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Sex in the time of coronavirus: queer men negotiating biosexual citizenship during the COVID-19 pandemic

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ABSTRACT

Throughout the COVID-19 pandemic, representations of irresponsible gay men partying with little regard for viral transmission have circulated across social media; a construction of gay men that has a history that long precedes the coronavirus conjuncture. In this article, we draw on in-depth qualitative interviews with 43 queer men in London and Edinburgh, to investigate experiences of sexual and intimate practices during COVID-19 and use the concept of 'biosexual citizenship' (2018) to analyse the ethical frameworks these men used to navigate them. We argue that rather than being 'good' or 'bad' biosexual citizens, queer men have developed an array of ethically reflexive strategies in order to negotiate the difficult terrain they have had to face when trying to pursue their cultures of sex and intimacy during the pandemic. In so doing, they appear to enact biosexual citizenship through diverse sexual practices that both inevitably include and challenge both hegemonic imperatives of responsibility and well-being, as well as well-worn media representations of reckless, hedonistic gay men.

KEYWORDS

Gay and bisexual men; biosexual citizenship; intimacy; responsibility; United Kingdom; COVID-19

Introduction

On New Year's Eve 2020 a party boat called the PV Delice capsized off the coast of Jalisco, Mexico, not far from the holiday resort of Puerto Vallarta. That day, the PV Delice was hosting a gay[1] party, and was carrying around 60 passengers, all of whom were able to gather in this way because of Mexico's comparatively relaxed COVID-19 restrictions. No-one on the boat was injured, nevertheless, memes of its capsizing went viral. One meme included the words, 'the series finale ending to 2020 in Puerto Vallarta' (Gaysovercovid 2021). This was posted by the anonymously run Instagram account @gaysovercovid that, at the time of writing (7 May 2021), had posted 77 times and garnered 133,000 followers. Having first posted on 15 July 2020, @gaysovercovid appears to have been created to 'call out' mass gatherings of gay men during a time when such gatherings are seen to increase transmission of COVID-19. It does this by posting images of groups of gay men often at 'circuit party' events – a global circuit of gay parties that emerged in the 1990s and

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defined in the gay cultural imaginary by topless, muscular men, consuming recreational drugs and dancing for hours to electronic music – archetypal 'circuit queens'. The following is an example of how the account captions these images:

> Why are we going back on lockdown [sic]? Because fools like this are still attending pool parties and posting about it. Your body is gonna look real good with a ventilator coming out of it. Hope you post that too! #stayhome. (Gaysovercovid 2020)

Puerto Vallarta is one stop on this circuit. For days leading up to the sinking of the PV Delice, images from Puerto Vallarta were widely circulated over social media platforms. The dramatic images of a party boat sinking in the Pacific Ocean were the 'season finale' to not just this run of social media content, but also to six months of commentary from the likes of @gaysovercovid admonishing 'circuit queens' for continuing to collectively gather and party through the pandemic.

@gaysovercovid has not been the only voice drawing attention to the allegedly irresponsible behaviour of gay men during the pandemic. High-profile activist and author Cleve Jones took to Facebook to furiously denounce gay men at a 4th July party in gay holiday resort Fire Island:

> Words rarely fail me but I can't express the depth of anger and disgust I feel towards many of the younger people (and some older) in my own community today. You who are so self-absorbed, so nonchalant in your irresponsibility, so arrogantly ignorant and selfish. (Casey 2020)

Around the same time in the UK, images of crowds of people gathering in Old Compton Street – London's iconic 'gay street' – without social distancing were used across different media outlets to represent the folly of allowing businesses such as bars to open up on 4 July 2020 (Kitching 2020). Between March and July 2020, #stayhome and sometimes #staythefuckhome were also highly visible across Grindr profiles in the UK, as a way to chide other users for even entertaining the thought of hooking up.

The representation of gay men as selfishly, sometimes murderously, hedonistic, reckless and irresponsible has a history that long precedes the COVID-19 pandemic (e.g. Kramer 1978). Different iterations of this representation have been conjured up more recently in gay moral panics on barebacking[2] (Dean 2009), so-called 'PrEP whores'[3] (Spieldenner 2016) and chemsex[4] (Hakim 2018; Race 2018). In this article, we see the extension of this critique during the current conjuncture as one front of many in the struggle over what constitutes 'biosexual citizenship' (Epstein 2018; Jones, Young, and Boydell 2020) for queer men during the COVID-19 pandemic. We draw on 43 in-depth interviews with UK-based, queer men to show that far from the seemingly clear-cut division between the 'irresponsible/bad' versus 'responsible/good' biosexual citizen constructed by @gaysovercovid (which, although US-based, has attracted international attention), queer men have in fact been enacting multiple and complex models of biosexual citizenship as they have been negotiating their cultures of intimacy during this exceptional historical moment.

Biosexual citizenship

Biosexual citizenship is a term coined by Steven Epstein. He defines it as referring to:

> . . . differentiated modes of incorporation of individuals or groups fully or partially into a polity through the articulation of notions of rights and responsibilities, in cases where biological and health-related processes are brought into some relation with sexual meanings or identities. This conceptual intersection of biocitizenship and sexual citizenship calls attention to how embodied pleasures and risks associated with sexuality figure in the worlds of biomedicine and public health, as well as how public health officials, in engagement with others, participate in defining sexual rights and responsibilities. (Epstein 2018, 26)

In doing so he draws on long-standing debates on citizenship, in which the term does not so much designate a type of person or legal status but instead a frame that can be used to consider the ethics of an individual's or a social group's relationship to a state (Richardson 2018), a polity (Epstein 2018), the authorities (Rose 2007) or concepts of national culture (Puar 2006). This relationship is marked by both the rights and entitlements these institutions confer on individuals or social groups, as well as the responsibilities that each of these various social actors have towards each other. The citizenship frame therefore requires us to be attentive to top-down, bottom-up and more horizontal dynamics, enabling us to think about the ethical ways that individuals and social groups, living in particular jurisdictions, relate to each other in a given set of historical circumstances.

Biosexual citizenship combines the concepts of biocitizenship with sexual citizenship. The multi-faceted question of 'sexual citizenship' has been central to rights-based politics of sexuality since at least the latter half of the 20th century and the scholarship thereof. In the context of British gay culture, the struggles for the decriminalization of homosexuality, the equalization of the age of consent, for gay adoption and for gay marriage have all been conceived of as struggles for sexual citizenship (Plummer 2003; Weeks 2010; Richardson 2018). Since the turn of the 21st century, what writers such as Adriana Petryna (2002) and Nikolas Rose have called 'biological citizenship' – and now more commonly 'biocitizenship' – also appeared. These 'biocitizenship' struggles occur in relation to questions of health, and specifically evoke demands to access healthcare as well as being attentive to specific practices that monitor, improve and advocate for one's own health. The various forms of activism around the AIDS crisis (a crisis that disproportionately affects gay men as well as other marginalized groups) are often held up as exemplary forms of biocitizenship. This activism, in part, is what provides the basis for Epstein's biosexual citizenship, as it drew attention to the intersection between rights and responsibilities relating to sex, sexuality, health and disease as they were constructed in this, and other, context(s).

During this period, these citizenship struggles have largely been shaped by the shifting political contexts in which they have occurred: namely the ascendancy of neoliberalism as the governing political rationality in much of the Global North (and elsewhere, see (Rofel 2007)) and the parallel decline of welfare state social democracy (or the collapse of the USSR in the case of Petryna). Within this context, enactments of biosexual citizenship have tended to align with two contrasting trajectories. The first, shaped by the individualizing tendencies of neoliberal ideology, involves individuals taking responsibility for their own sexual health; the second involves social groups organizing as collectives and making

political demands that the state address structural inequalities in sexual health. Paul Rabinow has called the latter 'biosociality' (Rabinow 1996) and Epstein incorporates this into his conceptualization of biosexual citizenship. This framing of biosexual citizenship – as having both individualizing and collective dimensions – is especially useful to analyse the ethics of how gay men negotiated their cultures of sex and intimacy during the COVID-19 pandemic, as will soon become clear.

Methods

In order to explore this question, we conducted semi-structured, in-depth interviews with 43 queer men from London (30), Edinburgh and the East of Scotland (13). We recruited our participants by promoting recruitment materials on social media, advertising on gay and bisexual smartphone hook up applications, such as Grindr and Scruff, and were supported by project partners (community organizations who work with different categories of queer men) who advertised the study through their online interfaces. We also explicitly approached different organizations and social media accounts who represent minority groups within gay communities, paying particular attention to race, disability, trans identities and class. Thirty-three of our participants identified as cis-gender men, while six identified as trans men and four identified as non-binary trans masc. Thirty participants identified as gay, four as bisexual and eight as queer and one as queer/androsexual/gay. Similarly, in terms of race and/or ethnicity, 29 participants self-identified as white, whereas the remaining self-identified as: Black (5), South Asian (4), Southeast Asian (1) and 'mixed' (4). Participants ranged from 21 to 58 years old. Thirty-four participants reported some form of university education, with nine describing secondary education. Eight men described living with one or more disabilities. The interviews, each one to two hours in duration, took place using video-conferencing platforms between July 2020 and February 2021. They were then transcribed, pseudonymised and thematically coded using NVivo. Research ethics were granted by the University of East Anglia's Faculty of Arts and Humanities Research Ethics Sub-Committee on 20 May 2019 (HUM SREC 19-030).

Regulating gay sex during the pandemic

In order to begin answering how biosexual citizenship was negotiated by UK-based queer men during the pandemic, it is necessary to sketch the discursive and material parameters that have circumscribed these men's pursuit of sex and intimacy during this time. These parameters have shifted continuously since January 2020, as the nature of the pandemic has changed (e.g. the spread of more contagious variants of the virus) as well as the UK governments' responses to it. Rather than taking a zero-transmission approach, Boris Johnson's Conservative government instead opted for 'flattening the curve' – introducing different levels of physical distancing restrictions so the spread of this airborne virus did not exponentially increase and overwhelm National Health Service (NHS) intensive care units with COVID-19 patients. The law introducing these, and other, restrictions is called The Health Protection (Coronavirus, Restrictions) (England) Regulations 2020 – more commonly referred to as 'the lockdown regulations'. Similar restrictions came into effect in Scotland, which, as a devolved nation within the UK, has separate governance over a

number of areas including health. These regulations were at their most severe between March and June 2020, when UK residents were prohibited from mixing with anyone outside of their household, only being allowed to leave their house for essential shopping or an hour of exercise. Since March 2020, these regulations have been relaxed and tightened regionally and UK wide, depending on how close to being overwhelmed the government felt the NHS was. The most significant change for our purposes was the introduction of 'support bubbles' on 14 June 2020 in England and 'extended households' on 19th June in Scotland. Although specific details differ slightly between these two jurisdictions, these 'bubbles' essentially meant that single people were legally allowed to join another household without having to physically distance.

When it comes to queer men's sex lives, a series of legal measures and different forms of advice have been introduced throughout this time. On 1 June 2020, an amendment was made to the lockdown regulations that forbade, ' . . . a gathering when two or more people are present together in the same place in order to engage in any form of social interaction with each other, or to undertake any other activity with each other' (legislation.gov.uk 2020). This amendment was widely interpreted, and mocked, by UK media outlets as a 'sex ban' (Holloway and Clark 2020). What it meant for gay and bisexual men and their cultures of sex and intimacy was left for these men, as well as sexual health organizations and sexual health and rights activists, to interpret. Reminiscent of early responses to the AIDS epidemic, two broad approaches emerged: sexual abstinence and harm reduction. In March 2020, The Terrence Higgins Trust, the UK's leading gay sexual health charity, recommended that gay men abstain from sex with anyone outside their household (Brady Brady, 2020a). Other UK-based gay sexual health organizations (e.g. PrEPster) suggested harm reduction techniques including: having sex in a shower, having sex outdoors, avoiding kissing and face-to-face interaction and only hooking up with one regular 'corona-buddy'. As restrictions from the initial lockdown began to ease, Terrence Higgins Trust changed its sexual health and COVID-19 advice from a message of abstinence to one of harm reduction (Brady Brady, 2020b).

The nature of biosexual citizenship demanded within these laws and their interpretation by these different sexual health organizations draws on the neoliberal rationalities outlined above. In lieu of a competent public health response from state-funded organizations (for example, a well-resourced National Health Service or a functioning contact tracing system (Horton 2020)) the spread of COVID-19 in 2020 was primarily managed by attempting to responsibilize citizens into practicing physical distancing and, for some months, staying at home. We see an intimate extension of these citizenship demands through the advice given to gay men by sexual health organizations. Like much health promotion material aimed at gay communities for decades (Keogh 2008), this advice emphasized that gay men ought to make 'responsible' choices in relation to the governance of their own sex lives in ways that minimized harm to themselves and the men with whom they were intimate, so as to reduce the need for state-mediated forms of healthcare. Where some advocated abstinence, and others harm reduction, almost all advice argued for sexual practice that considered its potential impacts on the wider community and health systems. However, as the significant asymmetries in COVID-19 transmission and mortality figures between social groups show, this model of citizenship is clearly

more achievable and sustainable for some social groups than it is for others, given structurally embedded health inequalities, especially in relation to class and race (Horton 2020).

It is through this particular frame of biosexual citizenship that the representation of irresponsibly hedonistic gay men so exemplified by the content posted by @gaysovercovid becomes intelligible. The Instagram account reprimands these 'circuit queens' precisely because they are not seen to be adhering to the idealized, public health-oriented biosexual citizenship practices of individualized responsibility that have become hegemonic in sexual health promotion in many anglophone, high-income countries (Keogh 2008) and which have come to greater public attention during the current COVID-19 pandemic. According to the above quoted post from @gaysovercovid, it is 'because fools like this' are failing to enact biosexual citizenship by 'still attending pool parties' that different US states were going back into lockdown. The rhetoric suggests that it is because gay men are failing to act responsibly and consider the impacts of their behaviour on others that COVID-19 continues to pose a significant public health risk, and not because of the insurmountable constraints that both neoliberal and populist approaches to global health pandemics fundamentally pose to their management, nor the profound structural inequalities across the US health system and US society more widely.

Judgements about rule-breaking and 'irresponsible' practices during COVID-19 are certainly not limited to gay men attending circuit parties in the US. However, this example highlights how queer men's sexual and social practices can become particularly intense sites for the articulation of morality, responsibility and, as such, biosexual citizenship in the context of the COVID-19 pandemic. Such judgements are particularly vehement when these sexual and social practices fall outside of the boundaries of normative sexuality and respectability (as in the case of circuit parties as events involving non-monogamous and casual sex) and when such judgements are made by gay men themselves, who may have particular investments in espousing their adherence to homonormative respectability and models of bisexual citizenship. We cannot know what, if any, harm reduction measures the men represented in the @gaysovercovid posts have or have not taken nor discern how they may be negotiating (or, indeed, rejecting) biosexual citizenship imperatives. However, we contend that the appearance, meanings and forms of responsibility during COVID-19 in relation to sexual practices are, in fact, more complicated than voices like @gaysovercovid suggest. Based on in-depth interviews with gay and bisexual men in the UK, we argue that rather than being 'good' or 'bad' biosexual citizens, queer men have developed an array of ethically reflexive strategies in order to negotiate the difficult terrain they have faced when trying to pursue their cultures of sex and intimacy during the pandemic. In so doing, they appear to enact biosexual citizenship through diverse sexual practices that both inevitably include and challenge hegemonic imperatives of responsibility and well-being.

Queer men negotiating biosexual citizenship during the pandemic

When it comes to pursuing sex and intimacy during the constraints of the COVID-19 pandemic, our participants fall into two loose groupings: those who claimed to adhere to the regulations as they changed throughout the pandemic and those who did not. Most

participants in the latter group spoke in highly reflexive ways about the careful negotiations they made when pursuing in-person sex so as to reduce the chances of COVID-19 transmission between themselves and their partners.

Following the rules

Following the rules to the letter, which included abstinence from extra-household sex, was a minority position amongst the interviewees but some did claim to practice this. For example, Tony (48, 'mixed', cis-gay man, London) said 'sex, obviously since COVID, there's been none.' Similarly, Will (31, white, cis-gay man, Scotland) said:

> . . . so, during the course of lockdown there was a period of four/five months where I had no intimate contact . . . And there was a guy that I started to see . . . casually, and we agreed in August when some of the restrictions were being lifted and the bubbles were coming in . . . he was like, 'I'm on my own for a week, you're on your own for a week, let's just, kind of, quarantine and then we can see each other.'

In fact, there was no legal requirement in the UK to quarantine for a week before joining an extended household but Will and his partner decided to add an extra layer of safety to diminish the chances of COVID-19 transmission. In so doing, both Will and Tony enacted particular modes of biosexual citizenship in their compliance with what they understood as state sanctioned rules and their implications for intimate contact: that citizens were to abstain from extra-household sex during March to June 2020, and, if possible, create a support bubble with another household after this time. In doing this, individuals take on the responsibility of diminishing the spread of COVID-19 through restricting or eliminating intimate contact. This has not been without its affective consequences. Two participants described being 'touch-starved' and another being 'traumatically affected' by putting his sex life on hold through much of the pandemic.

The interview conducted with Jacob (36, white, trans man, Scotland) raised an interesting problem in how he and others sought to negotiate biosexual citizenship in the context of the heteronormative parameters of pandemic restrictions. Jacob, who identifies as queer, explained that, 'the people that I surround myself with are mostly queer and mostly kind of relatively polyamorous or polysexual'. Polyamory (the practice of having intimate relationships with more than one person) is not an uncommon feature of even more mainstream cis-gay men's cultures of intimacy (Klesse 2007) yet it is one which Jacob found difficult to practice under the lockdown regulations even after they changed so that individuals could form extended households.

> I . . . reached out to one of my friends who I thought was most likely to . . . be up for creating a bubble, but then again I know that they live with somebody and . . . they . . . also have . . . other people that they would . . . maybe consider for . . . similar set-ups so . . . I didn't want to . . . come on too hard . . . That didn't happen . . . The people that I surround myself with are mostly queer and mostly kind of relatively polyamorous or polysexual . . . so obviously that eliminated that person from the list and I didn't really see any . . . other people that I would either want to or . . . they would be in a position to.

Jacob's reflections reveal how navigating compliance with pandemic restrictions disproportionately affect non-normative intimate practices, resulting in a highly constrained set of possible enactments of biosexual citizenship. The major constraint here is the

mononormativity (the imperative for intimate relationships to be monogamous) (Barker and Langdridge 2010) inherent in the nature of the pandemic restrictions. The specific features of the culture of intimacy that queer men like Jacob participate in came into conflict with his desire to enact biosexual citizenship, where this was conceived in terms of fully complying with state-sanctioned restrictions. He was therefore unable to pursue his preferred form of intimacy during the pandemic, even when restrictions loosened.

Negotiating the rules as individuals

A more common position amongst our interviewees was the attempt to negotiate different aspects of the lockdown regulations, so they could pursue sex and intimacy whilst reducing the possibility of COVID-19 transmission as much as possible and enact their own interpretations of biosexual citizenship. Many limited the amount of people they had sex with from outside their household. One way of ensuring this for some was reducing the opportunities available for casual sex, for example, by deleting hook-up apps from their smartphones. Interviewee Jack (36, white, trans man, London) did this at the beginning of lockdown but as lockdown persisted his 'libido [became] sort of high' and so downloaded the hook up apps again. Jack did not take this decision lightly:

> I went to flat sit for a friend. I . . . took the opportunity of his [laughs] very queer man heavy area. I was flat sitting there for a fortnight, and . . . hooked up with a couple of people . . . But now . . . I went on the other day, was like, 'well, what are you doing?' [laughs] The R rate's high and the infection rate, so again I'm at the stage of, hmm, should I come off PrEP for a bit, 'cause there's no point being on it . . . If I'm not taking my PrEP, that's another thing that's going to discourage me from going on the app. It's getting into the stage where it's not safe to be doing it . . . It's hard to know what's for the best . . . What do I think about this infection rate, what are they saying the R rate and sort of judging it off that. So at the moment I'm like locking myself down again.

Throughout this process in which Jack fluctuates between abstaining from extra-household sex to giving into his libido, he describes taking individual responsibility for assessing the epidemiological data at hand to work out whether it is safe or not for him to hook up. When he thinks it might not be safe *enough*, he further implements procedures that make him less likely to hook-up: deleting hook-up apps from his phone and stopping his PrEP. Jack's decision to hook up appeared to be difficult to make, and was grounded in ongoing interpretation of what responsibility meant in the context of sex, epidemiological/scientific information and preventative technologies.

Those participants who described reducing the amount of extra-household sexual partners and did not talk about especially elaborate strategies of negotiation, did demonstrate a strong degree of ethical reflexivity in relation to what breaching the regulations meant for them and other people.

> For me . . . [I] have been . . . actually, meeting up and doing stuff. I have done that . . . It's been like one-offs here and there, and I should be careful, but you know, I think that I'm just past the point of caring, to some extent, but it's been enough to think, this is probably too much, I should not be doing this. Saturday just past, it became too much when I drove through to [Scottish city], to see an ex, you know, play-friend of mine, and then drive back. I think that was very . . . I just drove . . . an hour and a half there, an hour and a half back, and I literally spent ten minutes with him. And I just think, 'why did I do that?' Like, that to me, I think that,

> 'was it nice as something that's kept me going?' Yes. But really, when you think about what I did, that was just, that to me, I think was too much. Yeah, I think that's the point that came, I thought, no, I've crossed a line here, if that makes sense. (Raj, 39, South Asian, cis-gay man, Scotland)

Although Raj says 'I am just past the point of caring' – and we read this as exhaustion with social isolation as opposed to a general lack of care – this longer extract demonstrates the affectively intense reflexivity generated when he breached the lockdown regulations. Raj thought that he had 'crossed a line' but in some sense felt he had to because the sustaining function of intimacy 'kept [him] going'. This reflection signals a concern for how his 'failure' to comply strictly with the restrictions might have consequences for others, and ongoing negotiations with what it might mean to fail to enact biosexual citizenship. This involved complex and careful assessments of im-/permissible behaviour, taking into consideration official restrictions, personal needs and personal and public safety. The accounts given here seem to be at odds with the thoughtless 'circuit queens' portrayed in @gaysovercovid posts and elsewhere as selfishly pursuing pleasure at the expense of other peoples' freedoms and lives. Even when there appeared to be no obvious consideration of harm reduction techniques within our participants' stories, we do see an explicit articulation of a sense of guilt at breaching a set of rules designed, however imperfectly, to protect people from COVID-19 transmission and a cautious rejection or bending of those rules where deemed necessary to alleviate personal suffering.

Negotiating the rules as a collective

So far, different iterations of biosexual citizenship have been enacted – versions where, in lieu of a robust public health response, gay and bisexual men are expected to make individual adjustments to their sex lives so as to minimize COVID-19 transmission. However, our interviewees also recounted more collective enactments of biosexual citizenship. Although never reaching the stage of collectively organized demands on the state, these collective enactments illustrate gay men's multiple and complex negotiations of citizenship within such tightly circumscribed historical conditions, as well as ways of moving beyond the hegemonic model of citizenship within these conditions.

Gareth (white, cis-gay male, 37, London) is, like Jacob from the previous section, also non-monogamous. However, unlike Jacob, Gareth managed to develop a strategy through the lockdown regulations which enabled him to pursue sex and intimacy in ways that Jacob felt he could not. Prior to the pandemic Gareth frequently enjoyed attending sex clubs on London's gay BDSM scene, as well as practicing BDSM at his and other's homes. One of the striking things about his interview was the obvious relish he took in negotiating the terms of his sexual encounters before they took place – a typical feature of BDSM scenes, gay or otherwise. This appears to have set him in good stead for negotiating an ethics of sex and intimacy in the new legal and material conditions of the pandemic.

> . . . in terms of sexual intimacy . . . it's now a smaller cohort of five people . . . where we sort of agreed going into lockdown . . . it's not really realistic to trust ourselves to not have sexual contact. That's going to be a massive challenge . . . There was a level of contract with them all

> of, 'do we buddy up?' or I think bubbles were discussed at one point . . . . look this is probably against the rules, in fact I think it is unequivocally against the rules to have more than one buddy. But, you know, we have different desires that we satisfy . . . At the moment there are five different individuals we still continue to play sexually. We all contracted that that means we have very limited other playmates, and we do this under the guise that we, we avoid shops, we avoid public transport etc.

Here, Gareth explains how he and his cohort of five buddies could not fully comply with non-contact restrictions, in spite of the risk of COVID-19. As such, they established their own set of harm reduction practices, such as avoiding public transport or other high-risk spaces to minimize the harm they might bring to the group. Thus, rather than complying with state-sanctioned restrictions, they established their own parameters of harm reduction with which they complied. Elsewhere in the interview Gareth describes how his responsibility to others, outside of his group of sexual partners, was addressed by ' . . . not going to LGBT spaces [which formed] part of the obligation to protect other people [I was] meeting.' Later on, Gareth contested the fact that the lockdown regulations were effective at stopping COVID-19 transmission, noting 'the current rules being if there's a till or a co-worker or a teacher around you're safe. You know, we don't subscribe to it.' He and the other men with whom he continued to share intimacy therefore continuously negotiated and renegotiated their own arrangement informed by the principles of 'we don't want to catch it, we don't want to have time off work and we, you know . . . don't want to die. We don't want to spread it to other people.' This collectively negotiated arrangement, which was both deeply thoughtful and conscious of their ethical commitments to themselves and to the wider publics their potentially contagious bodies moved through, enabled them to maintain some version of the non-normative form of intimacy they desired throughout the pandemic. Although operating on a relatively small scale, this collectively negotiated arrangement can arguably be understood as a creative form of biosexual citizenship that has protection of both self *and other* at its heart.

Conclusion

As set out in the introduction to this article, the figure of the gay man selfishly pursuing pleasure at the expense of life itself has a long history both inside and outside of queer culture. It is no surprise that this figure emerged once again during the COVID-19 conjuncture exemplified by the framing of the Puerto Vallarta circuit parties by @gaysovercovid. In contrast to such images of reckless hedonism, we found that our participants were engaged in complex negotiations of biosexual citizenship that took into consideration their own health, that of their intimate partners and of the wider publics they moved through. Some, following the homo-/mononormative imperatives of the neoliberal/populist state, abstained from extra-household sex entirely. This was not without its affective costs. Most attempted to develop creative strategies that combined their desired forms of sex and intimacy with their efforts in enacting biosexual citizenship so as to avoid further diminishing their quality of life, already diminished by living through the difficulties of a global pandemic. This is also no surprise. Since at least the post-Stonewall period (if not before) queer folk have pursued creative enactments of sexual and bio-sexual citizenship in a range of contexts that have either ignored or have been actively hostile to the

specificities of their cultures of sex and intimacy. These enactments have gone on to inform mainstream sexual health practices and policies, most notably in the global fight against HIV (France 2016). These struggles are represented in popular media but far less so than what appears to be the fictional figure of the deadly gay hedonist. We contend that the state could once again learn from queer enactments of biosexual citizenship during the COVID-19 pandemic if it were interested in providing the necessary infrastructures to maintain its citizens' health, well-being and quality of life not only during the coronavirus conjuncture but also beyond.

Notes

1. In this paper, we use the term 'gay' to refer to cis-gender male attracted men to whom distinctive forms of popular culture are mostly addressed, for example, the commercial gay scene. We use the term 'queer' as an umbrella term to describe the range of gendered identifications and sexual orientations used by our participants despite responding to recruitment material calling for gay and bisexual men. These identifications include cis-gender male, trans men, non-binary trans masc, gay, bisexual, queer and queer/androsexual/gay.
2. The practice of condomless sex.
3. A term used to describe queer men taking Pre-exposure prophylaxis (PrEP), initially meant as an insult, but widely taken up as a form of resistance to these criticisms of PrEP use.
4. The practice of queer men combining sex with recreational drugs.

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Ingrid Young is a Chancellor's Fellow in the Centre for Biomedicine, Self & Society, with training in Sociology and History. Her research examines the interface between biomedicine and public health, with particular consideration of gender, sexuality and wider inequalities in relation to emerging biotechnologies in HIV and sexual health. She is co-Investigator on Digital Intimacies.

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