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“Make sure I hear snoring”: Adolescent girls, trans, and non-binary youth using sound for sexual wellbeing boundary-making at home during COVID-19

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ARTICLE INFO

Keywords:
Home
Youth
Sexual wellbeing
Sound
Boundary-work
Intersectionality

ABSTRACT

To understand how COVID-19’s stay-at-home orders impacted youths’ sexual and social development, we conducted five virtual focus groups (n = 34) with adolescent girls’, trans’, and non-binary youths aged 16–19 between April-June 2021 in the GTA. We queried experiences of home, privacy, and sexual wellbeing during Canada’s third wave. Auto-generated zoom transcripts were coded using an inductive framework with NVivo. Field notes and team discussions on the coded data informed the analysis. This paper explores how sexual wellbeing during the pandemic is practiced in relation to, dependent upon, and negotiated at home. 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. We argue sound as an important piece of boundary-work that reveals the way youth construct space during precarious times. Youth primarily negotiated sonic privacy through (a) sound-proofing, (b) sound warnings and (c) “silent reassurance”, a term we coined to describe the precursor of silence from other household members in order for youth to feel safe enough to practice sexual wellbeing. We found that 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. Attending to intersectionality theory, we expand on McRobbie and Garber’s (1976) bedroom culture concept and widen Hernes’ (2004) concept of physical, social and mental boundary-work to include sound as a fourth type, which straddles among them. 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. Mapping how and where youth practice embodied sexual wellbeing exposes the ways that private and public understandings of identity relate to sexuality and geographies of home. We understand the home as a complex space that can not only determine sexual wellbeing, but where health promoting boundaries can be negotiated. We conclude with suggestions for supporting adolescent sexual wellbeing, inside and outside the home, during and after COVID-19.

Introduction

The COVID-19 pandemic, and its concomitant repeated calls for social and physical distancing measures, have fundamentally reorganized social, romantic, and sexual relations. For young women, whose lives were already subject to high degrees of social and familial surveillance and control (Seedall and Anthony, 2015), this period of heightened confinement exacerbated pre-existing inequalities related to mobility (Mitra et al., 2014) and accessing the social determinants of health (Paremoer et al., 2021; Hankivsky and Christoffersen, 2008). During stay-at-home orders imposed in response to the COVID-19 pandemic, many “experienced the scarcity of space” (Risi et al., 2021, p. 471). This scarcity was inequitably patterned, experienced, and resisted. Young peoples’ sexual, social, and intimate lives were lived almost entirely within the confined environment of the home, and mediated almost entirely through communications technology (Goldstein and Flicker, 2020). Therefore, drawing on feminist embodiment theory to examine narratives, we delineate how youth navigated visual and sonic privacy...
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determination (Mitchell et al., 2021). As Lorimer et al. (2019) argue, most young people, sexual wellbeing, along with other social and inti-Mmeje et al., 2020). At home, the pandemic has also increased restrictions limited access to sexual and reproductive health services, LGBTIQ young people (Grant et al., 2021). Additionally, COVID-19 restrictions may have disproportionately impacted the wellbeing of Ontario, Canada, where the study discussed in this article took place, making value as they materialize on bodies in different spaces and time (Torresin et al., 2021). Others have noted the heightened salutary sensory aspects of gardens, such as birdsongs (Marsh et al., 2021). To the best of our knowledge, this is the first paper to explore the relationships between sonic soundscapes, geographies of the home and sexual well-being among adolescent girls.

**Embodiment theory and intersectionality theory as theoretical framework**

Embodiment is a lived process that examines how the social makes place and space in the body. Intersectional understandings of embodiment (Combsy et al., 1997; Ahmed, 2000; Heimalaa, 2005; Crenshaw, 2017) have furthered our understandings on the relationships between subjectivity, corporeality and identity. Intersectionality, on the other hand, is a “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 and Carter, 2005; Rodé-de-Zárate, 2014; Sang, 2018).

Through postcolonial 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. Here, we 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. We 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.

The youth we talked to explained how negotiating privacy was a project of brokering sight and sound; these senses collide, combine and conflict to create embodied experience. As youth tried their best to be both unseen and unheard to better perform and practice sexual wellness at home, their embodied success related to both their physical and social circumstances. This paper draws on participant narratives to consider the home as a physical, yet porous space, where privacy and boundary-making negotiations for sexual wellness take place.

Intersectionality and embodiment frameworks are unique but also compatible. While intersectionality prioritizes the lived and embodiment prioritizes the body, sexual wellbeing is made up of the lived

**Intimate geographies of the home**

The home is an intensely intimate space. Many youths first confront power relations and learn about safety, danger, and privacy at home (Blunt, 2005). It is a place of intersecting identities and feelings that are “bound up” within wider structures like labor, the state and the family (Valentine, 2003, p. 39). Blunt and Varley (2004) define home 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” (p. 3). They argue that geographies of home are “both material and symbolic” (Blunt and Varley, 2004, p. 3). Moreover, homes are highly gendered spaces: boys and girls tend to congregate and prefer different kinds of spaces (see for example: Abbott-Chapman and Robertson, 2009 p. 431). Following Ahmed and others (see: Antwi et al., 2013, p. 117), we consider the home as a complex, multifaceted space where both toxicity and love can exist.

Boundary-making and negotiating privacy at home has been shown to promote youth wellbeing. Gale & Park (2010) found that “setting up boundaries can help individuals cope with aspects of infringement on areas they feel they have control over” (p. 35). There is also work on the physical manifestations of requests for privacy at home. As early as 1979, Parke & Sasin found that as children transition to adolescence, they make greater use of physical privacy markers, such as closing the door to their bedrooms. While physical boundaries have been given primacy in the literature on adolescent boundary-making in the home, some new geographers are also examining the importance of auditory boundaries. For instance, recent research around soundscapes of the
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 oppression while embodiment considers how those systemic forces are felt and made up within the body.

This study is part of a larger, ongoing project (Flicker & Goldstein, 2020; 2021) that considers the effects of lockdowns on youth’s romantic and intimate relationships. Earlier work has examined the challenges and affordances for teen girls to navigate relationships exclusively online (Flicker & Goldstein, 2020) and how physical distancing measures and school closures have created the conditions for some youth to reflect on the emotional labor involved in the maintenance of their relationships (Flicker & Goldstein, 2021). This study received ethical clearance through the Office of Research Ethics at York University.

Methods

Sampling

We co-facilitated five online focus groups with adolescent girls’, trans’, and nonbinary youths’ aged 16–19 years old residing in the Greater Toronto area during the Spring of 2021. Participants were recruited through ads posted on social media. Interested participants were emailed an online consent form and a link to complete an anonymous demographic survey. 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.

Procedure

Researchers opened the focus group by introducing themselves, the study, and explaining the functions of Zoom. Participants were encouraged to label themselves with a chosen pseudonym and preferred gender pronouns (we respect these preferences herein). We let participants decide to join the Zoom focus group by audio, video, and/or chat. We reviewed our Confidentiality and Disclosure Policies and procedures. To elicit discussions, we followed a focus group procedure with questions divided into 3 themes: (1) Getting into a Relationship; (2) Being in Relationships; and (3) Looking Ahead. An ice-breaker activity prior to the focus group questions asked participants to draw a map of their home and situated themselves. The focus groups discussions centered on how relationships and sexual wellbeing have been impacted by COVID-19, and their experiences of being at home. Each focus group lasted approximately 90 min. Participants were sent a $20 gift certificate of their choice following the session. This focus group procedure was informed by a feminist methodology that prioritized lived experience and focused on the goal of validating youth’s experience, especially paying “attention to lived experience exposes the role that space plays in the processes of identification and disidentification” (Valentine, 2007, p. 14).

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). Therefore, we informed our focus group with an understanding of the lived experience that Crenshaw (2017) described in her writings on intersectionality. Embodiment theory played a role in our method and our analysis, especially Ahmed’s (2000, p. 41) critique of intersectionality and embodiment, where 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 paper, we view gender and sexuality as an embodied spectrum, where specific identities are named and others have no name. More simply put, this understanding 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.

De Craene and Gorman-Murray (2017) argue 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 site 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. It is this thinking that led us to use the online focus group method; a method that could allow participants to truly be in place, in the home, while also, hopefully relatively comfortable and safe(r). Taylor’s (2009) too suggests that focus groups can better reflect the lived experiences of youth, while also providing them with an important social experience with other peers.

Data analysis

At least two members of the research team attended each session – a facilitator and a note taker. To capture the discussions, the research team utilized the Zoom recording and auto-transcription features. Chat transcripts were also downloaded. Transcripts were manually reviewed and checked for accuracy by an undergraduate research assistant. Copious field notes were taken following each focus group. All data was imported into NVivo for inductive thematic analysis. Drawing on the DEPICT model for participatory analysis (Flicker and Nixon, 2015), our team met repeatedly to collaboratively come up with a coding framework and then review, synthesize, and make sense of coded data. We examined individual stories and ideas and read them in conversation with markers of identity, and then compared them to the experiences of others across focus groups. In addition to noting moments of agreement and disagreement, we also marked obvious silences or absences. 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. Table 1 lists these codes with their corresponding discussion topics.

Demographics

Adolescent girls, trans and nonbinary youth were recruited because, historically, this population has been underserved by sexual health policy, curriculum, education and resources. In addition to this, binary understandings of relationships as either ‘healthy’ or ‘unhealthy’, 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 and Flicker, 2021, p. 7). All participants resided in the Greater Toronto area and were therefore subject to similar public health lockdown orders and school closures. 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). Table 2 summarizes the participant demographics. Based on the demographic survey (n = 34), Table 2 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
### Table 1
Focus group codes and discussion topics.

| Key Codes               | Discussion Topics                                                                 |
|-------------------------|-----------------------------------------------------------------------------------|
| Privacy                 | • What does privacy mean to you?                                                   |
|                         | • What makes a space feel private to you?                                          |
| Sexual wellbeing        | • How would you define sexual wellbeing?                                           |
|                         | • Do you think you have “good” sexual wellbeing?                                   |
|                         | • Why/why not?                                                                     |
| Risk navigation         | • Did your sexual wellbeing change during lockdown?                                |
|                         | • What kinds of risks do you feel okay taking with regards to COVID-19 lockdowns?  |
| Home as social space    | • What does it mean to do something risky?                                         |
| Family and boundaries   | • Do you feel that you can be yourself at home?                                    |
|                         | • Is home a safe space for you?                                                    |
| School                  | • How do you feel when you are at home?                                            |
| Dating                  | • Did your boundaries change during lockdown?                                      |
| Harassment, violence    | • What did school look like for you during lockdown?                               |
| and bullying            | • What did dating look like for you during lockdown?                               |
| Mental health           | • Is dating important to you?                                                      |
|                         | • What makes dating fun?                                                           |
| Friendship              | • Did your friendships change during lockdown?                                     |
|                         | • If so, how?                                                                     |
| Harassment, violence    | • Did you experience a toxic home environment during lockdown?                    |
| and bullying            | • Do you know anyone that experienced harassment, violence or bullying during lockdown? |
| Missed opportunities    | • How has your mental health changed during lockdown?                              |
| Personal growth and     | • Were you able to access mental health supports during COVID-19 lockdowns?        |
| development             | • Do you feel that you’ve missed opportunities during lockdown?                    |
|                         | • Do you feel that you’ve grown during lockdown?                                   |
|                         | • In what ways?                                                                   |

### Table 2
Participant demographics based on participant 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            |        |         |
| No                        | 6      | 18      |
| Sort of                   | 14     | 41      |
| Yes                       | 12     | 35      |

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. Table 3 summarizes participant gender 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 and Grace, 2015, p. 15). Surely, the data collected from these focus group surveys are important and necessary for understanding who was there, but they do not tell the full story of who was there.

### Table 3
Participant gender and sexual identity based on participant survey.

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

**Sound proofing, sound warnings and silent reassurance: sonic privacy for sexual wellbeing**

To practice sexual well-being, youth shared that they needed private spaces where they were unseen, but most importantly, unheard. They primarily negotiated sonic privacy through (a) sound-proofing (finding ways to limit being heard); (b) sonic reassurances (e.g. waiting for snores or silence); (c) sound warnings (e.g. knocking). 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, in addition to sound boundaries. 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).

McRobbie and Garber’s (1976) concept of bedroom culture argues that while boys tended to dominate the street cultures, girls created a culture of their own within the space of the bedroom. Participant’s acoustic and physical experience of their bedroom shows that the bedroom is not just as a site of cultural production, but one of negotiating for sexual wellbeing and therefore, agency of self. Here, we expand this 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. Finally, we use Hernes’ (2004) concept of boundary work and expand it from physical, social and mental, to include sound as a fourth type of boundary that intersects and connects all other forms of boundary work.
(a) Sound proofing: being unheard

Almost all participants pointed to sonic privacy as a major factor in whether they could practice sexual wellbeing. Alkyl, a bisexual, East Asian youth said in the Zoom chat: “sorry I do not 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 have lots of privacy lol.” This quote embodies the fear that many participants had surrounding being “overheard” during stay-at-home orders. Alkyl’s fear was a potent reminder that even during the focus group, participants were positioned at home, where surveillance mechanisms and constellations of power persist. Similarly, many participants made liberal use of the chat for “privacy” reasons. Being unheard (even during focus groups) was critical for youth to feel free to express themselves.

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 were often discussed, the limiting factor to being able to practice sex virtually was often the ability to find a quiet space where they could be unheard.

When asked about sexual wellbeing, Asha (she/her) a nonbinary, pansexual, black youth 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. Asha’s creative efforts to find places where she would not be heard was echoed by several others.

Giselle (they/she), a nonbinary, lesbian, white youth said that she goes to the basement and turns the television on in order to have extra privacy “because it’s definitely the place where no one can hear as much”. Giselle adds that she will sometimes turn the “TV on or something in the background and then being on the phone and having the floors and doors and stairs in between helps.” She adds that her room is “more of a physical safe space, rather than a sound one” and therefore, not as ideal if she needs to be loud. Giselle makes an important distinction here: that there are multiple understandings of privacy for youth during the pandemic. In her case, sonic privacy (the basement) and physical privacy (the bedroom) were different spaces. Giselle’s boundary work is complex, coupling multiple modes of sound to account for the different moments when she needs privacy. 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. Again, while auditory buffers as major factors in perceived privacy is not new (Lincoln, 2005), sound as related to privacy during a pandemic is, especially as our interconnected world turns more virtual with youth online for school, sex, and downtime.

Giselle also described how lockdown measures facilitated an exploration of their queerness. Moving online to find new partners encouraged them to try out lesbian dating apps. Giselle shared that this was a challenging terrain and 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...creating this safe space [would] allows us to create relationships safely and more openly because we would not feel the need to be so private/hidden/secretive.”

Giselle’s identity as a nonbinary and lesbian, coupled with the power struggles at home with her parents, may account for the effort she takes at navigating sound boundaries for her sexual wellbeing. In response to another participant, Giselle continued: “boundaries are crucial. Setting boundaries can be so hard, so I wish that parents understood that too”. Giselle’s experiences were reflected in other queer participants who were managing the labor of exploring their identities and practicing sexual wellbeing without the usual freedom and supports provided by access to public and community spaces.

Other youth agreed with the importance of sonic privacy. Bri (she/they), a nonbinary, pansexual, white youth says that she and her parents use the basement for downtime and privacy, “but privacy is kind of an issue sometimes because [she is] scared that they’re gonna over hear [her] since they’re so close...” Bri explained that it’s the only area available because her parents have given her brother permission to use the entire main floor to play video games. Bri’s relegation to the basement brings up the question of a gendered division of space: their brother receives one floor for playing, but she is confined to a shared communal space. Bri cannot help but connect this to her family’s lack of acceptance of her sexual and 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 must comply. Bell and Valentine (1995) argue that queer bodies existing in certain spaces allows others to understand that the space has been produced as heterosexual, heterosexist and heteronormative (p.18). We can see here that Bri’s taking up of space in the basement of a larger home may be an 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 her sexual wellbeing. Bri says the pandemic has actually made it easier for her to have uninterrupted sex with her boyfriend at home. Her parents wanted to keep their distance (due to fears of COVID-19 transmission):

“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.”

Similar to Giselle, Bri underscores the value of sonic privacy. While Bri can be alone, she cannot be private. The two do not necessarily relate here. Therefore, sound itself is embodied in Bri’s ability to engage in sexual wellbeing. These 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 often determined by their allowance for sonic privacy. Liz (she/her) a queer, white, youth 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 she was left 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. Home is “imbued with meaning and is part of the process of identity-making and a matrix of social relations” (Forsberg and Stran-dell, 2007, p. 395), but is 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” (Horschelmann 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 to find sonic privacy. For example, Aaliya, a bisexual girl who identified her race as “Other” in our demographic survey, shares:

“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 AirPods too so nobody hears them obviously.

We found that participants often wore AirPods to ‘find’ or rather make, privacy. Most of them said they would always have AirPods, earphones, or a headset on when engaging in intimate conversations. This kind of boundary work involves a lot of movement within space.
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) study on the boundaries of place and identity during schooling at home during COVID-19 which reveals how boundary making is “continuous” (p. 343). This fluidity represented at home is critical in understanding how lockdown orders were not simply stagnant or unchanging, but in constant flow and negotiation. In addition to this, the incorporation of earphones represents an embodied soundscape, where an object must be used to gain the soundscape the youth desires.

(a) Sonic reassurances: listening for snores or silence

A sexual wellbeing practice that youth engaged in often, especially during the restrictive pandemic lockdowns, was texting, phone, and virtual sex. The following quotes 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
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 “silent reassurance” was a major factor in whether youth 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 Johnson’s (1995) understanding that “at-home” sexual identities are both performed and come under surveillance (p. 88), Sasha, and others, shared that they often waited until household members were out or asleep before having sex. Two, on the other hand, made it clear that they would never engage in phone sex due to the fear of being overheard. Youth participants each negotiated their own boundaries that were context dependent

Sound warnings: knocking

As studies during the pandemic have found that people “need… a private and controlled soundscape for home working” (Torresin et al., 2021 p. 10), we argue that youth in this research also needed a private and somewhat ‘controllable’ soundscape for their sexual wellbeing practices. In addition to this, we found that sound warnings were important boundaries that adolescent girls negotiated during the pandemic. Knocking, specifically, was discussed as one of the most important factors in whether youth felt that they had privacy for sexual wellbeing. The importance of ‘sound warning’ requests was visible when participants discussed interruptions, with many youth indicating that they desired a ‘knock’ on their door before a family member entered. Often, knocking was described as just as important for privacy, as a closed door. Unfortunately, this request for a knock was also one that household members often ignored. 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:

But I just assume, like their idea of privacy growing up is much different than my idea of privacy, because we’re like, two completely different generations. They were raised in a different environment. … 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. Olivia (she/her), a bisexual, East Asian youth, was frustrated that she was often having to “reinforce[e] with [her] mum who I live with, that you need to knock before you enter”.

Hernes’ (2004) defined a framework for studying organizational boundaries, pointing to three parts: physical, social and mental. We argue that within the home, sonic boundaries represent an important addition to this typology. For example, Misty’s experiences of negotiating for privacy blends the physical and the sonic. A straight, Black youth, Misty says her siblings often “barge in” and she has “told them countless times to knock”. She says: “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.” While Misty refers to her bed as a potential space of privacy, “it’s not really a private area” due to the physical act of siblings often barging in. Misty’s experience represents how the social need for privacy has real physical implications at home, especially embodied within the bedroom. 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, we 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, with “[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, and not because they were guaranteed privacy within it. Take Valerie, a bisexual, Southeast Asian and Latinx/Hispanic girl who says she does not “have much privacy elsewhere”. Similarly, Tye, a bisexual, middle-eastern girl explained that her grandparents are “always, like, in and out of [her] room”, while Janice, a bisexual, East Asian girl shared that “privacy is definitely an issue, [my parents] always go into my room without asking and probably check my devices too.” 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, such as the moving of furniture to block access to a bedroom door or the addition of a tapestry to muffe both sound and sight. This discrepancy in the experiences of privacy between white youth and BIPOC youth may point to differentiating cultural understandings of one’s “right” to privacy. It may also point to intersections of race, ethnicity, and socioeconomic status, as BIPOC youth may be more likely to be living in multi-generational homes, or in less spacious homes with fewer rooms, making privacy more difficult to come by (COP-COC, 2019).

Understanding the home as being both a potential site of care and anxiety, illuminates the relationship of belonging and safety to 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. There is significance between the bedroom as ‘refuge’ versus “best option”. 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, we argue that sound in the bedroom as a boundary-maker and -marker played an important role in youths’ perception of their own privacy, which is vital for sexual wellbeing.

It should be noted that some of the participants in our focus groups,
often white youth, had positive experiences during the pandemic, using it as an opportunity to create communal boundaries for the entire household. Take Bri (they/them), a nonbinary, pansexual, white youth who had made a clear boundary that everyone must knock on closed bedroom doors. Similarly, Liz (she/her) 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 did not “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.

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. Expanding on Hernes’ (2004) concept, sound is a pivotal piece of boundary-work for youth at home, where physical, social, and mental boundaries blend with sound to create a space where youth feel safe enough to explore their sexuality, and engage in sexual wellbeing practices.

Conclusion

This analysis reveals how navigating sound (and silence) at home influences youth’s sexual wellbeing. Furthermore, it underscores how challenging it has been for youth to navigate sonic boundaries during stay-at-home orders. Our analysis, coupled with a more intersectional understanding of McRobbie and Garber’s (1976) concept of bedroom culture, 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. Hernes’ (2004) concept can be deepened to include sound, as the physical, social and mental boundaries inherently connected with the sonic in creating what youth understand to be a private space at home, where they can engage in intimate practices.

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. Results may not be generalizable. Also, the focus group format may have precluded discussions about masturbation—often a taboo topic that young women are shy to discuss (Kaestle and Allen, 2011). Therefore, masturbation was discussed in coded ways, as this was a sensitive topic, so we often heard instances where youth did not mention a sexual experience as an explicitly partnered one, but rather neglected to announce it solely as solo. In addition, queer youth were over-represented in our sample. This could be due to our inclusive targeted advertisements which may have been shared on social media among queer communities. Implications of this bias include the prevalence of narratives throughout the focus group which relies on creative ways to subvert the heteronormative home, and the more generalizable need for privacy. This over-representation may also influence our findings in that depending on the home, the perception of privacy is dependent on more than personal needs for privacy, but potentially even safety-based needs for privacy due to an unwelcoming home or a youth who is still discovering their identity. Nevertheless, the rich narratives gathered provided a nuanced and specific analysis of home in this historical moment.

As more COVID-19 waves continue, it is critical to consider the role that sonic soundscapes play in youth sexual wellbeing. Parents may wish to dialog 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 all be intentionally negotiated. In addition to this, future work could look at parental sexual wellbeing and privacy, as the experience of the parent is often underlooked in home studies.

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 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 during the pandemic 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 and Rao, 2020), we argue that youth’s sexual wellbeing needs can be better served through directly listening to their desires. 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 and Fleck, 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.

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 available on Zoom 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.

We’ve learned that the home and the bedroom is not always a “pulling away” from public life space. Instead, many youths used private space at home 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. In fact, the focus groups we conducted themselves were situated in private in participants’ homes (virtually) and we had many participants reach out afterwards to let us know they found the opportunity to speak with other youth incredibly therapeutic during a time of high anxiety. Our research reveals that the conditions adolescents need to practice sexual wellbeing include privacy and space. While we cannot define sexual wellbeing, nor did we come close to it, we can say that all youth participants indicated their need to create boundaries in their homes to give themselves opportunities to at least explore their relationships, sexualities, and identities free from the scrutiny and interference of others. In saying this, we call for more literature on the importance of space for young people’s burgeoning identities, and for specific considerations of what it might have meant to them to lose certain spaces for extended periods of time during the pandemic. In addition to this, more work on why youth depend on seemingly small boundary-making gestures, such as knocking, is needed.

Feminist geographer Mona Domosh (1998) 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” (p. 281). We hope that emerging research on youth operates as a small crack in that door, one that shines light on young people’s resilience during unprecedented times, their creativity and their autonomy in places that can do so much, so often, to restrict it. One of our participants, Olivia aptly described why we must work to 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”.

Declaration of Competing Interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

Leah L. Coppella reports financial support was provided by LaMarsh center for Child & Youth Research. Leah L. Coppella reports financial support was provided by Social Sciences and Humanities Research Council of Canada.
