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Original Article

Effect of COVID-19 lockdown on sexual minorities: A pilot survey study in India

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Abstract

COVID-19 pandemic has created havoc in the human mind and it has arguably a negative effect on human relationships and their sexual life. The intimate life of sexual and gender minority groups is a largely neglected area and the effect of the pandemic on it has been least studied. The current study was aimed to see how sexual behaviours have been changed among them during the lockdown period of the COVID-19 pandemic. Data were collected from 39 members of the sexual and gender minority group with a preformed questionnaire. Convenient sampling approach was followed to select the study participants. Significant changes were noted in sexual satisfaction with respect to the number of partners before and during corona pandemic, method of finding out the partner, and the ability to develop new sexual behaviour.

Keywords: Sexual minorities, Gender minorities, COVID-19

Introduction

The unprecedented crisis evolved due to spreading of COVID-19 infections is creating havoc in human lives. It has created unimaginable changes of tremendous scale in our personal and public life. Since the World Health Organisation (WHO) declared it as a pandemic, a significant proportion of the world population is either under complete lockdown or partial lockdown along with family or even unwanted company (World Health Organization, 2020). Almost all domains of lives have been affected whilst sexual life is not an exception (Arafat et al., 2020). However, there is a need to further a handful of studies to substantiate the above statement (Hussein, 2020). There is a dearth of studies assessing the impact of the crisis such as COVID-19 pandemic on the sexuality of sexual and gender minority (SGM) group.

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SGM persons include people who identify themselves in a long spectrum of lesbians, gay, bisexual, transgender, etc as well as individuals whose sexual orientation, gender identity or expression, or reproductive development varies from traditional, societal, cultural, or physiological norms which are characterized by non-binary constructs of sexual orientation, gender, and/or sex (National Institutes of Health Office of Extramural Research, 2019). Although in many countries, significant improvement was seen in legalizing the group and allowing basic human rights to them in the last few decades, internalized homophobia in largely heterosexist societies like India is a stark reality (Jawale, 2016). When extreme social isolation and stigma make their life miserable even in normal times, any person can expect much more difficulties to them in times of disasters. Therefore, the current study was aimed to see how sexual behaviours have been changed among the SGM persons during the lockdown period of the COVID-19 pandemic.

Methods

This cross-sectional study was conducted among SGM people in India from 18 to 28 April 2020. Ethical clearance was obtained from the Institute Ethical Committee (IEC) of IQRAA International Hospital and Research Centre, Calicut. Data collection was carried out by online survey, for which a questionnaire was created in English using the Google form. A convenient sampling technique was applied, and the SGM individuals who already came out and who understood English were approached through queer-friendly doctors forums, of which authors (PC Arjun and RT) are dedicated activists. As a descriptive pilot study, the sample size was not calculated by any statistical formula.

The questionnaire contained inquiries regarding respondents' demographic details, sexual identity, and sexual habits before and during lockdown due to the COVID-19 pandemic. They were requested to share the link in the SGM groups and to the individuals in their contact. Clicking on the questionnaire link, circulated during the survey flashed a brief summary of the survey on the screen, followed by the consent form. Participants aged 18 years and above, identifying himself/herself as an SGM member, consenting to participate in the study, and able to understand English were included in the study. The questionnaire became accessible after accepting the terms and conditions of the study. Data cleaning was done by one of the investigators and it was cross-checked by a second investigator. Data analysis was carried out using IBM SPSS version 21. Descriptive statistics like mean, SD, and percentage were used. Chi-square/Fisher Exact test for categorical values and independent student T-test in numerical values were employed for statistical analysis and a p-value of <0.05 was taken as significant.

Results

We received a total of 41 responses and two were discarded for not fulfilling inclusion criteria. Out of the remaining 39 responses, 33 were males, almost all the respondents <30 years of age (n=38), and homosexuality was the most common orientation (n=30) (Table 1). The majority of the respondents had realized their identity for a longer period mentioned as >3 yrs (n=25) and 89.7% of the respondents were staying home with parents during the lockdown period.

Before the COVID-19 crisis, more than half of the respondents (56.4%) used to find partners with the help of internet-based gay dating apps and 35.8 % thorough Facebook. Virtual sexual activity through phone (35.9%) and oral sex (51.3%)was most preferred sexual behaviour. But during lockdown changes were visible in sexual

behaviour with phone sex being most prevalent (41%) followed by oral sex (30.8%) (Table 2). Following the lockdown number of persons with no partner increased to 53.8%; porn videos came to help in sexual life for 64.1% of the respondents while LGBT chat rooms were most helpful for 15.4%. Difficulty in sexual life was reported by 46.2% of persons.

Table 1. Demographic and sexuality related details of the respondents (N=39)

Age in years	N (%)
18-20	8 (20.5)
21-30	30 (76.9)
31-40	1 (2.6)
Gender	
Male	33 (84.6)
Female	4 (10.3)
Transgender	2 (5.1)
Sex orientation	
Homosexual	30 (76.9)
Heterosexual	2 (5.1)
Bisexual	6 (15.4)
Pansexual	1 (2.6)
Time duration after self-identification	
<1 year	5 (12.8)
1-3 years	9 (23.1)
3-10 years	14 (35.9)
>10 years	11 (28.2)
Marital status	
Married	1 (2.6)
Separated	1 (2.6)
Unmarried	37 (94.8)
Stay during lockdown	
With parent	35 (89.7)
With partner	1 (2.6)
LGBT+ hostels	2 (5.1)
Alone	1 (2.6)

25.6% respondents reported a decrease in sexual satisfaction in a clinical interview while no change was reported by 53.8% respondents. An increase in sexual satisfaction was seen in 20.5% of persons. The characteristics of the three groups were detailed in Table 2. It was noticed that persons who could adapt to new sexual behaviours had a significant increase in sexual satisfaction (p-0.023). Monogamous respondents reported significantly lower problems in sexual life after the crisis (p-0.028). It was also noted that persons who chose a stable channel to find their partner had difficulty in the same as compared to those who chose multiple channels (p-0.031). At the same time, those persons who could maintain or increase the number of partners during lockdown reported a significant increase in sexual satisfaction (p-0.011). Before the crisis, most of the respondents (42.9%) were having sex once in a while, followed by weekly (17.1%), daily (14.3%), and monthly (11.4%). This too changed to the majority (48.6%) reporting no partnered sex after the crisis, followed by daily (14.3%),

Table 2. Changes in sexual life due to lockdown

Sexual satisfaction	Increase (N=8)	Decrease (N=10)	No change (N=21)
Age			
18- 20	1	-	7
21- 30	7	10	13
31- 40	-	-	1
Sex			
Male, Female, Intersex	6,1,1	10,0,0	17,3,1
Orientation			
Homosexual	7	8	15
Heterosexual	-	-	2
Bisexual	1	2	3
Pansexual	-	-	1
Time duration after self identification			
<1yr	1	2	2
1-3yrs	3	-	6
3-10yrs	2	5	7
>10yrs	2	3	6
Marital status			
Yes, No, separated	-,8,-	1,9,-	-,20,1
Place of stay during lockdown			
With parents	7	9	19
With partner	1	-	-
LGBT+ hostel	-	-	2
Alone	-	1	-
Finding partner through			
Dating app	5	9	8
Facebook	3	5	6
Suggested by friends	2	4	7
Number of partners before v/s after COVID-19			
Nil	2 v/s 2	-v/s 9	5 v/s 10
Single	5 v/s 5	5 v/s -	7 v/s 8
2-10	-v/s -	5 v/s 1	9 v/s 3
>10	1 v/s 1	-v/s -	-v/s -
Sexual behaviour before v/s after COVID-19			
Phone sex	3 v/s 3	5 v/s 7	6 v/s 6
Oral	5 v/s 5	8 v/s -	7 v/s 5
Mutual masturbation	3 v/s 5	6 v/s -	4 v/s 4
Anal	4 v/s 3	5 v/s -	7 v/s 6
Vaginal	1 v/s 1	- v/s -	1 v/s -
Only solo masturbation	-v/s -	- v/s 2	2 v/s 3
Most helpful way to cope up during lockdown			
Phone sex (sexting/audio/video)	1	3	3
Porn videos	6	3	12
LGBT+ chat rooms	1	-	5

monthly (11.4%), and once in a while (8.6%).

Discussion

The current study was aimed to understand the impact of COVID-19 related crises on the sexual life of SGM. In a conservative society like India which has a long history of persecution against the group, life was always difficult to them with extreme isolation, stigma, and atrocities (Jawale, 2016). The majority of them are hidden which creates big hurdles in conducting studies and planning targeted interventions (Math and Seshadri, 2013). A previous study conducted on the effect of the pandemic on sexual behaviour among married heterosexual couples revealed no major change in sexual intercourse frequencies, however an increase in emotional bonding (Arafat et al., 2020). But it has a tremendous impact on the intimate life of SGM. Partnered sexual activities were ceased in many SGM persons as shown in our studies. Had there not been the internet, many of them might have a complete dearth of sexual activities. But it comes with a danger of digital addiction, porn addiction, and problematic masturbation habits (Weinstein et al., 2015).

It is worth remembering that both saliva and faeces carry SARS-CoV-2. Glandular cells of oral mucosa and rectal epithelia expressed angiotensin-converting enzyme II (ACE2). SARS-CoV-2 enters cells by binding with ACE2. Fan et al. (2020) have reported high mRNA expression levels of ACE2 in the urinary tract, prostate, testis, endometrium, and ovary, but until now, no SARS-CoV-2 RNA positive results in genital tracts, semen, testis were reported in COVID-19 patients. Still, the fear of Corona transmission by sexual behaviour has prompted some scientists to take a radical appeal to stop all partnered sexual activities in disease hotspots while others have cautioned against 'non-classical' sexual behaviours like unprotected anal and oral sex (Patrì et al., 2020; Yin, 2020). This knowledge is critical while advising SGM persons about safe sex practices during the pandemic.

Most of our respondents were compelled to stay at home with family, only a few could stay back in the LGBT+ hostel. Lack of peer support and exposure to hostile surroundings make life more difficult especially to those who have not come out yet. A real chance to get 'exposed' and the fear of subsequent responses make them vulnerable to psychological upsets. Studies have shown that trans-genders were forced out of their homes or choose to leave home because of parental rejection or fear of rejection, but lockdown creates trouble there too (Koken et al., 2000). Probability of ego dystonia and subsequent psychological distress, suicidal ideation, substance abuse, etc increases manifold (Mathy et al., 2011; Ramirez-Valles et al., 2008; Hatzenbuehler et al., 2008).

Most governments and global health organizations have not yet announced clear guidelines for culturally sensitive approaches for COVID-19 care among SGM persons. Keeping the high prevalence of internalized homophobia among the community, lack of special arrangements for isolation and treatment of the disease may hinder the compliance from the community towards the campaign. There are few studies highlighting the degree of neglect shown by the government and other institutions towards the community during disasters (Gaillard et al., 2017). A better understanding of the specific problems SGM people are facing during the pandemic can help authorities to have a more realistic and empathic approach towards them.

This study has several limitations. The study applied a convenient sampling technique and the number of respondents was small. The questionnaire was prepared in English and respondents with good internet literacy were

only included. We failed to get participants from other groups like lesbians, queers, asexual, etc which could have given a better understanding if included.

Conclusion

This is the first study on the impact of COVID-19 pandemic on SGM yet in India. The study revealed that the pandemic causes changes in sexual life of the respondents. This can serve as a base line study for further research in the area and further empirical studies are warranted in the subject.

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