



“People are having lots of other kinds of sex”: Exploring sexual lifeworlds of LGBTQ+ young people in Bangladesh

Prima Alam & Cicely Marston

To cite this article: Prima Alam & Cicely Marston (2023) “People are having lots of other kinds of sex”: Exploring sexual lifeworlds of LGBTQ+ young people in Bangladesh, Cogent Social Sciences, 9:1, 2185305, DOI: [10.1080/23311886.2023.2185305](https://doi.org/10.1080/23311886.2023.2185305)

To link to this article: <https://doi.org/10.1080/23311886.2023.2185305>



© 2023 The Author(s). This open access article is distributed under a Creative Commons Attribution (CC-BY) 4.0 license.



Published online: 02 Mar 2023.



Submit your article to this journal [↗](#)



Article views: 168



View related articles [↗](#)



View Crossmark data [↗](#)



Received: 06 September 2022
Accepted: 23 February 2023

*Corresponding author: Prima Alam,
London School of Hygiene & Tropical
Medicine, London WC1H 9SH, United
Kingdom
E-mail: primji@gmail.com

Reviewing editor:
Ana Maria Lopez Narbona, University
of Malaga: Universidad de Malaga,
Spain

Additional information is available at
the end of the article

SOCIOLOGY | RESEARCH ARTICLE

“People are having lots of other kinds of sex”: Exploring sexual lifeworlds of LGBTQ+ young people in Bangladesh

Prima Alam^{1*} and Cicely Marston¹

Abstract: A lack of recognition of sexual diversity in Bangladesh continues to contribute to a scarcity in in-depth research around lived experiences of sexual and gender diverse young people. In this article, we adapt a phenomenological reflective lifeworld approach to capture the essential aspects of sexual intimacy as described by diverse young people. This article is based on qualitative data collected in Dhaka, Bangladesh over nine months in 2019 as part of the first author’s doctoral research. Using thematic analysis, we draw on experiences of normative sexual expectations from biographical in-depth interviews with 14 self-identifying lesbian, gay, bisexual, transgender, queer, and others (LGBTQ+) individuals aged 18 to 24 years. According to participants, sexual intimacy as experienced by LGBTQ+ young people in Bangladesh meant desiring consensual sexual and romantic relationships with sexually “matched” partner(s) while navigating heteropatriarchal sexuality norms. We observed five interlinked themes which encompassed the sexual lifeworld of young people in our study: desire for romantic intimacy in sexual interactions; need for discretion when navigating sex and relationships; “matching” sexual roles in partnerships; challenges to relational power dynamics of masculinity; and embodying notions of sexual morality. Our findings captured the essence of young people’s sexual lifeworlds in our study and indicate a universality around sexual intimacy while still making space for intersections of diverse lived experiences and social orientations. Further research is required to better understand these nuances in sexual behaviour.

Subjects: South Asian Studies; Gender Identity & Sex Roles; Intimate Relations; Gender & Development; Health & Development; Health Geography

Keywords: Young people; lifeworld; queer; sexuality; Bangladesh; qualitative research

ABOUT THE AUTHORS

Prima Alam is a PhD candidate at the Faculty of Public Health and Policy, London School of Hygiene & Tropical Medicine (LSHTM). Their doctoral research – funded by the Economic and Social Research Council – explores young people’s everyday experiences of sexuality and sexual health in South Asia and examines how such perspectives can inform more inclusive health policies and practice. Cicely Marston is Professor of Public Health at LSHTM. She leads the DEPTH research group which brings together scholarship centred on community participation in health. Professor Marston’s research focuses on sexual practice, contraception and abortion, and access to and experiences within health-care services more generally, attending to the ways context (including marginalisation) influences health, health promotion and healthcare services.

1. Introduction

Lived experiences of sexual and gender diverse (SGD) young people are often ignored or overlooked by mainstream public health research (Bowling et al., 2019; Pollitt et al., 2021; Zeeman et al., 2019). At the same time, global evidence reveals that SGD individuals confront increased health risks such as anxiety, depression, and poor mental health as well as higher rates of suicide (Laiti et al., 2019; Nieder et al., 2020; Searle, 2019; Zeeman et al., 2019). In countries such as Bangladesh, where discrimination and violence against SGD people is pervasive and ongoing, a lack of recognition of sexual diversity continues to contribute to a scarcity in research around the experiences of SGD young people (Khan & Raby, 2020; Rashid et al., 2011).

Procreative heterosexual marriage provides a dominant reference for sexual morality in Bangladesh (Siddiqi, 2011, p. 4). Heteronormativity—strict gender binaries, compulsory heterosexuality, and procreative marriage normativity—has become inscribed into postcolonial nations' legal frameworks and gradually established as universal (Karim, 2012; M. Menon, 2018; N. Menon, 2007). Unlike neighbouring India and Nepal, Bangladesh continues to criminalise consensual same-sex sexual conduct under Section 377 of its penal code as introduced by British colonial rule. Despite such legislations, multiple sexual expressions are “sanctioned or tolerated or ignored, as long as such activities remain hidden from the public gaze” and are not seen to disrupt the ideal of procreative heterosexual marriage (Siddiqi, 2011, p. 4).

Research in the field of sexuality in Bangladesh has focused explicitly on male-to-male sexual health governed by a global interest in AIDS and disease prevention (Gagnon, 2006; Hossain, 2017, 2020; Siddiqi, 2011). Such studies emphasise measuring transmission and responses to interventions, rather than the role of sexuality within young people's lives (Gagnon, 2006). Furthermore, categories such as “men who have sex with men” used by public health professionals and donors do not capture “highly context-specific ways” in which SGD people understand themselves or their identities (Hossain, 2017; Siddiqi, 2011).

As John Gagnon (2006) argued, public health research can sometimes neglect what sex means for young people in favour of quantitative measures such as “how often, how many, and did you use a condom the last time”. This preoccupation with “decontextualised goals and superficial measures of quality” may risk dehumanising research and practice and often neglects the “lifeworld”—a shared and meaningful world of emotions and memories that is textured, embodied and experienced by us and through us every day (Hemingway, 2011; Hemingway et al., 2015). The result has been a research focus on causes and treatment of ill health rather than a contextualised people-centred approach to understanding wellbeing. For example, there is an absence of research around sexual intimacy and pleasure in general.

There is an urgent need for research examining lived experiences of sexual and gender diverse communities (Keuroghlian et al., 2017; Laiti et al., 2019; Rashid et al., 2011; Regmi & van Teijlingen, 2015; Zeeman et al., 2019). Such research could shed light on current challenges faced by minoritised identities as well as culturally sensitive ways of navigating discrimination against SGM young people in healthcare and policy.

This article aims to explore young people's lived experiences of sexuality in Bangladesh by adapting a phenomenological reflective lifeworld research approach, as outlined by Dahlberg and colleagues (Dahlberg et al., 2008). In particular, we ask: what are the essential aspects of sexual intimacy as experienced by young people identifying as lesbian, gay, bisexual, transgender, queer, and others (LGBTQ+) in Dhaka, Bangladesh?

2. Phenomenological Approach

Reflective lifeworld research is concerned with how the implicit and tacit become explicit and heard, and how the assumed becomes problematised and reflected upon. As a methodological tool with which to reveal and understand the multifarious world of human beings, the overall aim

of lifeworld research is to describe and elucidate the lived world in a way that expands our understanding of human experience (Dahlberg & Dahlberg, 2020; Dahlberg et al., 2008). The concept has been used in several health-related studies looking at different phenomena such as sexuality and sexual wellbeing (Carlsson-Lalloo et al., 2018, 2021; Klaeson et al., 2012; Thoresen et al., 2011). For example, a recent study uses reflective lifeworld research to find that the essence of sexuality and childbirth as experienced by women living with HIV in Sweden is that perceptions about contagiousness profoundly influence sexual behaviour and considerations around pregnancy and childbearing (Carlsson-Lalloo et al., 2018).

The first author’s doctoral research used a phenomenological lifeworld approach to capture people’s experience of the world. The lifeworld perspective can be used to explore how the “experiential side” has a particular meaning for the person and must be attended to in order to better understand wellbeing (Dahlberg et al., 2008). PA used phenomenology as a tool towards grasping the meanings that young people give to their everyday experiences of sexuality in order to gain a deeper understanding of young people’s experiences of sexual health and wellbeing within the context of their lifeworld.

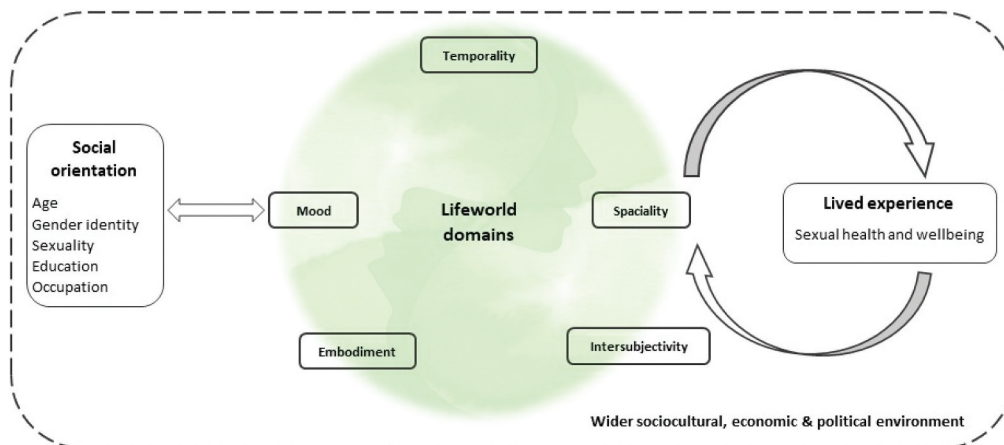
Figure 1 illustrates the theoretical framework which incorporates these concepts.

Individual characteristics have been labelled as “social orientation” (Ahmed, 2006), as these are not static and neutral categories, but are what comes into view; not simply given but effects of the repetition of actions over time. These social orientations, too, interact with and through the lifeworld. A broad range of factors—such as age, gender, sexuality, and so on—shape embodied experiences (Ahmed, 2006; Dolezal, 2015). Phenomenological research attempts to reveal these taken for granted structures as well as the “hidden” assumptions that inform lived experience with respect to these categories (Dolezal, 2015).

Through the theoretical framework of the study PA situates the five domains of lifeworld at the centre of analysis as a means of understanding the phenomenon of sexual intimacy as experienced by queer young people in Bangladesh. Lived experiences interact with the lifeworld domains—shaping, and being shaped by, life events. This study explores “lifeworlds” of participants by focusing on their descriptions of lived experiences and important life events around sexual intimacy as identified by the research participants themselves (Dahlberg et al., 2008; Van Manen, 2016).

The lifeworld framework with its interlinking domains emphasises how a phenomenon is simultaneously a part of the embodied, relational, and collective lived experiences across space and time. Within phenomenology, the intertwining between the “inside” and the “outside” found in our

Figure 1. Theoretical lifeworld framework.



embodied perception can be understood as a “double being-in” (Mensch, 2018; Wehrle, 2020). The embodied self is both subject and object as it experiences worldly things and is also experienced as a thing in the world (Wehrle, 2020). Our embodiment places us in the world and we internalise this embodiment through perception (Mensch, 2018). This “double being-in” is of temporal significance as it enables us to not only experience the present, but also experience a remembered past and a future that is planned (Wehrle, 2020). The self can be viewed as a phenomenological, temporal manifestation, and as an agent of interaction and morality (Mookherjee, 2013).

Sedikides and colleagues further elaborate selfhood as the co-existence of “the three selves”—individual, relational, and collective—so that we find ourselves alternating between “perceiving the self as a distinct individual, as a relational partner, or as an interchangeable group member” (Sedikides et al., 2011, p. 98). These selves may not be of equal importance and may have different motivational utility across space and time. The individual self attributes selfhood as relatively independent of relational bonds or group memberships, while the relational and collective self reflects interpersonal attachments shared with close others or ingroups (e.g., kinship, gender, religion).

It is worth noting the primacy of relational selfhood in shaping notions of sexuality and gender within the context of South Asian countries like Bangladesh. Here, family is understood as a matter of extended kinship and co-dependency beyond just the realm of economics (Karim, 2012). Bangladesh is a highly patriarchal society with men having control over women’s labour, sexuality, income, and assets in both public and private spheres (Kabeer, 1994; Karim, 2010). Women are often taught and made to depend on male “guardians”—fathers, husbands, and sons—throughout their lives, which also contributes to the pressures of upholding the norm of heterosexual procreative marriage (Karim, 2010). Within this context, self-representation may reflect valued attachments to kinship and conformity to sexuality norms as influenced by relationships and social groups.

3. Methods

This qualitative, ethnographic study involved interviews and observations by the first author (PA) in Dhaka, Bangladesh over nine months from February to October in 2019 as part of their doctoral research. CM guided the research as PA’s primary supervisor. We predominantly draw on themes of heteronormativity from biographical interviews with LGBTQ+ identifying university students and young professionals aged 18 to 24.

PA used purposive sampling to recruit 46 young people (aged 18 to 24) of varying social orientations—gender and sexual identity, religion, educational background, occupation etc.—based in Dhaka. The recruitment strategy was open and flexible in order to include a diverse range of experiences. Initially, PA approached potential participants through a range of academic and personal networks. Local research assistants working with PA were also asked to utilise their networks to identify suitable individuals who may be interested in participating in the research. Participants included students at public universities, recent graduates, and young people in full- or part-time employment (both private and informal: such as teachers, garment factory employees, shop assistants etc.). Participants lived in different low- and middle-income residential neighbourhoods of the city. This included precincts (thana) in Dhaka North City Corporation—such as Badda, Mohammadpur, Mirpur, and Tejgaon—as well as Dhaka South City Corporation—such as Dhanmondi, Lalbagh, Motijheel, and Ramna. Of the 46 total interviewees, 14 self-identified as LGBTQ+. Table 1 provides a summary of participants’ sociodemographic characteristics—including age, gender identity, sexual orientation, relationship status, religious background, and occupation.

PA conducted in-depth one-to-one biographic interviews with each participant in Bangla, consisting of open-ended questions about lived experiences of gender and sexuality and life history. Interviews were audio recorded and took between one and two and a half hours. Interview venues depended on where the respondents lived and were comfortable speaking, such as quiet cafes or

Table 1. Summary of participants' sociodemographic characteristics

Characteristic	Category	Number of Participants
Age	18–21	6
	22–24	8
Gender identity	Cisgender man ^a	5
	Cisgender woman ^b	5
	Transgender/non-binary	4
Sexual orientation	Heterosexual ^c	2
	Gay/lesbian ^d	8
	Bisexual/pansexual	4
Relationship status	Single	9
	In a relationship	5
Religious background	Muslim	9
	Hindu	3
	Christian/Buddhist	2
Occupation	University student	6
	Full-time employment	6
	Informal/part-time employment	2
Residence	Living with parents/family	5
	Living in rented accommodation ^e	5
	Living in halls of residence/on campus	4
Socioeconomic background	Working class/low income	6
	Middle class/middle income	8

private office space. All respondents provided written informed consent for participation in the research and were provided with details of local sexual and reproductive health services.

Four research assistants transcribed interviews in Bangla using a verbatim transcription protocol prepared by PA. Professional translators then translated these transcripts to English. Both Bangla and English transcripts were reviewed for quality and accuracy by PA and research assistants. PA used a phenomenological approach to explore sexual lifeworlds as identified and discussed in biographic interviews with the LGBTQ+ respondents. PA followed a phenomenological thematic approach to analysis by identifying and synthesising most prominent and recurring themes around sexuality through line-by-line open coding. PA iteratively coded the interview transcripts using NVivo software and used the open coding nodes to formulate a codebook which was used for secondary coding through in vivo and process codes (Saldana, 2015). PA also coded around the five domains of the phenomenological lifeworld (intersubjectivity, temporality, embodiment, emotions, and space) for more details around experiences. PA clustered and reviewed codes into common (sub)themes and then analysed how these related to sexuality. PA then developed an inclusive description of the phenomenon incorporating common themes.

Ethical approval was granted by the London School of Hygiene & Tropical Medicine, United Kingdom, and from North South University, Bangladesh. PA obtained informed written consent from all respondents and used pseudonyms to maintain anonymity. Recordings and documentation related to the research did not contain any identifiable data.

4. Results

In the in-depth interviews, sexual intimacy as experienced by LGBTQ+ young people in Bangladesh meant: “Desiring consensual sexual and romantic relationships with sexually ‘matched’ partner(s) while navigating heteropatriarchal sexuality norms.”

We analysed five interlinked themes which encompassed the sexual lifeworld of young people in our study:

- (1) Desire for romantic intimacy in sexual interactions
- (2) Need for discretion when navigating sex and relationships
- (3) “Matching” sexual roles in sexual partnerships and attraction
- (4) Challenges to relational power dynamics of masculinity and domination
- (5) Embodying notions of sexual morality

4.1. “More than just sex”: Desire for romantic intimacy in sexual interactions

I search for a mental attachment not just a physical attachment. But also, mental attachment and mental satisfaction. (Trishna, 24-year-old transgender woman)

Like Trishna—a 24-year-old transgender woman—all participants reported wanting some degree of “mental satisfaction” and “romance” with sexual partners when speaking about positive sexual experiences. For instance, Shayan—a 24-year-old who identified as a crossdressing gay man—stressed the importance of having a “mental connection” with someone before engaging in sex. While Shayan participated in what he and other interviewees said they perceived as the norm of having multiple sexual partners, he reported not feeling “entirely satisfied” as he had wanted to be dating his partners:

I like it better to be [in a relationship] with someone. In the meantime, I had physical encounters with a lot of people. But I was never entirely satisfied living like that. It was more that I found it necessary, or everyone else in the community is like that. (Shayan, 24-year-old gay man)

When speaking about his first sexual experience, Badol—a 20-year-old pansexual transgender man who used to identify as a lesbian woman—also vividly remembered feelings of romantic love and commitment for their partner which led to sex:

When you are with the person you love, you feel butterflies in your stomach. When you are with the person you love everything is possible. I was determined that if I want someone as my life partner, I want her. (Badol, 20-year-old transgender man)

Trishna recalled always wanting romantic interactions, such as holding hands and kissing, with someone she was interested in romantically: “I used to think we would go somewhere, hold hands or kiss. Or maybe we could hang out somewhere. Go to watch movies.”

Farhana—a 23-year-old lesbian woman—only had what she described as “room dates” with women she was dating or “crushing on”. Like other respondents, she explained that she was looking for romantic connections with sexual partners rather than “one-night stands”.

James—a gay student—on the other hand, was “very curious” about “random hook ups” when he first became sexually active: “In the beginning, it seemed very surprising to me that I could just have a one-time hook up with a person.” At the same time, James mentioned that he had always been attracted to men whom he found to be intellectually stimulating and thus regarded himself as “sapiosexual”—someone sexually attracted to intelligent people: “I think that even from my

childhood, I was a sapiosexual. At that time, I didn't even know this term 'sapiosexual'. Now I know it. I understand it."

According to participants, learning the terminology around sexuality and different relationship styles assisted them in explicitly finding and asking for what they wanted from partnerships. For example, James further mentioned preferring "foreplay" more than "the main anal thing" as he reported felt it was "more romantic". Although he recognised that he enjoyed "foreplay" a lot, James said he was not always able to negotiate this during his earlier hook ups with his partners because he "did not know these terms". However, he was able to use other terms to accurately describe what he enjoyed:

I actually get more pleasure out of foreplay than the main anal thing. It's more romantic ... In the beginning, with the hook ups, as far as I can recall some people used to do foreplay, but most were just doing their own thing. At that time, I did not know these terms, like foreplay. So, I would just say that I liked kissing and hugging, these things, very much. (James, 23-year-old gay man)

Participants were also able to express their preferences for being in either monogamous or polyamorous relationships. Trishna, for example, explained that although she thought polyamory was commonplace within the queer community, she did not like this style of relationship and intentionally sought a monogamous relationship: "I'm mono [monogamous], I'm not poly [polyamorous]. I don't like polyamory. He [my partner] has to be mono."

4.2. Need for discretion when navigating sex and relationships

Things are so underground here. It is easy for us to meet up and hook up. Nobody will even know about it. (James, 23-year-old gay man)

James elaborated why he thought open relationships would be "more practical" within the context of the gay community in Bangladesh where men can—and, according to James, do—discreetly "meet up and hook up" with other men. James said he would not break up with someone if they were to hook up with other men. However, he would rather be told about this than find out from others:

In order for the relationship to work out [open relationships are more practical]. ... If my boyfriend hooks up with someone else, I don't have to break up with him. But he has to tell me that beforehand so that I don't hear about it from other people. (James, 23-year-old gay man)

Auvi—a non-binary student—mentioned discretion around sexuality as something inherent within the queer community due to wider concerns about safety and stigma. As such, they explained that it was easier to negotiate relationship parameters—such as polyamory—within the queer community because of this overall level of discretion "about sexual things". They themselves had wanted to explore polyamory within their own relationship but found it more difficult to negotiate with their monogamous heterosexual male partner who was not a part of the queer community:

I wasn't able to explore that for myself because my partner was monogamous, and I don't want to be and that's something I've negotiated for a while. But being discreet is something that's very common about sexual things especially in the [queer] community. They're able to find people to have one-night stands with or people in the community who are also polyamorous. (Auvi, 22-year-old non-binary person)

Badol also spoke about a "discreet" gay friend who presented as a "straight guy" with whom he was sexually involved. Badol felt comfortable to explore his dominant side by anally penetrating his friend with a strap-on. Badol remembered realising that not only did he enjoy being a "hard dom" but also that he felt he was "completely a man" during sex:

I have a friend from my area. If you see the guy, he will seem like a straight guy. But actually he is a bottom. And he is quite discreet about his sexuality but he knew that I loved this. So, I had a physical relationship with him and had sex using a packing strap-on. That's when I realised that I love [being a top]. That's when I realised, I am completely a man and I am getting complete pleasure from this. (Badol, 20-year-old transgender man)

Shayan explained that the logistics of same-sex hook ups were sometimes “easier to manage” than straight ones. Shayan gave the example of a time when he went over to a partner's flat as they lived alone. Although the partner was concerned about the neighbours seeing the two of them together, Shayan explained that people wouldn't think anything of it:

The thing is, we are both boys. People don't usually think anything of a situation like that. You can always say that a cousin was visiting you, or something like that. I look a lot younger than him as well. He was a lot older than me. So, it really wasn't such a big deal. (Shayan, 24-year-old gay man)

Before her transition, Trishna's first long-term relationship was with man whom she lived with for a year. She said that it had not been difficult to keep their relationship a secret from neighbours as people assumed the two were brothers: “They [neighbours] thought we were brothers. I had just started my counselling [for gender dysphoria] by the end of our relationship. But I didn't start my medication at that time.”

Badol explained how he was able to have his first sexual experience with his girlfriend when he used to identify as a woman:

I went to her place in Tangail. She introduced me as her best friend and told her family that I was there for work. Her mother knew that I was working for [a human rights organisation]. I went there as a girl, and they took it normally [were not suspicious]. I stayed there for two days. That was my first time, and actually that's when I understood how two girls can have a physical relationship with each other. (Badol, 20-year-old transgender man)

However, Badol was only able to stay at his girlfriend's home once during their eight-month relationship: “We met up a lot, but we were only physical once.”

As a teenager, James would meet other gay men online from cybercafes and arrange meet ups to have sex. The first time James hooked up with someone online, he arranged to go to an unknown location for sex as suggested by his date. James was told that the landlord of a nearby saloon did not care who rented out the rooms for hook ups:

[He said,] ‘There is a three-storey market. On the third floor, there is a saloon.’ And in that saloon, apparently if anyone wants to hook up or do something like that – straight or gay – they don't care. They just give you a room. If you wanna do stuff, you can do it. (James, 23-year-old gay man)

Auvi reported that there was far more communication around sex within the queer community. They advocated for more open communication about sexuality and sexual desires between sexual partners outside of the queer community as well: “A lot of people are having lots of other kinds of sex and they don't really know how to be safe for it. There needs to be a lot more communication around sexuality between people that are being sexual.”

4.3. “Matching” sexual roles in sexual partnerships and attraction

There are many who like you to really be a man, because they like manly men. There are also many who prefer more feminine men role-playing as women ... (Shayan, 24-year-old gay man)

Queer participants identified as dominant/tops or submissive/bottoms within sexual relationships and looked for sexually compatible partners who identified as the opposite. All respondents described their sexual role as fixed. For example, Badol stressed that he always thought of himself as a top and hated the idea of being submissive during sex.

Shayan mentioned that he had known he was a “pure bottom” from the time Hijra members of his dance group had described him as a “*kothi*”—a term used by the Hijra community for effeminate gay men who want to be penetrated during sex:

They said that, ‘You are a *kothi*.’ What it means is, those of us who are gay bottoms. They are also called *kothis*. It was from them that I learnt that boys could have this kind of relationship together. It was from them that I found out about all this. (Shayan, 24-year-old gay man)

James was introduced to the terminology of “top” and “bottom” (in English) during his first gay sexual experience. However, he knew immediately that he wanted to do “bottom stuff”:

At that time, I didn’t even know what was ‘top’ and what was ‘bottom’? He [first sexual partner] asked me, ‘Are you top or bottom?’ I said, ‘I have no idea. I don’t understand.’ I had never even heard that term before. Anyway, after that, he explained things to me, and I knew I felt like doing bottom stuff. After he had explained, I said, ‘I am this. I am bottom.’ (James, 23-year-old gay man)

In terms of navigating sexual compatibility, Shayan suggested that this happened “automatically” because he was not attracted to “feminine men”:

I am pure bottom. I have never [done anything else]. I have never wanted to change my role, nor do I have any plans to do that. So, that is how I am. I will not be attracted to any feminine man. I like a man who is masculine or manly. So in that case, automatically that issue gets taken care of. (Shayan, 24-year-old gay man)

For James, however, there was not always such a clear-cut distinction between his sexual attraction towards men and his role as a “pure bottom”: “Surprisingly, you can’t always tell right from the beginning [whether someone you like is a top or bottom].” As an example, James spoke about his attraction towards “typical twinks”—young slim attractive gay men—who often also identified as bottoms. As such, he was able to appreciate them as “eye candy” but not as sexually compatible partners:

The thing with me is, I really like the typical twinks, and it invariably turns out that the typical twinks are most often bottoms. But they tend to be very much eye candy and since eye candy usually looks good, it is just for looking at, and I like looking. (James, 23-year-old gay man)

James also shared a situation where his friend, also a bottom, wanted to start a romantic relationship with him. James thought that such a relationship would be short lived as neither partner would be satisfied:

At one stage, he really liked me and he really wanted to be in a relationship with me. Then I said, ‘Look, the thing is we are both bottoms. What would we do if we went into a relationship? The relationship would not last very long.’ (James, 23-year-old gay man)

Similarly, Badol—who used to identify as a straight woman at the time—and his ex-boyfriend ended their romantic relationship after finding out that they were not sexually compatible as both wanted to be dominant during sex:

I actually wanted to take control while having sex. I mean, I wanted to be dominant and my partner to be submissive. He didn't want that. So, there was a problem in our relationship because of this. There was a distance between us. (Badol, 20-year-old transgender man)

Farhana recalled the lack of sexual compatibility the first time she had sex with her girlfriend had attempted to be dominant: "She [girlfriend] couldn't turn me on, that's why we broke up. Because I wasn't turned on by her during our room date [to have sex]."

She reflected on her sexual inexperience and not knowing what she liked or what she was supposed to do. Instead of exploring their preferences further, her partner at the time saw this as a rejection and broke up with Farhana:

I was like very naive. I was like super naive. I couldn't figure out what I was supposed to do. It wasn't coming naturally to me. I wasn't uncomfortable, but I didn't know anything. Because I had never been intimate with anyone before so I didn't know what to do. She [partner at the time] thought that was a rejection. And she told me that I wasn't her type. I know now why she said that. (Farhana, 23-year-old lesbian woman)

Badol recalled wanting to be in a relationship with someone who identified as a "tomboy". She explained to Badol that it was not possible to be in a relationship with "another tomboy".

She said, 'I am also a tomboy.' I wasn't aware of this term. I just knew the term lesbian. [She explained that it was] a girl who thinks of herself as a guy [rather than] a girl. I said to her, 'I think of myself as a guy that means I am also a tomboy.' She replied, 'Then how is it possible to get involved in a relationship with another tomboy?' She said, 'If I were a bit girly then she could consider me for a relationship.' (Badol, 20-year-old transgender man)

4.4. Challenges to relational power dynamics of masculinity and domination

Masculine behaviour is more common among tomboys and trans men. They are more patriarchal [and dominating]. In order to make themselves appear more manly they adhere to patriarchy so much that you end up hating them. (Farhana, 23-year-old lesbian woman)

According to participants' perceptions and experiences, queer relationship dynamics were shaped by inequitable patriarchal norms, with some individuals reproducing heteronormative behaviour to appear more "masculine". Not only did participants report viewing sexual roles as gendered and needing to be "matched" by partners, but they also commented on how these gender roles had an impact on their relationship dynamics. Farhana expressed that masculine-identifying queer people associated dominant patriarchal behaviour with masculinity.

Auvi also mentioned receiving sexual interest from men because of their androgyny but then wanted them to be more "feminine" and "submissive":

They were interested in the fact that I was 'exotic' and then uninterested in me when they were unable to make me into the woman that they wanted me to be. . . . They would come into the connection being like, 'I like you as you are' but then it would be like, 'You have to be more feminine. You have to be more submissive.' (Auvi, 22-year-old non-binary person)

Transgender women participants, Ria and Trishna, brought up relational moments where they most felt like "the girlfriend" or "the wife". Ria—who often presented as male in public—mentioned feeling like "the girlfriend" when a male schoolfriend would be dominating and "aggressive" towards her as this indicated that he had romantic feelings for her. This included times when the schoolfriend would have heated arguments with her as well as physically hurting her. During Trishna's first relationship, she remembered feeling like her ex-boyfriend was "the husband and I was the wife". This meant that while they were living together, Trishna managed most of the household chores—such as cooking and laundry—that were she claimed were typically carried out

by women while her partner focused on chores outside of the house—such as shopping for groceries.

Shayan described an issue within the gay community where bottoms confronted broader problems that “women of Bangladesh typically face” within relationships. He argued that many tops wanted to dominate bottoms not just during sex but in all aspects of the relationship:

In the straight community, males are dominant, and for us, tops are dominant. The kind of problems that women of Bangladesh typically face; these are the same for the bottoms in my community. (Shayan, 24-year-old gay man)

James described wanting a “balanced” relationship in terms of decision making with a romantic partner:

I don’t want to totally dominate the relationship. There are some points on which I want to be dominant. There are some points on which he can be dominant. The thing should be balanced. When one person starts taking the lead in everything, then the whole thing becomes toxic. (James, 23-year-old gay man)

Farhana reported being exasperated by what she perceived to be paternalistic behaviour from “tomboys”—masculine presenting lesbian women:

[They think that,] ‘Since I am the guy, I will protect you. When you’re crossing the street, you won’t stand on the side with oncoming traffic.’ Why? Do you think I don’t know how to cross the street? Were you helping me cross streets all those years that I haven’t known you? (Farhana, 23-year-old lesbian woman)

Farhana had not wanted to be in an open relationship until she began dating her current girlfriend. During this relationship Farhana said she began to realise that she was “both masculine and feminine”. While she wanted to express her sexuality and gender within her relationship, Farhana was unable to do so with her primary partner because they were “totally masculine” and did not take the issue seriously:

It’s like our choices didn’t match. There was also some problem when it came to our attitude towards each other. I’m both masculine and feminine. But my partner is totally masculine. So, maybe my feminine part was satisfied with her. But my masculine part was not. But whenever I brought this topic up with her, she laughed it off. I mean, she did not take it seriously. It’s one kind of disrespect. I felt ridiculed. All these insults made me feel distant from her. She ruined [our relationship] for me with her dominating and patriarchal behaviour. (Farhana, 23-year-old lesbian woman)

As a non-binary person assigned female at birth, Auvi said they found sexual experiences with cisgender men to be highly gendered—where men were expected to be dominant and women to be submissive. They said that having to “perform as the woman” during sex made the experience less enjoyable for them:

When I did have sex, I was usually performing as the woman. There’s also a lot of connotations that come with what being feminine means. I don’t know. That takes away from the experience for me. (Auvi, 22-year-old non-binary person)

They elaborated further by sharing their growing discomfort at having to perform the role of a woman, “even when you’re on top”:

The older I got, I wasn’t comfortable being seen as a woman, so I wasn’t comfortable constantly having to perform that role even when you’re on top, this is how it looks and all of that. (Auvi, 22-year-old non-binary person)

Auvi identified as a “soft dom” and was not comfortable being too “aggressive” in sexual spaces. They described how this was something they were negotiating with their straight-identifying male partner:

I've gotten a bit more aggressive in sexual spaces and that's also something I'm not particularly comfortable with because I'm a very soft dom ... I'm exploring like what it would be to use a strap on or to actually dominate my partner, actually talk about it and dominate my partner.

4.5. Embodying notions of sexual morality

I have a very weird relationship with sexuality, where hypersexuality can be like a form of self-harm for me and also just not engaging. It has also just been a few times where I've sort of cleansed myself or just tried not to have another person in my space as a way to just be OK with myself again. (Auvi, 22-year-old non-binary person)

Participants associated experiences of sexual pleasure with casual partner(s) outside of romantic relationships with feelings of regret, guilt, and naivety. Several respondents reported regretting not “protecting” their bodies from certain casual sexual encounters. Like Auvi, others also reported that they associated having a lot of sex—particularly “casual sex”—with “self-harm”, and associated celibacy or sex within a monogamous relationship with self-protection. Auvi reported that their sexual behaviour was heavily influenced by their mental health as well as how they felt about their own body. They recalled how too much sex was like “self-harm” whereas celibacy felt like “a way to just be OK with myself”.

Shonali, a bisexual student, stated the importance she placed on staying with one sexual partner—in her case, a heterosexual man—for life. In Shonali's case, she reported feeling that she could not possibly be with “anyone else” after engaging in sexual intercourse with her boyfriend. She explained that this view stemmed from what she perceived as parental expectation of monogamy:

I used to have this perception - you know, the one parents have, that if you have something [sexual] with someone, you have to stay with them. You can't think about anything else. ... It was because I had sex with him and I thought that 'oh my god, I cannot go back to anyone else'. (Shonali, 21-year-old bisexual woman)

According to gay participants, however, this expectation of monogamy was not universal. As Shayan explained, it was very common for gay men to casually date multiple partners, unlike “Bangladesh's straight culture”:

Like in Bangladesh's straight culture, it is not normal to date someone today, and date someone else another day. This is not normal in the straight culture of Bangladesh. But this is quite normal in my [gay] community's culture - that I am dating someone today, and tomorrow I might of course date someone else. (Shayan, 24-year-old gay man)

Nineteen-year-old transgender student, Ria, who had recently started attending queer events also suggested that many people within the gay community were “crazy for sex”. She noted that people would speak very openly about sex at these events:

There's a lot of people in the [gay] community who go crazy for sex. Like, when I go to any community event, people will always be talking about sex. [They'll ask,] 'How many times have you done it [had sex]? Who did you do it with?' (Ria, 19-year-old transgender woman)

However, Ria equated these open discussions about “promiscuous” behaviour as something “respectable” people did not participate in. She said that because she was “respectable” and came from a “respectable family”, she did not want to engage in, or speak about, casual sex

with people she did not know: “I come from a respectable family ... I am respectable. I only share myself [sexually] with those I am close to.”

Both James and Shayan reported engaging in casual “hook ups” with multiple people. Despite this, they described feeling guilty for having had sex with people they did not know rather than sex with long-term monogamous partners. Shayan remembered feeling like “a prostitute” during certain sexual interactions and felt “guilty afterwards”:

You just meet someone and right away you [have sex] ... I have never liked this. I feel guilty afterwards. I feel as though – it’s like being a prostitute or something. It’s as if someone comes there, sleeps with me, and then he goes off. For me, this feels very demeaning. (Shayan, 24-year-old gay man)

James reflected on his earlier sexual experiences and being “very curious” about the newness of everything. However, he regretted having a lot of casual sex:

What I now regret in my life – is that at that time, out of curiosity, I met up with a lot of people. And I also hooked up with a lot of people, to be frank. I now feel that I should not have done that. (James, 23-year-old gay man)

James expressed his guilt over having multiple hook ups as “giving up” his body and not “protecting” it better or “saving it for the right person”: “I feel guilty that I so easily gave up my body to people. This is what bothers me. Like, I should have protected it better. Maybe saved it for the right person.”

Moreover, James considered the negative health implications having “too many hook ups” in hindsight:

How many people I have hooked up with to date, is something that I cannot give a proper account of. But if I attempt to count that, I think it would be more than fifty or sixty people. So, I think that there is a risk involved here. There are of course health issues for us. There is the matter of HIV/AIDS. For that reason, now I feel that at that time I was very young; I was very naive. (James, 23-year-old gay man)

5. Discussion

Our study shows how sexual intimacy as experienced by LGBTQ+ young people in Bangladesh consists of a desire for consensual sexual and romantic relationships with sexually “matched” partner(s) while navigating heteropatriarchal sexuality norms. The statement captures the essence of young people’s sexual lifeworlds in our study and indicates a universality around sexuality while still making space for intersections of diverse lived experiences and social orientation (Ahmed, 2006; Dolezal, 2015).

In terms of norms, participants in our study acknowledged that openly discussing or displaying queer sexual desire was a taboo as it went against prevailing heteropatriarchal sexuality norms. Other authors also note that the dominant discourse in Bangladesh is that sexuality is private and shameful (Camellia et al., 2021; Khan & Raby, 2020; Siddiqi, 2011). Consequently, it may be difficult for young people to articulate nonnormative sexual desires (Karim, 2010). According to our research, young people appeared to have three avenues of navigating their queer sexual desires within the structure of dominant sexuality norms: conforming to heteronormativity and rejecting queer desires; implicitly rejecting heteronormative expectations and concealing nonnormative behaviours while passing as heteronormative; explicitly rejecting heteronormative expectations and being visibly queer. The authors analyse these categories further in their article examining the framework of heteronormative “straightening devices”—mechanisms working to direct people towards heterosexuality, gender conformity, and procreative marriage—to identify structures upholding normative sexual behaviours and see how young people in Bangladesh navigate these

in their everyday lives (Alam & Marston, 2023). As our participants all self-identified as LGBTQ+, none of them reported explicitly rejecting queer desires, although they remembered questioning and suppressing these desires at different stages of their lives while growing up.

Our data demonstrate a complexity in having to conceal queer desire. Discretion is considered a safer option than visibility and is, therefore, a widely accepted way of being within the queer community. At the same time, there is a constant fear of being found out. A recent ethnographic study looks at how heterosexual young people in Bangladesh use silence around sexuality as a way to circumvent uncomfortable conversations with parents and protect good boy/girl image (Camellia et al., 2021). For sexual and gender diverse young people, the burden of concealment is often more pronounced due to insecurities about being “discovered” to be queer with subsequent familial and social ramifications. In this way, our findings echo studies showing an association between sexual orientation concealment and internalisation of mental health problems such as depression, anxiety, and distress among young people (Pachankis et al., 2020). As a recent study explains, the absence of social safety—reliable connection, inclusion, and protection—has adverse health consequences for SGD people because of the long-term negative effects of chronic threat-vigilance (Diamond & Alley, 2022). Once stigmatised individuals realise that some people consider them “abnormal”, all people must be approached with new caution. Furthermore, evidence from global research suggests that lack of supportive environments at home, in school and healthcare settings further compounds the emotional challenges of living outside of heteronormativity (Bidell, 2014; Day et al., 2019; Earnshaw et al., 2016; Fantus & Newman, 2021; Keuroghlian et al., 2017; McDermott et al., 2021; Ryan et al., 2010). Adverse health implications such as trauma, depression, anxiety, and suicidal thoughts as described by all participants in our studies are also widely reported in mainstream research on LGBTQ+ experiences (Barragán-Medero & Pérez-Jorge, 2020; Bowling et al., 2019; Earnshaw et al., 2016; Kuper et al., 2018; Laiti et al., 2019; Lancet, 2011; Nieder et al., 2020; Regmi & van Teijlingen, 2015; Rivers et al., 2018; Searle, 2019; UNFPA, 2014; Zeeman et al., 2019).

As Siddiqi (2011) explained, certain sexual behaviours are tolerated or ignored as long as these remain hidden from the public gaze and do not disrupt the visible order of things such as the ideal of procreative heterosexual marriage. Ahmed (2006) suggested that to be found out as queer constitutes a “failure” to perform heteronormativity and achieve social respectability reserved for those who are seen to visibly conform. In other words, not being presumed as heterosexual or cisgender means that an individual has to “unbecome” heterosexual or cisgender (Ahmed, 2006). This deviance is often narrated as a loss of the possibility of becoming happy and, from a lifeworld perspective, can offer insight into meanings of wellbeing. As only cisgender heterosexual relationships are considered socially legitimate within the context of Bangladesh, these less-tangible aspects of the queer lifeworld of love and romantic partnerships require further exploration.

Our findings around relational power dynamics associated with sexual roles are indicative of a plurality of lived experiences and needs within the queer community. Heteropatriarchal sexuality norms were more challenging for some participants than others. For instance, we observed parallels between widespread inequitable gender roles and those described by feminine-identifying queer participants—including transgender women, gay bottoms, and femme-lesbians. Conversely, participants mentioned hegemonic masculinity as predominantly perpetrated by transgender men and gay tops. It is important to address these differences in sexual behaviour based on “matching” sexual roles in order to gain a deeper understanding of sexuality within the context of Bangladesh. It is also relevant to consider how sexual and gender diverse young people conceptualise and form romantic partnerships when these are not considered legitimate within wider society. What does this mean for current sexual health interventions? A better understanding the relational dynamics within the spectrum of LGBTQ+ community is essential to ensure health interventions are tailored correctly.

Against the backdrop of upholding respectability and honour through sexual abstinence before marriage, our data demonstrate a link between young people's understandings of heteropatriarchal sexual morality and the type and frequency of queer sexual interactions. Having sex with someone one is close to is considered more aligned with sociosexual norms than having sex with multiple unacquainted partners. Too many "casual hook ups" for those being penetrated meant a failure to "protect" their bodies which is equated to self-harm and a lack of self-respect, for instance. Reflections on past sexual experiences outside of romantic partnerships also predominantly centred on dissatisfaction with one's own "promiscuous" behaviour and negative emotional consequences such as feelings of guilt and shame. As a result, there was very little discussion around sexual pleasure, particularly outside of monogamous relationships. This can partly be seen from the lens of internalised shame, which is fundamentally an embodied experience shaped by larger social and political contexts (Dolezal, 2015). There was also a sense of permanence in the experience of embodied shame, "I have deviated from sexual norms by disrespecting my body and my body remembers my failure to protect it."

On the other hand, participants perceived positive experiences of sexual intimacy as driven by desire for romantic or "intellectual" connection with potential sexual partners. Our data show that young people desired sexual intimacy with partners they are acquainted with and felt close to. This corresponds with a recent study on college students reported nonphysical aspects of partnered sex—such as emotions, trust, connection with partners—to be as pleasurable as more physical aspects—such as bodily sensations (Beckmeyer et al., 2021).

As with global research, our study reveals how perceived and actual discrimination contributes to chronic minority stress and places SGD young people at risk of adverse mental health outcomes (Goldbach et al., 2021; Green et al., 2021; Inderbinen et al., 2021). Our analysis explored negative emotions around discretion, safety concerns, and stigma over heteropatriarchal sexual morality. Similarly, a systematic review of transgender populations reveals links between self-stigmatisation and mental health stressors while "community connectedness" was a strong protective factor for mental health (Inderbinen et al., 2021). It is vital to continue investigating associations between lived experiences of sexuality and mental health concerns among LGBTQ+ youth as well as identifying effective resilience and coping mechanisms (Ahmed, 2006; Earnshaw et al., 2016; Goldbach et al., 2021; Green et al., 2021; Inderbinen et al., 2021; Kuper et al., 2018; Ramírez et al., 2020; Rivers et al., 2018; Zeeman et al., 2019). How can we promote community connectedness while acknowledging that queer visibility presents real safety concerns for SGD youth, for example? Further exploration of how interventions promoting mental health can be adapted in a Bangladeshi context.

This study examined lived experiences of self-identifying LGBTQ young people in Dhaka within the phenomenological lifeworld framework. Although some of the participants grew up in different areas of the country, most of the narratives referring to public spaces and health services were based on urban settings. As such, further research is needed to understand the experiences of peri-urban and rural areas where young people may be facing different challenges. Similarly, we were unable to recruit intersex people, gay men who identified as "tops", or individuals from the Hijra community and their experiences should also be investigated in future work (Hossain, 2017; Zeeman & Aranda, 2020). Another avenue of research could be to explore nuances of experiences around visibility and concealment as a spectrum by purposively recruiting "closeted" and "out" respondents. From a phenomenological standpoint, it would be useful to explore each of the five themes in more depth to better understand the various aspects of these lived experiences. Given that our research focus was lived experiences of young people, we could not address the perspective of other actors—such as healthcare professionals or parents of young people. Examining structural challenges may provide more context-specific information on how to effectively advocate for the rights of queer young people. Due to the dearth of research on sexual and gender diverse young people in Bangladesh, we had to rely on reviewing global literature. As many of these other studies were based in high-income countries, the recommendations need to be further

examined to be applicable in Bangladesh. Likewise, while we reported—and carefully translated—verbatim terminology as used by our participants, it was outside the scope of this article to examine how their use of language may have impacted meaning construction. It would be beneficial to further explore normative “global” discourses and anglophone linguistic hegemony of queer experiences (Kao, 2021; Siddiqi, 2011).

Acknowledgements

The authors would like to thank research assistants Malisha Farzana, Nayeem Hasan, Tanzila Tabassum, and Ripon Islam for their support during the data generation period.

Funding

This work was supported by the Economic and Social Research Council under Grant ES/J500021/1.

Author details

Prima Alam¹

E-mail: primji@gmail.com

ORCID ID: <http://orcid.org/0000-0001-8286-9866>

Cicely Marston¹

ORCID ID: <http://orcid.org/0000-0002-5529-4646>

¹ Department of Public Health, Environments and Society, Faculty of Public Health and Policy, London School of Hygiene & Tropical Medicine, London, UK.

Disclosure statement

No potential conflict of interest was reported by the author(s).

Data availability statement

Due to the nature of this research, participants of this study did not agree for their data to be shared publicly, so supporting data is not available.

Citation information

Cite this article as: “People are having lots of other kinds of sex”: Exploring sexual lifeworlds of LGBTQ+ young people in Bangladesh, Prima Alam & Cicely Marston, *Cogent Social Sciences* (2023), 9: 2185305.

References

- Ahmed, S. (2006). *Queer Phenomenology: Orientations, Objects, Others*. Duke University Press.
- Alam, P., & Marston, C. (2023). ‘Bending’ against straightening devices: queer lived experiences of sexuality and sexual health in Bangladesh. *BMC Public Health*, 23, 173. <https://doi.org/10.1186/s12889-023-15085-0>
- Barragán-Medero, F., & Pérez-Jorge, D. (2020). Combating homophobia, lesbophobia, biphobia and transphobia: A liberating and subversive educational alternative for desires. *Heliyon*, 6(10), e05225–e05225. <https://doi.org/10.1016/j.heliyon.2020.e05225>
- Beckmeyer, J. J., Herbenick, D., & Eastman-Mueller, H. (2021). Sexual pleasure during college students’ most recent partnered sexual experiences. *J Am Coll Health*, 1–12. <https://doi.org/10.1080/07448481.2021.1978461>
- Bidell, M. P. (2014). Is there an emotional cost of completing high school? Ecological factors and psychological distress among LGBT homeless youth. *J Homosex*, 61(3), 366–381. <https://doi.org/10.1080/00918369.2013.842426>
- Bowling, J., Mennicke, A., Blekfeld-Sztraky, D., Simmons, M., Dodge, B. M., Sundarraman, V., Lakshmi, B. S. S., Dharuman, S. T., & Herbenick, D. (2019). The Influences of Stigma on Sexuality among Sexual and Gender Minoritized Individuals in Urban India. *International Journal of Sexual Health*, 31(3), 269–282. <https://doi.org/10.1080/19317611.2019.1625994>
- Camellia, S., Rommes, E., & Jansen, W. (2021). Beyond the talking imperative: The value of silence on sexuality in youth-parent relations in Bangladesh. *Glob Public Health*, 16(5), 775–787. <https://doi.org/10.1080/17441692.2020.1751862>
- Carlsson-Laloo, E., Berg, M., Mellgren, Å., & Rusner, M. (2018). Sexuality and childbearing as it is experienced by women living with HIV in Sweden: A lifeworld phenomenological study. *International Journal of Qualitative Studies on Health and Well-being*, 13(1), 1487760. <https://doi.org/10.1080/17482631.2018.1487760>
- Carlsson-Laloo, E., Mellgren, Å., Berg, M., & Rusner, M. (2021). Supportive conditions for sexual and perinatal wellbeing in women living with HIV in Sweden: A phenomenological study. *Sex Reprod Healthc*, 29, 100640. <https://doi.org/10.1016/j.srhc.2021.100640>
- Dahlberg, H., & Dahlberg, K. (2020). Open and Reflective Lifeworld Research: A Third Way. *Qualitative Inquiry*, 26(5), 458–464. <https://doi.org/10.1177/1077800419836696>
- Dahlberg, K., Dahlberg, H., Drew, N., & Nyström, M. (2008). *Reflective Lifeworld Research*. Professional Publishing House. <https://books.google.co.uk/books?id=JwX3LAAACAAJ>
- Day, J. K., Ioverno, S., & Russell, S. T. (2019). Safe and supportive schools for LGBT youth: Addressing educational inequities through inclusive policies and practices. *Journal of School Psychology*, 74, 29–43. <https://doi.org/10.1016/j.jsp.2019.05.007>
- Diamond, L. M., & Alley, J. C. (2022). Rethinking minority stress: A social safety perspective on the health effects of stigma in sexually-diverse and gender-diverse populations. *Neuroscience & Biobehavioral Reviews*, 138. <https://doi.org/10.1016/j.neubiorev.2022.104720>
- Dolezal, L. (2015). *The Body and Shame: Phenomenology, Feminism, and the Socially Shaped Body*. Lexington Books.
- Earnshaw, V. A., Bogart, L. M., Poteat, V. P., Reisner, S. L., & Schuster, M. A. (2016). Bullying Among Lesbian, Gay, Bisexual, and Transgender Youth. *Pediatr Clin North Am*, 63(6), 999–1010. <https://doi.org/10.1016/j.pcl.2016.07.004>
- Fantus, S., & Newman, P. A. (2021). Promoting a positive school climate for sexual and gender minority youth through a systems approach: A theory-informed qualitative study. *Am J Orthopsychiatry*, 91(1), 9–19. <https://doi.org/10.1037/ort0000513>
- Gagnon, J. H. (2006). States, cultures, colonies and globalization: A story of sex research. In S. Khalaf & J. H. Gagnon (Eds.), *Sexuality in the Arab World* (pp. 35–62). Saqi Press.
- Goldbach, J. T., Rhoades, H., Rusow, J., & Karys, P. (2021). The Development of Proud & Empowered: An Intervention for Promoting LGBTQ Adolescent Mental Health. *Child Psychiatry Hum Dev*. <https://doi.org/10.1007/s10578-021-01250-2>
- Green, A. E., Price, M. N., & Dorison, S. H. (2021). Cumulative minority stress and suicide risk among LGBTQ youth. *Am J Community Psychol*. <https://doi.org/10.1002/ajcp.12553>
- Hemingway, A. (2011). Lifeworld-led care: Is it relevant for well-being and the fifth wave of public health

- action? *International Journal of Qualitative Studies on Health and well-being*, 6(4), 4. <https://doi.org/10.3402/qhw.v6i4.10364>
- Hemingway, A., Norton, L., & Aarts, C. (2015). Principles of Lifeworld Led Public Health Practice in the UK and Sweden: Reducing Health Inequalities. *Nurs Res Pract*, (2015), 124591. <https://doi.org/10.1155/2015/124591>
- Hossain, A. (2017). The paradox of recognition: Hijra, third gender and sexual rights in Bangladesh. *Culture, Health & Sexuality*, 19(12), 1418–1431. <https://doi.org/10.1080/13691058.2017.1317831>
- Hossain, A. (2020). Section 377, Same-sex Sexualities and the Struggle for Sexual Rights in Bangladesh. *Australian Journal of Asian Law*, 20(1), 115–125. https://papers.ssrn.com/sol3/papers.cfm?abstract_id=3516500
- Inderbinen, M., Schaefer, K., Schneeberger, A., Gaab, J., & Garcia Nuñez, D. (2021). Relationship of Internalized Transnegativity and Protective Factors With Depression, Anxiety, Non-suicidal Self-Injury and Suicidal Tendency in Trans Populations: A Systematic Review. *Front Psychiatry*, 12, 636513. <https://doi.org/10.3389/fpsy.2021.636513>
- Kabeer, N. (1994). Reversed Realities: Gender Hierarchies in Development Thought. Verso. <https://books.google.co.uk/books?id=dLPWBScdOygC>
- Kao, Y.-C. (2021). The coloniality of queer theory: The effects of “homonormativity” on transnational Taiwan’s path to equality. *Sexualities*, 1(1), 13634607211047518. <https://doi.org/10.1177/13634607211047518>
- Karim, S. (2010). Living Sexualities and Not Talking “Straight”: Understanding Non-Heterosexual Women’s Sexuality in Urban Middle Class Bangladesh. *OIDA International Journal of Sustainable Development*, 1(6), 67–78. <https://ssrn.com/abstract=1672314>
- Karim, S. (2012). *Living Sexualities: Negotiating Heteronormativity in Middle Class Bangladesh* [PhD thesis]. Erasmus University Rotterdam.
- Keuroghlian, A. S., Ard, K. L., & Makadon, H. J. (2017). Advancing health equity for lesbian, gay, bisexual and transgender (LGBT) people through sexual health education and LGBT-affirming health care environments. *Sex Health*, 14(1), 119–122. <https://doi.org/10.1071/SH16145>
- Khan, T. H., & Raby, R. (2020). From missing to misdirected: Young men’s experiences of sex education in Bangladesh. *Sex Education*, 20(6), 583–596. <https://doi.org/10.1080/14681811.2019.1703177>
- Klaeson, K., Sandell, K., & Berterö, C. M. (2012). Sexuality in the context of prostate cancer narratives. *Qual Health Res*, 22(9), 1184–1194. <https://doi.org/10.1177/1049732312449208>
- Kuper, L. E., Adams, N., & Mustanski, B. S. (2018). Exploring Cross-Sectional Predictors of Suicide Ideation, Attempt, and Risk in a Large Online Sample of Transgender and Gender Nonconforming Youth and Young Adults. *LGBT Health*, 5(7), 391–400. <https://doi.org/10.1089/lgbt.2017.0259>
- Laiti, M., Pakarinen, A., Parisod, H., Salanterä, S., & Sariola, S. (2019). Encountering sexual and gender minority youth in healthcare: An integrative review. *Prim Health Care Res Dev*, 20, e30. <https://doi.org/10.1017/S146342361900001X>
- Lancet, T. (2011). Health concerns of adolescents who are in a sexual minority. *The Lancet*, 377, 9783. [https://doi.org/10.1016/s0140-6736\(11](https://doi.org/10.1016/s0140-6736(11)
- McDermott, E., Gabb, J., Eastham, R., & Hanbury, A. (2021). Family trouble: Heteronormativity, emotion work and queer youth mental health. *Health*, 25(2), 177–195. <https://doi.org/10.1177/1363459319860572>
- Menon, N. (2007). *Sexualities*. Women Unlimited.
- Menon, M. (2018). *Infinite Variety: A History of Desire in India*. Speaking Tiger.
- Mensch, J. R. (2018). *Selfhood and Appearing: The Intertwining*. Studies in Contemporary Phenomenology. Brill. <https://doi.org/10.1163/9789004375840>
- Mookherjee, N. (2013). Introduction: Self in South Asia. *Journal of Historical Sociology*, 26(1), 1–18. <https://doi.org/10.1111/johs.12008>
- Nieder, T. O., Güldenring, A., Woellert, K., Briken, P., Mahler, L., & Mundle, G. (2020). Ethical Aspects of Mental Health Care for Lesbian, Gay, Bi-, Pan-, Asexual, and Transgender People: A Case-based Approach. *Yale J Biol Med*, 93(4), 593–602. https://doi.org/10.1300/J082v52n03_01
- Pachankis, J. E., Mahon, C. P., Jackson, S. D., Fetzner, B. K., & Bränström, R. (2020). Sexual orientation concealment and mental health: A conceptual and meta-analytic review. *Psychological Bulletin*, 146(10), 831–871. <https://doi.org/10.1037/bul0000271>
- Pollitt, A. M., Mernitz, S. E., Russell, S. T., Curran, M. A., & Toomey, R. B. (2021). Heteronormativity in the Lives of Lesbian, Gay, Bisexual, and Queer Young People. *J Homosex*, 68(3), 522–544. <https://doi.org/10.1080/00918369.2019.1656032>
- Ramírez, E. G. L., Delgado, Y. K., Volpato, R. J., de Claudio, J. C. M., Pinho, P. H., & de Vargas, D. (2020). Suicidal ideation in gender and sexual minority students in the largest Brazilian University. *Archives of Psychiatric Nursing*, 34(6), 467–471. <https://doi.org/10.1016/j.apnu.2020.08.004>
- Rashid, S. F., Standing, H., Mohiuddin, M., & Ahmed, F. M. (2011). Creating a public space and dialogue on sexuality and rights: A case study from Bangladesh. *Health Res Policy Syst*, 9(Suppl 1), S12. <https://doi.org/10.1186/1478-4505-9-S1-S12>
- Regmi, P. R., & van Teijlingen, E. R. (2015). Importance of Health and Social Care Research into Gender and Sexual Minority Populations in Nepal. *Asia Pac J Public Health*, 27(8), 806–808. <https://doi.org/10.1177/1010539515613413>
- Rivers, I., Gonzalez, C., Nodin, N., Peel, E., & Tyler, A. (2018). LGBT people and suicidality in youth: A qualitative study of perceptions of risk and protective circumstances. *Soc Sci Med*, 212, 1–8. <https://doi.org/10.1016/j.socscimed.2018.06.040>
- Ryan, C., Russell, S. T., Huebner, D., Diaz, R., & Sanchez, J. (2010). Family acceptance in adolescence and the health of LGBT young adults. *J Child Adolesc Psychiatr Nurs*, 23(4), 205–213. <https://doi.org/10.1111/j.1744-6171.2010.00246.x>
- Saldana, J. (2015). *The Coding Manual for Qualitative Researchers*. SAGE Publications. <https://books.google.co.uk/books?id=ZhxiCgAAQBAJ>
- Searle, J. (2019). Queer Phenomenology, the Disruption of Heteronormativity, and Structurally Responsive Care. *ANS Adv Nurs Sci*, 42(2), 109–122. <https://doi.org/10.1097/ans.0000000000000258>
- Sedikides, C., Gaertner, L., & O’Mara, E. M. (2011). Individual Self, Relational Self, Collective Self: Hierarchical Ordering of the Tripartite Self. *Psychological Studies*, 56(1), 98–107. <https://doi.org/10.1007/s12646-011-0059-0>
- Siddiqi, D. M. (2011). Sexuality, rights and personhood: Tensions in a transnational world. *BMC International Health and Human Rights*, 11(3), S5. <https://doi.org/10.1186/1472-698X-11-S3-S5>

- Thoresen, L., Wyller, T., & Heggen, K. (2011). The significance of lifeworld and the case of hospice. *Medicine, Health Care and Philosophy*, 14(3), 257–263. <https://doi.org/10.1007/s11019-010-9296-6>
- UNFPA. (2014). *The power of 1.8 billion: Adolescents, youth and the transformation of the future (State of World Population, Issue)*. https://www.unfpa.org/sites/default/files/pub-pdf/EN-SWOP14-Report_FINAL-web.pdf
- van Manen, M. (2016). *Phenomenology of Practice: Meaning-Giving Methods in Phenomenological Research and Writing*. Left Coast Press. <https://books.google.co.uk/books?id=pn50AgAAQBAJ>
- Wehrle, M. (2020). Being a body and having a body. The twofold temporality of embodied intentionality. *Phenomenology and the Cognitive Sciences*, 19(3), 499–521. <https://doi.org/10.1007/s11097-019-09610-z>
- Zeeman, L., & Aranda, K. (2020). A Systematic Review of the Health and Healthcare Inequalities for People with Intersex Variance. *International Journal of Environmental Research and Public Health*, 17(18), 6533. <https://doi.org/10.3390/ijerph17186533>
- Zeeman, L., Sherriff, N., Browne, K., McGlynn, N., Mirandola, M., Gios, L., Davis, R., Sanchez-Lambert, J., Aujean, S., Pinto, N., Farinella, F., Donisi, V., Niedzwiedzka-Stadnik, M., Rosinska, M., Pierson, A., Amaddeo, F., & Health, L. N. (2019). A review of lesbian, gay, bisexual, trans and intersex (LGBTI) health and healthcare inequalities. *Eur J Public Health*, 29(5), 974–980. <https://doi.org/10.1093/eurpub/cky226>



© 2023 The Author(s). This open access article is distributed under a Creative Commons Attribution (CC-BY) 4.0 license.

You are free to:

Share — copy and redistribute the material in any medium or format.

Adapt — remix, transform, and build upon the material for any purpose, even commercially.

The licensor cannot revoke these freedoms as long as you follow the license terms.

Under the following terms:

Attribution — You must give appropriate credit, provide a link to the license, and indicate if changes were made.

You may do so in any reasonable manner, but not in any way that suggests the licensor endorses you or your use.

No additional restrictions

You may not apply legal terms or technological measures that legally restrict others from doing anything the license permits.



Cogent Social Sciences (ISSN: 2331-1886) is published by Cogent OA, part of Taylor & Francis Group.

Publishing with Cogent OA ensures:

- Immediate, universal access to your article on publication
- High visibility and discoverability via the Cogent OA website as well as Taylor & Francis Online
- Download and citation statistics for your article
- Rapid online publication
- Input from, and dialog with, expert editors and editorial boards
- Retention of full copyright of your article
- Guaranteed legacy preservation of your article
- Discounts and waivers for authors in developing regions

Submit your manuscript to a Cogent OA journal at www.CogentOA.com

