GEOGRAPHIES OF HOME: ADOLESCENT GIRLS', TRANS', AND NONBINARY

YOUTHS' SEXUAL WELLBEING IN THE GTA DURING COVID-19

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Abstract

This thesis examines how sexual wellbeing is related to the home as a spatial site during the COVID-19 pandemic and lockdown. We conducted five virtual focus groups (n=34) with those who identified as adolescent girls', trans', or non-binary youths' in the GTA between April-June 2021. We inquired about home, privacy, and sexual wellbeing during Canada's third wave. Sessions were transcribed using Zoom and coded using an inductive framework with NVivo. Using intersectionality theory and embodiment theory, this research analyzes how youth's diverse identities shape their understandings and experiences of sexual wellbeing. We found youth needed spaces where they were not only unseen, but importantly, unheard. Additionally, white youth cited the bedroom as the best space for sexual wellbeing practices, but BIPOC youth felt the bedroom was only their best available option and still found they had to negotiate privacy. We also found BIPOC and sexual minority youth often had to resort to physical boundary negotiations. I map place and self to the queer home, intergenerational home, and single parent home to understand how space is relationally defined. I argue McRobbie and Garber's (1976) bedroom culture concept can be expanded towards an intersectional analysis and coupled with increasing ICTs. I argue sound as an important piece of boundary-work that reveals the way youth construct space during precarious times. I also expand on Hernes' (2004) concept of *physical*, *social* and *mental* boundary-work to include sound as a fourth type, straddling amongst. This research shows how privacy, gender and sexual identities were negotiated at home in times of extreme uncertainty, highlighting how implications of home as a 'place' during the pandemic, constructs sexual wellbeing. I conclude with suggestions for supporting adolescent sexual wellbeing, inside and outside the home, during and after COVID-19.

Keywords: intersectionality, embodiment, home, sexual wellbeing, youth, gender, boundary-work, sound

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CHAPTER 1: HOME SWEET HOME

1.1 Introduction

The pandemic brought me home to my parent's house. After spending four years in Ottawa on my own during my undergraduate degree, coming home felt like I'd taken a step back into my teenage body. I knew this because my mind felt the same movements that my body made from the bed to the bathroom in the mornings, identical to that of my high school routine. Standing in front of my bedroom window, the view was relatively unchanged. I heard the same birds, the same neighbours, smelled the same awful Ailanthus Altissima, the Tree of Heaven. I was shocked to turn around and see my 22-year-old self staring back at me in the mirror. I had instead expected the 16-year-old who wore a school uniform, who ate Nutella in bed and wore a lot more eye makeup. It's this strange encounter with my "past" self, albeit my same body, that encouraged this research.

I grew up in a home with a mother and grandparents who constantly encouraged discussions on topics that would have been embarrassing or, unfortunately, incredibly taboo to many children and teens. Over my teenage years, friends found solace in my home, able to talk about things they could not in their own homes. Though I cannot pretend to know anyone else's home life entirely, I know the feelings that emanated from my home, thanks to the environment that my family created. The emotional geography of my home and the ways in which it welcomed my friends, myself, and others with open arms remind me that small places can hold big transformations. The conversations we had, and still have, about sex, masturbation, relationships, grief, love, and faith remain with me. I hold those warm feelings in my body, a constant reminder of the ways that my home is infused within my body, my own sexuality and the way I take care of and understand my own sexual wellbeing. The point remains that my body today, as physical, as symbolic and as representational, is inseparable from that of my

upbringing. They remain one today. I can feel these conversations in my skin as much as I can see them in my actions. Today, I am 24. I look through the emotional geography of my youth through my bedroom at my parent's house. They still live there today.

In the field of social science, sexual health often refers to the absence of disease. By contrast, sexual wellbeing refers to a much broader understanding of what sexual identity, sexual pleasure and sexual relationships may look or feel like to a person. Mitchell, Lewis, O'Sullivan and Fortenberry (2021, p. 610) propose sexual wellbeing as a "revolutionary concept" that can be operationalised through a seven-piece framework which includes: "sexual safety and security, sexual respect, sexual self-esteem, resilience in relation to past sexual experiences, forgiveness of past sexual events, self-determination in one's sex life, and comfort with one's sexuality". They also situate sexual wellbeing as one of the four pillars of a comprehensive public health approach to sexuality, beside sexual health, sexual justice, and sexual pleasure. Relying on Lorimer et al.'s. (2019, p. 844) work on the definitions of sexual wellbeing, particularly their thinking towards sexual wellbeing as "likely to be a self-assessment by individuals", I mobilize Crenshaw's (1989) intersectionality theory, and embodiment theory, to explore youth's experiences and understandings of sexual wellbeing at home during the COVID-19 pandemic.

Maintaining sexual wellbeing takes time and effort. Those in long-term or long-distance relationships, those with multiple partners or those who maintain sexual wellbeing solo, are now being faced with a pandemic that has shifted the ways people interacted. Teenage sexual wellbeing often entails emotional labour and work that often takes place outside the home. Take for example, date nights, sex in the family car, or the ability to shop for sex toys or safer sex paraphernalia. In addition to this, school, community programs, peer groups, malls and family

spaces, that once existed as distinct pieces of the sexual identity puzzle, have become more limited and complex due to the COVID-19 pandemic. Lock-down and physical distancing regulations have combined to intensify home as a space of education, socializing, *and* family life for many. This is especially true for cis-gender girls who already experience heightened surveillance and parental monitoring compared to that of cis-gender boys, during both childhood and adolescence (Seedall & Anthony, 2015). This can lead to a sense of entrapment and confinement for some. The pandemic has also increased vulnerability to family violence and reduced the availability of support (Usher et al., 2020). In addition to this, studies have shown that transgender and nonbinary people experience violence more often than cisgender or gender conforming people in both public, online and private spaces (Bauer et al., 2015). Therefore, the home is an intensely intimate space where many youths first confront power relations and learn what they know to be safe or private. For example, compared to boys, girls may be more likely to favour "the safety and security of home and [their] own bedroom with the familiarity of their "own things" around them" (Abbott-Chapman & Robertson, 2009). Therefore, it is important to understand the home as a place of intersecting identities and feelings all of which are linked to youth's transition into adulthood and "bound up" within wider structures like labour, the state and the family (Valentine, 2003a, p. 39).

Additionally, it is valuable to define and problematize any singular idea of "the home". Feminist scholarship has done this, where home is defined as "a space of belonging and alienation, intimacy and violence, desire and fear" where "meanings, emotions, experiences and relationships... lie at the heart of human life" (Blunt & Varley, 2004, p. 3). Defining the home singularly or binarily is an issue because home is more than a walled space representing the private. Geographies of home are "both material and symbolic and are located on thresholds

between memory and nostalgia for the past, everyday life in the present, and future dreams and fears" (Blunt & Varley, 2004, p. 3). Therefore, using the home as a spatial site, understanding youth's sexual wellbeing, and all that it encompasses from risk-taking to sexual and gender identity, are bridges to understanding overall health and wellbeing, what gives girls', trans', and non-binary youths' lives value, and what is important in everyday life in the present, future dreams and fears.

1.2 Research Problem and Context

Physical space in a city only becomes a place when it is embedded with meaning. Therefore, home as a place has changed due to the onset of the pandemic. Whereas school was the place where youth learned (with learning being the spatial practice), home now too became the place where youth learned, where adults worked, where the space of home has had a new meaning to it as a place. Sexual wellbeing, therefore, is a spatial practice at home, built up from meanings, negotiations, boundaries, cultures and routines.

Despite recent literature on the home, the embodied experiences of young sexual and gender minorities' home lives, in relation to sexual wellbeing, has not received adequate scholarly attention. Additionally, while geographers like Blunt (2005, p. 506) see "both home and culture- and their unsettled interplay- [as] intrinsically spatial and political", the interplay between home and sexual norms has been underexplored in geography.

This research advances scholarly understandings of home as a spatial site of negotiation and power through the embodied experience of youth's sexuality and wellbeing at-home during COVID-19. By understanding the home as multiple (e.g., some youth live in more than one home, others are part of the Child Welfare System in foster care, or live with divorced

guardians), and by recognizing the home as a potential site of anxiety, fear, or danger, I consider the relationship of belonging and safety (emotional, physical) to that of sexual wellbeing.

This project addresses the large gap in the literature on young sexual and gender minority's sexual wellbeing. By using focus groups to learn the lived experience of cis-gender, nonbinary and trans youth in the GTA, ages 16-19 who identify as heterosexual, trans, and/or nonbinary, it also attends to the literature gap on gender and sexual minorities experience of home in Canada. This research examines how sexual wellbeing is both an embodied, porous, and boundary-less spatial practice of discovery *and* a spatial practice of negotiation and boundary-making within the home during COVID-19.

While this thesis blends the newer geographies of home with the older geographies of health literature, health today "differ[s]from the previous positivist and biomedical conceptions, health today is commonly understood as being much more than the mere absence of disease" (Giesbrecht, Crooks & Morgan, 2016, p. 4). Today, we also understand *sexual* health to encompass more than simply contraception choices or the absence of Sexually Transmitted Diseases. Sexual wellbeing on the other hand, encompasses even more than reproductive decisions. It includes relationship maintenance, solo pleasure and sexual self-esteem, all of which involve emotional work and are dependent on spatial context. Applying geography to sexual wellbeing allows us to understand differences, similarities, oppressions, and privileges that exist in relation to the space they take place in. In addition to this, geographies of the home is an intimate geography that can acknowledge deeper inequities across space and can tell us more about what sexual wellbeing means to youth at-home.

This research will understand home similarly, considering the spatial differences amongst youth, and the wider social norms that make up the space. It will also seek the boundary and

boundaryless home in youth's interaction with Information-Communication Technologies (ICT). But "while the home can be a place of safety and security, it can also be a place of fear and danger" (Blunt, 2005, p. 509). In fact, it might be best to "view home as a site of and for ambiguity since its protective functions are interconnected with its limiting characteristics. Feelings of solidarity, safety, and protection are often achieved by severe acts of exclusion and regulation, which are in turn oppressive" (Schroder, 2006, p. 33). Therefore, this research will attend to the varied ways that sexuality is or is not expressed at home(s), who can practice it safely and where, as youth's sexual wellbeing and geographies of the home are intimately connected through their spatial and political implications.

More research is emerging showing that "during the lockdown our societies experienced the scarcity of space" (Risi et al., 2021, p. 471). Our job as geographers is to understand who is experiencing this scarcity most deeply and where it is taking place.

1.3 Research Questions

This research has two key objectives and within each of those objectives it answers 3 questions. The first key objective is to 1) *Assess how the home impacts adolescent girls', trans' and non binary youth's sexual wellbeing.* This will answer (i) How do adolescent girls, trans and nonbinary youths understand sexual health and wellbeing? (ii) How has the quality of sexual relationships and wellbeing changed by being home more often? (iii) How has being home changed how they practice sexual wellbeing? These questions reflect how home is a geography and converses with feminist literature to understand how place and self intersect through social understandings and individual desires. Therefore, these questions are about the understandings of privacy at home for sexual wellbeing and how they intersect with the individual youth's boundaries needed to practice it. The narratives that arise in seeking these answers contribute

youth's resilience and autonomy to the scholarly understandings of the home and sexual wellbeing.

The second key objective is to 2) *Evaluate the norms of sex and sexuality that exist in the homes of adolescent girls, trans, and nonbinary youth*. This will answer (i) What kinds of norms about sex and sexuality exist in the home? (ii) What does sexual wellbeing mean in different homes? (iii) How have these changed during stay-at-home and lockdown orders? Therefore, answers to these questions will examine the many ways that youth play a role in and against social reproduction and sexual norms at home during a pandemic.

1.4 Research Significance and Impact

At-home support through family connectedness and communication continues to reveal itself as a key factor in adolescents' healthy sexual development and sexual health outcomes (Blake et al., 2001; Aalsma et al., 2006; Needham & Austin, 2010; Rosengard et al., 2012; Wamoyi et al., 2015). A position paper by the Society for Adolescent Health and Medicine recommended that health providers influence policy related specifically to LGBTQ adolescents within the family structure or at home, as at-home support has been particularly critical for LGBTQ youth development and health outcomes (Reisner, et al., 2013). But adolescence is often distinguished by its move away from the family and the home. The creation of new friendships, the maintenance of old ones, and the development of romantic or sexual relationships begin in adolescence with about one in four Canadian youth reporting having had sexual intercourse by Grade 10 (Public Health Agency of Canada, 2020). These new relationships (and the emotional work needed for their maintenance) allow youth to learn important skills in relationship-building, intimacy, risk-taking and trust. Nevertheless, power relations and systems of oppression can hinder the development of these critical health skills. In

the Health Behaviour in School-Aged Children (HBSC) study by the Public Health Agency of Canada, youth engagement sessions revealed that gender issues and gender norms had a strong impact on adolescent health (Public Health Agency of Canada, 2020). Therefore, understanding youth's sexual wellbeing, and all it encompasses from risk-taking to sexual and gender identity, are stepping stones to understanding overall health and wellbeing and what gives their life value, importance and affirmation. Ahmed (2000, p. 41) discusses how viewing the body as "already determined and as differentiated in terms of gender and sexuality, and also race and class, does not always involve in practice an analysis of the particularity of bodies or of subjectivity in general" . Therefore, in this thesis I view gender and sexuality as a spectrum, where specific identities are named and others have no name. More simply put, this thesis respects how participants identified through the ways they expressed, defined, negotiated and created their identity. By framing identity in this way, as well as seeing sexual wellbeing on a spectrum, we can understand how power relations intersect with space and youth's sexual wellbeing at home, which is a site that has only been intensified since COVID-19 and stay-at-home orders.

Lorimer et al. (2019, p. 849) argue sexual wellbeing has no singular definition, but emerging literature has shown how critical it is to understand sexual wellbeing as experienced through the individual, but also influenced by society and wider structures. This research will add to the individual experience that is socially/structurally influenced, to understand how it is also spatially influenced at home. COVID-19 distancing requirements and the increase in virtual meetings have impacted adolescent girls', trans', and nonbinary youths' sexual relations and wellbeing. These impacts reveal the geography of the home as a space where power relations are also spatial practices.

How home affects youth's sexual wellbeing during COVID-19, from relationship maintenance to sexual pleasure is time-sensitive, and this research can attend to it. While COVID-19 restrictions over the past year have provided the close proximity to the home and family that is necessary for some youth to learn more about sexual health, the COVID-19 pandemic has also furthered inequities, adding to the toxic misinformation or abuse from some home environments. Therefore, this research will also give voice to the toxicity of some family experiences and the negative effects of stay-at-home orders.

This research will yield a more holistic understanding of youth's sexual wellbeing at-home during COVID-19. To approach this, intersectionality and embodiment is required in order to fully acknowledge the multiplicities within girls', trans', and non-binary youths' experiences, which is vital in constructing healthy sexuality. Just as Taylor (2009) seeks to look beyond intersectionality as simply theory toward intersectionality as lived experience, this research seeks to understand how COVID-19 and its every day consequences— physical distancing, social isolation, online communication, and school cancellations are impacting young people's sexual wellbeing. Daily interactions with social media, sexting and online chatting has become a major means of expressing sexual desires for youth (Public Health Agency of Canada, 2020). This research will add to intimate geographical literature by understanding how to support young people's healthy sexual relationships and wellbeing during and after COVID-19.

Understanding how geographies of the home play a role in sexual wellbeing is vital to understanding *how*, *when, and where* girls and young women practice sexual wellbeing and how sexual wellbeing can be an embodied spatial practice at home. During COVID-19, the home is a space that reveals how place shapes experiences of sexuality and sexual wellbeing, and ultimately sexual health outcomes. Home, sexual identity and wellbeing intersect in the intimate

spaces of the home by the influence of wider social norms, gendered boundaries and ICTs. This research will reveal an understanding of how young people attend to their sexual relationships and wellbeing, as well as the complex work involved in maintaining it during the COVID-19 pandemic.

1.5 Organization and Limitation of Study

This project was run in partnership with Dr. Alanna Goldstein, a Postdoctoral Research Fellow at York University, Dr. Sarah Flicker, professor at York University and undergraduate student, Stephanie Giroud. My thesis research was funded in part through the Social Sciences and Humanities Research Council of Canada. The project team was funded in part by the LaMarsh Centre for Child & Youth Research in partnership with Planned Parenthood Ottawa through the Dr. Eric Jackman Health Scholars Award. This research is working to provide PPO with information on the changing needs and wants of youth who are dating, relating, and seeking sexual health supports in pandemic times. This partnership allows us to support PPO's mandate of providing diverse youth with information and resources to support them in healthy decision-making about their sexual wellbeing, health and relationships. The findings from the study will also more broadly be used to make recommendations for how educators, parents, and community organizations serving youth can better support and assist young people to develop and maintain healthy dating relationships during COVID-19. In addition to this, I received the LaMarsh Graduate Student Award fund for the interdisciplinary nature of my research and its following of LaMarsh's mission to conduct research that is relevant to Canadians within a collaborative and community-engaged group of both faculty and students. Working with the LaMarsh Centre has allowed me to take a geographical look at LaMarsh's mandate of promoting youth's development and resilience.

Dr. Sarah Flicker and Dr. Alanna Goldstein's previous experience in working with youth and vulnerable communities was extremely beneficial to my growth as a focus group facilitator. Rotz et al. (2021, p. 2) argue that "the reflexive process ought to be embedded in [research] team dynamics" in order to craft an intersectional gender analysis in health research. Flicker and Goldstein's mentorship and guidance informed the way I engaged with participants and encouraged me to always remain reflexive in my positionality.

Dr. Flicker and Dr. Goldstein's research goals and questions differed from my own, but helped me to understand where geography intersects with other fields. Their research focused on young people's experiences around dating relationships and how communication in relationships has changed due to COVID-19 distancing. Flicker's disciplinary background is in social science and health, focusing on the engagement of youth in sexual and reproductive justice. More broadly, she works in community-based participatory methodologies and currently researches adolescent sexual and reproductive health and responding to gender-based violence in Canada. Goldstein researches intersections between youth, sexuality, and media. Undergraduate student, Stephanie Giroud, focused on mental health aspects. Despite their backgrounds which garnered different research questions relative to my own, I was able to infuse sexual wellbeing and the home into the focus groups as a sub-theme within wider questions about relationships.

A clear limitation to this research comes from the COVID-19 pandemic and our inability to enter research participants' homes or speak with them in-person. Focus groups had to be conducted virtually via Zoom, therefore the ethical considerations for this study included the risks of doing research with youth - a vulnerable population, as well as the risks of conducting research virtually. The risks of conducting research online are multiple. Not only are there technical limitations such as decreased ability to read social cues and lack of body language, but

more ethical risks, particularly concerning anonymity existed. Flicker and Guta (2008, p. 7) outline how to ethically approach adolescent participation in sexual health research, particularly the importance of "paying maximum attention to issues of confidentiality and anonymity". Ensuring anonymity means that vulnerable populations are often more protected from harassment, exposure outside of the group, and feel more comfortable sharing their opinion in the group setting. But anonymity still holds a twofold risk: Whether participants felt truly anonymous was a potential risk, as well as the risk of knowing that the group *was* anonymous and thus, could turn into an unsafe place of harassment due to the guise of anonymity. There was also the technical risk of a Zoom malfunction, where the focus group timeline could be disrupted due to technical difficulties. In terms of emotional risks, a sensitive topic online could foster emotional reactions or triggers that leave participants feeling alone or confused. Additionally, the lack of in-person or face to face connection could aid in the confusion, loneliness or anxiety of participants who are already vulnerable.

At times, information about individual experiences was hard to build out, as participants seemed to build a slow connection to others as the focus group went on. Therefore, questions that may have been asked at the beginning of the discussion sometimes were left lacking in detail or depth. Therefore, focus group discussions had a timeline that started with a generalized discussion of the home, before getting into the specifics of individual boundaries, needs and desires. Information on intimate topics such as masturbating was particularly hard to glean, as often participants were still aware of potentially being overheard by other home members or felt shy disclosing this type of personal information to a group of strangers. While many participants did discuss insights and/or experiences of harassment, there were notable silences in some groups on the topic. For instance, we did not hear stories of physical violence, even though we

know that rates of gender-based violence have increased during the pandemic (Mittal & Singh, 2020). At times, some discussions were also hard to gather momentum on, especially when some young people decided to rely upon the chat function in Zoom to share their experiences and insights. But the chat function did mitigate the methodological challenge of participants who might feel speaking to be too vulnerable or unsafe. Having the chat function open followed and respected our Safe(r) Space Guideline.

Another clear limitation to this research is that this was a small, qualitative, self-selected sample of young people who all had access to the technology, resources and negotiated privacy to participate. Therefore, the results may not necessarily be generalizable.

1.6 Chapter Outline

In the thesis chapters that follow, Chapter 2 situates the home and sexual wellbeing in the literature. It takes a feminist geographical lens to the literature, focusing on the home as a site in feminist scholarly work, youth and wellbeing in relation to space, and the soundscapes of home. It also defines sexual wellbeing, the current landscape of sexual wellbeing in practice in healthcare, and most critically youth's sexual wellbeing at home and who is practicing it safely. The theoretical framework is outlined from intersectionality to embodiment, locating the body as an important spatial site in the home and justifying intersectionality and embodiment together as a theoretical framework for this research.

Chapter 3 looks at methodology and ethics. First, I outline why I prioritized feminist ethics and feminist geographical methods. Then I discuss intersectionality as methodology, my positionality, and what it means to be in the field, online, during a pandemic. I also discuss how our research team trained and planned data collection. I bring up the way I prepared for methodological questions and considerations by employing a feminist ethic centered on care,

collaboration and a recognition of the field being everywhere. I describe our team dynamics, including our partnership with Planned Parenthood Ottawa and the LaMarsh Centre for Child and Youth Research. Later, an overview of the method is presented, along with how I learned about the radical focus group. Finally, selection criteria, recruitment, results, and the demographic survey process is detailed before a description of my coding and analysis experience.

Chapter 4 is a precursor for my main arguments on the bedroom and sound, seen in Chapter 5 and 6, respectively. Chapter 4 focuses on narratives of home as relational and mappable. With the conceptual anchor being the use of maps, particularly how mapping reveals these narratives of home and these relations, I use three "types" of homes: queer homes, intergenerational homes, and single parent homes and their subsequent maps, to argue home as both plural and perspective.

Chapter 5 looks at how youth are negotiating and making boundaries for sexual wellbeing in their 'private' bedrooms. Expanding on McRobbie and Garber's (1976) concept of bedroom culture, I argue the bedroom is not just as a site of cultural production, but one of negotiating for sexual wellbeing and therefore, agency of self. While McRobbie and Garber (1976) saw the bedroom as a significant site of privacy and personal space, they neglected to describe the boundary-making processes that make that place private and personal. Ahmed (2014) said that emotions are a boundary-making force and Massey (1993) argues that place is made through power relations which create and uphold norms and define boundaries. Therefore, for the purpose of this thesis, I do not see boundaries as a divider between things, but rather as identity-work in place. Discussing the spatiality of the 'private' bedroom and considering physical boundary-making, as well as the notion of the bedroom as refuge or best option, I argue

the bedroom is a space that youth made their own through physical, social, and mental boundaries, as Hernes' (2004) three-piece framework for studying organizational boundaries relies on. This chapter refers to embodiment theory to understand how the sexual and the private takes up space in the body, within the bedroom. It also uses intersectionality to reflect youths' experience within it.

Chapter 6 looks at sound's place in boundary-making for youth at home, especially as sound often goes invisible in boundary work research. I argue girls, trans, and non-binary youth crafted power by constructing a soundscape at home that would allow them to practice sexual wellbeing better. I outline sound warnings, being unheard, toxic sounds, as well as 'silent reassurance', a term I coined to describe girls' reliance on silence as a precursor to comfortable practicing. I also discuss toxic sounds. Going beyond the concept of sound as boundary-making, I discuss sound's use as negotiation for privacy warnings, such as knocking. I pull from Hernes' (2004) concept of the 3 types of boundary work: *physical*, *social* and *mental,* extending the concept further, to argue sound is an additional type of boundary work, particularly at home during a pandemic for youth.

Chapter 7 concludes this thesis with a discussion of how to better support youth and the lessons I've learned from fieldwork. It looks at limitations, gaps and future work to outline which youth are missing from these conversations. I also make recommendations on how to do better research with youth and support their sexual wellbeing. Going beyond assumptions of the "nonautonomous teen", this research documents the ways that young girls, trans, and non-binary youth exercise personal autonomy, find belonging, develop their identities and are resilient, during COVID-19.

CHAPTER 2: SITUATING THE HOME AND SEXUAL WELLBEING IN

GEOGRAPHY: LITERATURE REVIEW AND THEORETICAL FRAMEWORK

Given that "the sexual self is always a spatialized self" (Hubbard, 2018, p. 1296), this literature review expands across many fields and spaces, including: children and youth geographies, health geographies and geographies of home. The common thread amongst these fields is the work is produced by feminist scholars, or I bring in the critique or understanding of feminist scholars. This body of feminist work is often overlooked in mainstream geography. This literature review seeks to disrupt the notion that feminist geography is a singular domain, as well as the notion that is only useful as an addition to interdisciplinary work. Instead, I welcome a range of literature that gives recognition to the many feminist scholars that go unheard in the discipline while developing a theoretical framework for this research that is both feminist and geographical.

2.1 The Home as Site in Feminist Geography

Tuan (1977), a humanist geographer who influenced the work of feminist scholars, sees space as a physical arrangement, while place is something that generates meaning, belonging, and identity. Newer understandings of place have emerged due to feminist scholarship which understands it as dynamic, fluid and constantly changing. Home as a site of transformation has been studied since Buzar, Ogden & Hall (2005) and feminist geographers have continued to take up the call for more intersectional approaches in studying the home (Tarrant & Hall, 2020). Health geographer, Dyck, explores everyday spaces through a feminist lens. Her work on feminism and health geography was pioneering (Dyck, 2003). She also wrote about the home as a site for health geography research through her work on women with disabilities (Dyck, 1998). She has outlined many other feminist geographers who did the same, such as Litva et al. (2001)

on beauty and health, and Moss (1997) on older women with arthritis. Since these works, research on geographies of home show how the home intersects with identity and belonging, moving "beyond the separation of public and private spheres" (Blunt, 2005, p. 509). Feminist geographers propose that the home is made up of multiplicities that contrast one another, making it a rich site to explore power and identity (Blunt, 2005; Blunt & Dowling, 2006; Blunt & Varley, 2004; Domosh, 1998; Duncan & Lambert, 2004; Varley, 2008; Young, 1997). Many continue to argue that the meanings and understandings of home are infinite (Holloway & Hubbard, 2001, p. 95), from creative place-making in suburbia (Bain, 2014) to single people's experiences of home (Wilkinson, 2014).

Recently, scholars have connected geographies of the home to wider ideas, such as global mobility and neoliberal migrant labour market regimes (Walton-Roberts, 2010) or the shaping of masculine subjectivities, as Gorman-Murray (2015) argues young men are 'out of place' at home, or transgender subjectivities, such as Andrucki and Kaplan's (2018) article on objects that perform transness at home. It is these intersections of social identities and an understanding of what it means to be at home that has propelled feminist geography into a better understanding and prioritization of the lived experience.

A field of research that relates closely to home, is that of youth geographies. Valentine (2003a, p. 39) identified the need to recognize how "social identities such as gender, class, race, sexuality" intersect with youth. The site of the home has the potential to roof these identities. When looking at youth geography literature specifically, this thesis prioritizes adolescent girls, trans and nonbinary youth in relation to space and wellbeing, due to its connectedness to sexual wellbeing.

2.1.1. Youth, Wellbeing and Space

Studies of youth in space have encompassed how youth's identities are made in space (Holloway & Valentine, 2000) to how youth's wellbeing is affected by space. Recent literature in geography understands relationships between wellbeing and space, revealing space as a dynamic and involved piece in shaping wellbeing. Similar to how I define sexual wellbeing for the purposes of this thesis, wellbeing alone is generally understood as a holistic understanding of feeling that one is living a life they feel capable and free in, and therefore not simply an indicator of good health.

Grant, Gorman-Murray, and Walker (2021) use Fleuret and Atkinson's (2007) 'spaces of wellbeing' framework in their analysis of how spatial restrictions during COVID-19 have impacted LGBTIQ people's wellbeing in Tasmania, Australia. Fleuret and Atkinson's (2007, p. 113) framework outlines four forms of spatial construction that make up wellbeing geography, including: *spaces of capability* (where space might help or hinder wellbeing through the potential to self-fulfill based on how processes such as stigma might affect wellbeing), *integrative spaces* (where joining communities that have "social associations" especially when they are local in scale, impacts wellbeing), *spaces of security* (where risk can be compared and connected to "social, spatial and individual support, and sensations, feelings and perceptions" , and *therapeutic spaces* (where space has potential to be a site of healing). This framework is key in geographies of wellbeing, where wellbeing and space itself are both seen as contextual and dynamic.

COVID-19 and its impacts have also played a massive role in recent youth wellbeing literature. The pandemic has interrupted many of the "normative aspects" of adolescent development, such as independence and stronger relationships with peers (Lindberg, Bell & Kantorp, 2020, p. 75). Youth are also facing increased parental monitoring and reduced privacy,

both of which will have major effects on youth's development in the future (Lindberg, Bell & Kantorp, 2020, p. 75). The literature has continued to show that privacy is essential to youth's wellbeing, and boundary-making and negotiating for privacy in spaces has been shown to aid in youth's wellbeing, such as Gale and Park (2010, p. 35) who found that "setting up boundaries can help individuals cope with aspects of infringement on areas they feel they have control over". While research on lockdown's effect on mental health and wellbeing continues to emerge, it's important that we pay particular attention to youth. Recent research on remote workers during lockdown highlights how "everything is inside the home" (Risi et al., 2021, p. 474), meaning their work, their family, and their leisure. We must also understand what this means for youth.

By focusing on everyday life and negotiations made at home, one can understand how home becomes "imbued with meaning and is part of the process of identity-making and a matrix of social relations" (Forsberg & Strandell, 2007, p. 395). The home remains a critical place for better understanding "the embodied, everyday socio-spatial relations through which subjectivities are forged" (Hörschelmann 2017, p. 236), so it is crucial that we pay attention to the everyday experiences youth have there.

2.1.2 Boundary-Making At Home

Tuan (1977) saw home as incredibly important during recovery from illness, due to its association with care. But home is not always a caring place and health encompasses more than just recovery from illness. Take sexual wellbeing, which is a relevant health issue that takes work, practice and space. How does one create the necessary boundaries in order to practice it?

Lamont and Molnár defined symbolic boundaries as "conceptual distinctions made by social actors to categorize objects, people, practices, and even time and space" and "examining

them allows us to capture the dynamic dimensions of social relations" (2002, p. 168). Social boundaries, on the other hand, are "objectified forms of social differences manifested in unequal access to and unequal distribution of resources (material and nonmaterial) and social opportunities" (ibid.). The most important thing to note here is that it is only when the symbolic boundaries are actually agreed upon that they can "take on a constraining character and pattern social interaction", that only then can they become actual social boundaries that create social exclusion (ibid, p. 168-169). All of this to say that boundaries at home exist within both categories, symbolic and social. I argue that the symbolic boundary of home as completely private, creates a dangerous social boundary where opportunity, access, and difference becomes invisible in individual homes.

Lamont and Molnár (2002, p. 171) define boundary-work as the "kinds of typification systems, or inferences concerning similarities and differences, [that] groups mobilize to define who they are". Mobilize is an interesting word here, as geographers would later come to see boundary work as always in movement. Take Beasy et al.,'s (2021) study on the boundaries of place and identity during schooling at home during COVID-19 which reveals how boundary making is "continuous" (Beasy et al., 2021, p. 343). This fluidity continues across physical, social and mental boundaries, into auditory, as well.

Auditory boundaries are also important to consider in geographies of home. Knocking on a door, for example, has many meanings and negotiations. Knocking can be a form of announcing one's self (such as a parent to a child), or a request for a warning before entering (such as a child requesting a parent knock before entering their bedroom). Parke and Sawin (1979) found that as a child transitions to adolescence, requests for knocking on bedroom doors increases and that both mothers and fathers knock more frequently on daughter's doors than on

son's. This points to a gendered power relation at home where girls are surveilled more often than boys.

Physical manifestations of requests for privacy are also important to note in geographies of home. Parke and Sawin (1979) found that as children transition to adolescence, they make greater use of physical privacy markers, such as closing the door to the room they are in, most often the bedroom. They also found that a larger home size was not directly linked to youth's ability to find privacy, but rather the number of bedrooms and the number of bathrooms per person (Parke & Sawin, 1979, p. 96).

A theory that illustrates youth's new challenge to combine privacy, sexual wellbeing. school, friends, work, and family life all together at home is Clark's (2000) Work/Family Border Theory. The theory posits that boundaries between family and work can be physical, like walls or doors, which clarify exactly where certain work practices take place (e.g., in the bedroom). One might even argue that the spatial boundary can define *when* the work is done *(*when the door is closed). She also argues that every boundary or border is permeable. For example, in this thesis, while a bedroom with a closed door may represent a youth's private space, the boundary is incredibly permeable if a sibling walks into the room without knocking. She also says boundaries are flexible, which can be seen in this research, where youth have certain times when they do not want to be interrupted in specific spaces. While work is not the same as sexual wellbeing, sexual wellbeing practices *take* work and youth take up space in their places at home. Similarly, we could discuss sound's place in the home, as sound takes work and takes up space there.

2.1.3 Soundscapes of the home

Sound as essential space was first described by Smith (2000), as where we listen and what we are listening to allows us to understand ourselves in relation to space. Geographies of home specifically have utilized sound as an emotional dimension of space. For instance, Duffy and Waitt's (2013, p. 478) work which found "through the practices and performativities of hearing and listening to everyday sound, participants provided a grounded and embodied sense of themselves and their cultural specificity." Soundscapes of the home remains an important theme in geographical literature, especially for youth, as small moments of sound "can tell us much about the larger social forces operating within the everyday life" (Duffy & Waitt, 2013, p. 47). The pandemic has also sparked literature looking at places such as the garden as havens during the pandemic (Marsh et al., 2021).

The consideration of sound has started to emerge more recently in the children and youth geography literature. In addition to this, tensions due to sound and smaller homes have recently emerged as an issue (Kerr et al., 2018) as well as sonic geographies *of* childhood (Mills, 2017). Both concepts are timely to the COVID-19 pandemic's lockdown orders. A rich literature on the pandemic's effect on sound and home is continuing to unfold, such as Torresin et al. (2021) who recently found that the perceived acoustic conditions of home during the pandemic had a direct correlation to occupantś well-being. Results revealed that during relaxation time, "music and TV were reported to overpower the sound environment with sounds over which people had control" (Torresin et al., 2021, p. 9) while during working from home, many "expressed the beneficial effect of listening to sounds in the background compared to having a completely silent environment" (p. 9) as this helped them feel less lonely, provided them with a connection to the outside world as well as "feel comforted by the sounds of the family" (p. 8). Both scenarios explain how the perceived soundscape at home is vital to wellbeing.

Soundscapes of the home are now being understood more in relation to perceived privacy. Take Gale and Park (2010, p. 34) who looked at the impact of environmental factors on privacy at home, finding that many youths they interviewed voiced privacy issues related to the acoustical properties of the home, such as the sound carrying, to the point where the youth chose to leave the home to take private phone calls. Children's geographies specifically, has called for more work on the sensory/sound experience of the home (Wilson et al., 2012), as auditory buffers have been found to be major factors in privacy (Lincoln, 2005). Sexual wellbeing is another experience at home that relies on both privacy, sounds, and senses, but is lacking in the literature on youth.

2.2 Defining Sexual Wellbeing

While new understandings of place have emerged thanks to feminist scholars who see place as fluid and dynamic, similarly, understandings of health, specifically in Canada, changed with the Lalonde report (1974). The Lalonde report (1974) advocated for a social understanding of health. Health geography itself shifted similarly later when Kearns (1993) called to move away from the biomedical understanding to a more holistic health geography which would prioritize the lived experience, a concept that feminist scholars have long advocated for (MacKay, 2019; MacDonnell & Andrews, 2006).

When, in 2007, a World Health Organization/United Nations Population Fund (WHO/UNPF) working group met to define 'healthy sexuality', they found difficulties with the term. They found that the term 'healthy' sexuality implied there was an 'unhealthy' sexuality which could be used to "discriminate against sexual behaviour considered to be 'unacceptable' by some segments of society", such as LGBTQ2+ identities or polygamy (World Health Organization, 2010, p. 4). WHO then considered the term 'sexual health', which seemed to be

more appropriate for a public health approach, but found the term did not encompass the whole of sexuality either, as they argued that healthy sexuality could be seen simply as a precondition to a "more readily attainable" sexual health (WHO, 2010, p. 4). Thus, the term 'sexual wellbeing' was discussed. While sexual health indicators have been defined for years, sexual wellbeing indicators have not (Hull, 2008). The challenge WHO found with the term was that the "definition and understanding of 'well-being', [was] likely to be culture- and context-specific" (WHO, 2010, p. 4). Since then, social scientists, notably feminist social scientists, have accepted this so-called "culture and context-specific" notion, not by fighting it, but rather welcoming the nature of a culture- and context- specific 'definition' to sexual wellbeing's holism. Crenshaw's (1989) theory of intersectionality has often been the theoretical framework used to look at wellbeing as it intersects with sexuality, class, and gender, including work with youth (McDermott, 2010). More on intersectionality as theoretical framework will be discussed later, but it is the feminist theory of intersectionality that, when combined with sexual wellbeing, can account for a definition that is feminist, culture- and context- specific.

Lorimer et al.,'s (2019) rapid review on definitions of sexual wellbeing looked at how sexual wellbeing is quantitatively measured and qualitatively understood. Lorimer et al., (2019) found three main understandings: cognitive-affect, interpersonal, and socio-cultural. Lorimer at al.,'s (2019) review reiterated the importance of conceptualising sexual wellbeing as socially influenced, but ultimately, the importance of it as individually experienced. They argue because "if a measure of sexual wellbeing is more likely to be a self-assessment by individuals, then selecting relevant dimensions is vital to ensure the measure is appropriately capturing all aspects of sexual wellbeing" (Lorimer et al., 2019, p. 844). While these dimensions are different depending on research goals or theoretical framework a study might follow, they should

understand people's ability to "lead a life they have reason to value" (Lorimer et al., 2019, p. 844). Yet, Lorimer at al. (2019) maintains that there is no measure of sexual wellbeing that is truly multidimensional. Whereas some have argued there is the potential for a public health approach to sexual wellbeing, where "indirect assessments of sexual pleasure could be used as a marker for sexual wellbeing" (Ford, et al., 2019, p. 224), this thesis rests on the theoretical framework of intersectionality, taking the perspective that sexual wellbeing cannot be measured and that an understanding of the lived experience is what best defines it. Lorimer et al. (2019) argue that setting forth dimensions, such as mindfulness which has been considered a factor with sexual satisfaction, and therefore sexual wellbeing (Leavitt, Lefkowitz & Waterman, 2019), is critical in understanding the capability that individuals have in achieving/maintaining sexual wellbeing, but how to measure it remains contested. Therefore, this theses' approach instead gives value and importance to intersectionality theory (or lived experience) as the lens through which to understand an individual's capability.

2.2.1 Neglecting Place: The Current Landscape of Youth Sexual Wellbeing in Health Care Settings

While work has shown that youth are interested in the support and maintenance of their sexual wellbeing (Mitchell et al.,,, 2016), it has only recently been considered as a holistic care provision by some clinicians, combining it with contraceptive consultations (Garrett & Vaisey, 2020). Additionally, Canadian literature that concerns sexual and reproductive health highlights gender, sexual identity, and safer relationships as high concern for adolescents, but the literature neglects to understand sexual wellbeing as an embodied, individual experience that is influenced by one's environment, not just one's identity. Take, for example, Johnson's (2020) article that offers a 7-P approach for sexual and reproductive health to health care providers: Partners,

Practices, Protection from sexually transmitted infections (STIs), Past history of STIs, Prevention of pregnancy, Permission (consent), and Personal (gender) identity. It is important to communicate that a health practioner approach to sexual wellbeing is very different from that of a critical feminist geographer's approach. For example, while Johnson's (2020) framework is intersectional (accounting for LGBT teens as well as those with developmental disabilities and chronic health conditions), it neglects to consider place and its relation to sexual wellbeing. Johnson (2020) says that "offering an inclusive, open, and welcoming space where no-one makes assumptions about identities, attractions, or sexual behaviours is an important component of care," but neglects to offer possibilities of where this space could take place, outside of the doctor's office, or where these spaces may exist already.

A review of sexual minority women's (SMW) experiences of healthcare in the United Kingdom found that SMW had worse health experiences than heterosexual women, which might impact not just access and service uptake, but also health outcomes (Meads et al., 2019). The review found that the SMW experiences in doctor's offices and medical appointments was filled with assumptions of heterosexuality, but that it was the first impressions they received via "visual and non-verbal" cues in the environment, such as images in leaflets, waiting areas, and forms that often precluded and set up the heteronormativity that they would encounter in the consultation. Meads et al. (2019, p. 13) argue that the visual environment of the doctor's office has the potential to be supportive or it "can reinforce that their identity is not recognised and give a perception of exclusion". Therefore, Meads et al. (2019) call for the visible, non-verbal inclusion of SMW in order to overcome assumptions of heterosexuality and welcome into clinical settings.

Recent efforts to normalize the discussion and integration of sexual wellbeing into health care would benefit adolescents, especially girls, trans and nonbinary youth, who are often underserved by sexual health policies, education, and curriculums. Hankivsky and Christofferson highlight the small attempt made by CIHR in 2006 where a gender and sex-based analysis guide for health research was created (CIHR, 2006), but Hankivsky and Christofferson (2008, p. 273) note that still "gender and sex as separate determinants/variables are often confused" in determinants of health research in Canada .

Lorimer et al.'s (2019, p. 851) final recommendation strikes the tone that feminist geographers have been researching and understanding over the last 20 years: "We should also ask people what they actually value for their sexual wellbeing – their priorities to live a life they have reason to value". It is Lorimer et al.'s (2019) call for prioritization of lived experience and sexual wellbeing research and WHO's (2010, p. 7) call for further research on "the meaning of sexual well-being in different contexts" that continues to be taken up by feminist geographers and hopefully, in some small way, by this dissertation. Youth's sexual wellbeing has been particularly invisible in home geographies, but a feminist lens, and attention to a holistic definition of wellbeing can begin to reveal it.

2.3 Youth's Sexual Wellbeing At Home

Notions of what a family is have changed as feminist geography and sociology has gone beyond ideas of the family as a bonded group with specific roles. Today our understanding of "family ties cross social expectations of heteronormativity or institutionalization of partnerships, and they are increasingly based on individuals' feelings of intimacy and on commitments that individuals subjectively choose" (Castrén & Widmer, 2015, p. 36). Therefore, we see the family as a web of individual connections and feelings towards a specific other. Some of these relations

come together under one home, others are spread out across cities or countries. Nonetheless, this thesis sees the home as the space that these relations reveal themselves. It is unsurprising then that many studies have found the family and the home influence teen's sexual health decisions (Aalsma et al., 2006; Challa et al., 2018; Grossman et al., 2019). Studies have also found that skills like assertiveness during teen years are positively associated with relationship problem-solving, and that youth's positive engagement at home has been associated with "feeling more love in young adult romantic relationships" (Xia et al., 2018). Additionally, there have been studies that look specifically at parent-child communication and their outcomes on the age youth first engage in sex (Blake et al., 2001; Dittus et al., 1999), as well as parent's role as sex educators (Darling & Hicks, 1982; Feldman & Rosenthal, 2000), but there remains opportunities for research on adolescent girls' sexual health, especially that of trans and nonbinary youth, as spatially understood. A spatial understanding of girls', trans', and non-binary youths' sexual health is important because we can work towards understanding how power relations intersect with space and sexual health.

Studies have shown that open, frequent and positive communication within families about sex can improve consistent contraception use amongst adolescents (Wamoyi et al., 2015; Rosengard et al., 2012; Swain & Ackerman, 2006). In addition to this, acceptance and openness towards diverse sexual orientations at home has a positive relation to girl's sexual health decisions, with studies finding that girls who had mothers that discussed diverse sexual orientations with them, were more likely to get a Papanicolaou test (Pap smear) (Johns et al., 2016, p. 104). Brown et al. (2021) also found associations between parent connectedness and healthy sexual decisions among transgender and gender-diverse youth. The home is also the place where many girls interact with sexual health for the first time, and many girls' despite

traditional gender norms and assumptions, are eager to learn more, as evidenced by a review by Turnbull, van Wersch and van Schaik (2008) that found, in general, adolescents *wanted* to learn about sex from their parents, in particular.

The literature has consistently shown the home to be a place where parental beliefs about sex affect the sexual wellbeing of the child, such as Swain and Ackerman's (2006) study that tested the relationships between parent beliefs about effectiveness, safety and usability of condoms and oral contraceptives with parent-teen sexual communication. They found parent effectiveness beliefs were directly related to parent-teen communication levels, specifically parents who did not see condoms as effective had reduced conversations about sex with their teen (Swain & Ackerman, 2006, p. 754). Byers and Sears (2012) found that the children of parents who did not believe condoms to be very effective, neglected condoms often due to parents' outright refusal to discuss them. Swain and Ackerman (2006) also found parents were less likely to talk with boys about contraception than girls, pointing to the sexual norm ingrained and encouraged in the home, where young girls are protected and cautioned to be more informed and responsible about sex than boys.

While the transition towards adulthood is often described as a moving away from the home, it has been shown that it is still a critical time where adolescents look to the home to acquire new skills, learn about relationships and develop self-esteem. Youth participants in the Health Behaviour in School-Aged Children (HBSC) study by the Public Health Agency of Canada (2020, p. 149) said that they "understood that becoming more independent is an important part of their development, [but] they viewed the corresponding declines in support as problematic," especially their feelings of disconnect from parents which some reported as having major impact on the wellbeing and self-confidence. Unfortunately, this Canadian study also

showed that most youth reported finding it easy to talk to their mother about their personal problems, but boys consistently reported feeling more at ease communicating with both mothers and fathers than girls did (Public Health Agency of Canada, 2020). The study also found that the older girls were the least likely to feel ease of communicating, particularly with fathers. In addition to this, Canadian boys are more likely than girls to report feeling understood by their parents. More hopefully, 58% of grade 10 girls reported that they felt understood by their parents in 2018, compared to only 45% in 1990, but this continues to decrease with youth's age. In addition to this, studies have found that more young women rely on peers and siblings for sexual health information compared to young men (Flicker et al., 2009).

Therefore, even though adolescence is often marked by more time spent outside the home, home still remains a critical site to study youth, especially in relation to sexual wellbeing. Additionally, the Public Health Agency study is missing a spatial component, a component that could point to the "why of the where" of parent-adolescent communication about sexual wellbeing. A spatial component reveals the value of a geographic approach and there remains much room for this in the literature.

2.3.1 Is "Home Sweet Home" Sweet for Everyone?

It is important to note that the literature on gender identities such as girls and their sexual health at home does not represent all girls, especially disadvantaged communities, queer, refugee, and disabled girls. Nor does it have much representation of trans girls or nonbinary youth. An intersectional analysis means paying attention to identities and how these interact or play a role in individual experience. A study by Davis, Gahagan and George (2013) on sexual health communication between Black parents and their children in Nova Scotia found that very few sexual health interventions directed at Black youth exist in Canada, which meant mothers

had to supplement with information at home. Additionally, Dilorio, McCarty, Denzmore and Landis (2007) found that Black mother's frequent conversations about sex were statistically significant predictors of sexual behaviors, including more contraception use from their teen girls. They also found that less open conversations decreased the likelihood that condoms would be used consistently, proving again the positive effects of open conversation on sexual health decisions (Dilorio et al., 2007, p. 196). Dilorio et al.'s (2007) study is important work in Canadian literature, as it takes on an intersectional framework, considering age, gender, sex and race in its analysis.

Ahmed argues in Antwi et al.'s (2013, p. 118) interview that while home is often symbolized by comfort, and holds "the capacity to withdraw from the strains and the stresses of the publics that we inhabit in a kind of anonymous way," she also recognizes it as a dangerous "image of domesticity". She warns that violence and trauma "can be concealed by this idealization" (Antwi et al., 2013, p. 118). At the same time, home can be a toxic source of sexual norms as conversations may be heteronormative or use homophobic language, excluding queer youth from important conversations at home (Schroeder, 2015), or they may include information based in harmful traditional gender norms (Teitelman et al., 2008).

In addition to this, studies have shown that transgender and nonbinary people experience violence more often than cisgender or gender conforming people in both public, online and private spaces (Bauer et al., 2015; Brown & Herman, 2015). A report by *Juristat* found that sexual minority Canadians were more likely to have experienced physical or sexual assault both since age 15 and in the past year compared to Canadians identifying as heterosexual (Jaffray, 2020). Valentine (2003a, p. 46) argues that there are "processes of marginalization" for disabled and LGBTQ+ youth within their own home, as most disabled youth have able-bodied parents

and many LGBTQ+ youth have heterosexual parents. For both groups then, the home often does not allow for the embodied experiences of LGBTQ+ or disabled youth in the same way as it might for an able-bodied, heterosexual adolescent girl. With parental influence often not aligning with the embodied experience of the LGBTQ+ or disabled teen, the parent cannot act "as a guiding 'norm'"(Valentine, 2003a, p. 47). Studies have found that a lack of understanding about non-heteronormative sexuality from parents is a barrier for queer youth's at-home conversations (Newcomb et al., 2018). In addition to this, the home can be outright violent. This was exemplified in a paper that described a woman's father attempting to influence her attitude towards sexuality by punishing her for if she used the word 'lesbian'" (Harris and Valentine, 2017, p. 508).

One might also consider where home is and is not for queer people, especially as queer people have been turned away or abused at emergency shelters (D'Ooge, 2008; Yamashita et al., 2017). Or take Matthews, Poyner, and Kjellfren's (2019) look at queer experiences of homelessness and identity, referring to home(o)normativity. Additionally, a call by feminist geographers for *queering* disaster research has been made (Dominey-Howes et al., 2014). To queer disaster research means to understand that sexual and gender minorities are absent in policy agendas related to disasters, and that to account for their wellbeing, we must seek and address their particular experiences. Specifically, we need to account for the "vulnerabilities, needs and resilient capacities of LGBTI populations" through recognizing that "LGBTI populations are not homogeneous and have different needs wrought by intersections of socio-economic resources, gender, race/ethnicity, age and regional or national location" (Dominey-Howes et al., 2014, p. 905). They outline how "social differences and uneven vulnerability and resilience" (p. 909) operate to further harm LGBTI populations, considering the heterosexual

assumption that prioritizes middle-class nuclear family suburban spaces post-disaster (p. 910) or how existing LGBTI discrimination increases due to "discourses by US right-wing religious groups, who assert natural disasters as divine retribution for those who 'sin' (and those who support them)" (p. 911). Zooming in to the daily experience of disasters for this population, trans and intersex people face challenges in shelters due to their gender identity being questioned and harassment for bathroom choice (p. 912). Dominey-Howes et al. (2014, p. 912) argue that "private spaces are important for LGBTI well-being, since minority sexual and gender identities are often publicly concealed and privately expressed". This relates to the COVID-19 pandemic as a disaster because wellbeing for vulnerable populations (adolescent girls, trans and nonbinary youth) is now even more dependent on private spaces at home.

Another way to consider the home and its role in sexual wellbeing is through refugee's understanding of home. Ideas of *where is* or *what is* home for refugee communities can vary as many refugees come to Canada to escape homophobic laws or cultural norms of their "home" countries (Ottosson, 2010). Yet, still refugees have "limited access to sexual health information and resources" and refugee youth are "particularly vulnerable to negative health outcomes" even once they move to their new 'home' (Kaczkowski & Swartout, 2020, p. 370).

But as a feminist definition of sexual wellbeing posits, there remains much more to sexual health and wellbeing than contraceptive decision-making. Studies have shown that open conversation in the home allows youth to better negotiate healthy sexual relationships (Teitelman et al., 2008). The ability to negotiate is also a vital aspect of the ability to embody, as Impett et al., (2011, p. 55) argue some forms of sexual education programs that teach negotiation, also have the ability "to enable girls to resist pressures to self-objectify". By resisting self-objectification, Impett et al. (2011) argue that girls can become embodied, leading to feeling

comfortable with their sexuality and having more confidence when negotiating sexual situations. Studies have also found that while globally, girls are often educated on menstruation, pregnancy, and birth (the more physical aspects of sexual and reproductive health), in many societies still, due to "unequal status, girls are unable to put this education into action, particularly in sexually coercive situations" (Uraiwan et al., 2006, p. 2076).

Literature has also looked at vulnerable adolescent populations and the sexual wellbeing messages they have received. Rosengard (2012) looked at sexual health messages specifically 'at-risk' teens received in the home. Youth deemed these messages as negative, cautionary, and lacking in detail (Rosengard, 2012). It's clear that at-risk youth have different experiences in the home compared to those who are not, therefore an intersectional lens would better account for their experience. Additionally, embodiment theory could account for at-risk youth who frequent places other than home during the day, such as youth groups, or in Rosengard's (2012) case, those involved in the juvenile justice system or alternative high schools.

Gender as an identity has been found to have major impacts on wellbeing. Take the Public Health Agency of Canada (2020, p. 148) which found that "almost universally, participants identified various ways that gender can impact upon well-being, as well as the ways that gendered norms influence and create barriers for them as they grow and develop". Take a study set in Toronto which found that parental decisions around children's independent mobility (CIM) is gendered, and that boys enjoy significantly higher CIM than girls do (Mitra et al., 2014, p. 3414). Furthermore, the COVID-19 pandemic is a unique situation with implications for queer girls' sexual wellbeing, especially when queer people are experiencing poorer mental health than the wider population (Alessi, 2014; Bauer et al., 2015; Branstrom, 2017; Lewis, 2009), particularly LGBTQ youth (Perales et al., 2020). Therefore, this vulnerable population is also

potentially especially affected by COVID-19 restrictions and their related health disparities. With support at home being a major recommendation for helping queer people's mental health (Wilson & Cariola, 2020), it is vital that we understanding youth's feelings on home and the norms that inhabit it and its impact on sexual wellbeing.

While current literature has consistently found the home to be a key space influencing youth's sexual behaviour, (Coleman-Minahan & Scandlyn, 2016; Orihuela et al., 2020; Needham & Austin, 2010; Schroeder, 2015), there are notable gaps in research on the embodied experience of girls. In particular, the family has been shown to affect girl's decision on contraception use (Wamoyi et al., 2015); and age of sexual debut (Oshi et al., 2019), but the lived experience of girls' and *their* understanding of home in affecting their sexual wellbeing is lacking. Most importantly, existing literature on girl's sexual health at home does not represent all girls, especially disadvantaged communities, queer, refugee, and disabled girls. Nor does it speak to trans or nonbinary experiences. Therefore, this research is answering that call.

2.4 Theoretical Framework: From Intersectionality to Embodiment

This research employs intersectionality and embodiment as lenses to view the home as an everyday site of embodied sexual wellbeing. My research conceptualizes sexual wellbeing as lived experience, the home as it's spatial site, and COVID-19 pandemic as it's temporal dimension. This framework directed the research process, research design, and methods and was used to organize and structure the analysis, interpretation and synthesis. Understanding truth as existing in everyday living was this theses' feminist response to a field that is constantly pushing quantitative data as paramount.

Hubbard (2018, p. 1296) argues that "sexual practice and identity are being subject to a violent abstraction, with the researcher forgetting that sexuality always has a geography as well

as a biography". It's this notion that highlights the importance of embodiment (sexual practices) and intersectionality (identity) as theoretical frameworks in this research. Therefore, these theories were used during my analysis, in order to account for sexual wellbeing's narrative spatiality and temporality.

2.4.1. Intersectionality: A Feminist Call at Home

Intersectionality theory comes from Crenshaw's (1989, p. 140) writings that critiqued "how dominant conceptions of discrimination condition us to think about subordination as disadvantage occurring along a single categorical axis." The concept of intersectionality opens up a new lens from which to view research and understand experience. In geography, Valentine (2007) has highlighted the spatiality of intersectionality and in health geography, intersectionality considers "all the complex relationships between mutually constituting factors of social location and structural disadvantage in order to map more accurately the determinants of equity and inequity both within and beyond health" (Giesbrecht et al., 2016, p. 23). Health researchers have only considered intersectionality theory explicitly more recently. In fact, Veenstra (2011, p. 3) argues that in Canada, "many health determinants researchers have unintentionally addressed simultaneity and multiplicativity by identifying two-way statistical interactions between axes of inequality in regression modeling". Regression modeling in health research in Canada (Lacey et al., 2021; Lebrun & LaVeist, 2011; Wu & Schimmele, 2005), while important, cannot adequately account for the multiple identities at play in health-related outcomes. As Bowleg (2008) argues, 'intersectional' research is too often additive. Intersectionality, on the other hand, accounts for meaningful interactions between identities, layers of oppression and health outcomes that not only rely on these interactions, but the space and time in which they take place.

Intersectionality not only accounts for lived experiences and differences, but also provides a way to create better interventions that are just and relevant to young women, as a community (Giesbrecht et al., 2016, p. 23). Therefore, an intersectional lens provides a greater scope for understanding the differing roles that families may play in specific demographics, such as Coleman-Minahan and Scandlyn's (2016) study on the role of older siblings on the sexual health of girls. Crooks and Giesbrecht (2016, p. 241) call for diversity-based approaches in health geography, including intersectionality, and ask scholars to be reflexive throughout their entire research process in order to see "health-related problems in completely new ways". Therefore, by engaging with intersectionality theory in this proposed research, reflexivity and collaboration within the research team was prioritized.

The HBSC (Public Health Agency of Canada, 2020) study found that girl's home lives were often much more challenging than boys. They found that girls are less likely to feel understood by their families, more likely to report wanting to leave home and fewer girls than boys reported high family support. Additionally, girls felt less supported by teachers and friends than boys. In order to understand and reveal these findings, an intersectional lens is needed to provide context and depth. Without an intersectional lens, these findings may hang without critique or unattended to with regards to the inherent power relations that shape them. Race, class, ability, all intersect with gender, and is especially visible through the individual homes, whether that be an intergenerational home or a single-parent home or homes with non-familial guardians. But if trans and nonbinary youth are to be visible, we have to make the effort to understand where they might fit into these categorizations and generalized findings.

Dowling and Pratt (1993, p. 464) asked "what can a feminism that recognizes differences among women and the instability of "woman" as an analytical category look like?" This thesis

hopes to answer that in some small way, with a theoretical backing of intersectionality and a prioritization and valuing of the everyday experiences of these youth. I use intersectionality in my analysis of the homes that youth inhibit and whether they do or do not hold space for sexual wellbeing through adequate privacy. Intersectionality also allows me to reflect on youths' experiences as socially influenced, but individually perceived through the lived experience.

2.4.2 Embodiment: The Body as Site in the Home

Embodiment is a *lived* process that understands how "the social" takes place and space in our own body, whether that is through decisions we make or the everyday ways we interact with others. Therefore, everyday embodied experiences affect wellbeing, especially in the home. While embodiment has been explored since Merleau-Ponty (1964) understood perception as the most important experience of the body, Crenshaw (2017), Conboy, Medina, and Stanbury (1997), Heinämaa (2003), and most notably Ahmed's (2000) post-colonial embodiment thinking, are feminist works which have furthered our understanding of embodiment, especially in research on women and girls. Ahmed's (2000) work specifically critiques our understanding of strangers as static, unchanging objects and instead encourages us to see the stranger as a result and web of social relationships. Ultimately, she discusses how "the body takes shape, changes shape" (Ahmed, 2000, p. 159).

Additionally, Valentine (2001, p. 17) argues topics and research approaches like embodiment have been considered women's issues and thus, "othered" in geography. But Valentine (2007, p. 14) also argues that "attention to lived experience exposes the role that space plays in the processes of identification and disidentification", therefore, making lived experience a key part of geographical knowledge and a more diverse literature. Geographers have also made

the argument that a phenomenological approach to research (or lived experience) is a way that feminist geographers can "embody geography" itself (Johnson, 1989, p. 134).

An early pioneer of embodiment, Merleau-Ponty, theorized that subjectivity was situated in the lived body itself, rather than in the mind. The "primacy of perception" is in the lived-body experience (Merleau-Ponty, 1962). Again, it is clear how intersectionality and embodiment work together to provide perception that can be better understood from an outsider's point of view. Davidson (2017, p. 5) who said for "Merleau-Ponty the self is not only social but is inextricably embodied".

Longhurst (1997) discusses how a lot of focus in geographical discourse has been on dualisms (Sayer, 1989), the differences between culture/nature, production/reproduction, or for the sake of this thesis: public/private. Longhurst also writes about how feminist theorists have argued dualisms are gendered, especially in the 90's, such as Le Doeuff (1991) and Lloyd (1993) and geographer, Vaiou (1992, p. 247), who argued the dualisms in urban planning "reproduce gender hierarchies and ways of thinking about them". Longhurst and other feminist geographers have thus made the argument that the mind/body dualism is gendered. Western knowledge has consistently separated the mind and the body, and this separation has been gendered through processes of power, and in turn, created through inequalities in our valuing of the woman body. As Longhurst (1997, p. 491) writes, "in 'reality' both men and women 'have bodies' but the difference lies in that men are thought to be able to pursue and speak universal knowledge, unencumbered by the limitations of a body placed in a particular time and place whereas women are thought to be bound closely to the particular instincts, rhythms and desires of their fleshy, located bodies". Intersectionality complicates this view by describing how individuals are socially-bounded by the matrix of their identity. Most importantly, intersectionality challenges

and disrupts the assumption that every woman is bound to the same times, places, rhythms or desires in the same way.

Recently, children's geographies scholars have called for more work on the embodied experience of the home (Wilson et al., 2012). Wilson et al. (2012, p. 105) found that for youth, certain embodied activities turned their bedroom into a "safe" place. Therefore, embodiment can not only expose the lived and everyday experience of home, but it can do so with a geographical lens as well. Coupling an understanding of place with body is important because it allows us to challenge existing dualisms, hierarchies and power processes. Viewing bodies as simply objects of their identities where their bodies do not "operate beyond that level, has structural implications for the bodies that are discussed and reinscribed in feminist discourse" (Ahmed, 2000, p. 41). Therefore, this thesis attempts to de-homogenous youth, to allow them to be written and embodied, not just in determined terms of race, sex, gender, or age. To challenge existing binaries of identity terms, embodiment is employed.

Davidson (2017, p. 137) calls geographers specifically to this, asking us to "question exactly what kind of society, what kind of selves, [dualisms] are helping to produce and maintain". Most importantly, Davidson (2017, p. 19) writes: "By drawing attention to those that are… young, pregnant, classed, 'raced', sculpted, tattooed, built, bulimic, sexed, queer, disabled, fit, obese, cyber-, grotesque, psychiatrized, old and dead… geographers aim to initiate conceptual and material change. That is to say, such research can challenge the way we think and thus the way we treat bodies, and so also selves." Therefore, embodiment theory allows me to understand how the sexual and the private takes up space in the body, within the geography of the home.

2.5 Justifying Intersectionality and Embodiment Together As Theoretical Framework

Intersectionality has also been discussed in regards to capitalism and its "complex intersection of different forces that make and unmake value as they materialize on bodies in different spaces and time" (Skeggs, 2019, p. 32). This points to processes of embodiment and the theory of intersectionality as inseparable. Embodiment also blends with intersectionality in that intersectionality has been described as lived experience in feminist geography (Valentine, 2007; Pratt, 1999; Saad & Carter, 2005; Rodó-de-Zárate, 2014; Sang, 2018).

Perhaps the most notable work on intersectionality and its place in feminist geography is Valentine's (2007) article that argues, while feminist geography has looked at connections between identities such as gender, race and sexuality, the concept of intersectionality as a theory has not been properly confronted. While Valentine spends time theorizing intersectionality, she questions how it can be used in practice, providing stories that reflect how intersectionality is lived experience. Take, for example, Jeanette's story, where she describes the intersections between disability in her life and her sexuality. Valentine (2007, p. 18) argues that "she does not have a fixed sense of identification or disidentification, rather she is in a constant and unpredictable process of becoming". It is this continual process of becoming that youth are confronted with as they live in the places they inhabit daily, such as the home. And Valentine (2007, p. 14) argues this too, that, feminist geographers can contribute to furthering the theorization of intersectionality through showing, in practice, the "significance of space in processes of subject formation".

In addition to Valentine's work, queer geography in general has continued to look at how gender and sexuality is embodied and can be produced in space (Nash, 2010). De Craene & Gorman-Murray (2017, p. 356) argue that embodied "processes" inform "notions of self, identity and interpersonal dis/connection that locate us in grids of social power involving both privilege

and marginality". Take, for example, Valentine's argument that many LGBTQ+ and disabled teens have parents that cannot align with the embodied experience of their child's identity, meaning the parent cannot act "as a guiding 'norm'" and thus, their influence differs from what an able-bodied or heterosexual teen might experience (2003a, p. 47). With regards to LGBT youth, studies have shown that they negotiate their sexual and gender identity performances and embodiments throughout different places, especially the school and the home (McDermott, 2010). Additionally, these studies suggest that further research is needed on the emotional labour that LGBT youth do in order to perform the "correct" identity in a particular setting (McDermott, 2010).

Through post-colonial embodiment theory, Ahmed considers "how some are made into the aliens in spaces they call home" (Antwi et al., 2013, p. 117). This connects to Crenshaw's theory of intersectionality (1989) that was created to challenge the discrimination space that alienated so many experiences of discrimination. Also drawing on Ahmed's (2000) embodiment theory, this study shows the very lived and everyday coping strategies that youth relied on during the pandemic through boundary-making. I define boundary-making as the power relations and associated emotions that fuel decisions to create or sustain an identity that is meaningful to the person. The connection between intersectionality and embodiment is clear, as Hopkins (2019), a feminist geographer has pointed out. He argues employing intersectionality in work on embodiment is key to moving "beyond the simplistic assumption that intersectionality is only about multiple identities" and towards an understanding of how (un)belonging is contested and (dis)embodied (Hopkins, 2019, p. 943-4). Okafor (2018, p. 379) also writes about both embodied processes and intersectionality when she illustrates Black feminism as "a theoretical home" and says it can be both "lived and embodied", proving the importance of incorporating an

understanding of intersectionality into a geographical project. I argue that intersectionality and embodiment as theoretical frameworks for researching the home also allow us to see how understandings of home are multiple, especially for queer communities, as Elwood's (2000) work on lesbian living spaces reveals its multiplicities.

In addition to this, Hankivsky (2012, p. 1715-16) notes more literature is providing ways to apply intersectionality to health research and policy, by asking critical questions such as: "How will interactions at individual levels of experience be linked to social institutions and broader structures and processes of power?". I argue this proposed research can be applied to the embodied experience of girls', trans', and non-binary youths' sexual health and wellbeing at-home and linked to wider norms.

Justifying intersectionality and embodiment as frameworks mean understanding their differences, but utilizing their compatibility. While intersectionality prioritizes the lived and embodiment prioritizes the body, sexual wellbeing is made up of the lived experience of the body's feelings towards sexual pleasure and identity. Adolescent girls', trans', and nonbinary youths' sexual wellbeing is inherently bound up within space, place, and bodies, therefore intersectionality and embodiment as theoretical frameworks prioritize the lived experience at the center of individual and intersecting identities. Most importantly, intersectionality looks at systemic oppressions while embodiment considers how those systemic forces are felt and made up within the body.

CHAPTER 3: METHODOLOGY AND ETHICS

I outline in this chapter why I prioritized feminist ethics and feminist geographical methods. I discuss intersectionality and embodiment as methodology, my position in research and what it means to be in the field, everywhere, at all times. In discussing how our research team trained and planned for data collection, I outline the ways in which I prepared for methodological questions and considerations in employing a feminist ethic. Our team dynamics, including our partnership with Planned Parenthood Ottawa and the LaMarsh Centre for Child and Youth Research were a pivotal piece of my MA experience. Finally, I review my focus group method, amidst the selection criteria, recruitment, results, and the demographic survey process, before a description of my coding and analysis experience.

3.1 Prioritizing Feminist Geographical Methods and Ethics

Feminist geographers agree that the appropriateness of specific research methods is partly determined by the manner and purposes for which they will be used (McDowell 1992; Harding 1987). In my research, approaching embodiment and intersectionality in practice for spatial sexual health research meant prioritizing feminist geographical methods. Most importantly, this research method had to understand and account for the power imbalances between participants as researched and myself as researcher. I found that a feminist methodology that prioritized lived experience would best account for this imbalance while remaining focused on the goal of validating youth's experience, especially as Valentine (2007, p. 14) argues paying "attention to lived experience exposes the role that space plays in the processes of identification and disidentification".

3.2 Intersectionality as Methodology

Feminist scholar, Leslie McCall (2005, p. 1774), said that due to the nature of intersectionality, approaches to studying it are incredibly varied, more specifically that "different methodologies produce different kinds of substantive knowledge". But there have been urgent calls from Black scholars to incorporate both intersectionality and culturally safe approaches to women's health research in particular. But Black scholars have also argued that there are important theoretical challenges when integrating intersectionality in public health research, particularly when deciding which identities should be included and recognizing that intersectionality itself was not developed to predict health at all (Bowleg, 2012, p. 1270).

Serrant (2020, p. 2) calls for approaches "which centralize (Black women's) experiences in the spaces where identities, culture, health and expectation intersect and which the women themselves report as being appropriate and inclusive of their needs". Therefore, if I were to approach youth in their homes, even virtually though Zoom or the internet (where their identities, culture and health intersect), I had to also ensure that I was able to give something to them in return, something that they found both appropriate and necessary from myself as a researcher. In an effort to be reciprocal, I started my methodological design process by thinking through the ways I could offer a supportive and safe(r) space. Thus, intersectionality as a method, where identities were constantly respected and taken into account was necessary for this research, in order to both remedy and better represent the differences between participants and homes, while remaining as non-exploitative as possible.

Feminist geographers have done pioneering work that looks at the body and its relationship to space. Gorman-Murray (2017) says that feminist geographers have led the literature particularly on how bodies and their intersectionalities shape and change space. More specifically, feminist geographers have placed the body as a place of social reproduction when

looking at health and wellbeing (Dyck, 2003; Longhurst, 1997). Therefore, feminist approaches to research methodology in geography require an understanding of intersectionalities and their ability to change in place, as well as women's bodies as a site of social reproduction. It is this thinking that led me to view my research team's already chosen focus group method, as one that could allow participants to truly be in place, in the home, while also, hopefully relatively comfortable. Taylor's (2009) thinking of moving intersectionality from theory to research application inspired this thought as well, as the focus group could better reflect the lived experiences of youth, while also providing them with an experience with other peers.

The themes that I discuss in the following chapter are situated in the feminist geographical literature that understands the ways that focus group as method can better understand relationships and processes of power. I justify my methodological choices within feminist geography which views experience as situated in particular places and as defined by intersectional identities and power relations.

3.3 Being in The Field, Online

As a new graduate student, this was my first experience of 'the field'. What I understood as 'the field' before conducting the research, during, and after, varied as I learned not only the enormity of the field, but the sheer boundary-lessness of it. Katz (1994) understands fieldwork (and our place in it) both all the time and everywhere. This feminist notion reiterated to me how my being in the field both 'online' *and* 'in participants homes', was simultaneously everyday, personal and political. In addition to this, I conducted all of this research and wrote it all up in my own home, similar to Cuomo and Massaro (2016, p. 95) writings on the boundaries of the field and experience of "resid[ing] permanently in the locations in which we conducted fieldwork". This brings about its own practical challenges, outside of just ethical ones.

The geography of doing this emotional and sensitive research in a strange "field site" (online) and yet, also at home, meant that I had to recognize my own positionality. I could not rely or revert to my own lived experience as a young woman as default or as the baseline of which I viewed the participant's experience. I also had a geographically different experience, as I moved back and forth between the GTA and Ottawa between the ages of 16-19. But, at the time of conducting my research, I was still 23 years old, not far from those teenage years. Along with our undergraduate assistant, I was the closest to my participants demographics and experience, a valuable insider-outsider position. Therefore, my own identity as a young researcher, who has lived in the GTA, kept my work somewhat "close to home", meant that I had a passion and excited curiosity towards these participants' experiences. My experience of multiple homes also meant that I could connect to some degree with participants who also moved around during their teenage years, or even more importantly, as related to lockdown restrictions. It is this relatability that helped me to build trust and rapport with participants, as I could articulate the reason I was not only interested in their story, but truly cared about it. But along with this, Katz's (1994) understanding of the field called me to constantly question my place in the research, including the ways in which I remained "in the field" long after the camera shut off.

In addition to wanting to represent the home as a site and the body as a place for social reproduction in relation to sexual wellbeing, I had to approach the focus group method in an online format that could allow me to understand embodiment through a virtual setting. Katz's (1994) understanding of the field shows how we can discover critical insights in the significance of the everyday and that the field does not end once we stop our analysis. Similarly, Adams St. Pierre (2015, p. 142) writes that "we seem obsessed with what we can learn, what we can know, and with producing better methods for producing better knowledge" arguing that we remain

trapped in the mind/body dualism that embodiment seeks to disrupt. I argue that disrupting the mind/body dualism requires a reliance on feminist geographical methods like Katz (1994) discusses, ones that put the body first, especially in the online setting. In order to do this, I allowed participants to turn cameras on and off as they needed, and to use the chat function throughout to interact with others or use when it felt more comfortable than speaking.

My reading of feminist literature showed me how feminist notions of the field disrupt the idea of the 'all objective' researcher, who has a complete outsider position in regards to the research. Instead, positionality and reflexivity are key things to consider when in the field (Cupples, 2002; Sharp & Dowler 2011; Kobayashi, 1994). An extractive methodology is not a feminist methodology. Therefore, since my research is so deeply rooted in the resilient and vibrant community of youth, my relations and the relationships I've built within them continue on as I write this thesis, as I submit it, defend it and onwards. My volunteer work with Girls Inc. intersects with the lives and relationships of my research participant population. Girls Inc.'s mandate is to focus on the "development of the whole girl" by "supporting, mentoring, and guiding" in a life-affirming space. They focus on healthy living, academic enrichment and support, and life skills instruction to teach girls how to learn their value, develop their strengths and navigate challenges. While my work with them is still in the beginning stages of event planning and marketing committee work, due to the COVID-19 pandemic, it has fostered a full-circle feeling in me, as I had originally joined Girls Inc. as a young girl to engage in self-esteem workshops. The mentoring relationships that have stemmed from this, all represent my passion to work for this community. As an advocate for legislation and policies to increase opportunities and rights for girls, I also understand the utmost importance of research such as this thesis in effecting political change. By working alongside Planned Parenthood, as well as with the

LaMarsh Centre for Child & Youth Research, the relationships, understandings and meanings that have been collected within this research will be used to disseminate information and findings, inspire future questions and research feminist geography.

3.4 Planning Data Collection in a Pandemic: Organizing, Training and Working In A Team

When writing this section, I was struggling to commit to an "academic" voice, but I also did not want to diminish the important data collection and analysis work that our team did by writing entirely in *my* voice. I connect with Tamas' writing that: "Sometimes the normative academic voice is necessary, but it can also be a habitual hiding place with political consequences. When I stop speaking that way, nothing bad happens. I feel relief, a release of the pressure to inhabit a barely recognizable version of myself. Speaking from my heart doesn't mean I stop using my head; it's a false binary" (Tamas, 2020 p. 515). Therefore, I approached this section with my heart, because that is what data collection and analysis took for me. It took heart and collaboration and academic skills that became, rather than a hiding place for me, more of a look out. It was unfamiliar, a little bit scary, and I was unsure what I would find on the other side. But it was exciting nonetheless, to take the chance of peering out.

The research team consisted of my second committee member, Dr. Sarah Flicker, and Dr. Alanna Goldstein, a postdoctoral fellow at York University in the Faculty of Environmental and Urban Change. Flicker has a background in social science and health, specifically in engaging youth in sexual and reproductive justice and curriculum. Due to Flicker's vast experience working with community-based participatory methodologies, focus group training was focused on providing vulnerable communities with a more equitable and safe(r) space in order to facilitate authentic and focused discussion. Goldstein researches intersections between youth,

sexuality, and media. Her expertise in these areas and experience in focus groups made her a mentor for myself. Goldstein led the first focus group, so I was able to learn from her process and model that in my own leadership of the groups. Both Flicker and Goldstein had previously conducted focus groups on COVID-19 and its impact on youth's romantic relationships and as they wanted to expand and continue their research, they welcomed me on board so I could explore my interest in sexual wellbeing and home. Stephanie Giroud, an undergraduate student, joined the team as part of an undergraduate course and assisted in note-taking and transcription.

Planning data collection in a pandemic meant prioritizing digital organization, accessibility and security. All data (coding documents, demographic surveys, consent forms) and literature (recent work on our topics) was kept in a password-protected Google Drive folder. This allowed us to work simultaneously on our documents, while sharing and collaborating on our work. While the organization and protection of research information, transcripts, and codes was an important skill to learn as a graduate student, the discussions as a research team is what truly prepared me for my first graduate research experience.

Our training as a team began when Flicker organized a Focus Group Methodology training session. In preparation for data collection, I reviewed literature on method, particularly reading on the radical use of focus groups (Johnson, 1996), focus groups as a feminist method for the co-construction of meaning (Wilkinson, 1998), as well as introductions to qualitative research methods (Mack et al., 2005) and the online focus group as method for health-related topics and marginalized populations (Reisner et al., 2018). These readings connected to provide me with an understanding of focus group as both a form of research collection and a form of political activism. I learned that by engaging youth in a discussion about sexual wellbeing, home, dating, COVID-19, and mental health, we were also doing political work. Attempting to provide

a safe(r) space for these kinds of discussions also meant that we had to recognize the power imbalances between participants and researchers. My reading of Valentine, Butler and Skelton (2001) aided in my understanding of this, particularly the ethical issues with working with youth and the methodological choices that one can make that have a major impact on youth's comfort, safety, and the authenticity of the research.

This partnership was the first time I had collaborated in a research environment with another organization (PPO) as well as within a research team. While I learned immensely from the research we conducted, I learned so much through the experience of working within a team as well. With the team, I was able to see focus groups as a political experience, one rooted in power and radical opportunity.

I will forever be grateful that during a time of such loss and loneliness (for myself and others during COVID-19), I was able to learn alongside incredible scholars.

3.4.1 Partnership with Planned Parenthood Ottawa

In addition to planning our research, we partnered with Planned Parenthood Ottawa (PPO). This partnership shaped our research before we even began conducting it. In February 2020 (pre-pandemic), Planned Parenthood's national office, Planned Parenthood Ottawa, Flicker, and Goldstein began a panel focus group study exploring dating and relationships among marginalized (racialized, queer, newcomer) youth to help inform a new school-based violence prevention intervention (Goldstein et al, 2021). When COVID-19 emerged last spring, they pivoted online and found that the themes and topics they were exploring were more salient than ever.

Therefore, the project set out in this thesis was nested into an already existing and ongoing partnership (5-year study) between PPO and Flicker, in order to design, deliver, and

evaluate violence prevention programming in schools, but also inform community programming

on how to think about and support adolescent romantic relationships during the pandemic. By

collaborating with PPO, we were also seeking to answer: How can health and social service

organizations (like PPO) better respond to meet the changing pandemic needs of young people to

support healthy relationships, prevent violence and promote well-being? Additionally, analyzed

data from previous rounds of data collection by Flicker and Goldstein will provide a larger look

at the long-term impacts of COVID-19 on adolescent romantic lives. This partnership also

allowed us to engage with youth in synchronous online data collection, therefore building on

youth's opportunities to become community-engaged and to participate in research.

The research team came together to present at the Dr. Eric Jackman Health Scholars

Learning Forum due to us receiving the award for our community engagement efforts. At the

forum, I presented on our findings and the power of collaboration. Due to Flicker and Goldstein

already having connections with Ceara McIntyre and Léa Gareauwe at PPO, our relationship had

already been built on trust and reliability. But the forum provided an opportunity for both the

research team and PPO to connect more deeply on the importance of collaboration and

community engagement. I presented the key themes our research team came across during focus

group discussion including: home, privacy, sexual wellbeing, mental health, parents, friendships,

gender identity, boundaries, online dating, and risk-taking. I outlined our methodological

approach, as well as my specific thesis focus on geographies of home. I discussed boundary-

making, why sonic privacy is more important than ever to youth, and the spatiality and perceived

privacy of the bedroom as a space. I also discussed what mentorship looked like to us.

As a research team made up of more senior scholars, as well as an undergrad student, we

all had very different research experiences and backgrounds, so everyone was able to mentor one

another differently. One way we mentored each other is through how we defined success. Instead of focusing only on outputs or productivity goals, we guided and encouraged each other to be creative in our work. This looked like: trying out different techniques for icebreakers during our focus groups, such as getting participants to draw a diagram of where they were located in their homes, or suggesting new ways to analyze our transcripts. We also brought new ways of thinking into our community. Having such an interdisciplinary group of scholars meant we had many different perspectives on our research and the way we could approach our analysis. Because of this, we were able to submit papers to a wide range of academic journals in various fields. I was also mentored in qualitative research skills. I learned how to narrow down themes and codes in order to conduct an efficient analysis. In the research process, I learned practical skills, like how to submit a journal article proposal. As an early career scholar and the first in my family to attend university, this was something that was very important to me. Overall, our mentorship focused on our *abilities as people who love research*, not just our research abilities.

By partnering with Planned Parenthood Ottawa, we hope to provide them with the changing needs and wants of youth who are dating, relating, and seeking sexual health supports in pandemic times. This partnership allows us to support PPO's mandate of providing diverse youth with information and resources to support them in healthy decision-making about their sexual wellbeing, health and relationships. While this partnership has measurable goals with regards to producing material and curriculum for youth through PPO, it also provided the team with immeasurable opportunity to experience working alongside an organization that is passionate about serving youth and who value mentorship and connection.

3.4.2 Support from LaMarsh Centre for Child and Youth Research

The team received support from LaMarsh through the Dr. Eric Jackman Health Scholars Award, which seeks to enable community engagement and mentorship opportunities for students in research teams doing work on youth. I was also individually awarded the LaMarsh Graduate Student Research Award which was designed to enable students to gain additional research experience and receive research mentoring while participating in interdisciplinary research initiatives that align with the LaMarsh Centre's mandate. Working with LaMarsh allowed me to take my geographical focus closer to LaMarsh's mandate of promoting youth's development and resilience. I worked towards this mandate by submitting a manuscript with the guidance and mentorship of Dr. Flicker and Dr. Goldstein, attending LaMarsh events and engaging in knowledge mobilization activities. Attending LaMarsh workshops, talks, and symposia broadened my scope of where my work can be communicated and put into action. This research award also allowed me to use these practical skills to build partnerships and communicate my work with the youth it intends to serve, through partnerships with PPO, presenting on collaborative teamwork, and working with Girls Inc. as separate to my thesis, but as entirely vital to my understanding of youth populations as a researcher.

3.5 Ethical and Methodological Considerations: Employing a Feminist Ethic for Focus Groups

My method followed a feminist framework, and this continued into who I cite, who I am in conversation with and how I am in conversation with them. Using a feminist ethic in my methodology meant providing a safe(r), accessible virtual space for participants, paying participants for their time and emotional labour during the focus groups, a responsibility to value the lived experience of the participants and flexibility and creativity throughout the process. Arguably, the feminist virtual focus group relies on collaboration and care in an unbounded field.

I presented my thoughts on this at CAG 2022 where I used Katz (1994) understanding that the field is everywhere to outline our research method approach. Our method understood how care and collaboration are not only add-ins, but essential in garnering qualitative data.

Feminist scholar, Leslie McCall (2005, p. 1774) says that approaches to intersectionality as method are incredibly varied in their data, as "different methodologies produce different kinds of substantive knowledge". Therefore, if we approach method with Katz (1997) understanding of the field as everywhere (not just the consideration of positionality or reflexivity alone), and McCall (2005) argues that different methods produce different knowledge, therefore, so too would a care-full and collaborative method collect different stories. I argue that by creating this research space where method not only meets but *infuses* care, collaboration and boundlessness, we can hear stories that are often silenced.

Ethical and methodological considerations are incredibly important when working with vulnerable populations, such as queer, trans and nonbinary youth. Valentine, Butler and Skelton's (2001) work on the issues of conducting research with queer youth, outlines how youth are often framed as asexual or innocent and therefore research with them is especially sensitive and complex. Additionally, they outline the risk of homogenizing youth into a singular social category. Most importantly, Valentine, Butler and Skelton (2001) generalize that most research with queer youth is conducted either at school or in the family home, as youth are easily contacted there. But they point out that "the very nature of lesbian and gay young people's vulnerability means that both of these environments are potentially difficult spaces in which to access and work" with them (Butler & Skeleton, 2001, p. 120). Writings like these on working with vulnerable populations affirmed our decision to use virtual focus groups as a method.

The possibility that participants may need to conceal their participation in the focus group necessitated more methodological considerations. For example, while the home is thought to be a private and intimate space, youth are often surveilled by family members, particularly girls who experience heightened surveillance and parental monitoring compared to that of boys, during both childhood and adolescence (Seedall & Anthony, 2015). In addition to this, boys are more mobile around their neighbourhood than girls (Brown, et al., 2008). Therefore, the significance of this research also lies in its methodological and ethical considerations as we navigated how to best ensure a safe(r) and 'private' space in an online setting taking place in the home. But while an obvious limitation to this research comes from the COVID-19 pandemic and our inability to enter research participants' homes or speak with them in-person (decreased ability to read social cues, lack of body language), the online nature of this research design also came with many benefits, such as its accessibility to some participants. Another challenging aspect of focus group as method is that vulnerabilities are often kept hidden, especially in an online format where cameras do not have to be on. These methodological challenges were mitigated by allowing participants to use the chat function and reiterating a Safe(r) Space Guideline, outlined in the following section.

This method is suitable for an embodied and intersectional approach for a multitude of reasons. First, this method could better account for minority and disadvantaged communities due to its accessibility virtually. Secondly, this method can better account for the lived, everyday experience, especially as interviews will take place virtually (adding to the comfort of the participants), yet also in the research participants' home (the place they will be discussing and thinking about). Finally, this method also helps to mitigate the inherent power-dynamics in researcher and research participants, a key goal of feminist work. Participants may find that

meeting virtually is less intimidating than an in-person interview. In addition to this, participants could choose to turn their cameras off, adding to the power that they can hold. Feminist geographer, Nast (1994, p. 58), argues that "methodologies that promote mutual respect and identification of commonalities and differences between researcher and researched in nonauthoritative ways are deemed preferable in that they allow for "others" to be heard and empowered". By reminding participants that their participation is entirely voluntary, we hoped to allow all participants to feel heard and empowered.

Our caring and collaborative approach to the focus group meant that I understood the home as a site and the body as a place for sexual wellbeing through virtual focus group. And that meant I was able to open participants to the healing opportunity of focus groups, not just their research objectives. Our focus group came with many benefits for participants. Not only was it accessible, but we made sure to detail the opportunity to meet other youth experiencing similar issues, the chance to learn new strategies on how to take care of themselves during the pandemic, and an opportunity to help researchers and educators better understand how to support them during and after COVID. We also followed up with participants, sending them additional information on support and resources.

Being caring during this time was also important because we had many participants discuss the mental health challenges of the pandemic… being unable to connect with their peers due to school closures or one participant who contacted more than 20 clinics looking for an IUD consultation appointment. For us, being caring in a focus group meant creating a safe(r), accessible virtual space, paying participants for their time and emotional labour, maintaining flexibility and creativity throughout the process, and recognizing our responsibility to value their lived experience. We often felt as though we were listening in on private conversations during

these groups. And creating a caring space encouraged this kind of deep discussion, fueled by participants' own eagerness to connect with other participants. We had many participants reach out to us afterwards to let us know they found the opportunity to speak with other youth incredibly therapeutic. The technical aspects of method, which are described in the following section, were built on valuing this type of connection and community

3.6 Method

I co-facilitated five online focus groups with adolescent girls', trans', and non-binary youths aged 16-19 years old in Ontario. The focus groups asked participants to share their knowledge about healthy and unhealthy relationships, sexual wellbeing, and how these have been impacted by COVID-19. Participants were also able to brainstorm ideas on how they would like to be better supported during COVID-19. Recruited through ads posted on social media, interested participants were emailed an online consent form and a link to complete an anonymous demographic survey. Justifications for this recruitment process will follow in the "Selection criteria, recruitment and results" section.

Those who returned signed consent forms, completed the survey, and met age and residence eligibility criteria were emailed a secure Zoom link for their focus group session. Focus groups were recorded and participants could choose to participate with audio or video. The demographic survey and consent forms had earlier bones from Flicker and Goldstein's previous research project. I edited them both to include more intersectional questions about youth's sexuality, understanding of sexual wellbeing and their living situation. These documents went through at least 5 edits before being approved by the team. Consent forms were also edited to give more clarity of the participant's rights during the focus groups, including their ability to leave or turn their cameras off. A Focus Group Protocol & Questions (APPENDIX A: Focus

Group Protocol & Questions) was used by the research team as a semi-structured outline for focus group conversations. I helped to create this protocol with Goldstein. Using her knowledge from previous focus groups, we crafted a protocol that highlighted the most important topics to each team member's research questions. Participants used the pseudonym that they used in their demographic form for their Zoom nickname. Our research team opened the focus group by introducing ourselves as researchers, introducing the study, explaining the functions of Zoom and then asking participants to introduce themselves. Then, participants were asked to participate in an ice breaker activity, such as drawing a map of where in their home they were currently located. Screen captures were not permitted as we wanted participants to feel anonymous. Each focus group lasted approximately 90 minutes. Participants were sent a $20 gift certificate of their choice following the session. To capture the discussions, the research team utilized the Zoom auto-transcription and recording features in conjunction with our own transcription and note taking practices. All data was imported into NVivo, a qualitative data analysis software, for inductive thematic analysis. Research summaries were shared with Planned Parenthood Ottawa and their youth advisory committee for feedback, action planning, and program development.

3.6.1 Learning 'the focus group'

We opened the focus groups to target young women, queer, trans and nonbinary folks in the GTA, ages 16-19. Participants were recruited through Facebook and Instagram advertisements. Scholars who employ intersectionality in their qualitative health research argue that recruiting solely at more traditional health spaces, such as hospitals, research centers or other health-service organizations, could overlook marginalized peoples as "these social structures presume a certain level of access and self-identification," (Abrams, 2020, p. 4). Therefore, participant recruitment was done through social media. I created the graphic advertisements and

monitored the research project email for incoming requests to join. Recruitment took place 5

days prior to the scheduled focus group dates. Interested participants were asked to read a fact

sheet outlining the benefits and potential risks involved in taking part in the research project,

before signing the consent form (see APPENDIX C: Consent Form & Fact Sheet). In response

to previous research where participants i wanted to know more about resources and supports

available to them (Public Health Agency of Canada, 2020, p. 151),

  I learned from Goldstein what makes a focus group effective and safe. Goldstein led the

first focus group in order to give me a template for how I could approach the following ones.

This model of mentorship encouraged me to be creative and flexible in my focus group leading

and made me feel more comfortable with approaching a virtual research space. Goldstein relayed

how to facilitate a productive discussion that could also be potentially cathartic for youth. I

learned from working beside Goldstein that focus groups can be rewarding research experiences

that provide the researcher with incredibly complex and multifaceted data and provide the

researched with an opportunity to connect with others and have their voice heard by those who

have more power to influence things like policy and curriculum.

  We started every focus group with participants introducing themselves and their

pronouns. We followed this with an ice-breaker question, such as what form of media they are

enjoying most right now. We requested that participants restate their consent to participate

verbally. Afterwards, we reviewed our Confidentiality and Disclosure Policies and procedures.

We let participants decide to join the Zoom conversation by audio or video. We encouraged

participants to use pseudonyms. We ever revealed their real name at any point during focus

group, transcription, or analysis.

In outlining my positionality in the research process, I knew I had to account for the inherent power imbalance between myself and participants. As "showing where you speak from (aka your standpoint) can minimize the potential trespass of speaking for others" (Tamas, 2020, p. 513), my age (I was 23 years old during the focus groups) and my gender afforded me the privilege of appearing more relatable and trustworthy to participants, but I still needed to outline an anti-oppressive framework to ensure a comfortable and safer space for discussion. To do this, we asked participants the following: To respect their peers by not repeating what was said in the focus group; by not recording any part of the focus group; and by not screenshotting the focus group. We only asked them to share the things that they felt comfortable sharing with others and they were able to decline an answer to any questions at any time. We also stated that due to the nature of the issue, our discussion may include topics that some participants may find emotionally challenging and/or traumatizing. We asked participants to help us create an atmosphere of mutual respect and sensitivity. To facilitate this, if participants were feeling upset or needed more support at any time during the focus group, we asked them to send a private message to one of the researchers using the chat function. We offered additional support and resources if necessary, as well as following up with the participant the following day to check in. In addition to this, a right to self-care (leaving the space for a break, going to the washroom, getting a snack, etc.) was encouraged throughout the focus group.

A Safe(r) Space Guideline was also established: we outlined some guidelines to make the space as comfortable and open as possible for all participants. This included not contacting other participants directly via the chat function. Participants were encouraged to contact one of the researchers directly using the private chat function if they felt uncomfortable. Researchers also

reserved the right to remove any participant from the focus group at any time if they are deliberately behaving in disruptive or harmful ways.

After the icebreaker, questions were divided into 3 themes: 1) Getting into a Relationship; 2) Being in Relationships; and 3) Looking Ahead. While my thesis research considered all three themes, individual questions that considered sexual wellbeing more closely were included throughout the themes. See APPENDIX A: Focus Group Protocol & Questions for the list of questions.

I used an inductive research strategy when forming my questions, found in feminist paradigm and lived experience research. Instead of simply asking 'what' and 'why' questions, I understood the home as a place existing of sexual norms and of negotiations of what sexual wellbeing is. There were tensions, but also opportunities in composing and asking my specific research questions due to being part of a larger research project. For example, while Goldstein wanted to know more about how *parents* were affecting dating relationships, I took a more geographical lens and wanted to know where these dating relationships were being negotiated while in lockdown and unable to see one another. Another example of this would be undergraduate assistant Stephanie Giroud, who wanted to know how youth's mental health could be better supported through resources at school or online. In my case, I wanted to know how youth's sexual wellbeing could be better supported at home through boundaries.

Understanding sexual wellbeing and its relationship to the home meant asking questions about motives, meaning and intentions of everyday action and feelings around sexual wellbeing during COVID-19 at home. Asking how participants understand wider ideas and norms like sexuality, sexual wellbeing, sexual health, healthy relationships and unhealthy relationships was crucial during focus groups.

In closing our focus groups, we thanked participants for their participation and energy. We asked youth if there were any last thoughts they would like to discuss. In addition to this, we discussed self-care by asking participants about ideas on how they can take care of themselves that evening and the following day. We also restated support and resources available and let them know that we would be following up with them by email the following day, but that they could reach out to any researchers at any time.

3.6.2 Selection Criteria, Recruitment and Results

The age 16-19 years old was selected for logistical reasons, including that this age range did not have to ask for parental permission to take part in the study. Also, the Public Health Agency of Canada (2020) found that the majority of their youth participants who reported having had sex, first engaged in it at age 14 or 15. Due to sexual wellbeing encompassing sexual health (diseases and infections), we also selected this age due to STI rates increasing in those ages 15-18. 'Sexpress: The Toronto Teen Survey Report' (Flicker et al., 2009) found that chlamydia, gonorrhea, and syphilis rates have been increasing steadily in Toronto youth since 2001, but most importantly, these rates are highest in Canada among those aged 15 to 18 (Toronto Public Health, 2005).

The GTA was chosen as the parameter for participants in this study for multiple reasons. The first being because it is where our research team is also located, making our analysis closer to home and local. Another reason to conduct research within the GTA was that it represented a large population of Ontario, a province particularly affected by stay-at-home orders. In addition to this, the GTA collected urban and suburban participants, as well as participants who had experienced different levels of lockdown throughout the pandemic. About a quarter of Toronto youth experience their first sexual intercourse by age 16 (McKeown, 2007). Additionally,

Toronto actually reports higher rates of STIs compared to the rest of Canada (Toronto Public Health, 2005). Therefore, the GTA represented a sexual experience diverse sample of Canada's youth.

We chose adolescent girls, trans and nonbinary youth because, historically, this population has been underserved by sexual health policy, curriculum, education and resources. In addition to this, binary understandings, as well as a biological emphasis on sexuality or gender alone, do not "reflect the nuance associated with most young people's romantic and platonic relationships" (Goldstein & Flicker, 2021, p. 7). In total, we had 67 people respond to our survey. Of which, 34 youth participated in a focus group (many people simply did not "show up" on the day of the focus group).

3.6.3 Demographic Survey

The demographic survey asked participants to declare a pseudonym for use during the focus group. The survey also asked participants about their age, race/ethnicity, living situation, place of birth, and whether they had started a relationship since COVID-19, gender identity, and sexual identity. In addition to this, email (for gift certificate and reminder emails) was asked for.

See APPENDIX C: Demographic Survey.

	DESCRIPTOR	NUMBER	PERCENT
AGE	16	4	12
	17	9	26
	18	9	26
	19+	12	35
RACE/ETHNICITY	Black	7	21
	East Asian	3	9
	Latinx/Hispanic	1	3
	Middle Eastern	1	3
	Mixed	2	6
	South/Southeast Asian	4	12
	White	14	41
	Other	2	6
LIVING ARRANGEMENTS	Living with a romantic partner	2	6
	Living with family	27	79
	Living on own	1	3
	Living with roommates	4	12
PLACE OF BIRTH	Africa	2	6
	Asia	3	9
	Canada	24	71
	Latin America	1	3
	United States	2	6
	Europe	1	3
	Unreported	1	3
RELATIONSHIP STATUS SINCE COVID-19	Already in a relationship	2	6
	No	6	18
	Sort of	14	41
	Yes	12	35

Figure 3.1 Participant demographics

Based on the demographic survey (n=34), Figure 3.1 describes the reported age,

race/ethnicity, living situation, place of birth, and relationship status of participants since

COVID-19 started. It illustrates that the majority of participants were 17-18 years old, with 16

years old making up the smallest percentage. A large percentage were White, followed by Black,

with Latinx/Hispanic and Middle Eastern representing the smallest percentages. The majority of

participants lived with family and were born in Canada. Most participants reported they started

or 'sort of' started a relationship since COVID-19 started.

	DESCRIPTOR	NUMBER	PERCENT
GENDER	Man	2	6
	Nonbinary	7	21
	Transman	3	9
	Transwoman	1	3
	Woman	21	62
SEXUALITY	Asexual	1	3
	Bisexual	13	38
	Gay	2	6
	Lesbian	2	6
	Pansexual	7	21
	Queer	1	3
	Straight	8	24

Figure 3.2. Participant gender and sexual identity.

Figure 3.2 describes participants gender identity and sexual identity. It illustrates that the majority of participants identified as women. Many identified as nonbinary. The largest sexual identity reported was Bisexuality with the minority identifying as Asexual or Queer.

It is important to note that these demographics rely on the survey answers of participants. Often, participants came to focus groups with a differing or expanded identity compared to their survey answers. For example, only one participant identified as a transwoman, a Hungarian immigrant, who later identified in the focus group as Two-Spirited as well. In order to ascertain meaning from intersectionality-informed research, scholars must understand how the inclusion of various social identity categories through quantitative data collection can be fraught with problems, as "such quantitative approaches do not problematize the static and unchanging nature often assumed in the use of such categorical data" (Hankivsky & Grace, 2015, p. 15). Surely, the data collected from these focus group surveys are important and necessary for understanding who is here, they do not tell the full story of *who* is here.

3.7 Coding

The team met throughout the summer of 2021 to analyze the data. We used NVivo qualitative data analysis software to code and manage the data and took a collaborative approach

to codebook development. We each independently identified common themes, then individually crafted 10 codes each. We came together to discuss their significance to our research questions. During these meetings, we would argue our reasoning as to why each code was important, providing examples of the codes in our transcripts. Flicker presented an NVivo tutorial to teach various tools and shortcuts. Our codes or "nodes" were created in NVivo while I coded all the transcripts over the course of a couple weeks. As I continued coding, I became faster but I did encounter challenges when participants would speak to 3, 4, maybe even 5 codes in a singular point. Through research team instruction I came to understand how codes could be significant to the focus group topics as well as specific research questions. Therefore, I worked to code both broadly for the sake of the team, and more closely in order to provide significant examples for Goldstein, Giroud, and my own individual research questions. As a research team, we decided upon 12 codes: *Privacy; Sexual wellbeing; Risk navigation; Home as social space; Family and boundaries; School; Dating; Friendship; Harassment, Violence and bullying; Mental health; Missed opportunities; Personal growth and development.*

In the paragraphs that follow I clarify what each of the coded terms encompassed. *Privacy* speaks to where and when individuals feel free and comfortable before/during COVID; and lack thereof. This included what makes a space private and negotiating autonomy. Negotiating privacy involved a process of boundary setting within the family. Thus, *Family and boundaries* included communication, balancing parents versus independence versus relationship needs, surveillance/trust, support/lack of support, identity at home, and relationships. It coded the way that an individual interacts, understands and acts towards others at home and the struggles, challenges, and insights into relationships with household members.

Our understanding of *Home as social space* meant the home as influencing the individual's behaviours, and thoughts. It coded understandings of wider structures, the norms at home (homophobic, refusal to do emotional labour of researching children's identity), and ideas concerning belonging.

Due to the nature of the lockdown's, we coded *Missed opportunities,* which included the losses that youth experienced during COVID-19 (what they had missed out on, absence in life, experience of monotony), as well as missing milestones (prom, dating, grad, first year university, sex, dances, sports). Along with this, our *Mental health* code considered 'big feelings'. Depression, stress, anxiety, sadness, hopelessness, loneliness, loss of motivation, isolation, and disconnectedness were some of these ideas. In addition to feelings, strategies, support resources, therapy, and attitudes toward mental health were considered.

Getting at what *Sexual wellbeing* means to youth was the goal of this research project. Therefore, we defined sexual wellbeing as a holistic understanding of what 'good' sex/uality looks and feels like for an individual and lack thereof. Sexual identity, ways it's expressed (sending nudes, video sex, snapping while online) as well as understanding of being aware when sexual needs are not being met and "healthy" versus "unhealthy" sexuality were included in this code. Discussions of access to sex/sexuality resources, information and health care, knowledge of sexual risks, understanding of what feels good to them in a sexual relationship or with themselves solo were also considered. Discussions around living in an environment that affirms (or neglects) sexuality were also part of this code.

Along with an understanding of what constitutes 'good' sexual wellbeing, we included *Risk navigation* as youth's differing ideas of safety/danger/risk. From COVID-19 focused risk taking, setting and navigating boundaries, physical intimacy, concerns around spreading the virus

(immunity, grandmas, etc.), we used this code to mark what is/is not defined as dangerous to an individual or acceptable (to youth, parents, teachers, the law). It also included discussions and feelings towards COVID-19 restrictions, lockdowns and policies.

With navigating risk, comes navigating relationships during lockdown. Therefore, we considered *Friendships* and *Dating* as in person and/or online experiences. Feelings of belonging, inclusion, loss, understandings of (mis)communication, trust, starting / maintaining / ending, changes to relationship progression, and dealing with conflict were included. Technologically mediated dating (apps, online, facetime); as a form of connection and/or as a toxic encounter were considered, as well as starting/maintaining/ending and changes to relationship progression. *School* was sometimes discussed in relation to these relationships, as well as the experience of learning online, sex education, closures, and teachers.

While in-person and virtual realities were often discussed simultaneously, so was youth's experience of *Harassment, violence and bullying*. This code outlined experiences of toxic or violent encounters whether that was at home, in school, online or in public spaces.

During a time of intense social change, *Personal growth and development* considered wider boundaries/boundary-making, lessons learned/self-reflections, limits, rules or values that restrict certain ways of self for the purpose of wellbeing. Privacy boundaries, relationship boundaries, personal exploration, changes over COVID-19's timeline, development, and learning about identity were included. *Privacy, Sexual wellbeing, Home as social space, Family* and *Personal growth and development* were the key themes that were the focus of this theses research, although overlap existed amongst all 12 codes.
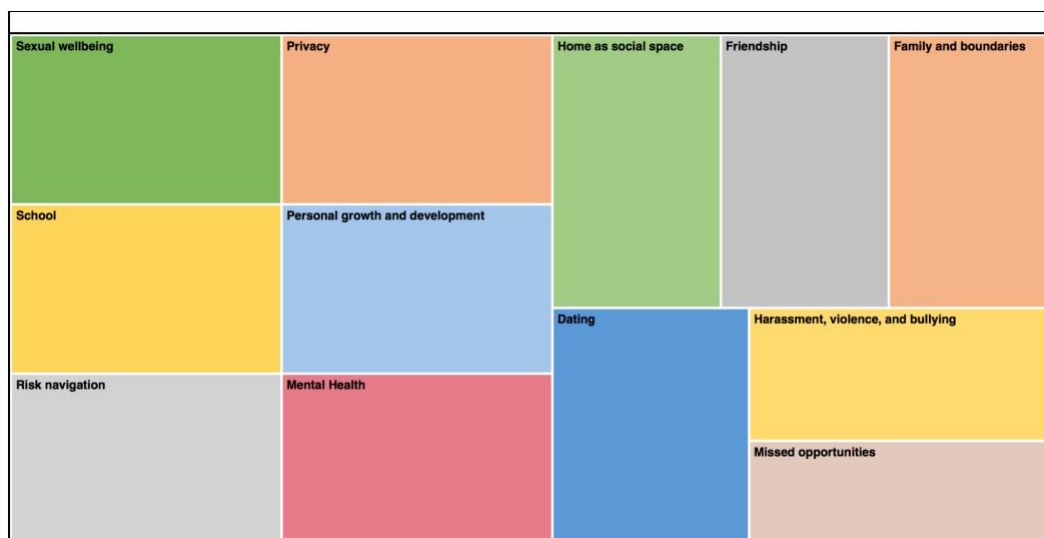
Figure 3.3. Hierarchy treemap of codes.

Above is a Hierarchy Treemap chart (Figure 3.3). This visualization uses one chart to communicate two different features of the data. This map is coloured by Coding References and sized by Items Coded. This means that *Sexual wellbeing, Privacy, School, Personal growth and development, Risk navigation,* and *Mental health* codes had the most sources, therefore, they make up the largest area. *Dating* has the darkest colour because it has the most coding references, followed by *Sexual wellbeing,* and then *Friendship.*

3.8 Collaborative Analysis

We used the DEPICT model for analysis (Flicker & Nixon, 2015), where dynamic reading of the transcripts is conducted to ensure we were truly sitting with the data. Then, we began engaged in codebook development, which started with us individually creating themes that we felt spoke most closely to the data. Due to our different research goals, we came with our own notes on potential codes for the data based mostly on our research purposes. By sharing our own analysis and understanding of the transcripts, we were able to craft an incredibly interdisciplinary understanding of the work we had done the last few months. It was an

opportunity where we learned to see the same data differently. Doing this allowed me to spot the weaknesses in my analysis, as well as the stronger aspects.

In order to locate the conversations within their social context, I began my analysis by rewatching the recorded focus group videos, taking notes on moments of contention, tension, and unity. Drawing parallels between these moments versus other focus group sessions, I made connections between each code. In order to maintain individual autonomy for the participants, I analyzed their stories individually first, considering their intersectional identities and marking boundaries around experiences unique to them. Aligning these experiences with the codes, I understood them as individual stories. After this, I began my wider thematic analysis, grouping stories according to my codes and their themes. Later, I pulled in these individual stories and groupings in relation to the focus group conversation, their responses to others statements, agreements and disagreements with others. By comparing story themes across participants, and other focus group sessions, I was able to begin understanding them as functions of identities. Finally, I reviewed these stories for obvious silences or absences.

I attend to embodiment theory and intersectionality theory in the analysis through the appreciation of lived experience. I attended to embodiment by looking deeper at how "the body takes shape, changes shape" (Ahmed, 2000, p. 159). This allowed me to better analyze when youth discussed the way that their physical bodies interacted with social boundaries, or vice versa, when their social identities interacted with physical boundaries. Intersectionality was attended to through the analysis of identities as in place at home, but also as in the lived experience of needs, wants, and desires. Therefore, intersectionality and embodiment allowed a more present and whole analysis that recognized the geography of the socially-bounded home and the individual lived experience.

Just as Oswin (2018, p. 100) writes that queering her study's analysis helped her to "position sexuality within multifaceted constellations of power", I also provide this thesis with an analysis that positions youth participant's complex identities within constellations of power. My analysis understands sexual wellbeing to be both an embodied and active practice with real physical, auditory negotiations and boundaries, as well as a discovery of self through time and space. All of this sits on a background of team collaboration, engagement, and most importantly, learning. Through the use of focus groups and mapping exercise, I began to understand these constellations and build out what would frame the following three body chapters that focus on the empirics. Mapping the home, the bedroom, and sound in negotiating and boundary-making for sexual wellbeing, relied on our research method's ability to represent identities and embodiments in place.

CHAPTER 4: MAPPING THE HOME

This chapter focuses on narratives of home as relationally intergenerational spaces.. I argue that a feminist understanding of home is plural because the voices, identities, and subjectivities existing in homes are both plural and complex. I use maps to reveal these relations. Using 3 "types" of mapped homes: queer homes, intergenerational homes, and single parent homes, I understand home as both plural and subjective. I use intersectionality theory to examine how these homes operate within systems of oppression and youth identity expression.

4.1 Mapping Participants' Locations

Before analyzing the negotiations and boundary work that youth did for sexual wellbeing practices, I analyzed where they were in their homes during the focus group sessions. When participants joined our focus group virtually, most retreated to the spaces where they felt most safe or most private in order to participate in the discussion. As an ice-breaker, I asked participants to sketch a map of their current location within their home and invited them to show their drawing on screen or describe it to us. This exercise was inspired by Lynda Johnston's research on drawings of lesbian feelings of home (Johnston, 1995). Drawing on Katz's invitation to consider the relationship between fieldwork and our everyday life, I analyze where and why participants chose particular spaces. I asked participants to sketch a map of their current location within their home and invited them to show their drawing on screen or describe it to us. This exercise was inspired by Lynda Johnston's research on drawings of lesbian feelings of home (Johnston, 1995).

Our safe(r) space promise to participants meant that we would not record the session, nor screenshot the maps that youth drew or discussed. This was, in part, to protect their anonymity,

but also to encourage them to be creative without judgment or the pressure of creating a finished or perfect product.

Mapping youths' location at home revealed how their narratives of home are inseparable from their participation in this study: their decision to participate was interlocked with their perceived ability to find a private space and to engage in a sensitive conversation. While the following two sections consider the mapping exercise and participants' own drawings, it also pulls from discussions throughout the focus group session to show how intergenerational queer and single-parent homes are mapped differently due to inherent power relations that differ from other participants more nuclear experience of home. This chapter profiles the voices and lived experiences of Aaliya, Tye, Braylin, Sage, Kenma, Tom, Bri, Vic, and Olivia.

4.1.2 Mapping youth's place in an intergenerational home

The study of intergenerationality is fairly new to geographers (Vanderbeck & Worth, 2015). While work has looked at how power dynamics in intergenerational relationships sustain the patriarchy (Kandiyoti, 1988), work on intergenerationality with regards to space is still emerging. More recently, work on embodied intergenerationality (Richardson, 2015) has emerged, as well as important research on the lived experience of Black family intergenerationality, which allows important community narratives to be passed on (Scott, 2020).

I decided to use the term "intergenerational" as opposed to multi- because inter- represents relationships more wholly, while multi- simply acknowledges more than one generation. In this thesis, an intergenerational home is defined as a home with more than one generation existing within it, and as affected by their relationships within. There were intergenerational homes that represented typical living arrangements for participants, as well as intergenerational homes that were created by COVID-19 circumstances.

Aaliya, a bisexual girl who identified her race as "other", mapped her location in relation to the intergenerational quality of her home:

> *Usually I'm in my room, but my grandma is staying in there for now. So, I'm in my dad's room and my sister is downstairs cooking along with my other younger sister. And usually my brothers are in the basement, so I didn't have the option of going to my basement either. So, I had to resort to my dad's room.*

Aaliya's location description does not merely outline where she is located in her home, but rather why she is located there. Although I only asked where Aaliya herself was located within her home, she also refers to where her family members are located. Feminist understandings of home recognize that the house is home in the sense that it is a space where power relations are also spatial practices (Okafor, 2018; Gorman-Murray, 2015, Blunt, 2005; Young, 2002). Neither grouping her entire household as a singular entity in the space of home, nor individualizing herself as solely separate from the rest of the household members, Aaliya speaks to how her intergenerational home is a relational construction. Aailya had to "resort" to her dad's room, while her brother was able to use the basement and her grandma stayed in Aaliya's own bedroom. A dimension of gender inequality exists here, where Aaliya, as a daughter, expresses being unable to use the basement due to it being her brother's domain. This example of uneven power is both informal and private at home, similar to how Davies et al. (2019) argue that gender inequality is oftentimes informal and in private too. They advocate for the recognition of these informal and hidden ways.

Tye, a bisexual, middle eastern girl, said that her grandparents live in her home "sometimes":

They're like going in and out between my parents' house and then my uncle's house. So, when they're over, the house is really crowded. And their guest room is right next to my room. So, like, they're always like, in and out of my room too. So [privacy is] kind of like non-existent when they're over…

Ahmed's belief of the home "as receivers" and on the ways "spaces receive the impressions of the bodies that come and go"(Antwi et al., 2013, p. 117), relates to Tye's experience of the coming and going of her grandparents within multiple homes, as well as their going in and out of her room. Therefore, Tye's impression of her bedroom is that it is not a private space when they are there, as the space has received the impression of their bodies.

Similarly, to Easthope et al.'s (2015) study on feeling "at home" in intergenerational households, participants described challenges such as a lack of privacy even in their chosen private space. The need to change how and when they use a space in response to the presence or needs of other household members, as well as the dedication of certain spaces for the sole use by specific household members impacts their ability to negotiate privacy. These challenges reflect the power relations within the home. While multiple household members can see one household as their home, each individual's experience of it as a physical space and as an emotional or affective space can vary greatly. These differences combine not only with intersections of race, gender, and class, but as seen in the intergenerational household, with generations or age. But, as work in intergenerational homes has stated, "the concept of home allows for a plurality of voices" and some critique "the tendency to categorically prefer a vision of control and exclusion" within them (Kreiczer-Levy, 2014, p. 160).

The physical space of the intergenerational home holds many challenges for adequate sexual wellbeing practices, especially as stay-at-home orders intensify the amount of time and

the amount of people at home. Additionally, youth in an intergenerational household greatly differ in their understandings of privacy due to their experiences of the home as an intersectional space, which is mediated through the power relations that exist between household members.

4.1.3 Mapping a queer youth's space: 'Queering' the home

Understandings of home are multiple, especially for queer communities (Matthews et al., 2000). Geographies of home have often painted queer youth who live in heterosexual nuclear family homes as living in an oppressive space, where violence and homophobia might be present. While we did speak with participants who did not feel welcomed due to their sexuality, many participants in this study described numerous circumstances of acceptance and openness in their home for their sexual identity and exploration.

Gorman-Murray (2008) who analyzed coming out narratives to argue against the normalization of the homophobic nuclear family home, says that homes that are supportive and welcoming to their queer youth can affectively "queer" the family home as a geographical space. Similarly, Bain and Podmore (2021) argue that paying more attention to queer suburbanisms would deconstruct suburbia as being heterosexualized. In my analysis, I found many youths experienced a queered home, where they not only felt accepted, but were able to openly practice sexual wellbeing through a queer identity. But others confronted challenges to belonging as their identities were not accepted by household members. Nonetheless, while "space is not naturally authentically "straight" but rather actively produced and (hetero)sexualized" (Binnie, 1997, p. 223), it's also important to map where space is actively being queered, whether this is accepted by others or not.

Take Braylin, a pansexual, white, nonbinary youth, who said their family did not allow them to "see anyone" during the pandemic, but were open to "having [their sexual partner]

over". Sage, a white lesbian girl, said she talks about sexual wellbeing with everyone in her family, saying: "We're very open, like, I talk to everybody about stuff like that. I'm just open about it." When asked what she specifically talks about, Sage says:

Yeah, if I'm just talking to somebody, like at all, I want to talk about them. It's fun for me to talk about how much I like them, who they are. I have like four siblings so, yeah, I like to talk about that stuff, especially because it's one of the only interesting things happening during a pandemic. I mean if you're talking to somebody, it's kind of really interesting and fun for you. But yeah, I just like talking to people. I'm not in a relationship, but just when I meet new people and I'm talking to them in that stage, I'll talk about it [with my family].

'Just talking' was an important relationship stage to many youths in these focus groups. Ironically, 'just talking' is defined as it *not* being a relationship stage, but rather a potential stage for a possible relationship or just a fun experience for one or both parties that are not looking for anything more serious. The 'just talking' stage has been an emerging trend prominent in youth cultures within the last few years (Sibley, et al., 2017; Sibley et al., 2015). Similarly, to the emergence of ghosting thanks to the increase in ICTs (smartphones and dating apps) have played a role in the creation of the "just talking" stage (Sibley et al., 2015).

Sage's quotation is indicative of her energy throughout the focus group… Sage was a particularly talkative and open focus group participant. It is important to note, however, that not all young people are as open to sharing details about their personal lives with their household. While Sage described the openness she has with her family, other participants described moments and interactions that turned the heteronormative space of the family home into a site of sexual difference, sexual exploration, and ultimately, sexual wellbeing, not through open

dialogue with their household, but through negotiations with the physical space. In particular, during the mapping exercise, some participants described their ability to queer their space through LGBTQ paraphernalia like posters and flags. One participant described hanging a pride flag in the basement while another hung one behind their bed. This creativity speaks to Bain's (2014, p. 215) work on artistic intervention as a way to turn home "into counter-spaces of cultural production that resist social conventions and property norms".

> Kenma, a bisexual, white youth, drew her room and how she uses posters for privacy:
>
> *So, it's not very good but I drew kind of a lot. And so, I'm in my room and I kind of have posters all over so that's kind of like privacy and I have a lock on my door. You can see some of my posters I realized…*

Kenma represents a creative boundary-making process. Her use of posters is both a physical and symbolic queering of her space, in addition to a boundary for privacy. Participants also often invoked a queer imagination in their private space, where sexual wellbeing practices might happen, if not for stay-at-home orders, such as Tom.

Tom, who identifies as trans, bisexual, and white explains their frustration with being in lockdown and its effect on their sexual wellbeing. Rather than just describing how they miss physical intimacy, Tom says "I'm not just able to kiss my girlfriend or hold her hand or hug her anymore, like the amount of times that I've literally just sat hugging my laptop in my room pretending that I'm hugging her on the other end… it's depressing". Tom's imagination of intimacy within his bedroom shows how sexual wellbeing itself is embodied even when it is not being actively practiced during the present moment. It also shows how ICTs are an extension of sexual wellbeing, almost as if ICTs are an extension of the body itself in the bedroom. The

bedroom for Tom is clearly a space where their lack of and longing for intimacy plays out in real, embodied ways. Tom also describes their virtual date-nights:

> *We would dress up in nice clothes and get whatever food our families were making or we have made ourselves or sometimes we'd like to make the same meal, like we'd make mac 'n' cheese. And we'd zoom call each other and watch a movie or something and then sometimes have a "sleepover" after and do kind of fun activities like that and we'd joke around like "Oh this mac 'n' cheese is delicious, this restaurant is just beautiful!" Like stuff like that, right? Most of that takes place in my bedroom, that's pretty much like I said earlier, where I exist from. So, I mostly date my girlfriend from my bed now.*

Mapping out this virtual date in Tom's bedroom reveals the ways that some youth are working through a sexual wellbeing practice under lockdown restrictions. The bedroom, which will be covered in the following chapter, was often deemed youth's safe space where they could practice sexual wellbeing.

In addition to the creative use of a virtual dinner date, Tom expresses how they "have a sleepover", alluding to sexual acts, albeit virtually. Tom maps their bedroom not only as the place they engage in sexual wellbeing practices, but also as the place where they "exist from", and where they "date" from their bed. While other studies have found that youth have difficulties in identifying and expressing their own needs for open spaces (Smaniotto Costa, Batista, Almeida & Menezes, 2020, p. 5), this research shows that some youth, like Tom, know what they want and need for and in a virtual space.

Tom's quotation is an empirical example that represents how ICTs are used to blur virtual and physical space to find intimacy, privacy, and queerness within bedroom space. I will discuss

ICT and bedroom culture later, but this example shows how connected ICTs are to identity during lockdown.

While many participants expressed their family's openness and ability to queer their space, others did not have the same experience. In particular, those who identified strongly with a particular faith (Catholic, was a re-emerging religion across focus groups), expressed the struggles of living through a pandemic in a home that does not accept queer identities.

Bri, a nonbinary, pansexual white youth, and Vic, a two-spirited transwoman and Hungarian immigrant, connected during the focus group over sexual identity and religious identity. Vic, who identifies as Catholic, said she had to leave the Catholic Church as an institution due to being LGBTQ, even though she was "really devoted". Bri reflected similarly, discussing how she had to hide her identity from her family:

> *I had to hide everything from my family. My grandparents are very traditional and stubborn. They don't want to be educated, so whenever they see my boyfriend, my mom automatically is like "Oh, that's Bri's friend, just a friend over for a project, nothing like that". And it was really hard being a person of LGBTQ and who is nonbinary, I have to hide all of this from my family and friends, because not everyone likes this or accepts my lifestyle.*

Bri's story represents an understanding of how sexuality is positioned within power processes at home. They make the distinction that they must "hide" themselves from those in their home, noting that even bringing their girlfriend into the home, does not allow for their home to understand their sexual identity. Bri says they are still figuring out their gender and sexual identity and has had to learn about sex and sexual identity through social media. They also said that they still use a private browser to Google information about identity, in fear that their

parents will see. It's important to note here that while home for some queer youth sometimes felt freeing and explorative, others felt that they had to hide from and in particular spaces in order to feel "at home". As Schroeder (2018, p. 268) argues, "the intersectional identities of queer youth enable, restrict, shape, and are shaped by complex forms of intergenerational and intergenerational interaction and relationships". Therefore, when I map out a queer or racialized youth's space or an intergenerational home, it is vital that we recognize the space interacts, not only with their own sexual identity, but with the identities and attitudes of those also in the home. Mapping intersectionality also documents who is taking up space and "occupying space has proved an important queer tactic" (Valentine, 2003b, p. 417). Therefore, Bri's experience positions boundary-work as a tough, but also creative and resilient practice influenced by identities of youth looking to practice sexual wellbeing on their own terms, in their own spaces. Because while Bri's experience at home has not been easy, they say that being online during lockdown has allowed them to be out to people on some social media platforms. Bri also says being able to put their pronouns in their bio has been fulfilling. They compared the accepting online communities that they interacted with from home online with the "physical, in-person relationships" at home. Therefore, mapping out or making visible these instances of the home as being queered or as being hidden is essential to mapping how power is in place at home.

4.1.4. Mapping youth's place in a single parent home

Olivia (she/her), a bisexual, East Asian youth, lives in a single parent home. She described her map of her home, first by describing her mother's place within it (rather than her own). Pointing out her mom's room, then her own bedroom next to it, she moves on to her mom's bathroom, then her own. Olivia's mapping suggests that her boundaries are made up or declared on what is "hers" and what is "her mom's".

This dichotomy of space was something that was brought up by other youth that lived in single-part homes. Often, space was designated solely by the parent. The spaces that were left, were either divided up amongst children, or the single child. Therefore, when mapping the single-parent home, most youth described their home as parental vs youth space, rather than "our" space. This is exemplified by Olivia's hesitation to describe the living room as an "our" space when she says: "... our living area, I guess, which has been taken over by her teaching school online".

Olivia says that there is tension due to communication issues with her mom:

I feel like because it's just my mom and I, we argue about everything. We literally just finished arguing about some shoes. It's just, it's just because like, you know, it's like high tension. Like, we've both got work and school at home… I feel like it's because there's no, like, the environment is kind of so mixed with, like, everything we're doing, like, it can become overwhelming at times for both of us. And then the fact that there's not anyone else in the house to like, blame. You know, it's just like, "I'm gonna yell at you and you're gonna yell back at me.

Olivia's experience shows that despite research showing overcrowded homes or large families as tense, a single parent home and single child home can also be just as overwhelming during the pandemic. While I do not mean to paint the single parent home as inherently toxic or stressful, Olivia's experience shows how full-time work and school intensify many formations of home during the pandemic.

Olivia also started a relationship during the pandemic, and found that they were able to connect often despite being in different time zones. By having a lot of time at home to be available online, Olivia felt she was able to grow her relationship. She also had plans to move to

the UK in the summer to live with her new partner. As their relationship has progressed over the pandemic, Olivia says she holds all of her serious conversations virtually and in her bedroom, "and if it's really serious, then I wait till my mom's out." Again, ICTs in the single-parent home represent the ability to connect without interruption, but even serious conversations must wait until the parent has left.

4.2 Why Map?

Mapping where marginalized youth practice sexual wellbeing, exposes the ways that private and public understandings of the self are connected with sexual identity and the home. When we make these youth's experiences visible, we draw the connection between space, place, and person. If we compare all three homes (the intergenerational home, the queer home, and the single parent home) to each other, we can see that these signifiers *are* identities to these individuals, despite them not being strict race, class, age, gender identifiers. Instead, individual youths complicate their own identities by giving their own home one. Therefore, race, class and sexuality complicate our understanding of home to reveal that while individual youth hold these identities, so too does the home as a place.

In addition to this, digital technologies create a hybrid virtual-material space of privacy and intimacy, especially within these three types of homes (youth in an intergenerational home, a queer youth's home, and youth in a single parent home). ICTs were especially meaningful for all youth in these different homes. But there are many different "identities'' of home, from homes with disabled youth, homes with adoptive children, homes with blended families, and homes with roommates that remain understudied. Expanding on the geographical idea of maps as narratives, these participant's experiences are linked to a wider understanding of space as

relationally defined, but individually perceived. Relations and individual agency are both bound up in these youth's experiences of sexual wellbeing at home.

CHAPTER 5: THE BEDROOM IN NEGOTIATING AND BOUNDARY-MAKING FOR SEXUAL WELLBEING

This chapter focuses on boundaries at home as both social and spatial, defining who belongs and who does not. This chapter argues that youth's boundary-making in the bedroom represents their ability to negotiate boundaries in a space rife with power relations (home), during a time where home is a more intense locale than ever (due to the COVID-19 pandemic). Relying on McRobbie and Garber's (1976) concept of bedroom culture (which said while boys tended to dominate the street cultures, girls created a culture of their own within the space of the bedroom), I expand the concept through participant's experience of their bedroom, arguing that the bedroom is not just as a site of cultural production, but one of negotiating for sexual wellbeing and therefore, agency of self. I also expand the concept to include not only gender, but sexuality and ethnicity, two facets of individual identities that McRobbie and Garber (1976) left out in their analysis. I outline the significance of the bedroom as sometimes 'refuge' and sometimes the "best option", as well as the physical boundary-making processes that youth employ. McRobbie and Garber (1976) saw the bedroom as a significant site of privacy and personal space, but they neglected to describe the boundary-making processes that make that place private and personal. Therefore, before using Hernes' (2004) concept of boundary work in Chapter 6 for sound, I leverage it here to argue that the bedroom is a space that youth made their own through physical, social, and mental boundaries. This chapter uses embodiment to understand how the sexual and the private takes up space in the body, within the geography of the bedroom, and intersectionality, to reflect youths' experience.

5.1 Theorizing Bedroom Culture

McRobbie and Garber's (1976) work is a conceptual tool for understanding how adolescent girls grow socially at home, specifically in the bedroom. A feminist perspective, the concept considers the home to be much more than a domestic space of reproduction, but also one of cultural production. Most importantly, they asked: "Do girls have alternative ways of organizing their cultural life?" (McRobbie & Garber, 1976, p. 186). They discovered the answer was not straightforward. Rather than girls creating an entirely different subculture in an entirely different space, they found that girls created a "complementary way in which girls interact among themselves and with each other to form a distinctive culture of their own" ((McRobbie & Garber, 1976, p. 186). By arguing that negotiations are not often located out in the public sub-culture for girls, they say that "girls can be seen to be negotiating a different space, offering a different type of resistance to what can at least in part be viewed as their sexual subordination" (McRobbie & Garber, 1976, p. 188). While the Teeny Bopper culture required "only a bedroom and a record player and permission to invite friends" (McRobbie & Garber, 1976, p. 187), we now see the bedroom culture differently, with the introduction of ICT and the COVID-19 pandemic lockdowns. Nonetheless, McRobbie and Garber (1976) work remains a conceptual tool for this theses' understanding of how adolescent girls organize and negotiate boundaries for sexual wellbeing, specifically in the bedroom.

In discussing the bedroom as a space, McRobbie and Garber (1976, p. 187) argue that "it might offer an opportunity for girls to take part in a quasi-sexual ritual" noting, that at the time, girls had no access to the masturbatory rituals common with boys. This is important as it reflects this thesis' own goal of making visible the spaces where girls *can* take part in sexual rituals. Since then, bedroom culture has expanded. Lincoln's (2016) more recent work also reviews how

bedroom culture exists within a wider context of how bedroom as a space is used by youth to negotiate boundaries.

We could also consider bedroom culture in the context of increasing ICTs. Valentine (2004, p. 56) says that ICTs "offer a cloak of anonymity", so there also remains the question of how youth use this anonymity to negotiate and create their own boundaries, which I will delve into in the following section. The critical, albeit indicative of the period, question that McRobbie and Garber (1976, p. 179) asked in their work is: "Are girls really absent from the main post-war subcultures? Or are they present, but invisible?". Similarly, this thesis works to make visible adolescent girls', trans' and nonbinary youths' presence in their bedrooms during the pandemic. While pandemic literature often focuses on the home as a site of work-from-home activities, this thesis considers it to be a space of sexual wellbeing and growth for an age group and gender that often goes unseen. I take McRobbie and Garber's (1976) concept further, beyond cultural production, towards one of girls', trans and nonbinary youth's sexual agency, resilience and resistance during a pandemic.

5.1.1 ICT and Bedroom Culture

While the social world was once considered "outside the home" or "in public", thanks to virtual worlds and social media, the social and virtual world have blended and can take place simultaneously within the confines of the bedroom. Scholars have argued that the bedroom, online space, and digital technology objects, have all melted together to create places of "personal space", fit for self-expression and identity-making and bound up within the desire to control for privacy (Hodkinson, 2017; Lincoln & Robards, 2016; Lincoln, 2014; Hodkinson & Lincoln, 2008). In fact, recently, the bedroom and its intimacy has been compared to social network sites, arguing that ICTs still retain intimacy and that their individual-first format can

actually positively facilitate the expression (and mapping) of identities for youth (Hodkinson, 2017). In addition to this, the internet straddles a strange space where youth can find both privacy and radical activism, community and isolation.

Isin and Ruppert (2015, p. 7) discuss the meaning of digital citizens, arguing that the increasing involvement of social groups in politics online, particularly youth and women, has "opened up various meanings and functions of being citizens". For Isin and Ruppert (2015), youth existing online is about more than creating communities of safety or support, it also represents the very real potential for youth civic engagement in the real-world. As Bain and Podmore's (2021) 'Relocating queer' discusses how queer politics take place in unexpected smaller places (New Westminster and Surrey, BC), the online space is also sometimes an unexpected site of revolution, activism and radical work. But Isin and Ruppert (2015) also note the important distinctions between the two, such as the discussion of rights and its role online (between "non-digital rights" such as political, cultural, economic and sexual versus "digital rights" which include access, privacy and anonymity. As the following two chapters demonstrate, the rights that youth discuss go beyond the binary of digital vs non-digital rights that Isin and Ruppert (2015) claim. Instead, the youth merge this dichotomy of digital and non-digital citizens within the bedroom, often online.

Instead of viewing ICT as a separate social world in the bedroom, the pandemic has brought the two together into one reality within the bedroom space. Hodkinson (2017, p. 274) argues that despite the rapid rise of ICT, the online world for teens can still be a place of "personal territory, intimacy and individual control". While McRobbie and Garber (1976, p. 213) found that bedroom culture consisted of ''experimenting with make-up, listening to records, reading the mags, sizing up the boyfriends, chatting, [and] jiving'', we've experienced a different

culture lately due to the pandemic. The Teeny Bopper culture requirement of "only a bedroom and a record player and permission to invite friends" (McRobbie and Garber, 1976, p. 187), has shifted during the pandemic, where instead, friends are invited virtually into bedrooms. And while they noted media consumption as a major piece of girl's bedroom culture, today, bedroom culture is directly linked to social media and ICT in deeper ways. Instead of simply consuming media, bedroom culture today is about existing within multiple realms: the virtual and material world, straddled between the blurred public *and* private. Ghosting, and other relationship traumas, can take place between this blurriness.

Lincoln (2005) argues also that neither McRobbie and Garber (1991) nor DeNora (2000) considered ITC as a piece of the musicalization of the bedroom. In Chapter 6, I will discuss sound as boundary, but ITC, sound and bedroom culture still blend here. While Lincoln (2005) focuses exclusively on how music changes the bedroom from space to cultural/social hub for teenagers, her argument that ITCs are still missing, remains incredibly salient today. Lincoln (2005) developed a theory of 'zoning', which incorporates the physical space and organization of the teenager's bedroom into a musical experience, which is intensified through ICT. In the early 2000's, take the sounds of a teen's favorite album playing. Today, we might hear Spotify or Apple Music streaming the latest hits. Netflix and other popular movie streaming services are sometimes played nonstop. YouTube videos such as ASMR or Mukbangs or Haul videos often act as background noise to a study session.

In addition to the sounds we hear from *others* in the bedroom, Kearney (2007, p. 134) also pointed out that ICT has changed girl's bedroom culture, specifically as "inexpensive, user-friendly, productive media technologies" have become introduced. Take the personal camera and computer, as well as the myriad of ways that one can now digitize film, art, music, photos and

writing to be either directly digitally sent to another or uploaded to YouTube. Along with this, I argue the introduction of instant message chatting sites and social media platforms like Facetime and Instagram have led to another dimension, one that is simultaneously productive, yet without substance in the sense that no media is created, it is rather simply shared and generated. Still, these ICT all have sounds and a visual quality that take up space in the bedroom culture of today.

There are other aspects that McRobbie and Garber (1976) argued with bedroom culture that do not hold true today. For example, they argued that there are no risks involving personal humiliation or degradation, such as being stood up or dumped when one is in the bedroom. Clearly, modern times contradict this, as virtual relationships and the increase in ICT make being humiliated, harassed, or abused very real and possible in the bedroom. In addition to this, McRobbie & Garber (1976, p. 187) argued that bedroom culture "can be seen as a kind of defensive retreat away from the possibility of being sexually labelled", which no longer holds up today. The quotation is untrue in two ways today: not only can ICTs be used to publicly sexually label girls within the confines of the bedroom, but also the idea of the bedroom as a defensive retreat is not always possible. For a lot of the participants in this study, the bedroom did not represent a retreat from the world, but a sense of resilience in a raging pandemic. Or it could represent a toxic place, not acting as a safe defensive haven, but as a harmful site of abuse or harassment. Along with this, McRobbie and Garber's (1976) work is outdated where they argue that the bedroom may offer girls a personal and autonomous area to anticipate the future ideal marriage. They describe how elements of fantasy are deeply entrenched in bedroom culture, and while they point out that "there may certainly be elements in Teeny Bopper culture which enable girls to negotiate a space of their own" (McRobbie & Garber, 1976, p. 187), their work can be modernized to include more examples of resistance and resilience within bedroom culture.

Hodkinson (2017, p. 286) argues that intimacy built online might allow youth to "take advantage of the individual orientation of social network sites to exhibit, play out and reflexively map identities and transitions". Hodkinson (2017, p. 286) also argues that we could think of social networks as "performing the role of personal home territories for young users – familiar, individually centered base points for sociality and identity in the context of complex, multi-spatial lives and identities". I push this further to posit that the bedroom and the online world blend here for the individual, where the social network does not simply perform the role of a personal home territory, but actually exists within the personal home territory as a piece of the spatial puzzle.

The use of ICTs within both public and private space create a hybrid world of virtual-material reality. This hybrid virtual-material world exists within the more than visual, as it has sound bubbles and invisible boundaries. I'll be discussing these boundaries, and how they intersect with power, next.

5.2 Power and Boundary Work

Blunt and Dowling (2006 p. 24) explored the concept of a critical geography of home where home, as a geographical site, forms identity as "people's sense of themselves are related to and produced through lived and imagined experiences of home. These identities and homes are, in turn, produced and articulated through relations of power". Similarly, boundary-making and boundary work is produced and articulated through relations of power as Massey (1993) argued. Additionally, the lived and imagined experience of home sits deep within emotion, as Ahmed (2014) argues, emotions are a boundary making force. Consider also Coen, Davidson, & Rosenberg's (2020) work on emotions and gendered boundary-making of an *everyday* exercise environment. But in order to understand boundary-making and power, we must first understand

how feminist geography has emphasized that the home is not a perfect place of security or safety, but rather is a place that can also be experienced as a site of conflict, anxiety and fear (Blunt, 2005, Pratt, 1999; Massey, 1994). The boundaries that exist at home are both social and spatial; they define who belongs and who does not. Therefore, *what* defines home and *where* it is defined is reliant on the power processes that shape it. Gender and age is a way to look at power at home. By understanding the intersectional identities of participants, we frame different power processes that exist where gender, race, sexuality exist. Kitchin (2016, p. 815) explains this through Massey's (1993) notion of power geometries, arguing "the socio-spatial processes that help shape and define places do not operate evenly, with different social groups and individuals relatively positioned as a consequence". Consequently, it is vital that we understand identity-making, belonging and boundary-making as intense work at home, work that is gendered and embedded with power relations and emotions of fear, anxiety and insecurity, especially for marginalized populations (Chawla & Jones, 2015).

For many feminist geographers, the home is a place of negotiation and relational exchange. Brickell (2012, p. 226), for example, writes about the "recognition of potential conflict between the agency expressed by individuals and by the household permeated disciplinary boundaries". Ahmed (2014, p. 51) says "boundary formations are bound up with anxiety not as a sensation that comes organically from within a subject or group, but as the effect of this ongoing constitution of the 'apartness' of a subject or group". Take Johansson and Lundgren (2015, p. 190), who saw gender as practice for boundary work in excluded spaces in Swedish supermarket job rotation, focusing on how "the implications of space and the ways in which gender, work and space are mutually enacted or enacting". Therefore, understanding how boundaries interact with

gender and existing power relations reveal how the home as a space is an intense locale for understanding youth's ability to negotiate boundaries.

Hernes' (2004) defined a framework for studying organizational boundaries, pointing to three parts: *physical*, *social* and *mental*. Johansson and Lundgren (2015) expand on Hernes' (2004, 69 –71) work, detailing his influence from Lefebvre before bridging his concept with the idea of gender as practices. Johansson and Lundgren (2015 p. 190) refer to *physical* as "efforts to create and/or use tangible and material structures" to manage interaction between people and things, *social* refers to the "practices that attempt to maintain social relations networks, define membership and regulate norms of behaviours that members learn to follow and not overtly transgress (for example, trust, social identity, love, dependency, loyalty and behavioral norms). Finally, *mental* boundary work looks at "how spheres of theory, meaning and thoughts, consisting of, for example, knowledge, learning and sense-making, are used to explain and (re)create boundaries between collectives" (Johansson & Lundgren, 2015, p. 190). Bratt (2002) has also created a three-piece framework, but for understanding family wellbeing through its connection with housing. This framework is important to note in this thesis because it represents a spatial understanding of wellbeing. Bratt (2002, p. 15) says family wellbeing is dependent on 1) the physical characteristics and availability of housing 2) the relationship of housing to its occupants (affordability, stability, and opportunities to create a positive sense of self within it) and finally 3) neighbourhood conditions (access to employment and education). But while Bratt's (2002) typology is important, it neglects the fluidity that exists between boundaries in the home. The physicality, the relationships and the conditions, while each individual important pieces, do not adequately represent the boundaries that youth flowed together to represent their

homes in these focus groups. Instead, I consider the relationships between household members, the geography of the bedroom and the time of the pandemic.

While boundary-making for youth is not new, the COVID-19 stay-at-home orders are. Geijsel and Meijers (2005, p. 1528) argue that "'boundary experiences'—experiences of learning or growth, often fraught with conflict, uncertainty, and emotion—play a central role in identity work".. Therefore, these intense boundary experiences that took place during a pandemic are doubly so, wrought with major anxiety and uncertainty due to a 'new normal'. Therefore, while expansion and innovation of ICT plays a major role in bedroom culture and in anxiety and uncertainty due to blurred boundaries, the coupled nature of ICT with a pandemic intensifies this, blurring boundaries through time and space.

This chapter considers how youth negotiate boundaries in their bedrooms as they practice sexual wellbeing. It analyzes how youth understand the bedroom as a private place and how they negotiate and set boundaries there. This analysis reveals how power relations relate to the private bedroom and its boundaries, or lack thereof.

5.3 The Spatiality of the 'Private' Bedroom

Adcock (2016) argues that the bedroom as a site has not been thoroughly explored by youth geographers, as research in general tends to look at youth and their relationship with public space, rather than private space. Additionally, the notion of what constitutes a 'private' space has been complicated more recently for today's, as virtual school and social networking has increased, and even more so due to the pandemic, blurring the boundaries of public and private even further (Livingstone, 2005). The spatiality of the private bedroom blurs this even further, as it is a space where adolescent girls, trans, and non-binary youth privately practice for sexual

wellbeing, but the boundaries of this are negotiated by power relations and identities that are very much public.

Much has been written on how youth become increasingly involved in identity work as they move through adolescence (Brown et al., 1994; Valentine, 2003a), with many arguing the bedroom specifically plays a critical role in self-discovery (Adcock, 2016; Croft, 2006; Brown et al., 1994) and a representation of self (Lincoln, 2014). The following analysis sees the bedroom similarly as it most often one of the only spaces at home that youth are even able to negotiate some privacy in (Abbott-Chapman & Robertson, 2009; Lincoln, 2015). Queerness is of particular note here, as queer youth often face more challenges in finding and negotiating privacy. Youth actively queered their spaces, despite being isolated. Oswin (2018, p. 89) says that geographers "generally depict queer spaces as spaces of gays and lesbians or queers existing in opposition to and as transgressions of heterosexual space", but that queering a space means producing a space as queer *actively,* rather than being only in tension with an already existing heterosexual place. The participants in this study show this active queering through their negotiations for privacy in their bedroom.

In order to understand how participants discussed their bedroom, I analyzed what the bedroom as private space meant for youth. First, I look at those who saw the bedroom as refuge. Second, I look at the bedroom as discussed by participants as the best available option for their privacy at home. Then, I look at the perceived quality of the space in allowing for sexual wellbeing practices and the negotiations that had to be made in order to have privacy for sexual wellbeing practices. Finally, I understand digital citizenship and the fusion of material and virtual worlds as an extension of privacy and sexual wellbeing. In this analysis, I discuss who has to make privacy negotiations more than others, what kind of negotiations are made and why.

5.3.1 The Bedroom as Refuge or Best Option? The Socially Bounded Bedroom

McKinney discusses how each household member's "physical and mental space within the home is that person's haven from the rest of the family" where a private space of one's own can create healthy "mental and emotional barriers between oneself and others" (McKinney, 1998, p.1). The bedroom is an important area to research, as many girls describe their bedroom as their favourite place (Abbott-Chapman & Robertson, 2009; James, 2001).

For some participants, the bedroom was their private space where negotiations for privacy with other household members did not have to be made often, or at all. Meaning, the bedroom represented a socially understood boundary, and therefore social boundary-making was not so necessary, as it had already been socially understood by the household. Bri, a nonbinary, pansexual white youth, who uses she/they pronouns, identified their bedroom as such, saying this:

> *I don't have a lock on my door, but me and my family have a thing where no one really*
>
> *comes in my room, but if someone needs to talk to me they will knock or like, I will be*
>
> *downstairs to talk to them. Like, I'll make myself known to you.*

Bri's boundary-making in the bedroom stems from a family understanding that one must knock in order to talk with them or they will leave their bedroom to signal that they are open to discussion. This boundary signals not only their need for a warning before someone enters their designated private space, but that they have created a sharp distinction between which spaces within the home they are available to the rest of their household in. Bri's leaving of the bedroom to signal availability is part of a physical boundary signal that is socially understood by her home. But Bri also alludes to the sound warning of knocking as a major piece of boundary work that does not fit adequately into the categories of physical, social, or mental completely. Sound,

therefore, is a major boundary-marker and as I will discuss in Chapter 6, boundary-maker, for youth during the pandemic. By delineating exactly which space is private to them and which space they are publicly available, Bri represents youth's ability to set strong boundaries at home, a space where public and private boundaries are often blurred.

While many participants deemed the bedroom their chosen safe or private space at home for sexual wellbeing practices, many only saw it as their best option. Take Misty, (she/her) a straight, Black youth who said:

> *I don't really have any privacy, because I don't have a lock on my door, my siblings come barging in whenever they want to… I had my own room until about the last two years. I used to share a room with my siblings. And so, I think that that's why they are just used to sort of walking in any time they want and they forget to close the door. They don't have the practice. I have little privacy, the most I got is my bed. It's not really a private area. Yeah that's the only place, just one little corner of privacy.*

Misty argues that because she does not have a lock on her door, her siblings enter at will and therefore she "[doesn't] really have any privacy". Misty represents a physical boundary-maker here, that of a lock. Without, her perception of her own privacy is that it is suffering. And while she refers to her bed as a space of privacy, "it's not really a private area" due to the physical act of siblings being able to barge in. Misty's experience represents how the social need for privacy has real physical implications at home.

These "little corners of privacy" that Misty speaks of are also important to consider. Kearney (2007, p. 130) says that describing all bedrooms as personal and autonomous is problematic because it "suggests that all girls' homes contain private spaces where they can freely relax and socialize". Based on previous research, and findings from this study, we know

this is not true. While analyzing who deems their bedroom as their refuge, I found that white youth were far more likely than BIPOC to identify their bedroom as a private space where they had to do little to no negotiations for privacy. Take Liz (she/her), a queer, white youth, who's bedroom is entirely her own private space, where "[she] and [her] cat, just vibing alone". BIPOC youth, on the other hand, said they still had to make constant negotiations for privacy within what they identified as their own private space of the bedroom. Meaning: BIPOC youth were more likely to deem the bedroom as their private space solely due to it being the best option they had in the home. Take Valerie, a bisexual, Southeast Asian and Latinx/Hispanic girl who says she does not "have much privacy elsewhere". While many white youths cited the bedroom as the best space for sexual wellbeing practices, BIPOC youth often said their bedroom felt like their best available option and that they still had to make privacy negotiations often. Tye, a bisexual, middle-eastern girl whose grandparents are "always, like, in and out of [her] room" or Janice, a bisexual, East Asian girl, who says "privacy is definitely an issue, [my parents] always go into my room without asking and probably check my devices too" are examples of this. Some BIPOC youth described their bedroom as spaces where they are "usually pretty alone", but many still noted having to negotiate privacy through social boundary-making, such as having discussions with parents about where their privacy boundaries lie in the bedroom, particularly during the pandemic and in order to engage in sexual wellbeing practices. Based on our data, BIPOC youth also had to resort most often to physical boundary negotiations.

5.3.2 Physical Boundary-Making

Just as Lewis (2010) found that teenagers locked bathroom doors as a sign of their desire for privacy and as an expression of agency over their bodily boundaries, the participants in this study also found that they had to make physical adjustments to their environment in order to set

boundaries for better privacy and thus, sexual wellbeing. Based on our data, BIPOC and sexual

minority youth had to resort most often to physical boundary negotiations. Vic, who identifies as

a two-spirited transwoman and Hungarian immigrant, epitomizes this:

> *I'm in my room, the desk is just right beside the door and my desk is not really heavy, so*
> *if I need some privacy I can just push it so [my family] cannot open my door because I*
> *don't have a lock in my door. Although I don't make a big deal out of it because I am the*
> *only one who speaks English in my family and they constantly need my help so I try to be*
> *as helpful as possible.*

Vic's boundary-making strategies involve both the physical moving of furniture to block access

to her bedroom, but also includes how language acts as both an additional privacy-generating

filter and a hindrance to her private time. While the bedroom was the space that most participants

set boundaries in, it's important to note that the idea of the bedroom as a fixed space of privacy is

untrue. Twigg (1999) discussed the spatial ordering of privacy at home looking at intimacy

specifically and how this is structured within particular home spaces. For example, she found the

bathroom to be more intensely associated with privacy and intimacy than say the garage. But,

Twigg (1999, p. 391) critiques the notion of spaces at home as fixed spaces that are always

associated with privacy over other areas, as this would assume "a static account of social

relations in the home", which we know to be untrue. Therefore, others had to take their

boundary-making further or change it entirely by finding alternative space within their bedroom,

such as Asha, a nonbinary, pansexual, black youth who goes into their closet to get an even

quieter private space. BIPOC youth had to constantly negotiate their privacy within their own

rooms, or also create physical boundaries. Gorman-Murray (2012, p. 46) speaks to this when

describing the front door: "Despite its physicality, the front door does not separate a personal,

private, safe sphere from a public, political or confrontational zone. Rather our subjectivities and our homes are in complicated dialogue". Other examples of having to negotiate more boundaries for privacy in the bedroom include Sam (she/they), a nonbinary, south Asian youth who identifies as lesbian/pan-sexual considers their room to be their "safe space", but only when they create the physical boundary of closing their door.

Another layered boundary example by BIPOC youth is one Latinx/Hispanic youth's use of "tapestry [they] keep in front of [their] door, because [they] have no luck, so when people like to come running in, there's like an extra layer." These "extra layers" are often made by youth who are confronting a home that needs boundaries in order to attain privacy. These boundary management strategies are creative and crafty, where boundaries are created within bounds. Therefore, sometimes it is not about finding privacy, but making it.

Some BIPOC youth explained that while they did consider their bedroom their personal private space, they were okay with some interruptions by their family members. Tiana, an asexual, Southeast Asian girl who shares her "small" bedroom with her siblings illustrated this:

> *Right now, I'm sharing a room with my two other siblings so they might come in anytime*
> *but it's okay, I trust them enough.*

Tiana describes how she trusts her siblings enough for them to enter what she refers to as the space she retreats for privacy. Based on our data, BIPOC youth were most likely to live in intergenerational homes where again, privacy negotiations were made more often. Tiana exhibits this, as an immigrant from the Philippines, living with multiple generations. But Tiana also reveals how she negotiates these interruptions of privacy with auditory negotiations that help her to mold her identity in her sibling's eyes:

It has been kind of a challenge because I have mentioned earlier that I have two younger

siblings. So, they are not super young, they are in high school, so they do kind of

understand that yeah, I mean big sister has relationships and she's an adult and she's

human she has relationships and So, right now, like I kind of let my siblings hear [my

phone conversations]. But, of course, like the more controversial stuff or more personal

stuff I take it to the basement and hope that the wi-fi is good enough, won't cut up.

Tiana's explanation leads into my later analysis on soundscapes of privacy for sexual wellbeing. Tiana uses moments where her privacy is infringed upon to instead build on to her growing independence and transition to adulthood. This acts as both a signifier of her need for privacy, as well as a creative way she asks for it, through an indirect auditory negotiation. Tiana is an example of the intense boundary-work that the pandemic has ignited in youth, revealing how space is a social, physical and mental boundary.

5.3.3 Where is the Mental Boundary-Work?

Tiana's story also represents the fluidity of boundaries. While she calls her bedroom her private place, she does not 'fix' it with certain boundaries at all times. As seen in her quotation above, she is flexible and fluid in her decisions to break down previous boundaries. But this decision is made with the awareness that it will lead to her siblings seeing her as "an adult" who is "human" and "has relationships". Therefore, one might wonder where the mental boundary-work is here. I argue that mental boundary-work is individual and consists of work that seeks to understand one's own desires or needs. Mental boundary-work sees experiences as lessons learned and works towards discovering one's boundaries as individuals, before implementing them physically or socially. Therefore, many participants found the pandemic to strengthen and challenge their mental boundary-work. Many reported feeling like time during the pandemic

afforded them insight into their own desires and needs. Therefore, mental boundary-work is seen throughout these youth in their justifications, reasons and understandings of their privacy. Their perception of privacy is a piece of mental boundary-work that hinges on spaces like the bedroom.

5.4 Conclusion

Hernes' (2004) typology of the three types of boundary-work represent the bedroom as a space that youth made their own through physical, social, and mental boundary-work. From physical boundary making through locks, to retreating to closets, to the social boundary-work involved in serious conversations with household members about privacy needs, to discovering their own personal needs, youth relied on boundary-work that crosses across and between the physical, social and mental. The physical, social, and mental boundaries that youth developed were mandated by the boundaries of the bedroom, but they were also expanded and negotiated outside of it, through ICT technologies. This chapter has shown how the bedroom is not always a "pulling away" from public life space. Instead, many youths use private space of the bedroom as a way to practice sexual wellbeing on their own terms. Instead of a "pulling away", practices of sexual wellbeing connect youth to their peers, popular culture, and a sense of community. As I will discuss in the following chapter, there is also room to talk about the role of ICTs in fostering connectivity that can counter this assumption of "pulling away". In fact, ICT technologies allowed me to understand how the home, and particularly, the bedroom, is both boundary and boundary-*less* in sexual wellbeing during pandemic times.

Focus groups revealed that while the bedroom was named as youth's "private" place, understandings of what privacy is, and what kind of privacy is 'good' or 'good enough' for individuals, varied extensively. While many white youths felt that the bedroom was an adequate private place, such as Braylin, Kenma, Liz and Bri, many BIPOC youth felt the bedroom to be

the "best option". Take Aailya, Janice, Vic, Asha and Tiana, all BIPOC youth, who either had to make privacy negotiations with siblings or made physical boundaries with the use of desks against doors or by going into their closet. Based on our data, BIPOC and sexual minority youth most often had to resort to physical boundary negotiations. BIPOC were also most likely to live in intergenerational homes where again, privacy negotiations were made more often. An intersectional analysis like this provides an understanding of the differences between experiences of these youth and accounts for power processes that often go invisible at home.

It's important to note that the negotiations and boundary-making processes that BIPOC youth went through during the pandemic do not represent a kind of withdrawing from the home. In fact, I argue BIPOC youth are creating boundaries in order to best serve what they deem 'good' privacy. These youth often talked about their creative boundary-making with pride, even humour to one another. While some say that LGBTQ adolescents "often struggle in isolation to make sense of their experiences and to develop a sexual identity in relation to their other identities" such as ethnic, familial, or religious (Maticka-Tyndale, 2008, p. 89), this research found many examples of LGBT youth actively *discovering*, not struggling with, their sexual identity also in isolation, but due to stay-at-home orders. Similarly, Kearney (2007, p. 138) argues that "contemporary female youth are not retreating to private spaces; they are reconfiguring such sites to create new publics that can better serve their needs, interests, and goals". McRobbie's bedroom culture conceptualizes the bedroom as a place of resistance to sexual subordination in the public sphere, but this thesis expands that, arguing that bedroom culture and sexual wellbeing during a pandemic and the increase of ICT, is about boundary-making amidst sexual norms that threaten youth's autonomy and agency.

But there is an absence in this boundary-making framework, that of sound and sonic privacy, as inherent to youth's understanding of boundaries and negotiations of them. Youth in this study are creating boundaries in their bedrooms in order to create a place that serves *their* definition of privacy and ultimately, sexual wellbeing. But there is also room to dive deeper, into that of sonic privacy, as an addition to the boundary-making conceptual framework that I've discussed. Hernes' (2004) typology has been criticized for lacking a regard for how organizational boundaries are gendered "and for the ways in which boundary work is part of the performance and performative constitution of gender" (Johansson & Lundgren, 2015, p. 190). But it could also be criticized for lacking insight on sound as boundary, a type of boundary work that straddles between the physical, mental, and social. Focusing on sound to reveal another dimension of boundary-making that youth employed during the pandemic at home, also allows us to understand sexual wellbeing as multi-dimensional.

CHAPTER 6: SONIC BOUNDARY-MAKING IN SUPPORT OF SEXUAL WELLBEING

This chapter discusses sound as a boundary-making tool. Going beyond the concept of sound as boundary-making, such as through muffling conversations, I discuss sound's use in negotiating privacy warnings, such as knocking. This chapter argues that sound is a form of boundary work, especially at home, where physical space is often much harder to negotiate. I argue adolescent girls, trans, and non-binary youth crafted power by constructing a soundscape at home that would allow them to practice sexual wellbeing better. This chapter pulls from Hernes' (2004) concept of the three types of boundary work: *physical*, *social* and *mental* that I discussed in the previous chapter. Extending this concept further, this chapter argues sound is an additional type of boundary work, particularly at home during a pandemic for youth. I further this concept by coining the term 'silent reassurance', which youth relied on in the home to ensure they could practice sexual wellbeing privately. Therefore, silent reassurance, being 'unheard', and sound warnings are all pieces of the type of boundary work that sound entails. Sound is an important aspect of youths' sexual wellbeing boundary work that often goes invisible. Ignoring sound as boundary ignores the creative populations that deploy it. When we listen to these often invisible spaces, we hear a multitude of ways that vulnerable populations are constructing their own space during insecure times.
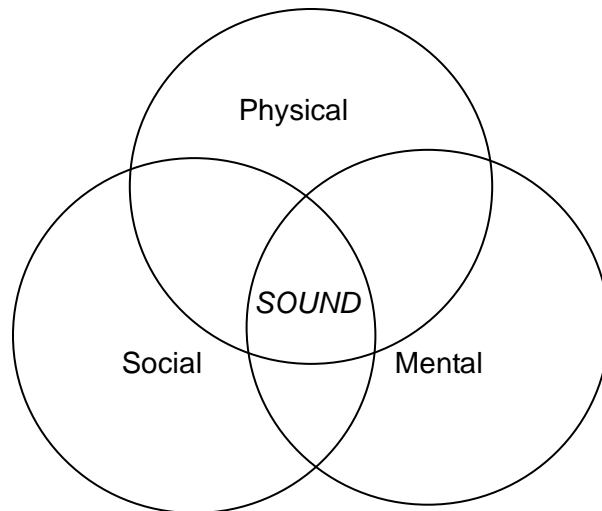
Figure 6.1. Boundary-Work convergence

Figure 6.1 is a visualization representing the physical, the social and the mental

converging with sound as a part of boundary-making processes. This explains how physical,

social, and mental boundaries merge to create an overall concept of what boundary-work consists

of. What it also includes is 'sound' as a fourth type of boundary-work. While the physical, the

social and the mental, all blend with one another, they also remain as separate distinct types. I

argue that sound belongs both in its own boundary category, but also as a convergence between

all of them. Sound is unique because it exists as not just a boundary-*maker*, but also as a

boundary-*marker* within space. The soundscape infuses space with boundaries that come from

the social, the mental, and the physical, therefore to separate sound outwardly as we see with the

three other categories above, would be to destroy the soundscape and its fluidity and its sweeping

existence in space.

6.1 Domestic Soundscapes

While Lefebvre (1991, p. 154) said "space is never empty: it always embodies a

meaning', I might argue that space is also never sound-*less*. Or rather sound, its existence or

absence, embodies a meaning. The soundscape, coined by Schafer (1994), is the sonic

environment which embodies meaning. Schafer's (1994) concept doesn't simply define a place where we can hear things, the concept also realized that due to too much noise in our lives, we are losing the ability to hear the "nuances and subtleties" of sound. Schafer calls us to truly listen to the sonic environment, in order to analyze and understand what we have come to know as a soundscape. Therefore, it is important to listen in environments that often go invisible (the home) by people who often go unheard (adolescent girls, trans, nonbinary youth) on subjects that are frequently kept hush (sex, sexuality, sexual wellbeing).

Domestic soundscapes have a wide place in geography, from Porteous' (1990) book on "other" scapes outside of the visual, to DeNora (2000) who argues music is used to create a safe space for teens in their bedrooms, where sounds outside of the room are silenced. The use of ICTs within the home create a hybrid world of virtual-material reality. This hybrid virtual-material world exists within the more than visual, as it has sound bubbles and invisible boundaries that intersect with power at home. Most importantly though, domestic soundscapes as a means for boundary-making often embody meanings of privacy.

Studies on pandemic work practices have found, people need a private and controllable soundscape for working at home (Torresin et al., 2021 p. 10). I argue that youth in this research also needed a private and somewhat 'controllable' soundscape for their sexual wellbeing practices. As Lincoln (2005, p. 400) argues: "For [youth] the bedroom, which throughout their teenage years is a site of multiple cultural and social articulations and expressions, is often the first space in which they are able to exert some control, be creative and make that space their own". In addition to this, we found that sound warnings were important boundaries that youth negotiated during the pandemic. Knocking on a door, specifically, was discussed as one of the most important factors in whether youth felt that they had privacy for sexual wellbeing.

Participants used sound, a missing type of boundary work in Hernes' (2004) boundary types, to creatively craft and protect their soundscape at home, thus crafting and protecting their sexual needs at home.

6.2 Sonic Privacy and Silent Reassurance

Power as it relates to space is key in feminist geography. But power as it relates to sound within space is another important perspective. Research that looks at youth's feelings towards sonic privacy makes boundary-making processes more audible, especially when youth deem sonic privacy as essential to sexual wellbeing practices. Sexual wellbeing is a spatial and acoustic practice of negotiation and boundary-making within the home during COVID-19. I found that youth need private spaces where they were not simply unseen, but more critically, unheard. Almost all participants pointed to sonic privacy as a major factor in whether (or not) they could practice sexual wellbeing, but queer adolescent girls particularly noted the importance of being unheard in order to practice sexual wellbeing. I argue that youth in this research needed a somewhat 'controllable' soundscape in order to engage in sexual wellbeing practices and this 'sound-proofing' and what we refer to as "*silent reassurance*", gave youth the ability to do so.

6.3 Being Unheard

Alkyl Halide (she/her): sorry I don't want to unmute because I'm not sure how my parents feel about focus groups, but if my brother could just bother me a little less, i'd [sic] have lots of privacy lol

Alkyl (she/her) a bisexual, East Asian youth had to use the chat function to communicate. Her chat quotation embodies the fear that many participants had surrounding being "overheard" during stay-at-home orders. But Alkyl's fear extends beyond just her private conversations and into the actual focus group process itself, calling into focus Katz (1994) understanding of the

field again. Sometimes the field extends beyond the present, beyond the home and into the past or future. Her quote is an embodiment that these participants, while within the space and time of the focus group, were also positioned in place at home where constellations of power exist.

Focus group discussions revealed that not being heard was not only a major indicator for youth to feel that they had privacy, but it was also vital to youth's ability to engage in sexual wellbeing practices. Youth often found sonic privacy by moving farther away from other household members or closing doors in between rooms to soundproof their space. While issues with parents checking text messages or tracking their location was often discussed, the main factor to being able to practice sex virtually was the ability to find a quiet space where they could would be unheard, but also have "silent reassurance" as mentioned earlier. When asked about sexual wellbeing, Asha, who identifies as female/nonbinary, pansexual, and Black, says she "love[s] going in [her] closet" for privacy, but also said she will go to her underground patio area for "personal conversations and stuff" because the area is farther away from her family's ability to hear. Referring back to Hernes' (2004) 3-part typology of boundary-work, we can see where her experience fits into all categories and then some. Her physical move towards the closet, her social understanding of what is deemed a "personal conversation" and her mental boundary-work that helps her to decide whether to move to the underground patio are each salient. But, these practices also point to a missing boundary type, that of sound. Asha highlights what many youths also felt about privacy during the pandemic… that privacy is sometimes defined by not being heard.

Giselle (they/she), a nonbinary, lesbian, white youth drew herself during the opening exercise in the basement with the television on, while simultaneously on the phone:

...this is probably the place that I go when I want to be on the phone or have some sort of

private call or something because it's definitely the place where no one can hear as

much, but then also having my room as well, for me is kind of more of a physical safe

space, rather than a sound one, but it's not as great for if I'm being somewhat loud or

something with my friends, then sometimes other people can hear, so usually the

basement here, maybe having a TV on or something in the background and then being on

the phone and having the floors and doors and stairs in between helps.

In this quotation, Giselle makes an important distinction: that there are multiple understandings of privacy for youth during the pandemic, one of sonic privacy (in her case, the basement) and one of physical privacy (for Giselle, the bedroom). But Giselle also marks how the mental, physical and social boundaries blend to inspire her to leave a television on, as well as having the floors, doors, and stairs in between herself and other household members. This boundary-making goes beyond the physical to include sound as a type of boundary-work. Again, while research on the importance of auditory buffers in privacy is not new (Lincoln, 2005), sound as a field of study related to privacy during a pandemic *is*, especially as our interconnected world turns more virtual with youth online for school, sex, and downtime. Giselle's boundary work is complex, coupling multiple modes of sound in order to account for the different moments when she needs privacy. Taking her boundary-making further, Giselle's outlining of the physical boundaries she puts into place in order to safeguard her sonic privacy, including: turning on a television in the background and having doors closed in between, shows how the use of ICTs create boundaries here, how a 'private' space also exists within a hybrid world of virtual-material reality. Giselle represents how both sonic and physical privacy flow together to create her ideal private space at home, where she can engage in intimate conversations. Therefore, while sound belongs both in

its own boundary category, it also acts as a convergence between all physical, mental, and social. In Giselle's case, sound is not just a boundary-*maker*, but a boundary-*marker.* Adding in or rather appreciating and giving voice to the sonic boundary work that youth do, bridges the mental, physical and social to reveal how boundaries are truly spatially and relationally defined.

Giselle also said that lockdown is where they "really discovered [their] queerness" due to the ability to of not having to 'come out' online to new partners, but rather using lesbian-specific dating applications. Alkyl said that "dating online removed the gay panic aspect of the whole thing". Jaylen, a transman, said that he likes that people get to know him as a person first before knowing that he is trans, saying "I feel like I pass better, a lot better online than I do in real life". Other stories included youth who found it fulfilling to try new pronouns online, or to place them in their online bios. Youth also pointed to being online more than "in-person" led to them experimenting with hair and fashion.

Additionally, a lot of queer (and straight) participants reported experiencing ghosting while trying to date online, some even arguing ghosting has increased due to the pandemic forcing people to stay indoors and online and feeling that cutting someone off is therefore, easier to do. Ghosting is described as "a user who ceases all contact with another user unexpectedly, and usually includes blocking that person from all communication platforms, and "unmatching" from the dating app" (Marston et al., 2020, p. 13). While ghosting itself is not a new way to end a relationship, it has new context due to its relationship with ICTs, particularly dating apps and social media apps. Solomon, Martinez and Wren (2021, p. 1544), in their article on how to build relational self-awareness in youth, say that ghosting "reflects and perpetuates cynicism and low accountability in the dating world". Avaleen describes herself as "the ghoster", saying "I wasn't

ready for it. I guess I didn't really know how to [be in a relationship], I didn't know how it would work… and so I just stopped talking to him".

Similarly, Giselle said that she "wish[ed] parents knew that they actually need to put in work to create a safe space for their child to be independent and discover themselves", as she often found herself exhausted having to act as a "google search engine" for her parent's questions about queer identities. Giselle said "creating this safe space [would] allows us to create relationships safely and more openly because we wouldn't feel the need to be so private/hidden/secretive." Therefore, Giselle's identity as a nonbinary and lesbian, coupled with the power struggles at home with her parents, can account for the way she makes boundaries with sound for her sexual wellbeing. In response to another participant, Giselle states that "boundaries are crucial. Setting boundaries can be so hard, so I wish that parents understood that too". Giselle represents queer youth who are managing the emotional labour of fielding questions at home about their sexuality, while having to manage their own sexual wellbeing independently in the midst of adolescent discovery.

Other queer youth agreed with the importance of sonic privacy, especially during the pandemic. Bri (she/they, nonbinary, pan, white) says they and her parents use the basement for downtime and privacy, "but privacy is kind of an issue sometimes because [they are] scared that they're gonna over hear [them] since they're so close…". Bri explained that it's the only area that they and their parents have because their parents have given their brother permission to use the entire upstairs main floor to play video games. Bri's use of the basement brings up the question of a gendered division of space, where their brother receives one floor for playing, but Bri's place that they can go to for privacy is a shared communal space with her parents. In addition to this, Bri's family is not accepting of their sexual or gender identity. The division of

space in this home represents a complex relationship between power and identity, where parents divide the space and the youth comply. Bell and Valentine (1995, p.18) argue that queer bodies existing in certain spaces allows *others* to understand that the space has been produced as heterosexual, heterosexist and heteronormative. We can see here that Bri's taking up of space in the basement of a larger home is a clear indicator of the heterosexual and heteronormative space that their home employs.

Fortunately, Bri points to one result of the pandemic that has been positive for their sexual wellbeing. Bri says the pandemic has actually made it easier for them to have sex with their boyfriend at home without interruptions. Bri says when their boyfriend would come over, their parents would not want to be near him due to COVID-19 risks, so they would make them stay in their bedroom:

> *So, they just leave us alone. It's kind of annoying being home with my mom and my brother. The house I live in is not very soundproof, like I can hear my neighbor's through my walls like I can hear my mom and my brother, and it is not very good. The Covid gives us some privacy to be alone, but not be very loud.*

In this quotation, Bri understands the sonic value of privacy, pointing to how they cannot be very loud with their boyfriend, despite being behind a closed door and uninterrupted. This continuous linking back to sound as a major factor in their ability to practice sexual wellbeing is important. But while Bri can be *alone*, they cannot be as *private* as she would prefer, where she notes that COVID-19 gives "some privacy to be alone, but not be very loud". Interestingly, many would assume that being alone would equate with the ultimate privacy. Instead, Bri exemplifies how sound is oftentimes more important for privacy than being solitary itself. This reveals the creative understanding of boundaries and the boundary-work that youth are doing during a

pandemic. Sound as boundary itself is embodied in Bri's ability to engage in sexual wellbeing. Milczarek's (2012, p. 72) master's thesis looked at emotional geographies of home through women's experience of a long-term care facility, arguing that home has a deep relationship with the body, where meanings attached to home are created by how one understands their body, "the aging, changing, unstable geography of the body". Milczarek (2012, p. 72) says "both concepts construct one another". Similarly, Bri's experience of sex and the place of her body during the pandemic, constructs her experience of home during the pandemic.

Sound is a constant consideration that youth had to negotiate at home. Recent literature helps us understand this as related to privacy, but I argue that sound is intrinsically related to ability to embody sexual wellbeing. These youth narratives reveal that sexual wellbeing as an embodied practice is stunted even when "alone" at home.

Others also made the distinction that their most private places (spaces where they could get work done or have personal conversations with friends), where they could also have uninterrupted time, were determined more so by their allowance for sonic privacy. Liz made the distinction that her room allowed her to both focus and talk out loud to people over the phone because it was quiet and uninterrupted. Similarly, Two, a bisexual, East Asian girl, said a lot of sound travels back and forth between her room and the rest of the house, but that other than the sound issue, her house respects the privacy she requests when she is in her room. Linking this back to our theoretical framing of embodiment, and how boundaries are embodied at home, we can see how sound is used in boundary-work in everyday life at home. One can understand how home is "imbued with meaning and is part of the process of identity-making and a matrix of social relations" (Forsberg & Strandell, 2007, p. 395), but also filled with boundary-making and a matrix of sounds. The home remains a critical place for better understanding 'the embodied,

everyday socio-spatial relations through which subjectivities are forged' (Hörschelmann 2017, p.

236), and narratives of where youth find sonic privacy reveal how sexual wellbeing is embodied.

Many participants also made the distinction that although they considered their bedroom

to be their most private place, they would often leave it in order to find sonic privacy. This

speaks to the porosity of public/private boundaries, similar to Valentine's (2004) writing on how

teenagers often find privacy in public, as well as Skelton & Valentine's (1998) work on the cool

places in geographies of youth cultures. For example, Aaliya, a bisexual youth who identified her

race as "other" in our demographic survey, demonstrates this when she is not in her bedroom:

> *Usually I just stay in my room. Or, I have this part to the back of my house that used to*
>
> *be like an outdoor part but then we enclosed it. I'll just go in the back there and kind of*
>
> *just chat and usually I'll wear my air pods too so nobody hears them obviously.*

Aaliya again exemplifies that mental, social and physical boundary-work is not sufficient in

describing youth's boundary-making at home. Wearing AirPods as a way to find privacy was

discussed often by participants. Most of them said they would have AirPods, earphones, or a

headset on when engaging in intimate conversations. This kind of boundary work involves not

only a lot of movement within space, but changing the soundscape itself within a certain space.

While youth in this study mobilized their sexual wellbeing practices often, such as through the

incorporation of earphones for better sound-privacy or the moving between rooms, similarly,

geographers have come to see boundary work as always in movement. Take Beasy et al., (2021,

p. 343) study on the boundaries of place and identity during schooling at home during COVID-

19 which reveals how boundary making is "continuous". In addition to this, the incorporation of

earphones represent an embodied soundscape, where an object must be used in order to gain the

soundscape the youth desires. This fluidity represented at home is critical in understanding how lockdown orders were not simply stagnant or unchanging, but in constant flow and negotiation.

6.4 Sexting, Phone and Virtual Sex

Sexual wellbeing has combined with ICT at home more intensely than ever. Take Olivia who says social media "may have kind of filled a gap a bit in sex-ed" from school. She says: "more like, people are talking about it online. And so, I think because people are hanging out in those spaces, they might be more educated in some sort of way." She also described how she set up her IUD consultation appointment online with Planned Parenthood after calling "20 different clinics, but because of COVID no one's doing it". Olivia pointed out that Planned Parenthood were "open about a whole bunch of other things like STDs and like, like sex and stuff." Clearly, ICTs have become intertwined with teen sex lives and education. In our focus groups, we found that adolescents specifically practiced sexual wellbeing through ICTs to initiate or engage in sex.

A sexual wellbeing practice that youth engaged in often, especially during the restrictive pandemic lockdowns, was sexting, phone, and virtual sex. Sexting is when explicit or intimate texts, photos or videos are sent. Though this was once considered possible only via SMS texting, it has expanded to include messaging platforms such as WhatsApp and Snapchat. For youth, this was often cited as their preferred means. While sexting tends to be the most quiet of virtual sex forms (or even silent), many youths waited until their parents were sleeping or they were home alone. Although sexting is often written rather than spoken, youth felt they needed to have privacy in order to engage in it. Phone sex is when explicit or intimate conversations are held audibly through a phone call. Virtual sex is much broader than both of these. It includes videoing through Snapchat, Facetime, Zoom or Skype as well as different kinds of sex that takes place via iMessage or chatting platforms. Virtual sex can have sound or be sound-less. While many cited

these virtual practices as healthy and helpful to their sexual wellbeing, others commented that they can also be harmful and sites of sexual abuse. Asha (they/them), a nonbinary, pansexual, Black youth, exemplified this in their experience of sexual exploitation, stating: "I'll be real, I did have an unpleasant experience that did teach me why I should keep my face out of things in that [online] realm". To provide Asha with a more tangible voice here, I've provided a detailing of their description of the exploitation, which acts as both a reclamation of their exploitation and a narrative that is familiar to many youth. As Christensen and Jensen (2012, p. 114) argue "life-histories contain information about subjectivity and collective processes as well as social structures and institutions". Therefore, I include this in an attempt to convey Asha's unique experience as well as the collectivity of experience that many youth encounter while exploring ICTs and their own sexuality amongst a society that genders and sexualizes those encounters.

6.4.1 Asha's Story of Sexual Exploitation

"When gender intersects in stories with racialization, ethnicity, sexuality, sexual orientation, health and ability or class, many of the tropes narrated in story-spaces become the lived and forcibly marginalized realties of embodied subjects in place" (de Leeuw & Morgan, 2020, p. 519).

Asha met, who they assumed was, an adolescent boy on Tinder. Asha said their mutual interest in music and film production is what started their chatting. He had even asked if they would help with shooting for one of his music production's album covers. They told him "maybe, yeah. But in my head I was like, no way. That's probably not gonna happen, at least a couple months after we're friends, or whatever". After talking for a little while, he suggested they move to Snapchat. Asha accepted, but grew suspicious because he lacked a 'bitmoji' on Snapchat. A bitmoji is a type of cartoon avatar that can be personalized to look like you. Asha

said: "I kind of was a little suspicious because I noticed that first of all, he didn't have a bitmoji setup, which most people have bitmojis so it kind of shows identification of like an actual person and what not and so he didn't have that, which I thought was a little weird. I was like, whatever." Asha outlined numerous other warning signs that they discovered as she continued to chat on Snapchat. The second being that he did not have his Snapchat location 'on', meaning there was no way other Snapchatters could tell where he was located. Third, his snaps were "really, really low and that's something really big to pay attention to because if it's, you know, under I think it's like 100,000 or so, it means that they've had it for like less than a month or so". He had only 500, "which means he didn't have it for that long and I wish I paid attention to that more because that was kind of a sign". All of these signs that Asha noted were thoughtful. Soon, he stopped talking to them on Snapchat, went back to Tinder and told them he had an issue with his Snapchat account and requested their phone number. Asha says they were "very dumb" and gave it to him. When he asked to Facetime, Asha hesitated and told him they were nervous. He continued to pressure them and Facetimed them around midnight. Asha admits they had never Facetimed with a virtual stranger before, but they thought: "Whatever, he's already calling like I might as well just do it". On Facetime, Asha said he wanted to engage in:

> *… virtual sex, if you will. So, he wanted the both of us to pleasure ourselves on the camera, and I was very uncomfortable with that. I was like, listen I'm sorry but I can't go through with this. This isn't something I can do. And he's like, okay, whatever and then he blocked me on everything. I was like okay, weird.*

Not long after, Asha checked his SoundCloud, a music sharing platform online. On his SoundCloud, he had uploaded a screenshot of her body from their Facetime call as cover art. Asha said they were "immediately really scared".

I was like, what the heck, like he put my body as the picture for his song. What do I do?

That was the worst possible nightmare, you always hear stuff that could happen. I just

wish I listened to myself more, that I had a bad feeling and I was like I gotta tell my

parents, I really don't want to, but I know I need to.

Asha told their brother first, the oldest of four older brothers, "I was like listen, I'm really scared, I did something dumb. I need your help." Asha says her brother's non-judgement and support "was the most important thing. It was so kind. It wasn't like, why did you do that, or you know, or you had a bad feeling, why did you continue? He said what he did wasn't okay, it's not your fault. But we need to tell mom and dad, we need to deal with it. Yes, I think that's the important part that he kept saying "we" not just "you" need to go tell Mom and Dad.*"*

Asha and their brother approached their parents, who reached out to Soundcloud to get the abuse taken down. He has since been banned from Soundcloud, "which was something that I was really grateful for because, I mean, they didn't necessarily have to, but the fact that they were protecting me, but also other women, because who knows what else he might do or who else he's done it to."

Other participants listened with empathy, maybe even solidarity with Asha's story. Asha's experience is not singular. As virtual sex becomes more common, and virtual worlds become even more blended with our physical one, we see online sexual exploitation, especially amongst youth, even more. Asha says it was "definitely a really scary experience, so I do still keep them in my mind. But I'm a dumb teenager so even though I know things can go wrong and I've had a bad experience, I'm still going to sometimes do those things." This is important because it emphasizes Asha's desire to have a *safe* virtual sex experience. Asha shared their story

as a warning to those engaging in virtual sex, but it also served as a way for them to understand what kind of safe, virtual sex they truly want.

While including Asha's story of exploitation is also an important methodological decision (as narratives reveal the intersectional identities and experiences of participants), it is more importantly, a narrative way of understanding the positioning process, where youth at home do not remain "home alone" despite being alone in the home due to ICTs. Asha's story is also more than a story *about* exploitation. It is a story about familial support and empathy. Asha's experience sits within a home that is loving. It is important that we consider the home as not just background to their exploitative experience, but as a key piece of their understanding of the experience. Asha called their brother's support and lack of judgment "the most important thing." Therefore, when analyzing and retelling experiences where sexuality and sexual exploration is exploited, we must note what stays with the survivor. In this case, Asha's home is critical to her experience and her healing.

6.4.2 Being Unheard for Virtual Sex

The following quotations are from the chat when participants were asked when they were able to engage in sexual wellbeing practices like "sexting":

> **Two** (she/her, bisexual, Southeast Asian): absolutely no phone sex D:
>
> **sasha** (she/her, straight, Black): phone sex after hours lol… make sure I hear snoring
>
> **Jade** (she/her, bisexual, Latinx/Hispanic): gotta wait until we're both home alone to
> make sure

Being unheard and having what we referred to earlier as "silent reassurance" was a major factor in whether they would even begin engaging in intimate conversations/sexual wellbeing practices. The performance of sexual identity, pleasure and wellbeing were contingent on not being

surveilled, similar to Johnston's (1995, p. 88) understanding that "at-home' sexual identities are both performed and come under surveillance". Sasha and others echoed during the group that silent reassurance that household members were asleep, as well as the double reassurance via the sound of snoring, was vital to whether they would begin sexting. Sasha's notion that her being able to hear snoring = more privacy, embodies exactly what privacy feels like (or rather *sounds* like) to her. This also represents an understanding of sexual wellbeing as highly individualized and best measured by the individual. Jade goes farther to say that she waits until both her and her partner are alone, in order to make sure no one will hear them. Two, on the other hand, made it clear that they would never engage in phone sex due to the fear of being overheard (phone sex consists of an auditory sexual engagement between the callers), whereas sexting is often non-verbal, consisting of chat transcripts over messaging apps, sending intimate photos or videos. The youth who spoke with had clear boundaries related to their privacy and sexual wellbeing. While many of the boundaries were sonic in nature, they were all different depending on the particular social relationships each at home and the meanings they gave to each space at home.

Overall, youth pointed to being unheard as not only an indicator of privacy, but as a precursor to their willingness to engage in sexual wellbeing practices, especially sexting, phone sex and virtual sex. What is notable here is that youth while deeming their bedroom their "private place", would often go elsewhere where they would not be heard in order to engage in sexual wellbeing practices. To youth during the pandemic, being unheard and uninterrupted were crucial to sexual wellbeing. And how the sexual self is both performed and under surveillance at home relates to embodiment, as youth had to do embodied boundary-work in either creating soundproofed spaces or adding soundproofed layers, like earphones, to their sexual wellbeing practices.

6.5 Sound Warnings: Knocking

The sexual self was also negotiated through, what I refer to as, '*sound warning*' requests. When youth were interrupted, they preferred to be interrupted through the use of sound. Knocking was a specific sound warning most commonly requested by youth during the pandemic. Unfortunately, it was also the one request that household members often did not heed. Often, knocking was described as just as important for privacy as a closed door. Avleen (she/her), a straight, South Asian youth, explains that her parents walk into her room without knocking, even when her door is closed. Avleen says she tells them that even if she is not doing anything, they "just need to knock before [they] come in". She reflects on her idea of boundaries versus her parents, arguing that "their idea of privacy growing up is much different than my idea of privacy, because we're like two completely different generations… but I, my privacy now is not what I want it to be ideally."

Avleen describes a sentiment that many others felt. Not only was knocking a boundary for youth, but a closed door signaled this request for a knock. While Avleen noted differences in understandings of privacy between her generation and her parents, others did not feel so empathetic towards their parents' lack of knocking. Olivia, for instance, was frustrated that she was often having to "reinforc[e] with [her] mum who I live with, that you need to knock before you enter". Or Misty (she/her), a straight, Black youth, who "told them countless times to knock". It is important to understand the intersectional identities reiterating this statement. Most often, BIPOC youth reported that home members did not comply with their request for knocking. Understanding the home as being both a potential site of care and potential site of anxiety or fear lets us consider the relationship of belonging and safety to that of sexual wellbeing. While youth

did not report feeling particularly scared or anxious about this, they voiced their frustration and exhaustion at having to repeat and justify their request for sound warnings.

Others even described experiences where parental knocking became too much, such as Mercy, a bi/pan, white teen, who said her "parents are very much always knocking. Like at random points in the day." This experience could be in conversation with Parke and Sawin (1979, p. 93) who found that both mothers and fathers knock more frequently on daughter's doors than on son's, pointing to a gendered power relation at home where Mercy may be surveilled more often than boys.

Others took the pandemic experience as a positive opportunity to create communal boundaries for the entire household. Take Bri (she/they), a nonbinary, pansexual, white youth who had made a clear boundary along with other household members that they must knock on bedroom doors. Similarly, Liz (she/her), a queer, white youth felt that with her changed living situation due to the pandemic, knocking was the least that household members could do for her privacy. She explained that she could ask for more spatial privacy, but she didn't "want to ask". Instead she requested a sound warning: "You know, I'm just like, please knock on my door. And I'll knock on yours too." Her request is collective and is collectively practiced.

Youth's ability to uphold their sexual wellbeing relied heavily on knocking as a sound warning. This warning was a way *for* youth to be alerted that others were near or about to enter, but it also acted as a boundary signal *from* youth who felt knocking was about respect for others. Youth's ability to uphold their sexual wellbeing relied heavily on knocking as a sound warning. This warning was a way *for* youth to be alerted that others were near or about to enter, but it also acted as a boundary signal *from* youth who felt knocking was about respect for others.

6.5.1 Toxic Sounds in 'Safe' Places

Toxic sounds were also in place at home. Youth said that yelling, in particular, seemed to be a result of tension due to pandemic stress and an isolated home. Olivia said tension and yelling with her mother had increased since the pandemic due to them both being home often**.** She says this is because "there's not anyone else in the house to like, blame, you know, it's just like, "I'm gonna yell at you and you're gonna yell back at me." Tye, a bisexual, middle eastern teen also found tensions with her younger brother increased during the pandemic, which manifested in yelling. Tye said: "Whenever I go downstairs, it's kind of like, my parents start yelling, and my brother's yelling, everyone's yelling. I'm like, I don't I don't want to deal with this. And then I'll go back upstairs, then I'll feel lonely again. So." Tye's description of moving around her physical home and encountering different feelings shows how home is both a "material and an affective space, shaped by everyday practices, lived experiences, social relations, memories and emotions' ' (Blunt, 2005, p. 8). Tye's physical movement around her home and confrontation with yelling embodies her search for belonging at home.

Other youth also found the pandemic challenging for her household relationships. One youth said she rarely talks to her household members about personal problems, unless they "need to be addressed immediately", adding: "if I don't want it to be yelled back at me in an argument, then I won't say it". Clearly, these teens expressed concern about these toxic sounds and their wellbeing. While these toxic sounds did not seem to have a direct link to sexual wellbeing practices, they are linked to generational power differences, including parental control. The power processes that take place during yelling at home often manifested in youth "retreating" to other spaces, such as Tye describes by going "back upstairs" and feeling "lonely again". On the other hand, Tye said that before COVID-19, she was insistent on wanting to move out of her family home due to her parents "constantly yelling" at her, but found that being around them

more due to lockdown, eventually taught them how to be "less aggravated" by each other towards the end of lockdown.

It is clear that yelling disrupted youth's feelings towards their home, particularly their belonging within it. These stories highlight how important the sonic geography of home is to belonging and wellbeing. Take Kenma, who when asked where her private space is said that just listening to music made a space a "safe place". Or one teen who felt stunted as an early adult after having just finished their first year of university and being told they were not allowed to be on the phone past 10pm because their parents didn't want to hear them talking. All of these sonic stories reveal power processes at home that shape a young person's sense of belonging and wellbeing.

6.6 Conclusion

This auditory perspective on youth and the home highlights how the implications of the home as 'place' during the pandemic, constructs sexual wellbeing. Sound boundaries in geography reveal how sound can be mapped, how it has power, and how it is acted upon and who for. It also reveals how ICTs and the blurring of the virtual/material boundaries act as an extension of boundaries at home. Silent reassurance and the role of silence in domestic soundscapes (when sex is rarely a silent endeavour) reveal the invisible boundary-work of sound for privacy. Sound as both boundary-maker and -marker reveals the creative and fluid domestic soundscape for youth at home. The sonic boundary-making techniques that youth employed in their practice of sexual wellbeing represent an untapped area of resilience and of work.

This research found that sound boundaries are extremely fluid and changing, but that they are very much embodied in youth. Take Longhurst's (2001) work on the fluid boundaries of bodies. The home narratives, negotiations and boundaries that participants revealed during these

focus groups described their lived experience of power and fluidity at home. While their understanding of sexual wellbeing and sexuality had been produced at home, at least in part, *before* stay-at-home orders, the COVID-19 pandemic intensified these power relations and ultimately, influenced their sexual wellness in overlapping and complex ways. In particular, negotiations for privacy, whether it sound or physical, were discussed and confronted more often, due to the entire household being, living and working at home during lockdown. This analysis reveals how navigating sound, silence, and space at home influences youth's sexual wellbeing. Furthermore, it underscores how challenging it has been for young women and/or LGBTQ+ youth to navigate sonic and bedroom boundaries during stay-at-home orders.

This auditory perspective on youth and the home highlights how the implications of the home as 'place' during the pandemic, constructs sexual wellbeing. Sound boundaries in geography reveal how sound can be mapped, how it has power, and how it is acted upon and who for. Most significantly, sound and silence at home influences youth's sexual wellbeing and sound can be used as a boundary for youth's better sexual wellbeing. Our intersectional analysis reflects the call from feminist geographers for more diverse work on the various dimensions of home and the gender, sexuality, and racialized identities that exist within it. We also found that sound boundaries are extremely fluid and changing, but that they are very much embodied in girls, trans, and non-binary youth. The home narratives, negotiations and boundaries that participants revealed during these focus groups described their lived experience of power at home. Many argue that "… sexuality and wellbeing are often shaped by peer social norms, cultural backgrounds and individual life experience" (Flicker & Pole, 2010, p. 155). So, while their understanding of sexual wellbeing and sexuality had been produced at home at least in part, *before* stay-at-home orders, the COVID-19 pandemic intensified these power relations and

ultimately, influenced their sexual wellness in overlapping and complex ways. In particular,

negotiations for privacy were discussed and confronted more often, due to the entire household

being, living and working at home during lockdown. Boundary-making became extremely

important for youth during this time, not just to safeguard their privacy, but to also protect their

inner space, a place where they have independence, a sense of self, and the ability to define their

own boundaries.

CHAPTER 7: SUPPORTING YOUTH AND LESSONS FROM THE FIELD

7.1 Thesis Summary

Adolescence traces a time of great change. The home and the family once dominated understandings and conversations around adolescent's development and environment, but more contemporary understandings of youths' ability to forge new social relationships with peers, has had a major impact on their development and the environments youth are found in. Nonetheless, the family remains a socializing force that can provide support and guidance to youth. It can also however be a source of violence and reproduce dangerous gender and sexual norms. Elwood (2000) argues that meanings and understandings of home are multiple and dynamic due to their potential as sites of liberation or violence. She also argues that this makes home a site that cannot be defined as fully private or fully public. Therefore, the home reinforces and reclaims youth's identities in discursive ways, publicly and privately. The identities of these youth in relation to their sexual wellbeing, along with their specific site of home, create an image of where place and self, intersect.

In this thesis, I have linked these images of place and self and their intersections. Therefore, I've linked participant's experiences of the mapped queer home, intergenerational home, and single parent home to a wider understanding of how space is relationally defined.

I have argued that McRobbie and Garber's (1976) bedroom culture can be expanded to encompass a resilient space for sexual wellbeing during the pandemic, especially coupled with increasing ICTs and their virtual worlds as places of discovery. Expanding on McRobbie and Garber's (1976) concept of bedroom culture, I view the bedroom as not only a site of cultural production, but one of negotiating for sexual wellbeing and therefore, agency of self.

This research also expands on Hermes' (2004) three-part typology of boundary-work to include sound as a piece of boundary-making in order to make sense of how youth negotiated for sexual wellbeing at home. Sound is an important piece of boundary work that reveals the ways that youth construct their own space during precarious times. Sonic boundary work bridges the mental, physical and social to reveal how boundaries are truly spatially and relationally defined. The sonic, coupled with the physical, social and mental, are inherently connected in creating what youth understand to be a private space at home, where they can engage in intimate practices. Boundary-making became extremely important for youth during this time, not just to safeguard their privacy, but to also protect their inner space and to define their own boundaries. For many youths, sometimes it was not about finding privacy, but making it.

My empirics contributed back to feminist literature that self and place intersect through the social understandings as well as individual desires. In this case, social understandings of privacy for sexual wellbeing intersected with individual youth's boundaries that they needed in order to practice. My hope is that these narratives contributed pieces of resilience and autonomy to the scholarly understandings of the lived experiences of homes for youth.

Considering the home as a space that constructs youth's sexuality reveals the power relations that exist as spatial practices at-home, therefore I expect this research to contribute to debates on girls', trans', and non-binary youths embodied and intersectional experience of home as a site of negotiation, boundary-making, and discovery. Both embodiment and intersectionality helped me to see, hear and understand my data differently. This theoretical framing allowed me to see both resilience and pain in youths' homes by attending to their lived experience as social people at home and their experience as bodies at home. More specifically, embodiment theory allowed me to understand how the sexual and the private takes up space in the body, within the

geography of the home. Intersectionality allowed me to reflect on youths' experiences as socially influenced but individually perceived through the lived experience. As the COVID-19 pandemic has pushed people to the home, changed the way we understand it as a space by intensifying family relations and virtual up-keep of outside-the-home relationships, this research will also contribute timely to the sexual wellbeing gap in COVID-19 literature.

Blunt and Varley (2004, p. 4-5) assert that because geographies of home sit within meanings, emotions and relationships, notions that are both material and symbolic, geographies of home are therefore critical "on scales from the domestic to the global". Geographies of home represent an understanding of intimate experience that crosses over the private binary into the public and, in fact, back again. Feminist geographies of home give names to the experiences of youth and thus, by naming a space, it becomes a place (Cresswell, 2004). And while youth did not explicitly 'name' their private oases, they discussed them in intimate detail, their boundaries, their rules, their meanings, and their emotions.

This study shows that despite the unprecedented times of COVID-19, adolescent girls, trans, and nonbinary youth in the GTA's lived experiences in the home have wider implications for sexual health policy, curriculum and the understanding of the home as "place". Gender, class, ethnicity, race, age and sexuality combine and intersect to create youth's everyday experience that constitutes how youth feel, understand and negotiate their sexual selves.

ICTs have also intensified during this time, blurring boundaries and making new ones, marking again Blunt and Dowling's (2006, p. 27) words that "home is neither public nor private but, both. Home is not separated from public, political worlds, but is constituted through them: the domestic is created through the extra-domestic and vice versa". Therefore, this research ultimately understands how adolescent girls', trans' and nonbinary youths' sexual wellbeing and

geographies of the home are intimately connected through their shared spatial and political implications.

7.2 Limitations, Gaps and Future Work

Many parts of youth's lives remain under-researched and underrepresented, especially in sexuality literature. This analysis reveals how navigating sound (and silence) at home influences youth's sexual wellbeing. Furthermore, it underscores how challenging it has been for young women and/or LGBTQ+ youth to navigate sonic boundaries during stay-at-home orders. The pandemic saw a major reduction of health services in an attempt to focus on limiting the spread of COVID-19. But, in the midst of this comes the repercussions of limited access to sexual and reproductive health services, including contraception, abortion, screening and treatment of STBBIs (Mmeje et al., 2020). There also remains work to be done on how youth are discovering who they are and what they like (especially in post-pandemic times when virtual school, dates, and work may be all that they have known over the last two years). In addition to this, there is much room for research on youth's understanding of their sexual wellbeing in relation to other spaces, such as shopping malls, online communities, or campuses that can be more intersectional. Our intersectional analysis reflects the call from feminist geographers for more diverse work on the various dimensions of home and the ways that gender, sexuality, and racialized identities are embodied. My inclusion of the prevalence of ICTs within bedroom culture represents possible future work that could be done on ICTs and boundaries.

Both the sonic and the physical are inherently connected in creating what youth understand to be a private space at home, where they can engage in intimate practices, but several limitations impacted this research. This was a small, qualitative, self-selected sample of young people who all had access to the technology, resources and negotiated privacy to

participate. Therefore, results may not be generalizable. For instance, we did not hear stories of violence, even though we know that rates of gender-based violence have increased during the pandemic (Mittal & Singh, 2020). In addition, queer youth were over-represented in our sample. Nevertheless, the rich narratives gathered provided a nuanced and specific analysis of home in this historical moment.

Research on youth's privacy at home is incredibly important *because* it is their everyday lifeworld. Research on the everyday can be expanded to include a more intersectional understanding of youth's experiences, especially with regards to more mundane, intimate activities. Twigg (2003, p. 143) speaks about bodily care, saying: "Nothing could be more mundane and everyday than the processes of body care [. . .] These processes are assumed to be both too private and too trivial for comment, certainly too trivial for traditional academic analysis. They belong with those other aspects of private life which we are socialized to pass over in silence". I argue that there is still work to be done in these 'trivial' places in order to make them visible. If we value the mundane everyday, we value lives.

Although this research was incredibly interdisciplinary, studying it within the field of geography allowed me to ultimately understand how space constructs youth's sexuality. But it also exposed the ways that private and public understandings of self are connected with space. Without geography, I would not have been able to engage in how power takes up space. I would have neglected many of the rich understandings of what sexual wellbeing meant to youth and what it meant to talk about it at home. Power relations at home can often be hidden, and as youth are staying home more often, and living at home longer, it's more important than ever to understand the adolescent sexual experience as contingent on place. Looking at the geography of sexual wellbeing practices is a way that we can improve services for youth by understanding

where they are and where they are not. All of this dialogue takes place somewhere and if we do not look at those spaces, how can we begin to even imagine how to talk within them?

7.3 Empowering Marginalized Youth for Sexual Wellbeing

"When pleasure occupies a smaller and smaller public space and a more guilty private space, individuals do not become empowered; they are merely cut off from the source of their own strength and energy... We cannot create a body of knowledge that is true to women's lives, if sexual pleasure cannot be spoken about safely, honestly, and completely" (Vance, 1984, p. 7).

Thinking about how to do better for youth's sexual wellbeing requires considering what is sexual wellbeing. Based on this research and the background literature, sexual wellbeing is not defined by one thing. It may be impossible to define it. But what can be defined, or rather gotten closer to, is understanding what *things* (what emotions, what services, what spaces, places, people) allow adolescents to *better* their own sexual wellbeing. Clearly, we've looked at the home as a place in this, but there are numerous ways to consider sexual wellbeing. Research that is interdisciplinary, intersectional, and "every day" can get closer to sexual wellbeing. Let us continue asking what youth need, what they want, what they like, what they do not like. It is the least we can do for a population that is underserved in sexuality literature. We can do better for youth by continuing to engage in research that challenges the public / private dichotomy, much of which is feminist in nature. Society can do better by making their stories, their experiences, their questions visible. If institutions, organizations and policies neglect this, we work to constrain youth's identity. Scholars have also pointed to intersectionality-informed research as a critical tool in policy-making (Grace, 2014). There is a body of knowledge in bedrooms, in closets, in basements. And while I echo Tamas' (2020, p. 516) statement that: "Trying to instruct and change others, as I am doing now, places us above our readers and places readers above

whomever we have written about," I also think that if one works to engage in self-reflexive and intersectional research, important knowledge can become visible to and for other youth, whose stories are fuel for solidarity, togetherness and wellness.

Society can also do better by challenging one another during the research process. As a white, cis-gender woman, I often returned to feminist literature on reflexivity and positionality in order to continue challenging any dualist binary beliefs I held. Ahmed discusses how to improve collaborative feminist ethnographic research, through "a post-colonial feminist emphasis on the power differences between women" (Ahmed, 2000, p. 64). Therefore, employing intersectionality and embodiment was also part of this attempt to work towards an understanding of sexual wellbeing and privacy that was creative, fluid, changing and could account for power differences.

Creating research teams that encourage reflexivity is one way to also do this. Team dynamics that put a focus on being creative during research, that highlight accomplishments outside of productivity or publishing goals and that see their colleagues as humans with hearts, not just minds, is crucial to better research. I remained in the field long after I turned the Zoom camera off on our final focus group. I remain there today in some ways, as do those who participated. The virtual focus group as method during the pandemic, grounded in collaboration and a recognition of the field's bound-lessness was a 'care-full' research experience for both our participants and researchers. By producing this kind of space, coupled with attention to intersectionality and embodiment, we assembled insights that may have gone unheard. Olivia, a bisexual, East Asian youth said something that points to why we must provide these research spaces as feminist geographers: "I guess one of the things is just like knowing where... not

feeling like you have to be yourself in every place, but knowing where you can be yourself and then using those spaces to show who you are".

As more COVID-19 waves continue, it is also critical to consider the role that sonic soundscapes play in youth sexual wellbeing. Parents may wish to dialogue with their youth about how to negotiate privacy and what supports can be put into place to uphold boundaries. Headsets, music, doors, knocking, and alone time can be intentionally negotiated, assuming willing parents. Nonetheless, youth may consider the creative ways that they can make sonic space for their own sexual wellbeing. A cleverly placed towel under a door or a discussion with parents or guardians on knocking boundaries are potential ways that youth can find this space. The narratives shared in this paper also have implications for those seeking to conduct research or engage in conversations with young people around intimate and sensitive topics. Participants in our focus groups appreciated the chat feature for its sound-less engagement. Finding ways to confidentially reach youth at home may require further creativity from researchers and service providers to better utilize the privacy-enabling affordances of new technologies.

Youth's sexual wellbeing can be better supported practically by providing sexual health services that are accessible, gender-diverse, and welcoming. The Toronto Teen Sex Survey (Flicker et al., 2009) found that most Toronto youth are not accessing sexual health services, where 83% had never visited a clinic or doctor for any sexual health reason whatsoever. When we consider that chlamydia, gonorrhea, and syphilis rates have been increasing steadily in Toronto's youth and that Toronto reports higher rates of STIs compared to the rest of Canada, we must also consider why only a small per cent of youth are visiting clinics (Toronto Public Health, 2005). Flicker et al., (2009) also found that youth of *all* genders did not feel medical clinics were particularly positive spaces for youth, with young women calling specifically for clinics to be

more sensitive to sexually diverse youth and religion. Additionally, the geography of COVID-19 and its associations with the social determinants of health will impact vulnerable populations years into the future (Lee & Ramírez, 2022). Understanding how these vulnerable populations will continue to be affected 'post-pandemic' is vital in also understanding how sexual health services, accessibility, programming, and interventions for youth will be continue to be affected.

Therefore, while this research serves as a better way to understand the spatial and political implications of home in sexual wellbeing practices and understandings, it also had the radical goal of ultimately, creating a safe and vibrant youth community of resources that can respond to the needs arising from the impact of the pandemic on youth's sexual wellbeing, as well as their use of ICTs and how to create resources that cater to *where* they are. I argue that considering sexual wellbeing, not just sexual health, in the public health field can reveal gender and sexuality norms role in health disparities and access. This includes creating, adapting, and improving current programming and services, especially providing supports for youth as they navigate virtual worlds and sexting. While others have looked at sexual wellbeing through a health risk lens, recommending risk reduction counseling, only having sex with quarantined partners, and virtual sex as safer sexual wellbeing practices during the pandemic (Banerjee & Rao, 2020), I argue that youth's sexual wellbeing needs can be better served through the pointed listening of their desires and where these desires are located. Our partnership with PPO and their youth advisory committee will allow for feedback, action planning, and better program development towards this.

What does this mean for curriculum? I believe that a stigma surrounding sex, a fear of the intimate or a certain hesitation to "go there" in "that way" in "those spaces" are all adding to the poor sexual education curriculum in Ontario. Therefore, we must rid ourselves of binaries of

what is considered public, what is considered private (both in regards to discussion and in regards to spaces). A queering of curriculum would mean a dynamic and open space to listen to what youth are saying. Therefore, a curriculum does not necessarily have to say much, but rather give space to youth to say what they want. We need new ways of relating. We can begin that discussion in spaces that are welcoming.

I echo feminist academic activist and Health Policy and Systems researcher, Anuj Kapilashrami (2020, p. 6), words: "... there is a unique opportunity to ensure that policies and interventions prioritize a progressive SRHR (Sexual and Reproductive Health and Rights) agenda that has equality, solidarity and social justice at its core premise". So, while this research serves as a better way to understand the spatial and political implications of home in sexual wellbeing practices and understandings, it also has the more radical goal of generating resources that can respond to the impact of the pandemic on youth's sexual wellbeing. This includes creating, adapting, and improving current programming and services. While others have looked at sexual wellbeing through a health risk lens, recommending risk reduction counseling, only having sex with quarantined partners, and virtual sex as safer sexual wellbeing practices during the pandemic (Banerjee & Rao, 2020), I argue that youth's sexual wellbeing needs can be better served through directly listening to their desires. The public health field has started to write about the importance of paying attention to sexual wellbeing as a piece of overall health, arguing that integrating sexual wellbeing in public health efforts can address health inequities related to sexuality (Mitchell et al., 2021, p. 609).

Brickell (2012, p. 235) argues that a main characteristic of work on "the 'doing' of a critical geography of home is that the 'private' injustice being focused upon tends to be relatively

'public'" such as homelessness. Therefore, it is incredibly important to map the more hidden or invisible "private" injustices, such as that of privacy for sexual wellbeing. Research is continuing to show how COVID-19 is particularly affecting adolescent lives "as teens are more likely than older people to be living at home, subject to parental or guardian scrutiny, and [have] restricted mobility" (Goldstein & Flicker, 2020, p. 67). Therefore, it is more important than ever to understand the adolescent sexual experience as contingent on place, but also as connected to the sheer time spent at home during lockdowns.

Bell and Valentine (1995, p.18) argue that queer bodies existing in certain spaces allows *others* to understand that the space has been produced as heterosexual, heterosexist and heteronormative. If we take the time to look, we can see this. We can also look to more radical feminist methods, such as Sophie Tamas' (2020, p. 512) own work in autogeography, particularly the idea that it serves the "feminist and geographic contention that bodies, things and places are not inert backdrop matter, and meaning does not emerge directly from the discursive ether". This speaks to my own place in research today, as a first generation university student, and therefore, graduate student. I write from that place, therefore the meaning of research to me has and *is* constantly shifting as I learn more about what it means to conduct. I believe reminding myself of this ether is important in keeping my work open-eyed.

But most importantly, we need new ways of relating. Of listening to what youth want to say and where they are saying it. The identities of the youth in this research, their sexual wellbeing, along with their specific site of home, create an image of where place and self, intersect. The largest lesson I learned from this research experience is that participants are whole people before, after, and during the research, and so are researchers. Therefore, the field extends in the past, present and future.

Finally, we can do better for youth by understanding the bounded and boundaryless home as a site of negotiation, power and identity. How adolescent girls, trans, and non-binary youth negotiated their privacy through space and sound for sexual wellbeing during Toronto's third pandemic wave shows youth's resilience, their identity- and boundary-making processes. It's now our turn to listen. To listen to the ways youth want to receive sexual wellbeing information and where, to listen to how they navigate relationships and how they see themselves as sexual wellbeing.

Sexual wellbeing is not an unchanging, unmoving thing. Ideas about what sexual wellbeing is have changed over time, differing between generations and cultures. It's a thing that moves all over space. It interacts with others, unbounded. Similarly, home is unbounded. But within it exist boundaries and boundary-making processes that shape it. Sexual wellbeing is a boundary-making thing. There are so many boundaries in the everyday, from something as small as shutting a door to the major boundary crossing from child to teenager (Valentine, 2003a). I do not think the places that sexual wellbeing takes up space in are entirely knowable, but it's our call as geographers to make some of those spaces and some of those boundaries, a little more visible.

In 1998, feminist geographer Mona Domosh (1998, p. 281) said "the home is rich territory indeed for understanding the social and the spatial. It's just that we've barely begun to open the door and look inside". I hope this thesis operates as a small crack in that door, one that points to youth's resilience during unprecedented times, their creativity and their autonomy in places that can do so much, so often, to restrict it.

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Appendices

APPENDIX A: Focus Group Protocol & Questions

Youth Relationships During COVID-19 – Focus Group Protocol

Welcome:
- **Welcome! Please share pronouns in your name and change your name to your pseudonym (fake name). Explain functions of Zoom.**
- **"I'm starting the recording…"**
- Introduce myself and the study.
- **Check-In:** Go around the room & ask participants to introduce themselves, their pronouns, & what form of media they are currently into. Restate consent to participate.

Facilitator:
- **Have participants restate verbally their consent to participate.**
- **Restate Confidentiality Policy:** Before we begin, we would first like to make a few points about confidentiality and its limitations. As researchers, we will do everything we can to ensure your privacy. However, due to the group nature of focus groups, we cannot guarantee that no other participants will share what you say in the focus group with their friends and families. Please know that you can turn off your video and participate by audio only at any time.
- **For this reason, we ask the following things:** Please do your best to respect your peers by not repeating what was said in this focus group; by not recording any part of this focus group; and by not screenshotting the focus group. Please share only the things that you feel comfortable sharing with others in this focus group. Please feel free to decline to answer any questions.
- **Restate Disclosure Policy:** The only exception to our confidentiality policy is if we are told that someone under the age of 16 is being hurt by someone else or that a youth is considering self-harm or harming others. We will have to share that information as appropriate.
- **Restate Resources Available:** Throughout this process, we are hoping to create an open space. Due to the nature of the issue, our discussion may include topics that some participants may find emotionally challenging and/or traumatizing. We ask that participants help to create an atmosphere of mutual respect and sensitivity. If you are feeling upset or need more support at any time during this focus group, please send a private message to the moderator using the chat function, and we will do our best to support you as needed, or direct you to additional supports. We will also follow up with you tomorrow to check in, and to provide a list of additional resources available.
- **Right to Self-Care:** If you need to leave the space for a few moments, go to the washroom, get some food, or take a break please feel free to do whatever to take care of yourselves.
- **Safer Space Guidelines:** We want everyone to feel comfortable sharing their thoughts and ideas. In order to do this, we would first like to take a minute to establish

some guidelines that would make this space as comfortable as possible for everyone (based on anti-oppressive framework).

- We ask that you please do not contact other participants directly via the chat function. If someone is contacting you via the chat function, or behaving in any way that is unwanted, please contact the moderator directly using the private chat function. Also please note that the moderators reserve the right to remove any participant from the focus group at any time if they are deliberately behaving in disruptive or harmful ways.

Focus Group Questions

To get started - "I'm going to open up the whiteboard…"

Ice Breaker: We're going to start with an icebreaker. If you want, we invite you to draw a diagram or layout of your house and where you are within it right now.

Follow-up question: What does having privacy in your home look like during COVID-19?*

Theme 1: Getting into a Relationship - we can talk about any of your relationships, not just dating relationships….

1. How has getting into or starting a relationship changed (or not) during COVID-19?*
    a. How does being at home more often due to COVID-19 affect the start of a new relationship?*
    b. How do you show interest, flirt, or know if you're attracted to someone at this time?
    c. What risks do you see in starting a relationship right now? Emotional risks? Sexual risks? Health risks?*
    d. How has COVID changed how you think about sex, your sexuality and relationships?*

Theme 2: Being in Relationships

1. Prior to COVID-19 and physical distancing regulations, what did it look like in your world for someone to be in a relationship? (What kinds of things did people do, how did they spend their time, how did they communicate?)
2. How have school closures, remote learning or hybrid learning affected your relationships?
3. How has being in a relationship changed (or not) during COVID-19?*
    a) If you are in a relationship, how have you been able to connect with your partner(s) during the last year?*
    b) Do you ever connect in person? How do you make these decisions?
    c) Does your living situation affect your sex life or relationships?*

4. What are some things you/your friends/your partners do to show you care during COVID-19?*
5. When you want to have a serious, private, or romantic conversation, where do you go in your home?*
6. Is there anyone in your home that you can talk to about your romantic life? Where do you typically have these conversations?*
7. Prior to COVID-19, what did a healthy or unhealthy relationship look like to you?
8. Under COVID-19 restrictions, what does a healthy or unhealthy relationship feel like?*
   a) Do you think experiences of healthy and unhealthy relationships differ by gender and/or sexuality?*
9. Prior to COVID-19, how would people in your world end relationships? In what ways have COVID-19 restrictions impacted how people end relationships?
   a. Have you or anyone you know ended a relationship during COVID-19? What has that been like?

Theme 3: Looking Ahead
1. Are there any aspects of starting, continuing and ending relationships under COVID-19 restrictions that you think are better than pre-COVID-19? Are there any aspects that you think are worse or more difficult?*
2. Are there any practices or experiences from living under COVID-19 restrictions that you plan to take into your future romantic life?*
3. Prior to COVID-19, where did young people go for help or information about dating, sex and relationships? Have COVID-19 restrictions impacted young people's ability to get help or support? What are some ways that young people could be better supported during this time and into the future?*
4. What changes would have to be made in your home life to make it easier for you to date or be sexual right now?*
5. What do you think adults, educators and parents should know or understand about young people's dating, sex, and romantic relationships under COVID-19 and/or how young people are thinking about the future of their relationships after COVID-19?

CHECK-OUT & CLOSING
- Thank participants for their participation and energy.
- Do a check-out/ Go around & ask youth participants if there are any last thoughts or anything missing that they'd like to discuss?
- Self-care question - Talking about these topics can be difficult and emotional. What are some things that you can do to take care of yourself today?
- Facilitators provide a brief overview of everything discussed and determined throughout the workshop and explain how this information will be used in the development of resources and supports for young people.

- Restate support and resources available. Let them know that you will be following up with them by email the next day, but that they can reach out any time.
- Provide space for any other thoughts/ideas
- Reminder about gift cards

APPENDIX B: Consent Form & Fact Sheet

Fact Sheet & Consent - Dating During COVID-19 - ONLINE FOCUS GROUPS

> **Before you sign your consent form, please read this fact sheet outlining all of the benefits and potential risks involved in taking part in this research project.**

COVID-19 has changed everything about our social lives, including the ways we connect with others. We are conducting a study to better understand how COVID-19 and its effects – physical distancing, social isolation, online communication, school cancellations etc. - are changing or impacting young people's dating relationships. We are doing research to learn more about how young people are experiencing and thinking about dating relationships at this time, with a focus on:

(1) healthy and unhealthy relationships
(2) consent
(3) gender
(4) communication

If you join this project, you will get a chance to:

● Virtually meet other young people who are experiencing similar issues to yourself
● Participate in activities to learn new strategies and brainstorm ideas about how to take care of yourself and others during COVID-19
● Be involved in important research about an emerging issue
● Help researchers, educators and other caring adults better understand how to support young people's healthy relationships during and after COVID-19

Who is running this project?
This project is run by Dr. Alanna Goldstein, a Postdoctoral Research Fellow at York University, in partnership with Dr. Sarah Flicker. Leah Coppella, an MA student will also be assisting with the project, in order to collect research for her MA thesis. This project is funded in part through the Social Sciences and Humanities Research Council of Canada.

When? Where?

You will take part in a 90-minute virtual focus group. The focus group will take place virtually via Zoom. We will send you a link and a password (or phone number) to participate. You will also be asked to complete a brief, anonymous online survey.

How?
The focus group session will be co-led by team members. During the focus group, you will share your knowledge about healthy and unhealthy relationships and how these issues are changed or impacted by COVID-19. You will also get to make suggestions and help us brainstorm ideas for how to better support young people during this time. Our conversations will be video recorded so that we can remember all the important things that everyone shares! You can decide whether to participate with audio or video.

Could anything bad happen from being in the project?
We hope not, but there are a few risks to consider:

● There is a risk that you will get upset or confused by something that comes up in the group discussions. You may find it hard to talk about issues like dating.

● Even though we will all promise to respect each other's privacy, there is a chance someone could break their promise and talk about you outside the group.

● If you disclose an experience of violence that happened to you or anyone you know (even your little brother), and that person is under the age of 16, it needs to be reported. This may have unintended consequences that you don't expect.

Our project team has a lot of experience working with young people from diverse communities on issues relating to sex, gender, relationships and health. We are taking all the steps we can to keep these risks down. We are here to talk to you if you need extra support. We will provide you with a list of organizations that can help and connect you with extra supports if you need them. *We will never ask you to disclose your own personal experiences of trauma or violence.* Our goal is to learn about the unique experiences young people are facing during the COVID-19 crisis, and how we can collectively respond. We will create ground rules that cover respecting privacy and people's rights to decline to be involved in anything that makes them uncomfortable.

What are the good things that could come out of it for me?
You will also get a chance to connect and network with other young people in your community and be supported by your peers. You will learn more about healthy and unhealthy relationships and get to think about strategies for supporting young people during COVID-19. This can feel really empowering! You will get a $20 gift card for attending the focus group.

What will be done with all the stuff we talk about?
The findings from the study will be used to make recommendations for how educators, parents, and community organizations servicing youth can better support and assist young people to develop and maintain healthy dating relationships during COVID-19. Findings may also be presented at conferences, in academic journals, books, or in reports, and through exhibitions, public screenings or online. Media may also cover our work.

How will you protect my privacy?
You get to decide whether you join the Zoom conversation by audio or video. We will encourage participants to use pseudonyms and will never use your real name at any point during transcription or analysis. The researchers will send detailed instructions ahead of the focus group outlining how to change your user name to your pseudonym prior to joining the Zoom meeting, to help you further protect your identity.

While the focus groups will be video-recorded, videos will only be used to help transcribe the data and see who is talking. Video-recordings will be destroyed once transcripts are developed. Each person who joins the project will promise not to discuss the things said in the workshop outside of the group. You do not have to say anything in the group that you don't want to, for any reason.

We will store the project records safely at the Faculty of Environmental Studies at York University and online in a password protected drop box folder, so that only researchers have access to it. We will not share any of your personal information without your permission. Confidentiality will be provided to the fullest extent possible by law.

*The researcher(s) acknowledge that the host of the online survey (Survey Monkey) may automatically collect participant data without their knowledge (i.e., IP addresses.) Although this information may be provided or made accessible to the researchers, it will not be used or saved without participant's consent on the researcher's system. Further, because this project employs e-based collection techniques, data may be subject to access by third parties as a result of various security legislation now in place in many countries and thus the confidentiality and privacy of data cannot be guaranteed during web-based transmission.

Times when we cannot protect your privacy:
By law, the project staff cannot protect your privacy if something you say or do:
● puts anyone in danger, including you
● indicates that there has been a crime committed against a person under the age of 16, such as sexual or physical abuse.

We have a legal duty to report problems like these. We would also work with you to get you help.

Your rights as a project member:

Everything you do in the project is voluntary. You do not have to take part in activities you don't want to. You can leave the project at any time you want. You do not have to answer any questions you don't want to. Your decision to leave the project will not affect your relationship with any of the researchers, York University, or any other group associated with the project. You will still receive the $20 gift card if you decide to withdraw from the study. All data and materials collected in relation to you will be omitted from the analysis.

If you have any questions or concerns about your rights as a research participant, please contact Dr. Alanna Goldstein at acgold@yorku.ca, or Professor Sarah Flicker at flicker@yorku.ca or by Phone: 416-736-2100 x 20728.

This research has received ethics review and approval by the Human Participants Review Sub-Committee, York University's Ethics Review Board and conforms to the standards of the Canadian Tri-Council Research Ethics guidelines. If you have any questions about this process, or about your rights as a participant in the study, please contact the Sr. Manager & Policy Advisor for the Office of Research Ethics, 5th Floor, Kaneff Tower, York University (telephone 416-736-5914 or e-mail ore@yorku.ca).

I am _____ years old

Please check each box to affirm your understanding and consent to participate:

I have reviewed the form.. I understand what the project is about and my rights as a project member. I want to take part in this project.

While I am taking part in this project, I will follow the safety and privacy rules. I will not discuss things said in the workshop outside the group. I will not record any aspect of the focus group. I promise to respect the privacy of everyone in the project. It will be a matter of personal honour for me to keep my word.

It is OK to video record our zoom group session. I understand these recordings will only be used for internal analysis (and will not be shared publicly).

When talking/writing about me and/or the things I say during this project, please use THIS name: _____(Please pick a pseudonym/fake name)

I've read all the info and I want to sign up!

My initials: _____ Date: _____

PARTICIPANT Contact Information

1) Email: _____ (so we can send you gift certificate)
2) Is it OK to contact you by text or email again regarding other project stuff?

APPENDIX C: Demographic Survey

Participant Survey

Thank you for taking part in our study! Please take a moment to complete this brief survey.

* Required

1. What focus group are you joining? *

    Mark only one oval.

    ( ) Monday, April 12

    ( ) Tuesday, April 13

    ( ) Wednesday, April 14

    ( ) Thursday, April 15

2. What pseudonym/fake name will you be using at the focus group? *

    _____

3. How old are you?

    Mark only one oval.

    ( ) 16

    ( ) 17

    ( ) 18

    ( ) 19

    ( ) 20+

4. How would you describe your gender?

Mark only one oval.

- ◯ Woman
- ◯ Man
- ◯ Non-binary
- ◯ Two-spirited
- ◯ Trans
- ◯ Genderqueer
- ◯ Other: _____

5. How would you describe your sexuality?

Check all that apply.

- ☐ Gay
- ☐ Lesbian
- ☐ Straight
- ☐ Bisexual
- ☐ Pansexual
- ☐ Asexual
- ☐ Other

6. Check all that apply to your living situation*

Check all that apply.

- ☐ Living on my own
- ☐ Living with a romantic partner
- ☐ Living with roommates
- ☐ Living with family
- Other: ☐ _____

7. Has your living situation changed since COVID-19?*

Check all that apply.

☐ Members have left my household
☐ New members have joined my household
☐ Our entire household has moved
☐ I have moved to another household
Other: ☐ _____

8. Since COVID-19, where in your home do you have private, virtual conversations with friends, partner(s) or engage in wellness or self-care practices?*

Check all that apply.

☐ Bedroom (private)
☐ Bedroom (shared)
☐ Kitchen
☐ Outside (front stoop, porch, balcony, sidewalk, front/backyard)
☐ Living/family room
☐ Basement/Attic/Den
Other: ☐ _____

9. How would you describe your race/ethnicity?

Check all that apply.

☐ Black
☐ Black (African)
☐ Black (Caribbean)
☐ White
☐ Middle-Eastern
☐ Mixed-Race
☐ East Asian
☐ South Asian
☐ Southeast Asian
☐ Indigenous/First Nations
☐ Inuit
☐ Latinx/Hispanic
☐ Pacific Islander
☐ Other

10. Where were you born?

    _____

11. If you were born outside of Canada, how long have you lived in Canada?

    Mark only one oval.

    ⬭ Less than 1 year

    ⬭ 1-5 years

    ⬭ 6-10 years

    ⬭ 11+ years

12. Since COVID-19 started, have you started a dating, sex, or romantic relationship?

    Check all that apply.

    ☐ Yes

    ☐ No

    ☐ Sort of

    Other: ☐ _____

APPENDIX D: Email Scripts

Email Scripts (adjust and personalise as needed)

1. Interested Participant Response

Hello (name),

Thank you for reaching out! We would love to have you join our study on Dating During Covid-19 this coming Thursday, April 29th, from 7:00-9:00 pm (EST).

Here are a few important things to know before you decide if you want to take part:

a.	These discussions involve topics that might be sensitive or personal. You might want to make sure you have access to a private space while you take part in the focus group.

b.	You will also want to ensure that you have access to a computer/phone to use for the entire duration of the focus group, and that you have access to consistent Wi-Fi or adequate data on your device.

c.	While we will do our best to ensure confidentiality, there are always risks involved in research. However, we will give you the choice about whether to participate by video or audio, and you can choose a pseudonym to better ensure anonymity.

d.	These discussions will touch on topics that might be upsetting or confusing, as we will be talking about issues relating to healthy and unhealthy relationships. We will do our best to support you before, during and after the focus group.

Before you can participate, we ask that you read and sign the study's informed consent form. This form outlines all of the risks you might encounter through taking part in this study, and explains how the research team is working to manage those risks. Please read the consent form thoroughly and please don't hesitate to contact us with any questions or concerns you might have about the form or about the study.

After you have read and signed the consent form, we ask that you also complete a brief demographic survey, which should take just a few minutes to complete.

The consent form and survey can be found [here.](here)

After you have completed your forms, you will receive a link to the Zoom session. Following your participation in the focus group, you will receive a $20 e-gift card for your time.

Again, thank you for your interest in the study, and please don't hesitate to contact the research team with any questions you might have.

All the best,

(your name)
The Dating During Covid-19 Research Team

Reminder Email - Morning of the Study - be sure to BCC

Hi everyone!

This is a reminder that you have indicated that you plan to join the Dating During Covid-19 online focus group that is happening today from 7-9 pm EST. Below is the Zoom meeting information and password. **If you are unable to attend this focus group, please let us know as soon as possible!**

Before you can take part, **you must have signed your consent form**, and completed your survey, both of which can be found here.

[Insert Zoom info]

Before joining the meeting, we ask that you set your Zoom username to your pseudonym (the fake name you provided on your consent form).

If you do not already have Zoom, Here's how to set up your Zoom.
If you do have Zoom, here is how you can change your Zoom screen name to your pseudonym.

Also, please come prepared with a pen and paper, as we are going to do a little drawing activity to start off the session!

Finally, here are a few more things to know/remember about this project:

- These discussions involve topics that might be sensitive or personal. You might want to make sure you have access to a private space while you take part in the focus group.
- You will also want to ensure that you have access to a computer/phone to use for the entire duration of the focus group, and that you have access to consistent WiFi or adequate data on your device.
- While we will do our best to ensure confidentiality, there are always risks involved in research. However, we will give you the choice about whether to participate by video or audio, and you can choose a pseudonym to better ensure anonymity.
- These discussions will touch on topics that might be upsetting or confusing. We will do our best to support you before, during and after the focus group.
- We are going to be recording the focus group! We will only use this recording for analysis purposes and will destroy it when we are done.

We really appreciate you taking the time to share your thoughts on this topic and look forward to chatting with you later today!

Best,
(your name)
The Dating During Covid-19 Research Team