

Sexual and intimate citizenship in a Time of Pandemic.

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Abstract: This paper provides an overview of a transnational research project exploring the impact of the COVID-19 pandemic, and public health responses to it, on sexual and gendered politics. It sets out a framework for rethinking sexual and intimate citizenship during the COVID-19 pandemic, and draws on examples from India, Italy, Mexico and the UK to illustrate our analysis. We examine how the pandemic has impacted on the everyday negotiation of intimacy and highlighted material inequalities that impact on the lives of women and LGBTQ+ people. We argue that the pandemic has produced new faultlines between women and different groups of LGBTQ+ people, as well as amplifying existing tensions. In addition to identifying these faultlines, we explore the cracks opened by them which might reveal possibilities for new coalitions and alliances in relation to sexual and gendered politics.

Non-technical summary: This working paper provides an overview of a transnational research project exploring the impact of the COVID-19 pandemic, and public health responses to it, on sexual and gendered politics. This paper sets out a framework for rethinking sexual and intimate citizenship during the COVID-19 pandemic, and draws on examples from India, Italy, Mexico and the UK to illustrate our analysis. We examine how the pandemic has impacted on the everyday negotiation of intimacy and highlighted material inequalities that impact on the lives of women and LGBTQ+ people. We argue that the pandemic has produced new faultlines between women and different groups of LGBTQ+ people and amplified existing tensions. In addition to identifying these faultlines, we explore the cracks opened by them which might reveal possibilities for new coalitions and alliances in relation to sexual and gendered politics.

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Introduction

The profound impact of COVID-19 has been experienced differently depending on people's geographical location and the extent to which their lives align with social norms in the society where they live. Public health responses often reproduce normative assumptions about people's living arrangements and intimate lives that adversely affect members of sexual and gendered minorities. The work presented in this working paper explores the ways that the COVID-19 pandemic, and the various forms of 'lockdown' enacted around the world in response to it, have led sexuality and gender to become known (and contested) in a variety of new ways.

Through our exploration of these processes, this project examines how the pandemic has amplified existing ways in which sexuality and gender have simultaneously become both hypervisibilised *and* invizibilised in the contemporary world.

This working paper begins with a description of the 'urgent witnessing' methodology we developed for this project, before exploring intimacy and materiality – two of the key themes that emerged from our acts of collective witnessing and which we focus on here as they help guide and inform our wider analysis. We suggest that these material differences have exposed faultlines which will continue to shape sexual and gendered politics after the pandemic subsides.

Developing urgent witnessing methodologies

What we have called 'urgent witnessing' builds on an approach to transnational feminist collaboration that Banerjea and Browne (2018) had developed with others through their 'Liveable Lives' project. They developed an approach to collaborating between locations in India and the UK that questioned the comparative focus of much research that operates across multiple specific places at a physical distance (Banerjea and Browne 2018; Browne et al 2017). Instead, they deployed a transnational engagement that queered the presumptions of hierarchies which comparative methodologies can foster and sustain.

Given the public health restrictions enacted in response to COVID-19, and the fact that we were physically dispersed across England, India, Ireland and (at times) Trinidad and Canada, our work was conducted online, through regular team meetings and collaborative working on cloud-based documents. While this was a pragmatic response to pandemic conditions, our working methods also provided significant opportunities to rapidly develop collaborative practice between a dispersed research team and to appreciate the transnational impacts of the pandemic as we lived through it together. We developed a contemporaneous archive of 75 policy documents, reports, and news items relating, broadly, to sexuality and gender in the context of the pandemic. Between April and July 2020, we met approximately every three weeks (and most of the team have continued to meet and discuss with this regularity throughout the rest of 2020 and 2021). Through these regular team meetings, we discussed emerging themes from these processes and reflected on our own autoethnographic observations of life in pandemic times (Ellis 2004).

Working transnationally meant engaging with places in ways that are geographically sensitive to answer common research questions. The research team engaged digitally, creating research questions, developing considerations, and overarching project aims and activities, but also thinking locally to create methods that worked for each of our research locations, at that time. This created research that was locally engaged and emphasised the import of going beyond geographical hierarchies of equalities in the considerations of LGBTQ+ lives. Over time, we came to think of this approach as acts of 'urgent witnessing' (a spatio-temporal methodological approach that we plan to articulate further in a future paper) – deploying the best means of research that we could, where we were, within the context of the height of the first wave of the pandemic. In the rest of this working paper, we provide examples and analysis of two thematic areas in which we think the COVID-19 pandemic impacted on the lives of women and LGBTQ+ people.

Negotiating intimacy

As governments around the world imposed lockdowns as public health responses to COVID-19 between January and April 2020, these measures inevitably impacted upon people's intimate lives, as they attempted to maintain social distancing. These social distancing measures had significant consequences for people who were cut off from friends, family members, and partners, as well as deepened vertical caste hierarchies (which are based on the norms of social distancing). In the early days of the lockdowns, most governments implemented blanket bans on social contact, and it was only later that more nuanced guidelines on contact with highly prescribed 'bubbles' (to use the British government's terminology for arrangements which allowed single adults from more than one household to support each other at a time when other forms of indoor socialising were prohibited) were developed. In many national contexts, the parameters of lockdown and who people were allowed to meet inside or outside the home largely seemed to make normative assumptions about family relationships, including that most adults were in monogamous, cohabiting dyadic relationships (Wenner Moyer 2020). By working across different national contexts, our research allowed us to analyse the different interpretations of such arrangements and to consider what they revealed about social norms and sexual politics in those contexts. For instance, in some countries, these 'bubble' arrangements were primarily framed in relation to childcare and other caring responsibilities, as well as allowing for non-cohabiting parents to maintain contact with their children (Ramírez, 2020). In Italy, as the initial lockdown measures were eased and the country moved into 'phase 2', people were still only officially permitted to meet with 'blood kin', highlighting the continuing role of the extended (Catholic) family in the operation of the Italian welfare regime, and the prevalence of state policies (beyond COVID public health measures) that fail to recognise and legitimize other, non-normative, family structures (Di Feliciano 2015). The regulation of households and familial relationships under COVID lockdowns has many implications for sexual and gendered politics and people's intimate citizenship, which we will explore throughout the rest of this text. But, first, we would like to raise some broader issues about the regulation of bodily boundaries and their implications.

The public health measures enacted in different polities to tackle the threat of the pandemic and minimize restrictions have continued to adapt and evolve. Consistently, these measures have advocated mask-wearing to reduce airborne transmission, as well as different configurations of 'social distancing'. But while people could stay connected with friends and family through technological solutions, it was the reduction or removal of touch and holding that impacted on many people's mental wellbeing and resilience (Simcock 2020). This led us to consider how the sexual politics of COVID-19 lockdowns was not only presented as a series of risks and threats, but also in reflecting on how some gaps, pauses, and absences were reframed as 'opportunities'.

During the first national lockdown in the UK, in the spring of 2020, the 56 Dean Street sexual health clinic in London argued that the lockdown presented an opportunity to further, significantly, reduce HIV infections amongst gay and bisexual men in the city (Brown 2020; Ledin and Weil 2021). Their argument rested on the assumption that strict social distancing measures would impact on the spread of all infectious diseases, not just COVID-19. The Dean Street clinic recorded a significant decline in new cases of gonorrhoea and Post Exposure Prophylaxis (PEP) prescriptions in the period immediately following the imposition of the UK's COVID-19 lockdown. This, they believed, demonstrated that significantly fewer gay and bisexual men were having condomless anal sex with new sexual partners during lockdown (Segalov 2020). Through a combination of measures to encourage regular HIV testing, early treatment, alongside the rollout of Pre-Exposure Prophylaxis (PrEP), new HIV infections in London have dropped by 71% since 2012 (Alcorn 2017). In this broader context, the Dean Street clinic and other leading HIV charities proposed that lockdown produced a 'once in a lifetime' opportunity to target the shrinking population of HIV+ gay men in the capital who were not yet on antiretroviral treatments that would reduce their viral load to 'undetectable' levels

and prevent them from passing on HIV to others. In May 2020, Dr Alan McOwan from the Dean Street clinic stated (Segalov 2020),

“If we can now find the remaining people with HIV through testing and put them on treatment, we could remove anyone who is infectious from the population with long-lasting effects. We won’t get this two-month window of no sex again.”

While the ambition to take advantage of lockdown to reduce HIV infections was laudable, the framing of both the problem and solution poses critical questions about the representation of people with HIV in these statements. The ‘Test Now, Stop HIV’ (56 Dean Street, UK) and ‘No Hookups’ campaign (Terrence Higgins Trust, UK), have been argued to exacerbate stigma of LGBTQ+ people - particularly people living with HIV - by signalling a move away from developing and advocating for adaptive and creative intimacies (that have been a feature of the LGBT response to HIV since the 1980s), and instead reproducing State directives that privilege ‘discipline’ over (self-)‘care’. It also overlooked the fact that for many gay and bisexual men (and others) an extended period of enforced abstinence during the strictest period of lockdown may have been anything but a positive opportunity and may have had a significant, detrimental, impact on people’s mental health. While hook-up culture might have a tense relationship with deep intimacy, it nevertheless provides intimate contact and connection for many – a means of making life liveable. Having considered some of the ways in which COVID lockdowns impacted on people’s intimate lives, and how this interruption of intimacy was exploited for other health interventions, we now turn to a consideration of how lockdown has surfaced material inequalities, noting how and when these have become incorporated into sexual and gendered politics.

Materialities and Faultlines

COVID-19 lockdowns have required (most) citizens to stay in their own homes, for their own safety and that of others. However, feminist and critical sexualities scholars have long argued that women and members of sexual and/or gendered minorities often have a very ambiguous relationship to home (Brickell 2012; Tunåker, 2015). Feminists have long contested the assumption that women ‘belong’ in the home and have a natural affinity with the domestic sphere. Similarly, LGBTQ+ people have frequently been constrained to keep their sexuality and/or gender identity ‘private’; whilst, at the same time, the material constraints of shared accommodation, or a lack of secure housing, mean that many can only ever find some form of ‘privacy’ to express themselves in public spaces (Bell and Binnie 2000). We have been interested in investigating the ways in which being forced to spend more time at home has impacted on the lives of women and LGBTQ+ people, as well as the ways in which this relationship to domestic space has (or hasn’t) been addressed in contemporary sexual and gendered politics.

When lockdowns were imposed many younger LGBTQ+ people suddenly found themselves locked into domestic arrangements that were unsafe or unsupportive (Hunte 2020a). Many LGBTQ+ youth had little choice but to spend lockdown with their families, or to spend more time with fellow tenants in multioccupancy housing that they might, at other times, try to avoid contact with. If those people did not understand or affirm an individual’s sexuality or gender identity, lockdown could be (at best) uncomfortable or (at worst) life-threatening. For trans and non-binary people in particular, life in enforced lockdown with unsupportive family members or housemates meant trying to cope with constant misgendering, deadnaming, or the threat of violence (Hunte 2020b); but, for others, lockdowns offered some respite from everyday homophobia and transphobia. For us, this highlights that the focus of so much LGBTQ+ politics on the achievement of formal legal equalities, over the last two decades, has deflected attention from the very real material inequalities that impact on the lives of many LGBTQ+ people. However symbolically important marriage equality might be, for many LGBTQ+ people, access to safe, secure, and affordable housing might make a far bigger difference to their quality of life (Neary 2020).

With many people spending more time in their homes during COVID lockdowns, the pandemic has drawn renewed attention to the gendered division of (unpaid) domestic labour, as well as to the classed, caste-ed, gendered, and racialized dynamics of who provides 'essential' labour inside and outside the home. Survey after survey has demonstrated that women who were 'working from home' during the pandemic, continued to carry the burden of childcare, the home schooling of children, and other care responsibilities (Janestky 2021, Azcona, Bhatt and Love 2020). This situation also drew attention to how much middle-class women in many countries rely on outsourcing socially reproductive labour in their homes to working class, lower caste and/or migrantised women to maintain their careers and status. When England's initial lockdown rules were modestly relaxed in May 2020 the new rules allowed cleaners and nannies to go and work in others' homes, while people were still not allowed to travel to visit relatives in most circumstances. This provoked a social media 'twitterstorm' between the ('gender critical') journalist Sarah Ditum and the gay socialist commentator Owen Jones (Staples 2020). Ditum argued that it was appropriate for cleaners to work in others' homes and suggested that this was socially and economically beneficial for both households. In contrast, Jones questioned why working-class women should be expected to put themselves at greater risk of contracting and spreading COVID to do cleaning that middle class families could, in most circumstances, easily do themselves. The spat quickly degenerated into a more problematic tone, when Ditum suggested that, as a 'childless' gay man, Jones could never understand the burdens of motherhood. In many ways, this exchange was nothing more than a twitterstorm in a teacup. Yet, it illustrates a tendency for 'gender critical' commentators to mobilize a maternalistic feminism to celebrate motherhood, particularly the motherhood of white, middle-class women reframing 'feminism' in a way that belittles and attacks gay and trans rights (and often has classist and racist overtones). This tendency existed before the pandemic, but we believe that it has been amplified through COVID lockdowns.

Throughout the COVID lockdowns, there has been a noticeable increase in reported incidents of domestic and gender-based violence (Hsu and Henke, 2021; Istituto Nazionale di Statistica, 2020; Mittal and Singh, 2020; Piquero et al, 2021) and at the same time, is one of the most neglected outcomes of pandemics). The UN Office on Drugs and Crime Executive Director stated in November 2020 that being 'locked down and locked in' through Covid "has worsened the plight of at-risk women and girls, while also hindering criminal justice responses and reducing support to victims" (UN.org 2020). An Oxfam report, 'The Ignored Pandemic: The Dual Crisis of Gender-Based Violence and COVID-19' revealed the number of calls made by survivors to domestic violence hotlines in ten countries. According to this report Italy registered a 73% increase in such calls for help, while the UK registered a 25% increase. In India an incredible '250 percent increase of domestic violence cases' during the pandemic was reported by the National Commission for Women there in November 2021 (oxfam.org 2021). Mexico has also experienced throughout the pandemic, a surge in gender-based violence towards women which has been reported by multiple agencies. Just a few weeks into the pandemic, Data Pop Alliance reported a surge of 60% in calls to the recently established domestic-violence helpline and that 'the federal authorities estimated that violence against women had gone up between 30% to 100%' (Ortiz-b in Fernández Nieto 2020). It was reported by the Mexican Department of Security and Citizen Protection that by 13 April 2020, more women had died due to gender-based violence than of coronavirus (Castellanos 2020.). In other Latin American countries, such as Colombia, Argentina, and Peru, which had stricter lockdowns than Mexico, reports of gender-based violence also surged. This was largely attributed to vulnerable individuals being forced to remain at home without suitable safeguards in place, such as access to shelters (Janestky 2020, Fumega 2020). This has posed challenges for specialist service providers and has required them to rethink how to support victims of domestic violence when, more than ever, they might be trapped inside an unsafe domestic environment with an abusive perpetrator. Some of the innovative responses to this challenge included: creating a digital directory of resources for women at risk of gender-based violence in Colombia, such as access to lawyers willing to assist pro bono, an idea piloted by the NGO, 'Mutante' (Sandoval 2020). Meanwhile, in Mexico City the government

launched 'Puerta Violeta' in June 2020 with the objective of providing specialised support for women and children suffering from domestic abuse via a helpline, police attention and increased access to refuge support (Tenahua 2020). In collaboration with the UN, the Mexican government also launched a country-wide Twitter campaign: #NoEstásSola (You are not alone). This was a part of their 'Spotlight Initiative' to encourage those at risk of violence to seek practical help through videos, posters and adverts advising victims to speak to a neighbour, pack an emergency bag, remember a distress code for use with a trusted contact and call 911 (Spotlight Initiative 2020). The Veracruz-based NGO, Brujas del Mar, expanded its 'country-wide social media network to bolster existing digital aid for victims' and develop new strategies, including offering 'digital accompaniment and tracking services for women who have to walk alone in empty streets' (Janetsky 2020).

This situation poses both conceptual and practical considerations for pandemic sexual citizenship. Conceptually, the pandemic has raised questions about the limits of neoliberal imperatives for the self-governing body. In many ways, pandemic citizenship has required individuals to take embodied responsibility, through social distancing and mask-wearing etc., for their own health and that of others. But, how has the pandemic impacted on an individual's capacity to make and act on other decisions about their bodies? Before the pandemic, reproductive rights were understood as an individual's responsibility. However, this responsibility breaks down under lockdown conditions, where people have been largely restricted to their homes. How are people expected to self-manage sex and reproduction in the home when they might have increasing difficulties in accessing the technologies and services they need to support their choices about their own bodies? While the prioritisation of the pandemic response has (directly and indirectly) impacted on access to a wide range of primary and secondary health services in many countries, this has had specific impacts on women and LGBTQ+ people, impacting on reproductive, sexual, and gender-affirming healthcare services. In some locations, specialist service providers have responded innovatively in rapidly developing new forms of telephone and online consultations, as well as implementing home delivery of abortion pills, HIV and STI testing kits etc. (Reza-Paul et al 2020). In other contexts, and alongside this, grassroots mutual aid networks have also developed to support provision of abortion pills, PrEP, and hormones. While these responses remain uneven, they have sometimes forced the delivery of home-based and remote services that users and advocacy groups have been calling for, for a long time. Nevertheless, new inequalities in access to services have been produced in the process, and we also question the longer-term consequences for sexual and gendered politics of the ensuing 'hospitalisation of home'. We have emphasized throughout this section some of the ways in which the material consequences of the pandemic have produced new faultlines between different groups of women and within the LGBTQ+ umbrella, often with reactionary consequences. However, we also believe that a renewed attention to these material inequalities has the potential to reframe sexual and gendered politics away from an emphasis on formal legal equalities (which often benefit the already relatively privileged) and towards new alliances and coalitions which might span existing faultlines to improve services and living conditions for all.

Where are we? And where next?

To further explore and test the themes and observations set out above, members of our research team have conducted four localized research projects (some of which are still ongoing at the time of publication):

- Interviews with Mexican feminist activists to gain a deeper understanding of their innovative responses to increasing gender-based violence during the pandemic;
- Research to understand the impact of the pandemic on HIV prevention and treatment in Italy;
- A survey of LGBTQ+ people in Leicester, Leicestershire, and Rutland (in England), the preliminary analysis of which suggests some of the ways in which age, relationship status,

and housing conditions have impacted on the capacity of LGBTQ+ people to 'successfully' live through the pandemic.

- A participatory mapping project to record the experiences of vulnerable and multiply marginalised LGBTQ+ people in Delhi and Kolkata.

Taken together, the preliminary findings from these local projects confirm (and add nuance to) the analysis presented in this working paper: namely, that COVID-19 lockdowns have had significant impacts on the intimate lives of people, and that the unequal and differential impacts of this have been reshaping sexual and gendered politics in multiple ways. While resurgent violence against women, violent street-based homophobia, and the mainstreaming of anti-trans prejudice cannot be reduced to the impact of the pandemic, it has made known, and amplified, each of these phenomena. Equally, the pandemic has exposed the limits of (white) liberal feminism and mainstream LGBT politics based predominantly on the achievement of formal legal equalities. While we do not reject these equalities out of hand – they have had significant, positive impacts on many people's lives – they have been achieved at the expense of addressing the material inequalities in housing, healthcare, employment, and citizenship experienced by many women and LGBTQ+ people. At the same time, this crisis provides an opportunity to reformulate a progressive sexual and gendered politics that is more attuned to challenging these intersectional inequalities.

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