INTIMATE recommends

Significant developments regarding the ways in which people decide to be or remain partnered demand urgent adjustments in law and social policy in order to include same-sex and consensual non-monogamous relationships.

+ **Developing a relational-fair welfare:** decentring coupledom as the main locus for family-based law and social policy.

+ **Queering kinship:** political, legal and conceptual reframing of what *family* and *kinship mean*.

+ **Adequate training:** to prevent and fight against homophobia, transphobia and mononormativity across different sectors of society (e.g. schools, hospitals, prisons, etc.).

+ **Patient-centred medical care and information:** courses included in Medical Training addressing sexual orientation, gender identity and relational diversity, especially in the fields of General Practice, Gynaecology and Psychiatry.

+ **Promoting sexual health:** adequate information provided to patients who search for safe-sex between women or safe-sex with multiple partners.

+ **Strengthening the welfare state:** economic precariousness hinders the prospects of autonomous, self-determined intimate lives.

+ **Promoting queer public sociology and scholar-activist work.**

+ **Encouraging social visibility of transgender, intersex and/or older LGBTQ people** in lesbian and/or non-monogamous relationships, with a particular emphasis on the media and popular culture.

+ **Ensuring schools are safe spaces** for sexually and gender diverse students and staff.

+ **Promoting pedagogical contents on family diversity** (e.g. sexuality, gender and relational diversity) in the curricula since early childhood.

+ **Encouraging task forces and interdisciplinary networking,** involving parliamentarians, journalists, health professionals, lawmakers, NGOs, students and researchers.

+ **Thinking intersectionally:** identities are not crystalized or exclusionary; they change in the life course; they overlap; multiple belongings require inclusive laws and social policy in all sectors of human experience.

+ **Supporting community spaces:** LGBTQ community spaces should be more and safer, and specific measures should be taken to promote leadership by lesbian or bisexual women and transgender or intersex people.

+ **Raising awareness and demanding action:** the full respect for intimate citizenship, regardless of sexual orientation or relational status, is not a bonus; it is a constitutive element of any democratic regime.

+ **Rethinking citizenship:** data suggest decision-makers and scholars need to change the way in which citizenship is framed and enacted by law, social policy and sociocultural outlets.

intimate

CITIZENSHIP, CARE AND CHOICE
The Micropolitics of Intimacy in Southern Europe
PORTUGAL | SPAIN | ITALY

QUeeRING
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RESEARCH BRIEF 1 2015 2016

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TOPICS AND STUDIES

PARTNERING   2015 > 2016
LESBIAN COUPLEDOM   STUDY 1
POLYAMORY   STUDY 2

PARENTING   2016 > 2017
ASSISTED CONCEPTION   STUDY 3
SURROGACY   STUDY 4
POLITICS OF NAMING A CHILD   STUDY 5

FRIENDSHIP   2017 > 2018
TRANSGENDER AND NETWORKS OF CARE   STUDY 6
LIVING WITH FRIENDS   STUDY 7

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Lesbian Coupledom STUDY 1

Data gathered in the context of women experiencing lesbian coupledom challenges the hypothesis of individualistic lives. Conversely, networks of friends and support hold increasing weight across a range of relational diversity.

¬ Prejudice and discrimination outlive changes in law and social policy;

¬ Importance of a wide range of relationships, instead of increasing individualism and isolation;

¬ Sexual orientation is a dynamic category, under construction, an experience-based floating label;

¬ Multiple categories of personal identity and political belonging: (e.g. LGBTQ, feminism, anti-austerity, animal rights, veganism, etc);

¬ Increasing diversity of relational models: couples living together; couples living together and with friends; couples living apart;

¬ Narratives of resilience towards violent family contexts, street harassment or daily and/or invisible homophobia;

¬ Discriminatory or inadequate situations in the context of medical care, often caused by health professionals' ignorance re: (e.g. non-heterosexual social and intimate experiences);

¬ Centrality of friendship networks, offering mutual care and material support in addition to or replacing families of origin, and particularly important in contexts of acute precariousness;

¬ Marital and/ or couple status influences the decision to *come out* to the family of origin (the existence of what is socially perceived as a stable, life-long, couple-based relationship seems to facilitate the decision to come out);

¬ Monogamy can become a choice after experiencing non-monogamous relationships, and vice versa (fluidity between relational models);

¬ Technology (e.g. dating apps, social networks, chats) plays an important role, especially amongst younger LGBTQ people and/or in contexts in which lesbian friendly places are absent.

Six years ago I applied [to adopt a child], but I'm still waiting. The explanation they gave me was that if they have to choose between a [heterosexual] couple and myself, they will prioritize the couple.
'ALEX' 40-45 YEARS | LESBIAN | LISBON PORTUGAL

I wrote a letter to my parents, about how I felt and about the way they reacted [to my sexual orientation]. [...] Instead of supporting me and trying to understand, they abandoned me. I felt abandoned for a long time in my life.
'ELISA' 30-34 YEARS | PANSEXUAL | MADRID SPAIN

The government should take a step forward regarding these issues [...] for all of those people hiding, who cannot show who they are. [...] I have many heterosexual acquaintances, friends, who go to Pride marches, many supportive people with children, and they help their children to open their minds. This is my victory.
'VITTORIA' 30-34 YEARS | LESBIAN | ROME ITALY

Polyamory STUDY 2

Polyamorous intimate biographies offer new understandings of relationships. Considering it is less common to have only one (sexual) partner throughout the life course, these narratives must be taken into account by policy-makers.

¬ In times in which law and social policy are perceived as too rigid and adverse to change, polyamorous people tend to focus on sociocultural transformations;

¬ Legally-based concerns include pensions, inheritance and care-related rights amongst different partners, such as work leaves and the recognition of non-monogamous forms of filiation;

¬ *Fluid kinship*, as defined by INTIMATE research: blurred boundaries between friends, partners, lovers, ex-lovers, family (e.g. kinship may include a partner's partner);

¬ Centrality of care, both self-care and caring for others, particularly in a context of precarious conditions of employment, housing, health and life. Networks of care often involve current partners, ex-partners and partners of partners;

¬ Personal and relational well-being as a constitutive element of an ethics of care;

¬ Centrality of discourses around authenticity, self-development, personal growth, responsibility, consensus and reciprocity;

¬ Rejection of normative constraints attached to mainstream coupledom. Challenges to relational hierarchies, sexual exclusivity and dominant practices of romantic love;

¬ Refusal of hegemonic models of masculinity and gender-based binary models;

¬ Conceptual fluidity in the use and in the daily management of categories such as polyamory and (consensual) non-monogamies;

¬ Welcoming bisexual people, especially in comparison to the invisibilization of bisexuality within activism and mainstream discourse;

¬ Engaging exchange between academia and social movements, especially in relation to mainstream literature and cultural references (*Ethical Slut*; *Opening Up*);

¬ Importance of safe spaces in activism, virtual outlets and globalized academia as sources for information, support and networking;

¬ Significance of support by peers during processes of coming out (e.g. coming out as poly was reported by participants as being harder than coming out as LGBTQ);

¬ Significance of non-normative sexual communities (e.g. BDSM, kink, etc.).

We don't have any type of representation, we're not visible at all and we don't have any rights. [...] If one of our children ends up in hospital, who gets to be there, who's got that right to be there? And even in situations of separation or death, right? It's difficult to understand what our rights consist of.
'SUSANA' 25-29 YEARS | BISEXUAL | LISBON PORTUGAL

We need more debate and awareness about this not being a temporary phase when you are a student or have just divorced. It can be for some people, it is their right and that is just fine, but this cannot stop just there. This reality has to be integrated in the legal system, parenthood, care related issues, economic and legal rights.
APHRA BEHN EXPERT AND ACTIVIST IN POLYAMORY | MADRID SPAIN

They always accused us [...] that we don't want to construct, we don't want to grow up, we don't want to take responsibilities. Polyamory gave me twice as much responsibility, three times more, as you deal with many emotions, you make mistakes and sometimes you feel you are surrounded by porcelain and you break everything. But, by breaking things, then you fix them, everything gets right, gets rebuilt, and even what was broken becomes stronger.
'NADIA' 30-34 YEARS | BISEXUAL | ROME ITALY

CONCEPTUAL INNOVATION
INTIMATE ADVANCES THE NOTIONS OF

+ **RELATIONAL CITIZENSHIP**
(consensual, non-monogamous) to capture both the disjunctions and possibilities for reframing how we perceive, represent and manage our intimate lives vis-à-vis the state (law and social policy).

+ **RELATIONAL PERFORMATIVITY**
to describe the practices through which intimate relations are socially displayed; intimate relationships depend upon rehearsed scripts that guide interaction and become constitutive of the relational encounter.

+ **FLUID KINSHIP**
to signal the blurred boundaries between friends, partners, lovers, ex-lovers, family of origin and acquired or chosen families.

For more information, please refer to our publications and audiovisual materials available at www.ces.uc.pt/intimate