Abstract

Homonormativity has become a hegemonic concept within geographies of sexualities, with critical scholars emphasizing exclusionary practices towards specific ‘unwanted’ subjects. However, the literature has ignored the role of one of the main sources of bias and discrimination for gay men: HIV-positivity. The paper seeks to start to fill this void by showing how the geographies of homonormativity and the migration paths of gay men living with HIV often overlap. The paper builds a diversified and situated account of homonormative spaces as spaces of (relative) privilege and inclusion by looking at the everyday practices and experiences of Italian and French gay migrants living with HIV in Barcelona, the Catalan capital. When considering everyday practices, the paper focuses on three characteristics usually associated with neoliberal homonormativity: individualism; privatization, domestication and sanitization of sexual life; exaltation of coupledom. Methodologically the paper results from fieldwork conducted in Barcelona in 2014, including 16 in-depth interviews with Italian and French gay migrants living with HIV.

Keywords: homonormativity; Barcelona; stigma; individualism; domestication of sexual life

Resum. Inclusió de l’homonormativitat en el món de les ciutats: el cas dels immigrants gais seropositius a Barcelona

L’homonormativitat ha esdevingut un concepte hegemònic dins de les geografies de les sexualitats, i els acadèmics crítics emfatitzen les pràctiques d’exclusió en subjectes específics «no desitjats». No obstant això, la literatura ha ignorat el paper d’una de les principals fonts de biaix i discriminació per als homes homosexuals: la positivitat al VIH. El document pretén omplir aquest buit mostrant que les geografies d’homonormativitat i les rutes de migració d’homes homosexuals amb VIH se superposen. El document construeix un relat diversificat

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i situat dels espais homonormatius com a espais de privilegis (relatius) i inclusió observant les
pràctiques i experiències quotidianes d’emigrants gais seropositius italians i francesos a Barce-
celona, la capital catalana. En considerar les pràctiques quotidianes, l’article se centra en tres
característiques generalment associades amb l’homonormativitat neoliberal: individualisme;
privatització, domesticació i higiene de la vida sexual; i exaltació de la parella. Metodològica-
ment, els resultats del treball de camp realitzats a Barcelona el 2014 inclouen 16 entrevistes
en profunditat a immigrants homosexuals italians i francesos amb VIH.

Paraules clau: homonormativitat; Barcelona; estigma; individualisme; domesticació de la
vida sexual

Resumen. Inclusión de la homonormatividad en el mundo de las ciudades: el caso de los
inmigrantes gais seropositivos en Barcelona

La homonormatividad se ha convertido en un concepto hegemónico dentro de las geo-
grafías de las sexualidades, y las investigaciones críticas enfatizan las prácticas de exclusión
hacia sujetos específicos «no deseados». Sin embargo, la literatura ha ignorado el papel de
una de las principales fuentes de sesgo y discriminación para los hombres homosexuales: la
positividad al VIH. El documento pretende llenar este vacío mostrando que las geografías
dehomonormatividad y las rutas de migración de hombres homosexuales con VIH se
superponen. El artículo hace un relato diversificado y situado de los espacios homonorma-
tivos como espacios de (relativo) privilegio e inclusión al observar las prácticas y experiencias
cotidianas de los inmigrantes homosexuales VIH positivos italianos y franceses en Barce-
lona, la capital catalana. Al considerar las prácticas cotidianas, el artículo se centra en tres
características generalmente asociadas con la homonormatividad neoliberal: individualismo;
privatización, domesticación e higiene de la vida sexual; y exaltación de la pareja. Metodoló-
icamente, los resultados del trabajo de campo realizados en Barcelona en 2014 incluyen
16 entrevistas en profundidad a inmigrantes homosexuales italianos y francesos con VIH.

Palabras clave: homonormatividad; Barcelona; estigma; individualismo; domesticación
de la vida sexual

Résumé. Inclusion de l’homonormativité dans le monde des villes : le cas des migrants
séropositifs à Barcelone

L’homonormativité est devenue un concept hégémonique au sein des géographies des
sexualités, et certains spécialistes critiques mettent l’accent sur les pratiques d’exclusion
concernant certains sujets spécifiques « non désirés ». Cependant, la littérature a ignoré
le rôle de l’une des principales sources de biais et de discrimination chez les hommes
homosexuels : la séropositivité pour le VIH. Le document vise à combler cette lacune en
montrant comment les zones géographiques s’inscrivant dans l’homonormativité et les
trajectoires de migration des hommes homosexuels séropositifs se chevauchent souvent. Le
document construit un récit diversifié et localisé d’espaces homonormatifs en tant qu’es-
paces privilégiés (relatifs) et d’inclusion tout en observant les expériences et les pratiques
quotidiennes des migrants séropositifs italiens et français à Barcelone, la capitale catalane.
Lorsqu’il examine les pratiques quotidiennes, l’article se concentre sur trois caractéristiques
généralement associées à l’homonormativité néolibérale : individualisme ; privatisation,
domestication et hygiène de la vie sexuelle ; exaltation du couple. Méthodologiquement,
les résultats du travail effectué à Barcelone en 2014 comprennent 16 entretiens approfondis
avec des immigrants italiens et français homosexuels atteints du VIH.

Mots-clés: homonormativité; Barcelone; stigmatisation; individualisme; domestication
de la vie sexuelle
Inclusion in the homonormative world city: 
The case of gay migrants living with HIV in Barcelona Cesare Di Feliciantonio

Summary

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1. Introduction

Amsterdam, Barcelona, Berlin, London, Madrid, Paris: these are just some examples of the cities around Europe that have become ‘world gay cities’ in recent decades, attracting thousands of gay and lesbian tourists and new residents, and hosting mega-events for the ‘pink consumer’. With increasing international competition to attract investments and capital, entrepreneurial city governments have invested in the promotion of Gay Villages and ‘rainbow’ events, including Pride festivals, as markers of the cosmopolitan and tolerant nature of the “wannabe global” city (e.g. Binnie and Skeggs, 2004; Rushbrook, 2002). The triumph of this entrepreneurial model of urban governance occurred alongside the affirmation of a “new homonormativity”, a concept introduced by Lisa Duggan in 2002 that rapidly came to include all the issues concerning the relation between urban LGBT communities and neoliberalism. Focusing on how specific subjects claim (and obtain) access to conservative state and market institutions, the multiple contributions to this debate have highlighted the dynamics of selective inclusion and privilege driving homonormativity, race and class/consuming capacity representing the main sources of discrimination and exclusion (e.g. Collins, 2009; Elder, 2004; Nast, 2002; Puar, 2002; 2006; Richardson, 2005; Visser, 2008).

When reviewing the construction of the notions of inclusion and exclusion in these studies, it is astonishing to register the lack of interest and consideration for what has been one of the most historically relevant issues of discrimination and exclusion towards gay men: HIV-AIDS. Activists and scholars denounced the ways in which HIV-AIDS was used to promote homophobic discourse, hate and discrimination (e.g. Cadwell, 1991; Christiansen and Hanson, 1996; Herek and Glunt, 1988). Despite the improvements in therapies and life expectancy for people living with HIV, HIV-related stigma remains pervasive (Elmore, 2006a; Murphy et al., 2016; Parker and Aggleton, 2003). However we do not find any serious engagement about inclusion/exclusion, othering and discrimination towards HIV-positive gay men in the vast literature on homonormativity.

The aim of this paper is to try to start to fill this void by showing how the geographies of homonormativity and the migration paths of gay men living
with HIV often overlap. The main argument developed is that the homonormative ‘world gay city’ can be a welcoming place for gay men living with HIV, serving as the place to re-imagine the self, experience new social and communal life avoiding prejudice and discrimination thanks to an inclusive social environment. The paper builds on those studies that have shown how migration plays a central role in the life experiences of HIV-positive people for different reasons: i) escaping bias/discrimination; ii) finding more services available; iii) receiving support and care from people they love (e.g. Buehler et al., 1995; Di Feliciantonio, 2018; Ellis, 1996; Elmore, 2006b; London et al., 2004; Tatum and Schoech, 1992; Wood et al., 2000).

By accounting for the overlapping geographies of homonormativity and HIV-positive gay migration, the paper questions issues of inclusion/exclusion underpinning most literature on homonormativity. Inspired by recent studies in gay migration literature1 focused on the situatedness of the migratory experience (e.g. Di Feliciantonio and Gadelha, 2016; Gorman-Murray, 2007; 2009; Lewis, 2012; 2013; 2014), the paper builds a diversified and situated account of homonormative spaces as spaces of (relative) privilege and inclusion by looking at the everyday practices and experiences of Italian and French gay migrants living with HIV in Barcelona, the Catalan capital. By emphasizing the role of place in redefining exclusion and inclusion, the paper follows recent geographical criticisms addressed towards accounts on homonormativity as often de-contextualized and tending to build monolithic and uniform narratives (e.g. G. Brown, 2009; 2012; Browne and Bakshi, 2013). In order to destabilize all-encompassing analyses, the paper shows how HIV-positive gay migrants representing the homonormative model in Barcelona experience a variety of practices and values that challenge some of the basic ideas usually associated with neoliberal homonormativity, notably individualism; privatization, domestication and sanitization of sexual life; exaltation of coupledom.

The paper is the result of research aimed at investigating the migration paths of Italian and French gay men embodying homonormativity in Barcelona, a prominent ‘gay world city’ with a well-known gaybourhood, the centrally-located GayXample (the name being a combination of the words gay and Eixample, the neighbourhood’s actual name), and hosting several international events (like the Circuit Festival every summer). Before presenting the structure of the paper, two considerations are needed to facilitate international readers who might not be familiar with issues related to HIV in Southern Europe. The first is the need to take into account the intra-EU nature of the migratory paths under scrutiny, where it is relatively easy to migrate. Secondly, the three countries and the cities of provenance/destination considered are homogeneous in terms of welfare state provisions for HIV-positive people who can easily

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1. This literature often privileges the use of the term “queer migration” in order to include different forms of sexual dissidence (e.g. Gorman-Murray, 2007). However, because the research project has involved only self-identified gay men, in the paper I will refer to “gay migration”.
access antiretroviral therapies (ARTs) free of charge. This marks an innovative contribution with respect to those studies focusing on the migration of people living with HIV towards big cities to find services that were not available in the places where they were living (e.g. London et al., 2004).

The remainder of the paper is made up of five sections. In section 2 I introduce the research field and discuss the research methodology, showing both its potential and limits. In section 3 I briefly review the literature on homonormativity, discussing recent geographical criticisms and highlighting the lack of attention devoted to HIV as a factor of inclusion/exclusion. Section 4 shows how Barcelona welcomes ‘homonormative’ HIV-positive gay men who move there to escape “felt” stigma. By focusing on everyday practices of the participants, in section 5 I challenge three of the main characteristics usually associated with homonormativity: individualism; privatization, domestication and sanitization of sexual life; exaltation of coupledom. In the final section I summarize the main argument of the paper and highlight some main research questions about HIV-positivity and the situatedness of homonormative practices that future research should take into account.

2. The research field, methodology and its limits

The triumph of a “Barcelona model” of urban governance combining urban regeneration, redistribution measures and citizens’ active participation/consensus has been widely acknowledged in the literature (e.g. García Ramon and Albet, 2000; Gonzalez and Healey, 2005; Monclús, 2003). In the restructuring of the city economy, services and tourism have emerged as the drivers of growth, leading to an increasing pressure on housing and real estate, with the ‘touristification’ of the city centre becoming a main concern for city residents (e.g. Degen and García, 2012). However, little attention has been devoted to analysing the increasing appeal of the city to tourist and migrant “global gays” (Altman, 2001)\. In fact, Barcelona has become a primary ‘gay world city’, and the Circuit Festival is a global event attracting tens of thousands of gay men every summer. In terms of spatial visibility, the GayXample represents the main openly gay ‘gayborhood’ (M. Brown, 2014) with a spatial concentration of leisure activities aimed at a gay audience (bars, saunas, gyms, shops, etc.), although the resident population is very heterogeneous because of its considerable size. The average attendees of the Circuit and the other main gay venues of the city, as well as the imagery of masculinity promoted by them, embody the model of homonormativity characterized by the importance of consumption in the formation of identity, a strong dedication to body shape and looking masculine, and increasing depoliticization.

Barcelona has one of the highest HIV-rates in Spain, with men who have sex with men (MSM)\textsuperscript{3} being over-represented; a comparative study

2. For an exception see Peixoto Caldas (2010).
3. Since I am discussing official data, I use the established medical jargon.
of six European cities found that it had the highest HIV prevalence among MSM (17%) (Mirandola et al., 2009). To address this issue, since 2006 the city hosts the BCN checkpoint, a community-based centre located in the GayXample offering free HIV testing, peer counselling and support, as well as providing information for people newly diagnosed with HIV. The staff at BCN Checkpoint is composed of gay men, including some living with HIV; the rationale for this is the creation of a supportive environment for people living with HIV to interact with peers. The work of Meulbroek et al. (2013) has shown the success of the project, measured by the number of people who have tested HIV-negative and return to test and people who have tested HIV-positive and are successfully linked to the official health care system. In relation to HIV-stigma, we can consider the PhD work of Fuster Ruiz de Apodaca (2011) about the pervasiveness of stigma and discrimination in every domain of social life throughout Spanish society, including health care.

The paper results from fieldwork conducted in Barcelona in the second part of 2014 (August-December). The original aim was to investigate the migratory experiences towards Barcelona of two national gay communities: the French and the Italian. During the fieldwork, I conducted 16 interviews; 9 of the participants were Italian, and 7 were French; all of them were living in big urban areas before moving to Barcelona after 2008 (Marseille, Montpellier and Paris in France; Bologna, Naples and Rome in Italy). The research focused on transnational inter-urban gay migration, thus going beyond the rural-urban perspective characterizing most studies on gay migration. The lifestyle of all the participants seemed to embody the ‘homonormative’ model: all of them devoted effort and energy to sport and body shape (some statements on this topic being “you need a nice body in the gay world” and “if you look good, your life will be easier in this city”), 15 out of 16 declared they were not interested in (gay) politics. Moreover, the majority (13/16) made reference to the importance of being masculine and the lack of desire towards effeminate men; and, with respect to coupledom, 11/16 stated that they would like to get married one day and one quarter would like to have children.

After the seventh interview I realized that all the men I had interviewed were living with HIV and their narratives assigned a great role to the change in their HIV-status as a driver of migration. I therefore decided to explore this issue in greater depth, adding an extra criterion in the selection of participants, i.e. having become HIV-positive before moving to Barcelona. All the participants had been living with HIV for less than 10 years at the time of

4. Research participants were recruited through specific advertisements on websites/apps (Gay Romeo, Grindr) and through snowballing. The mean age of the participants was 33.4, with the youngest being 27, and the oldest 42. In terms of class, the spectrum of the participants is varied, the majority being low-middle class, working in very precarious and low-paid jobs in the services sector.
the interview (the ‘oldest’ in terms of HIV-status from 2006); this is relevant to consider since it implies that all of them have accessed effective ARTs5.

The data collected have two main limits. The first is the focus on intra-EU migration; for the research participants migrating and accessing health services (including ARTs) in the new destination was relatively easy. A focus on non-EU migration of gay men living with HIV would have led to completely different results because of the difficulties in accessing legal status and the persisting moral panic in relation to HIV being transmitted by specific ethnic communities (for an example see Pezeril and Kanyeba, 2013). The second limit concerns the racial and ‘generational’ profile of the participants. All of them but one (French) are white; this is an important factor to bear in mind when considering notions of inclusion/exclusion, considering the persistence of racism/xenophobia in Spain (e.g. Cea D’Ancona and Valles Martínez, 2011). The ‘generational’ bias is strictly connected to the drug-regime: all the participants have been treated with effective ARTs with limited side effects, the consequences of the therapy in terms of ‘visibility’ being extremely reduced. This is a crucial aspect to take into account when discussing HIV-related stigma; for instance, previous research has shown that HIV-related lipodystrophy makes HIV-status a “public spectacle” (Persson, 2005: 239, cited in Berg and Ross, 2014: 187), thus enhancing the possibilities of discrimination.

Despite these limits, the group analysed is still relevant because HIV-related stigma (not to mention homophobia) remains prominent for European gay men (e.g. Nachega et al., 2012; Stutterheim et al., 2009). It is important to re-assess that in this paper I am not arguing that there is no or less homophobia or HIV-related stigma in Barcelona: it is not a matter of ‘ranking’ but rather it reflects the perceptions of the HIV-positive gay men involved in the research. Discrimination and stigma (and their perception) work on many different levels, so looking at the everyday experience of them through in-depth interviews represents a privileged research method to gain a better understanding of how they work and affect people’s life decisions.

3. Situating homonormativity, rethinking inclusion and exclusion

The increasing access for LGBT people to national state institutions, such as marriage and the army, across Western countries and beyond has been conceptualized by queer critics as “homonormativity” or “the sexual politics of neoliberalism”, a concept originally introduced by Duggan (2002) in relation to US politics. The concept registered a rapid uptake, with scholars discussing its emergence in very different contexts like Buenos Aires (Kanai, 2015), San Francisco (Mattson, 2015) and Singapore (Phillips, 2014). When reviewing this widespread debate, two main perspectives, which are closely

5. At the time of the interview, 14 out of 16 declared they were on ARTs; the others had started but had decided to stop them.
related, can be found. On one side, those analysing homonormativity as a ‘top-down’ political strategy from the institutions of neoliberal governance to create new sources of profitability (e.g. Agathangelou, Bassichis and Spira, 2008; Bell and Binnie, 2004; Kanai, 2015; Rushbrook, 2002), and on the other, those emphasizing its ‘lived’ dimension in everyday practices, represented by the increasing importance attached to consumerism, the privatization and domestication of sexual life and the exaltation of coupledom (e.g. Collins, 2009; Fung, 2013; Lippert, 2010; Searle, 2014). In this respect, the work of Andersson (2011) on Vauxhall (London) marks a notable exception, showing how desexualisation and sanitization of gay life did not take place in this internationally-known area.

Against the assumption of homonormativity as a global process with the same characteristics everywhere, critical voices emerged in geography and political economy. Building on a diverse economies approach, G. Brown (2009) highlights the persistence of diverse gay economic practices and spaces in the metropolitan areas of the Global North not built around the (capitalistic) market. He argues that by stressing the (international) uniformity of the “sexual politics of neoliberalism”, scholars dealing with homonormativity under estimate the place-based (and social, cultural and historical) differences concerning the governance of (homo)sexualities. Such a focus on place in the critique of homonormativity has been reinforced in another paper (2012), where he argues that theories of homonormativity have overlooked “the lived experience of many lesbians and gay men outside of the metropolitan milieu in which these theoretical debates circulate” (p. 1067). In this vein, in their book about LGBT life in Brighton, Browne and Bakshi (2013) have re-asserted the primary role of place for the working and reproduction of (homo)normativities, since they are not fixed and immutable. More recently, Di Feliciantonio (2015) has addressed a political economy-grounded critique of homonormativity as it builds a monolithic account of neoliberalism and its sexual politics. Borrowing Ong’s conceptualization of the interplay between “neoliberalism as exception” and the “exceptions to neoliberalism” (2007), he has shown how the same interplay characterizes its sexual politics.

Despite the different positions, one of the main characteristics of all the literature on homonormativity is the focus on exclusion, while the inclusion in national/urban citizenship neoliberal agendas is selective and based on the reproduction of heteronormative values (e.g. Oswin, 2012, Searle, 2014). In this respect, Binnie (2004b) has defined as “queer unwanted” all those who fail to embody the homonormative prototype. Several subjectivities belong to this category, with race and class/consuming capacity being the primary lenses of exclusion (e.g. Collins, 2009; Nast, 2002; Puar, 2006; Richardson, 2005; Visser, 2008); moreover, the exclusion of transgender people (Stryker, 2008; Vitulli, 2010) and sex workers (Hubbard, 2001; 2004; Ross and Sullivan, 2012) has been discussed.

However, when reviewing these studies on exclusion from homonormative visibility, it is surprising to register the complete lack of consideration
for the situation of people with HIV. To give an example, we can consider the clear categorization analysed by Collins: “homonormativity—like heteronormativity—is an exclusionary process; inclusion is for select bodies—white, middle-class, consumerist, Western, and often gay male bodies who have access to the consumer “freedoms” of the West and who have more to gain from respectable performances of gay masculinity” (2009: 467). What happens to the bodies and lives of HIV-positive people? Are they included or excluded from homonormative ‘respectability’? The response coming from these diverse contributions relies on a complete removal of HIV-positive lives. This appears at least paradoxical for a debate developed by scholars whose main theoretical and political engagement is rooted in the critique of the politics of AIDS.

Despite the rapid improvement in therapies available in terms of both life expectancy and quality of life/side effects, HIV-related stigma continues to dramatically affect people’s lives and well-being (e.g. Elmore, 2006a; Murphy et al., 2016; Parker and Aggleton, 2003), including young people from the so-called “post-gay” (G. Brown, 2004; Ghaziani, 2011) and post-AIDS generation (Fielden et al., 2011). Moreover, legal discrimination in travelling and migration is still widespread, with more than 60 countries currently restricting freedom of movement for people living with HIV/AIDS. To give some examples, in the US restrictions on travel and migration of people with HIV were lifted only in 2010; in 2015 the ‘global city’ of Singapore lifted the restriction on travel but not on migration; since 2011, more than 80 people have been deported from Russia because of HIV-positivity; in Australia HIV testing is still compulsory for permanent visa applicants. Several studies showed how HIV-related stigma deeply intersects with other lines of exclusion and discrimination, such as race, gender, homophobia and class, among others (e.g. Arnold et al., 2014; Loufty et al., 2012).

HIV-related stigma combined with persisting homophobia produces what has been defined as “the second closet” for gay men (Berg and Ross, 2014), leading several of them to migrate (Buehler et al., 1995; Di Feliciantonio, 2018; Ellis, 1996; Elmore, 2006b; London et al., 2004; Tatum and Schoech, 1992; Wood et al., 2000). However, most studies on migration by people living with HIV rely on quantitative methodologies, and thus do not explore the complexity of factors shaping the decision to migrate. As argued by M. Brown (1995: 162), they usually analyse and map the geographies of the virus rather than the people living with it. To gain a better understanding of the complexity of factors shaping the decision to migrate for HIV-positive gay men, including HIV-related stigma, in a recent paper (2018) I highlighted the role of different factors in shaping the decision to migrate for HIV-positive gay men, notably sexual desire and the imagery of the big city; the configuration

7. Source: ibid.
of the welfare regime allowing free access to ARTs; access to employment in the services sector; and the absence of strong ties in the new city.

4. Escaping stigma, moving to the ‘world gay city’

To gain a better understanding of the role of stigma in driving the decision to migrate for HIV-positive gay men, it is important to consider the distinction made in the academic/clinical debate between “felt” and “enacted” stigma (e.g. Bogart et al., 2008; Green, 1995). “Enacted” stigma refers to openly discriminatory acts (and norms, as seen in the previous section); “felt” refers to the sense of stigma perceived and internalized by the subject, in the case of HIV being associated with a sense of moral condemnation (for ‘risky’ and ‘despicable’ sexual behaviour). As documented in the literature, HIV-stigma often leads to poor mental health, notably depression, anxiety, and loneliness (e.g. Courtenay-Quirk et al., 2006). According to Berg and Ross (2014), one of the main strategies adopted by HIV-positive gay men to respond to stigma is the “second closet”, i.e. hiding HIV-positivity in order to avoid negative social condemnation, thus protecting themselves from harm. This is a painful and psychologically taxing process that ends up reproducing the stigma associated with HIV-positivity. However, their study shows that during the life course the experience of stigma can be alleviated by activism, with denial and shame being replaced by empowerment and self-esteem. Building on their study, I have shown that migration is an active strategy to escape the “second closet” for HIV-positive gay men, offering the possibility to establish new ties and ‘start a new life’ (Di Feliciantonio, 2018).

Adding to this work, in this section I show how the research participants escaped “felt” stigma and the “second closet” by moving to a ‘gay city’ they perceive(d) as open and welcoming towards HIV-positive gay men. In fact, cities like Barcelona (but also Berlin, Brighton, London and Paris) appear as welcoming to them when considering both the services available and the attitude of people towards HIV. I here refer not just to doctors and other health services providers, but also to the gay community in general. However, the peculiarity of the movements analysed in the research, i.e. transnational inter-urban gay migration, calls for a further reflection: even when living in cities with a well-established gay community and widespread services related to HIV (like Montpellier and Paris in France or Bologna and Rome in Italy), people can decide to move towards a ‘gay world city’ in order to escape the feeling of stigma and bias. In the life histories of the research participants, “felt” stigma was depicted as pervasive in the social contexts in which they were living, leading them to move to start a sort of ‘new life’.

To best highlight this process, I here introduce the life history of VT, an Italian gay man who grew up in Southern Italy, then moved to Naples where he lived for several years – he graduated from university there – before moving to Barcelona where he had been living for 4 years at the time of the interview. VT discovered he was HIV-positive in 2008 while living
in Naples; he describes the institutional and social attitude towards HIV in Naples as follows:

The doctor was a nice person, a bit cold but s/he explained that I could access psychological support if I wanted, (…), I did not feel any bias or like I was being blamed, s/he just tried to appear calm and explained to me that through treatment I could stay well for a long time. (…) I think the main problem in this situation is yourself, your personal relations, it is very difficult to disclose the situation to people you have known for a long time, and at the same time you don’t want many people to know because the reactions could be dangerous, (…), I had different experiences when disclosing it to gay people, (…), what struck me was the amount of people somehow blaming you, making you feel like ‘you are not a responsible and reliable person’. (Personal interview, November 2014, author’s translation)

For VT, leaving for Barcelona was something he needed to “start re-imagining my life”. However, his decision came at a time of deep financial and economic turmoil for the Catalan capital, with unemployment, the housing crisis and poverty affecting an increasing number of people. So why did he choose Barcelona?

I had been here on holiday in the summer of 2009 and found an amazing atmosphere, I had a lot of sex in just one week and found an amazing attitude towards people with HIV. (…) That week was a sort of experiment for me: I disclosed my status to all the partners I found through GayRomeo. I did not have any issues: many disclosed their positive status too, others said ‘no problem, we’ll use condoms’. (…) I was tired of my precarious employment conditions in Naples so I opted for Barcelona hoping to experience a new life in a new city. (ibid)

How was the migratory experience? What is his perception of the city as a HIV-positive gay migrant?

The city is vibrant and people are so open and friendly, moving here has been so easy from the beginning. (…) Working conditions are not the best and I do not have a permanent job but I just feel happy to live here, I feel no pressure, no social expectations. (…) Everything has been great so far as regards HIV, accessing treatment is easy, my friends know about it, even my colleagues, (…) it is simply one of the thousands of things in my life, (…), I simply love living in this city. (ibid)

As stressed also by the other participants, Barcelona is a welcoming city for gay men living with HIV despite the material difficulties experienced in the city in recent years. However this welcoming atmosphere is not enough to

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8. It is important to stress that the Italian health public system is strongly decentralized and uneven so experiences and services can be very different from one place to another.
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undermine the hegemonic narrative about homonormativity in the ‘world gay city’. In fact all the research participants are quite young, in shape, good-looking (their HIV-status is ‘invisible’ because of the lack of side-effects of ARTs) and come from ‘close’ EU countries (but do not have a large spending capacity, as most of them are employed in precarious jobs in the services sector). To challenge the hegemonic narrative of homonormativity I proceed by focusing on their everyday situated experiences and practices in the next section.

5. Challenging homonormativity through situated practices

In this section I consider the everyday practices of the ‘homonormative’ research participants as a way of highlighting the diversity of their practices and values, thus contrasting monolithic and reductionist accounts of homonormativity. I focus on three specific characteristics usually associated with homonormativity: individualism; privatization, domestication and sanitation of sexual life; exaltation of coupledom. I discuss them individually using the life histories of different research participants in order to make my argument clearer.

5.1. Challenging individualism

Homonormative gay men are usually depicted as egotistical individuals seeking only their own pleasure and satisfaction through consumption, symbols of neoliberal rationality and its celebration of personal success. On the contrary, the idea of ‘failure’ is usually associated with being ‘not man enough’, thus reinforcing the heteronormative bias assigning an inferior position to femininity (e.g. Searle, 2014). As seen in section 3, G. Brown (2009) has opposed such a reductive narrative by considering the plurality of forms of collective (social and economic) gay life in the metropolis.

The findings of my research support G. Brown’s argument: engaging with others, creating new forms of communal life and encounters have an important role in the lives of the research participants. They all stressed how feeling welcomed and accepted when disclosing their HIV-status can be a very positive experience favouring the creation of new social relationships. I here consider the case of JJ, a French man, who lived in Paris before moving to Barcelona (at the time of the interview he had lived in the Catalan capital for 3 years). In JJ’s self-narrative, sport, notably volleyball, has been the main vehicle for sociability, offering him the opportunity to establish strong personal ties. In his own words:

When you move to a new city, it is never easy to make new friends, I knew very few people in Barcelona when I arrived, (...) when I was living in Paris I had never tried to be part of a gay sports group, but here I thought it could be a nice way to meet people, (...), it proved to be the right decision! I have met my best friends here through the volleyball team. (...) I disclosed my HIV status pretty soon after one of my friends did it before going to a party. (...) My friends are a great part of my life, as a gay migrant I think my friends are my
everyday family, I feel so lucky to have met such nice people who make me feel like I’m never alone. (Personal interview, October 2014, author’s translation)

The importance of social relationships and engagement with others does not concern only personal friendships, but also forms of civic and social engagement. Barcelona is perceived as a supportive city where people become socially engaged in many different forms:

I think it is great to feel you are part of a community, we take part in many different things, (…), I usually volunteer for a couple of projects supporting homeless people and older gay men living with HIV/AIDS. (…) Solidarity is so strong in Barcelona, people are engaged in many social activities, there is a lot of activism, I’m really happy to live in a city where people are so engaged”. (ibid)

We can see how JJ’s ‘homonormative’ lifestyle (he practices sport at least four times a week; he goes to gay clubs and parties at least once a week; he travels at least three times per year to attend big gay events and parties around Europe; he avoids “slim feminine guys” since he openly presents himself as a bottom and looks for “very masculine, well-built men”) encounters the widespread activism characterizing Barcelona; individualism and isolation are replaced by civic engagement and strong social ties.

5.2. Challenging privatization, domestication and sanitation of sexual life

Following the zero tolerance politics and the closing of commercial sex venues in New York in the 1990s, several scholars emphasized the desexualisation and sanitation of gay urban spaces across Western countries (e.g. Bell and Binnie, 2004; Binnie 2004a; Rushbrook, 2002). In relation to this, critics of the “new homonormativity” have argued that gay sexual life has become increasingly privatized and domesticated, with the use of Internet and hookup apps playing a central role in this shift (e.g. Weiss, 2008). Against this narrative, Andersson (2011) showed how specific sites and neighbourhoods, such as Vauxhall in London, have experienced a completely different path, featuring increasingly commodified forms of public (bareback) sex and recreational drug use. Building on his anti-pathologizing perspective that rejects homophobic categories such as ‘death wish’ and ‘self-hating’ to analyse recreational drug use and bareback sex, I here show how the life histories of the research participants express the same values. In fact 15 out of 16 declared they usually practise bareback sex (10 of them adding that they practise only bareback), 14 are frequent recreational drug users (at least once a week); in terms of sexual promiscuity (measured by the average number of different sexual partners per week), more than half of them reported having more than 4 sexual partners per week.

To best show how Barcelona offers multiple possibilities for a newcomer’s sexual life in terms of places, practices and people to have sex with, I here consider the case of VR, an Italian man. According to him, HIV-positivity in Barce-
lona does not preclude sexual encounter at all, giving him a strong sense of social
acceptance and respect. On the contrary, his narrative emphasizes the difficulties
of being HIV-positive in Rome:

I felt a bit depressed, I was not openly blaming myself but I felt like I had been
so superficial, (…), now I know it was largely influenced by the very negative
attitude around HIV in Italy, even among gay people. (Personal interview,
October 2014, author’s translation)

Concerning sexual partners, VR’s account is in line with the experience of
VT discussed in section 4; in fact, he did not find any prejudice from potential
sexual partners, including HIV-negative men. In his words:

When I got here I still found it difficult to disclose my status, but then I realized
how so many people were sharing it, even on their Romeo profiles, (…), it was
a bit of a shock for me, but when I started to try and saw that people reacted in a
very open and comforting way, I felt so relieved, (…), in Barcelona there are so
many guys you can have wild sex with, (…), as a person living with HIV I think
it is a very comfortable place to live. (…) I often have sex with HIV-negative
guys, here people are very well-informed so since I’m on therapy and undetect-
able, people are comfortable having bareback sex with me. (ibid)

These multiple possibilities of sexual encounter occur not just at home
because of the proliferation of hookup apps. Public space still plays a very
relevant role in the sexual experience of gay people: the beach, the sauna and
bars provide multiple possibilities of encounters and sex, often in a continuum
with the use of digital apps. In fact, “in Barcelona you have the feeling that
any moment, any place is the right one to hook up and have fun, (…), sex is
very important in my life, for me it is a great way to connect with people, it is
definitely one of the main reasons I moved to Barna” (ibid).

In VR’s narrative, the sauna and the beach have a very special role:

Meeting sexy guys at the beach drives me crazy, all those sexy naked bodies,
you know? It’s just a matter of taste, you can have any type of guy and any
type of fun! (…) I go to the sauna when I’m really horny and want to have
wild fun, (…), I usually don’t go home without having sex with 7 or 8 guys
at least, (…), I adore orgies in the sauna. (ibid)

Similar to what Andersson described in Vauxhall (2011), in Barcelona gay
sexual life does not appear to be privatized, domesticated or sanitized. The city
offers multiple possibilities for (increasingly commodified) encounters and sexual
fun. HIV-positive men are not excluded from this process. More interestingly,
VR’s narrative traces a tight connection between social encounter and sociability:

I like being in touch with people I have great sex with, especially those who
live in the city, (…), with two of my best friends it started as a sexual encounter
in a sauna and now they are very special to me. (…) After the sauna I often
invite two or three people I met there back to my place, maybe for the day, maybe more. *(ibid)*

Echoing analyses about the pre-Giuliani times in New York where (commercial) sexual encounters, sociability and community building were closely connected (e.g. Berlant and Warner, 1998), leading Floyd (2009) to acknowledge them as forms of “queer commons”, the experiences of the research participants show how sex can still be a primary vector of encounter and community formation in the ‘homonormative’ city.

5.3 Reframing (the exaltation of) coupledom

Queer scholars and activists have portrayed access to marriage and adoption as the main markers of homonormativity and the exaltation of heteronormative values (e.g. Croce, 2015; Santos, 2013). In this respect, the work of Wilkinson (2013) has shown how in the UK citizenship is based nowadays upon whether or not a person is in a coupled relationship, coupledom (both hetero and homo) being naturalized and privileged. Although the hegemony of the public discourse around coupledom is undeniable, I aim here to show how looking at the everyday practices around coupledom gives a more diverse and complex account. At the time of the interviews, only 3 out of 16 interviewees had a boyfriend, but the majority of them (11) emphasized the importance of being part of a couple during their interview.

To best highlight how coupledom, marriage and parenthood are framed, I consider the self-narrative of TL, a French man, who had moved to Barcelona from Montpellier 4 years before our interview because he was in love with a man living there. At the time of the interview they were still together, sharing a flat and a dog. When asked about the decision to live together, TL does not depict it as ‘the triumph of love’ or as something done because of social expectations. On the contrary, he frames it as a form of help, care and solidarity:

*(name of the boyfriend)* was evicted from the house he owned because [he was] unable to repay the mortgage, he was earning very little money and still had to repay his debt with the bank, so I offered him to stay at my flat, 

*(…)*, I'm not rich but the rent is affordable so I just felt it was the best decision, I did not want to see him going back to his parents’ place in the province. 

*(…)* For me, being part of a couple is feeling that you can count on me and I can count on you. *(Personal interview, September 2014, author’s translation)*

As regards marriage, TL states that he would like to marry his boyfriend one day. When I asked him about the reason, once again his response was much more grounded in a material explanation than ‘the triumph of love’. In his words:

I see marriage as sharing your engagement with that person with others, it is a big celebration of two people being together, *(…)*, of course there are also
many important material aspects, like the mortgage, (...) I would love to be able to buy a house one day and live there with my boyfriend and some of my best friends, but I know I would never be able to do it by myself, (...), coupledom and all these big steps [referring to the mortgage] are forms of mutual trust and support, I have never wanted to be alone when making big steps in my life. (ibid)

In the same vein, TL frames his desire to have children one day as a form of solidarity and engagement with the well-being of another person:

I think it is very important and rewarding to have kids, you know when I was a child I really wanted to have a parent who accepted and encouraged me to be what I felt, someone you admire and trust (...), I would love to be that parent. (ibid)

Reframing coupledom and being together also involves a consideration of sexual and social life. Is their sexual life ‘respectable’, privatized and fully centred on each other or are they also involved in the ‘wild’ scene discussed in the previous sub-section? TL’s response is completely in line with previous narratives: his sexual life is central in his experience of the city and sociability, and both he and his boyfriend like to experiment. In his own words:

Many people occupy a special role in my life, (name of the boyfriend) is one of them, but I cannot reduce my entire life to him, (...), we often do not go out together, I don’t want to have him around all the time! I love that he has his life, his community and friends and I have mine, can you imagine how boring it would be to live the same life as your boyfriend? (...) Sexual life in this city is so great, why should I avoid contact with other guys? For me it has always been a matter of desire. There are periods when I just want to be with (name of the boyfriend), and other periods when I feel curious to explore the many sexy guys all around me. (ibid)

In this regard, it is relevant to stress how the private space of the couple’s house, usually portrayed as the triumph of neoliberal homonormativity (Lippert, 2010), is not a closed space but the centre of the couple’s sexual experimentations. In fact, TL does not like saunas very much because of the price charged, so he and his boyfriend prefer to use their house to organize bareback group sessions. He states:

It does not happen that much since our flat is quite small, but I love having lots of people around who stay the night and the next day. (...) We really enjoy group sex, you can have great discussions while having hot fun, (...), we keep in touch with most of the people, (...), it is a matter of creating a good social vibe and sharing the moment with others. (ibid)

TL’s account therefore highlights the need not to create monolithic narratives about coupledom and marriage, but diverse meanings attributed to being
part of a couple. Moreover, his experiences reveal how their social and sexual life is not confined to them as a couple, but it is open to encounter and experimentation. Although living as a couple, homonormative HIV-positive gay men do not express a privatized and domesticated emotional and sexual life.

6. Conclusions. Considering HIV-positive lives, situating inclusion/exclusion

Homonormativity has become a hegemonic concept within geographies of sexualities and critical social sciences in general. Scholars account for its emergence in very different contexts all around the world and emphasize exclusionary practices towards specific ‘unwanted’ subjects, with race and class/consuming capacity being the primary sources of exclusion. However, these critical scholars have ignored HIV-positivity as a factor of inclusion/exclusion, which is a serious mistake considering the persistence of HIV-related stigma (both “felt” and “enacted”). In this paper I have tried to start to fill this void by showing how the geographies of (metropolitan) homonormativity often overlap with the migratory paths of HIV-positive gay men. By analysing the experiences of French and Italian migrants in Barcelona, I have shown how the homonormative city is a specific place of inclusion for those stigmatized bodies and lives that often opt for “the second closet”. The life histories of the research participants emphasize the openness of the city, offering multiple possibilities for encounter and sexual adventure, with sero-disclosure not representing a source of discrimination. By accounting for these multiple possibilities, my main aim has been to undermine the monolithic and reductionist logics underpinning the debate about homonormativity. In fact, processes of inclusion and exclusion are place-specific, with a multiplicity of factors, histories and social relations shaping them. Moreover, the diversity of everyday life experiences cannot be reduced to universal trends: ‘homonormative’ gay men engage in multiple practices and relations that go far beyond i) individualism; ii) the privatization, domestication and sanitization of sexual life; and iii) the exaltation of coupledom.

When assessing the role of HIV-related stigma in driving the decision to migrate, my analysis is not aimed at building a causal and deterministic relation; on the contrary, the use of qualitative research methods offers the possibility to explore the complexity of factors shaping migration. Housing and working conditions, the accessibility of ARTs and the configuration of the health system, (sexual) imagery and desire: they all play an important role in determining the choice to relocate as well as the forms of sociability and encounter in the new city. As critical scholars we need more place-sensitive, non-pathologizing and diverse accounts to better understand the complexity of stigma and dynamics of inclusion.

Building on this analytical effort, future research and analyses on homonormativity and its exclusionary logics should start to include HIV-positivity. How is the HIV-positive body included in the homonormative logics? How does HIV-positivity intersect with other forms of bias and discrimination in
determining inclusion? How is the dismantling of the welfare state, including health, in several Western countries impacting on the migration paths and the everyday experiences of HIV-positive gay men? Which spatialities and social relations are shaped by the use of recreational drugs combined with bareback sex? These are only some of the multiple questions we need to address in the near future to avoid fixed and unidirectional accounts that ignore the ‘lived’ and situated nature of homonormativity.

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