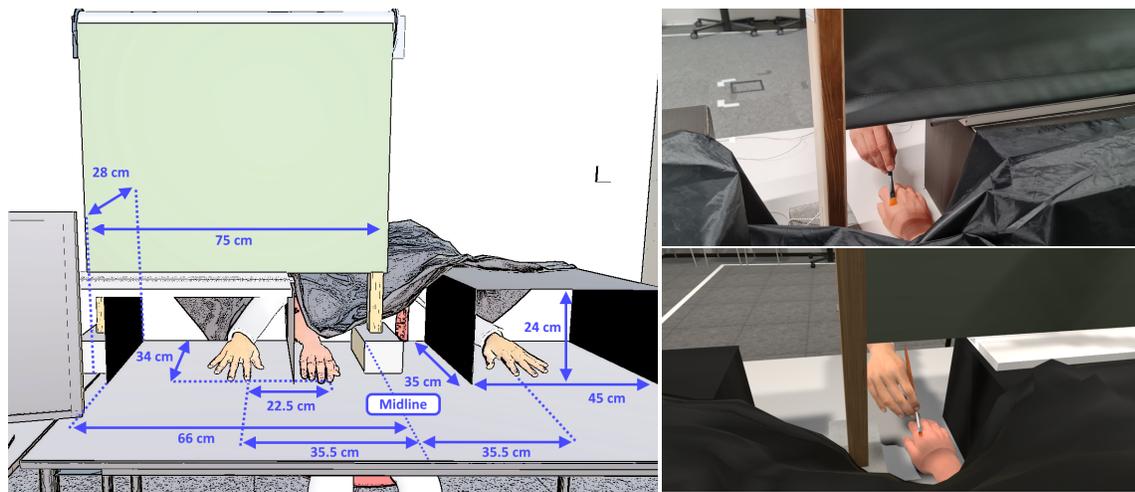


Fig. 1. Experimental setup (left) and the participants' view (right) for the RHI in the real world (top) and in VR (bottom).

from index fingertip to wrist. It is placed in an anatomically plausible posture, aligned at right angle to the participant's frontal plane. For the physical RHI, we use an artificial right forearm made from PVC-rubber as rubber hand (AFM-BLM Male flexible arms large hands medium arms, Hollands Wonder Wereld vof, the Netherlands) and designed the virtual version based on this model.

In VR, an avatar is placed at the location of the participant. To prevent unintended limb ownership of virtual body parts other than the rubber hand, both the participant and the avatar wear a cloth smock attached to the boxes to cover their visible body parts, as well as the upper part of the rubber hand. For the same reason, both of the participant's/avatar's hands are placed in two cardboard boxes in order to keep both hands out of sight. This has additional advantages if hand skin temperature is assessed, firstly as consistent conditions should be maintained for both hands and secondly, as it follows the approach, in which the temperature response was most evident [24]. The front, back, and bottom of the boxes are removed to ensure that they do not interfere with the participant's arms or the brush strokes.

An experimenter sits opposite the participant, controls the experiment, and applies the brush strokes during the RHI using flat paintbrushes (size 12). As social factors are assumed to affect the illusion [2, 9, 27], a roller blind (75 cm × 150 cm) is placed in front of the participant and lowered to conceal the experimenter, except for the hand stroking the rubber hand. Fig. 1 shows the participant's view during the virtual and physical RHI. A monitor on a separate table allows the experimenter to supervise the virtual scene.

For the assessment of the proprioceptive drift, an 80 cm × 25 cm × 1.6 cm board is located on top of the box that covers the right hand. After the stroking procedure, the board is pushed to the participant's left, hiding the rubber hand. It stops when it protrudes 7 cm over the table's midline (automatically in the virtual setting and by a cuboid on its bottom stopping against the cardboard box in the physical setting). A blanket attached to the board covers possible reference points. An 80 cm long scale is displayed on the board, parallel to the participants' frontal plane, on which the centimeter labels are replaced by 80 two-digit numbers. They are arranged in random order to prevent participants from using their indication from a prior trial as a reference for their new indication. For the same reason, we created four distinct scales, which vary in numbers and order. Participants are asked to state the number they believe the right

index finger of the real hand is located. The proprioceptive drift is calculated by subtracting the position indicated by the participants from the actual index finger position.

### Implementation of the Virtual RHI

For the virtual RHI we implemented the setting defined above as 3d environment using Unity 3D (v. 2019.2.1f1). The project files and the source code are available on github<sup>1</sup>. The virtual rubber hand was created using a 3d model from previous research on hand ownership [16, 30]. We edited its diffuse and normal maps to create a virtual replica of the physical rubber hand. The shader's smoothness was adjusted to achieve a slightly glossy surface similar to the physical rubber hand. Furthermore, we adapted and transformed the hand's rig to match the physical rubber hand.

Regarding the stroking procedure, we used Unity's cloth physics to animate the bristles. High-resolution real-time shadows from directional lights further enhance the appearance of brush strokes. Anti-Aliasing was set to 8x Multi Sampling to avoid pixelated shadows. In accordance with the physical setup, where the experimenter's hand is not covered by the roller blinds, a rigged realistic hand holding the brush was added to the 3d scene. Initially, we planned to track the brush to create a real-time stroking animation. Due to tracking inaccuracy causing offsets and asynchrony, we created a pre-defined stroking animation. The experimenter applies tactile stimulation in synchrony with this animation.

### Technical Materials

The virtual RHI is designed to be experienced from a first-person perspective using a head-mounted display with head tracking enabled. In our tests, we used an HTC Vive Headset (HTC Corporation, Tayuan, Taiwan) connected to a PC running Windows 10, equipped with Intel i7 Processor, 16GB RAM, and an NVIDIA GeForce GTX 1080 graphics card. The experimenter uses a wireless controller (e.g., an HTC Vive Controller) to trigger the stroking animation and proprioceptive drift assessment. A monitor to the experimenter's left renders the scene in real-time enabling to synchronize the brush strokes with the rendered animation. In the physical RHI headphones can be used instead, to listen to a metronome app dictating the stroking speed. The experimenter can actuate a footswitch located under the table to log events such as the start and the end of the stroking procedure. The output of the foot controller is processed by a python script that writes a log file containing UNIX timestamps of the events.

Our apparatus allows the integration of measures obtaining physiological responses to the RHI. We, for example, incorporated a thermometer (TC-08 8-Channel USB Thermocouple Data Acquisition Module, Omega Engineering, USA) that can be used to record the skin temperature of the left and right hand. Therefore, T Type fast response insulated Thermocouples (Omega 5SRTC-TT-TI-20-2M) need to be taped on each hand. To increase measurement accuracy it is recommended to attach multiple thermocouples on each hand [13].

## 3 CONCLUSION AND FUTURE WORK

With this demonstration, we present a system to conduct RHI experiments in VR. The system includes a virtual RHI, as well as an identical physical RHI setup, to compare effects of a virtual and physical RHI. It is designed to ensure consistent visual, tactile, and social factors between both settings. Consequently, the setup allows to investigate, whether the RHI in the real world differs from the RHI in VR in terms of psychological and physiological responses. Future studies can utilize this apparatus to increase our understanding of body ownership. The virtual RHI provides a flexible

<sup>1</sup>[https://github.com/a-kalus/virtual\\_rhi](https://github.com/a-kalus/virtual_rhi)

tool to systematically manipulate factors contributing to the RHI. For instance, the setup can easily be adapted to explore virtual rubber hands, that burn [12], dynamically change [14], or depict realistic 3d scans of the participant's hand [25] to examine the role of individual characteristics in the mechanisms underlying a BOI.

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