


Please cite the Published Version

Di Felicianantonio, Cesare  (2020) Migration as an active strategy to escape the 'second closet' for HIV-positive gay men in Barcelona and Rome. *Social and Cultural Geography*, 21 (9). pp. 1177-1196. ISSN 1464-9365

DOI: <https://doi.org/10.1080/14649365.2018.1541248>

Publisher: Taylor & Francis (Routledge)

Version: Accepted Version

Downloaded from: <https://e-space.mmu.ac.uk/624253/>

Usage rights:  In Copyright

Additional Information: This is an Accepted Manuscript of an article published by Taylor & Francis in *Social and Cultural Geography* on 30th October 2018, available at: <http://www.tandfonline.com/10.1080/14649365.2018.1541248>.

Enquiries:

If you have questions about this document, contact openresearch@mmu.ac.uk. Please include the URL of the record in e-space. If you believe that your, or a third party's rights have been compromised through this document please see our Take Down policy (available from <https://www.mmu.ac.uk/library/using-the-library/policies-and-guidelines>)

Migration as an active strategy to escape the “second closet” for HIV-positive gay men in Barcelona and Rome*

Cesare Di Felicianantonio^a

^a National Institute for Regional and Spatial Analysis (NIRSA), National University of Ireland Maynooth, Maynooth, Co. Kildare, Ireland.

Email: difeliciantoniocesare@gmail.com

*(this is the final draft of the paper to be published on *Social & Cultural Geography*, <https://doi.org/10.1080/14649365.2018.1541248>)

Migration as an active strategy to escape the “second closet” for HIV-positive gay men in Barcelona and Rome

Centred around the life narratives of HIV-positive gay migrants in two Mediterranean cities, Barcelona (Catalonia/Spain) and Rome (Italy), this paper frames their decision to migrate towards the big city as an active strategy to escape the “second closet”, a concept introduced by Berg and Ross in 2014 to refer to the hiding of HIV-positivity by gay men in order to avoid negative social condemnation. In line with recent literature on gay migration that has emphasized its relational and situated character, the paper focuses on several factors leading to the decision to migrate: sexual desire and the imagery of the big city; the configuration of the welfare regime allowing free access to antiretroviral therapies (ARTs); access to employment in the services sector; and the absence of strong ties in the new city. Methodologically the paper draws from in-depth interviews conducted with 24 HIV-positive gay men between 2014 and 2016.

Keywords: HIV; gay migration; Barcelona; Rome; qualitative research

Introduction

Before the introduction of effective antiretroviral therapies (ARTs) in the mid-1990s, being diagnosed with HIV appeared to be a sort of ‘death sentence’ (Balter, 1996; Flowers, Knussen and Duncan, 2001), often leading infected people to relocate. Early work published after the diffusion of HIV-AIDS emphasized two main trajectories for the migration of HIV-positive people: i) the return to their hometown (e.g. Ellis and Muschkin, 1996); and ii) migration towards major metropolitan areas where more specialist services were available (e.g. Ellis, 1996; London, Wilmoth and Fleishman, 2004).

Since then the availability and efficacy of therapies have significantly improved, HIV-positivity is now considered by medical doctors as a chronic but manageable condition, and the life expectancy of HIV-positive people with access to ARTs is nearly the same as the HIV-negative population (e.g. Nakagawa, May and Phillips, 2013;

Teeraananchai, Kerr, Amin, Ruxrungtham and Law, 2017). Nevertheless HIV-related stigma remains persistent, exposing HIV-positive people to fear, vulnerability and violence (Elmore, 2006a; Murphy, Hevey, O'Dea, Ní Rathaille and Mulcahy, 2016; Parker and Aggleton, 2003). Because of the high prevalence of HIV among gay men, such a difficult situation is worsened by homophobia, thus requiring specific analytical enquiry.

Most studies on HIV-positive gay migration rely on quantitative methodologies and adopt an epidemiologic/public health perspective rather than one embedded in social sciences (e.g. Berk, Schur, Dunbar, Bozzette and Shapiro, 2003; Buehler, Frey and Chu, 1995; Ellis, 1996; Ellis and Muschkin, 1996; London et al., 2004). As argued by Michael Brown (1995: 162), such studies usually analyse and map the geographies of the virus rather than people living with it. Against such a perspective, health geographers have called for more qualitative research exploring the complexity of factors driving the decision to migrate for HIV-positive gay men (Elmore, 2006b). With most studies on the topic focused on Canada and the US, we have little knowledge of the migratory trajectories of HIV-positive people in other areas, such as Europe. Assuming that the process highlighted by the literature for North America is the same in Europe would be a serious mistake since the health and legal systems work in a different way. In fact in both Catalonia and Italy, the countries this paper focuses on, access to the health system and ARTs is completely free and universal. Moreover being HIV-positive does not affect the possibility to migrate there for non-European citizens; this marks a deep difference with other Western countries, including Canada whose

healthcare system is more similar to the European model as respect to the US one, where HIV-positive people are not allowed working and long-term visas¹.

The need for more qualitative research on HIV-positive gay migration in Europe is made more urgent by considering how HIV-phobia, homophobia and related stigmas intersect with other forms of inequality and discrimination on the basis of race, class, age and faith among others (e.g. Arnold, Rebchook and Kegeles, 2014; Halle, Padilla and Parker, 2011; Loutfy et al, 2012). The aim of this paper is to start filling these gaps in existing knowledge on HIV-positive gay migration in Southern Europe through a multidimensional analysis.

To frame the strategies adopted by HIV-positive gay men facing persistent social biases and discrimination, Berg and Ross (2014) have introduced the concept of the “second closet”, i.e. hiding HIV-positivity in order to avoid negative social condemnation. This is a painful process since

being closeted required substantial effort, in particular continuous management of stigmatizing information, and appeared to be psychologically taxing. Such closetedness unfortunately also reproduces the hegemonic status quo of HIV as a shameful disease, and those who bear the greatest burden become entangled in perpetuating the social avoidance surrounding serostigma (2014: 196).

This paper builds on the work of Berg and Ross to argue that for HIV-positive gay men migration towards a big city can represent an active strategy to escape the “second closet”. The argument is developed through the analysis of life narratives of 24 HIV-positive gay migrants performing homonormativity in two Mediterranean cities: Barcelona, the Catalan capital, and Rome, the capital of Italy. Both cities (and both

¹ To have full information on the regulation around mobility for HIV-positive people across the globe, see the website <http://www.hivtravel.org/> [last visit: 04 October 2017].

countries) remain under-studied in geographies of sexualities, a field characterized by the hegemonic focus on the Anglo-American world (e.g. Silva and Ornat, 2016).

When analysing the migratory paths of HIV-positive gay men in the two cities, the paper does not isolate the need to escape stigma and the “second closet” from other factors. These include sexual desire and the imagery of the big city; the configuration of the welfare regime that allows free access to ARTs; occupational segregation within the urban economy; and the absence of strong ties in the new city, where the newcomers rely more on ‘weak’ ties. Recognizing the importance of these factors emphasizes the need for multidimensional and situated analyses when studying complex processes like migration.

The remainder of the paper is comprised of five sections. In section two I frame the multidimensional approach of the paper in relation to the literature on gay migration. In section three I discuss the main characteristics of the research sites while reflecting on the importance of studying places outside the Anglo-American world. In section four I briefly present the research methodology, including the main characteristics of the research participants. In section five I unpack the complexity of factors shaping the decision to migrate for the research participants. Finally in the conclusion I discuss the main findings and the main concerns raised by the research, stressing the need for further qualitative research including HIV-positivity.

A multidimensional framework to understand HIV-positive gay migration

The multidimensional approach of the paper is grounded in recent geographical literature on gay migration that has emphasized its relational and situated character, thus avoiding essentialist and unidirectional narratives. Despite the historical importance of HIV in terms of discrimination, exclusion and hate (Cadwell, 1991; Christiansen and

Hanson, 1996), HIV-positivity has remained at the margins of the geographical literature on gay migration, the main exception being the work of Nathaniel Lewis (e.g. 2014b; 2015; 2016), although Lewis focuses on pre-exposure migration in North America, trying to identify which factors may lead gay migrants to engage with ‘risky’ practices.

Early literature on gay migration made a direct association between ‘coming out’ and the decision to migrate (e.g. Binnie, 2004; Brown, 2000), with such a relation having a deeply spatial character as a rural-urban movement. From such a unidirectional perspective, the city was synonymous with self-discovery, ‘outness’ and freedom, while rural areas and, more generally, ordinary towns were conceived as ‘backward’ and closeted. The city seemed therefore to embody therefore what Knopp defined as a “queer quest for identity”, meant as “an effort to create order out of the chaos that is fractured identity combined with structures of power that discipline (and, too often for many of us, oppress) identity” (2004: 123); at the same time it is “about testing, exploring, and experimenting with alternative ways of *being*, in contexts that are unencumbered by the expectations of tight-knit family, kinship, or community relationships” (2004: 123, emphasis in original).

The geographical reductionism of the rural-urban trajectory to ‘come out’ has received strong criticism, starting with the work of Gorman-Murray (2007) who has recognized how it classifies and crystallizes identities and movements, while not accounting for the complex and diverse spatial practices of gay men. Following the work of Fortier (2001) linking the ‘coming-out’ journey with the construction of *home*, Gorman-Murray (2007; 2009; but see also Waitt and Gorman-Murray, 2011a; 2011b) has highlighted the embodied dimension of gay migration through different scales, places and imaginaries. In this way, movement needs to be framed at the scale of the

body, rejecting predetermined trajectories since affect, desire and intimate attachments all play an important role in shaping the migratory path of the individual.

Lewis (2012) has deepened this perspective by acknowledging the importance of social contexts in the decisions of gay migrants. His interviews with gay black men in North American cities did not reveal any connections to the ideas of ‘emancipation’ and ‘disclosure’ emphasized in previous studies. Subsequently, Lewis (2013) emphasized the role of complex negotiations within different networks and institutions. His work contributed to a better understanding of the complex spatial and temporal dynamics associated with identity formation and establishing a sense of security. Lewis’ argument is echoed in the quantitative results of Blidon and Guérin-Pace (2013) who found that the relocation of lesbian and gay people in France was shaped by several factors (work, affects, studies, family ties). In a following paper (2014a), Lewis deepened his framework by considering the gay migration experience at multiple points in the life course, the results of his analysis revealing how migration is a tool used by gay men to negotiate different circumstances and transitions, as linked to work, community identity and stigma among others.

In this way, we can see how the literature has gradually reduced the emphasis on the issue of specific identity formation by acknowledging the complexity of factors shaping gay migration. Such complexity is further developed in recent work on Malmö (Sweden) by Wimark (2016a) who argues that, in the context of a strong welfare state like the Swedish one, the migration patterns of gay men are now more similar to those of the general population. Contextual effects need therefore to be acknowledged. Wimark’s argument is in line with the study on ‘atypical’ trajectories of migration of Italian queers by Di Felicianantonio and Gadelha (2016) who emphasized the role of welfare regimes as both a push-factor and a ‘magnet’ for migration. In order to avoid

economic reductionism, they also acknowledged the complexity of factors at work in the choice to relocate, such as imagery, desire and affects.

To better frame the multidimensional perspective developed in the paper, it is important to consider also the studies by Lewis and Mills (2016) and Wimark (2016b) that have shed light on other important factors linked to migration. Noting how work and employment have remained marginal in the literature on gay migration, Lewis and Mills (2016) argue that, in the case of gay migration to Ottawa (Canada) and Washington, DC (USA), uneven landscapes of heterosexism and homophobia (both at work and in the place of living) play an important role. So affective needs both deflect them from and attract them to specific localities (to live) and workplaces. However, “while many gay men successfully employ mobility to overcome these uneven geographies and reshape the norms of work in certain cities and sectors, they often remain subjected to less obvious forms of workplace regulation” (p. 2485). Therefore Lewis and Mills (2016) invite future scholarship to include work in the analysis of queer livelihoods in order to better understand how these intersect with sexual identity and other components. In the context of gay and lesbian migration in a non-Western country (Turkey), Wimark (2016b) emphasized the importance of the family of origin for research participants, arguing that “the family can be understood as a structure that is both constraining and supporting. While the family may be unsupportive of coming out, it can offer other forms of emotional, social and economic support” (p. 670). His results echo those of the study by Di Felicianantonio and Gadelha (2016) with respect to the relocation of Italian queers to provincial towns in order to meet family expectations (and to avoid losing their support). However both studies stress the importance of historical and geographical contexts to understand gay and lesbian migration. We see then how these existing studies on gay migration highlight the need to engage with

situated and multidimensional analyses, an effort shared by this paper that draws on life narratives to understand the complexity of factors shaping HIV-positive gay migration.

Situating the study: Barcelona and Rome

As already discussed, this paper is grounded in the academic sub-field of geographies of sexualities, notably the debate on gay migration and its intersection with the interdisciplinary studies on the relocation of HIV-positive gay men. Despite the increasing attention devoted to decolonizing knowledge production through unveiling the dynamics of power founding the production and circulation of contemporary academic knowledge (e.g. Garcia-Ramon, 2012; Kulpa and Silva, 2016), this sub-field is still dominated by Anglo-American scholarship that “silences academic discourses that originate from the peripheries” (Silva and Ornat, 2016: 185). In line with other recent attempts to decentre the focus of this sub-field (e.g. Kulpa and Silva, 2016; Rodó-de-Zárate, 2016; Silva and Vieira, 2014; Silva, Ornat and Chimin Junior, 2013), the paper focuses on two cities, Barcelona and Rome, located at the Southern periphery of Europe and is authored by a non-native English speaker who was working there at the time of the research. Beyond contributing to the sub-field of geographies of sexualities by focusing on two cities that remain underexplored, the research aims to stimulate academic production around space, gender and sexualities in Italy and Spain by re-asserting the importance of cities for specific social groups who have been largely ignored by ‘local’ geographical researchers (Borghi, 2012)².

² For an exception in the Catalan context, see Rodó-de-Zárate, 2014; for an exception in the Italian context see Soggiu, 2015.

Barcelona and Rome share similar characteristics in their urban geography, notably strong social *mixité* (e.g. Leontidou, 1990; Salvati, 2015). Since both are large metropolitan areas, they attract large flows of migrants, both domestic and international, in search of new life opportunities. However, relocating migrants do not always find the support of the welfare system, for instance in the domain of housing. In fact the Southern European model of welfare regime characterizing both countries is based on the primary role of the private family and the intergenerational transmission of wealth (e.g. Castles and Ferrera, 1996; Di Felicianantonio and Aalbers, 2018), with public intervention being universal only in education and health while social housing is extremely limited. With the global financial crisis and severe austerity measures hitting hard in both cities/countries, several studies have emphasized their dramatic impact, notably with respect to rising impoverishment and indebtedness, and growing numbers of evictions and foreclosures (e.g. Di Felicianantonio, 2016a, 2017b). Social inequalities have therefore increased, younger generations and migrants are the ones experiencing the most dramatic effects of the situation, ending by being “expelled” by the regime of well-being that characterized these countries in the last decades (Di Felicianantonio, 2017a).

Despite these commonalities with respect to the configuration of the welfare regime and the impact of the crisis, the cities occupy very different positions in the restructuring process of the European economy in recent decades. In Barcelona the organization of the 1992 Olympics paved the way to the affirmation of the so called ‘Barcelona model’ comprised of big urban regeneration projects, redistribution measures and citizens’ active participation/consensus (e.g. García-Ramon and Albet, 2000). On the contrary, despite the increasing importance of cultural services and tourism, in the case of Rome rent speculation and the public sector remain key-drivers

of the city economy (e.g. Berdini, 2008; Bonamici, Ciccarelli, Gemmiti and Paragano, 2011), leading to the general perception of the city's economy as stagnant, especially when compared to Milan, Italy's most dynamic urban economy.

Despite increasing concerns about the economic, social and political transformations of both cities (e.g. Balibrea, 2001; Cellamare, 2016; Degen and García, 2012), little attention has been given to their urban geographies of homosexualities, although both cities have witnessed an increasing visibility of gay spaces. Barcelona has become a primary gay destination for both tourists and new residents in Europe, the Circuit festival being a global event attracting dozens of thousands of gay men every summer. In terms of spatial visibility, the GayXample represents the main openly 'gayborhood' (Brown, 2014) with a spatial concentration of leisure activities directed at a gay audience (bars, saunas, gyms, shops, etc), although it remains 'mixed' in terms of residential function because of its spatial extent. The average attendants of the Circuit and the other main gay venues of the city, as well as the imagery of masculinity promoted by them, appear to embody the model of homonormativity characterized by the centrality of consumption in the formation of identity, a strong dedication to good-looks and body sculpture, and increasing depoliticization (e.g. Lippert, 2010; Searle, 2014).

On the contrary Rome does not enjoy such an international reputation for the gay traveller, even though it hosts big gay parties (e.g. the weekly Muccassassina), a summer gay village and the yearly Pride demonstration attracts many thousands of people while retaining its radical focus (Di Felicianantonio, 2016b). The city lacks a real 'gayborhood', although there is a small concentration of gay bars and shops in the city centre identified as 'gay street' by local entrepreneurs.

In terms of services offered to HIV-positive (gay) men, both cities have free and universal access to health care, including ARTs. The free universal system is available for anyone, including international migrants (from both inside and outside the EU)³. Both cities have among the highest HIV-rates in their countries, with men who have sex with men (MSM)⁴ being over-represented; in the case of Barcelona a comparative study of six European cities have found that it had the highest HIV prevalence among MSM (17%) (Mirandola et al, 2009). Since 2006 Barcelona has hosted the BCN Checkpoint, a community-based centre located in the GayXample which offers free HIV testing, peer counselling and support and provides information for people diagnosed with HIV, trying to link them to the healthcare system. The BCN Checkpoint is staffed by gay men, some who are HIV-positive; the idea is to create a supportive environment where people can interact with other HIV-positive people. Results show the success of the initiative, measured in terms of people tested HIV-negative who return to test and people tested HIV-positive who are successfully linked to the official healthcare system (Meulbroek et al, 2013). With respect to HIV- stigma, Fuster Ruiz de Apodaca has argued that “discrimination and stigma are a reality in Spanish society” (2011: 56, my translation), the empirical results of her study highlighting the pervasiveness of HIV-stigma in every domain of social life, including the health sector.

In the case of Rome, there is no comparable community service to the BCN Checkpoint; however the main gay association of the city, the Circolo di Cultura

³ In Spain, the 16/2012 Royal Decree (RD) approved by the right-wing government in 2012 made the access to healthcare impossible for most undocumented migrants, including people living with HIV. However some regional governments implemented regulations to make healthcare accessible for undocumented migrants. The new socialist government in power since 2018 aims at cancelling the 16/2012 RD.

⁴ Since I'm discussing official data, I here use the medical jargon.

Omosessuale Mario Mieli, runs an HIV-testing and counselling service in collaboration with one of the hospitals of the city (there are no public data available concerning the impact of this long-standing project). With respect to stigma, specialized press, websites and blogs⁵ have highlighted how ignorance and stigma around HIV/AIDS remain pervasive, although the gay community appears to be the most informed, and several health campaigns related to HIV and other sexually transmitted infections (STIs) have targeted primarily MSM. An online survey conducted by Lelleri (2016) showed that stigma (both enacted and felt)⁶ continues to characterize the life of HIV-positive gay men in Italy. One quarter of the HIV-positive respondents stated that they had been excluded/avoided/rejected “sometime” by HIV-negative gay men because of their serostatus (p. 29); while 14.6% reported that it happened “very often” (*ibid*).

The research methodology

This paper is based on fieldwork conducted in Barcelona in the second part of 2014 (August-December) and in Rome in the summer of 2016. The original aim was to investigate the migratory experiences of two national gay communities (the French and the Italian) in times of crisis for the Catalan capital. During fieldwork in Barcelona, I conducted 16 interviews, 9 of my research partners were Italian, 7 French; all were living in large urban areas of their native country before moving to Barcelona after 2008 (Marseille, Montpellier and Paris for France; Bologna, Milan, Naples and Rome for Italy). So the research focused on transnational inter-urban gay migration, thus going

⁵ See, among others, <http://sieropositivo.it/area-informativa/news-dallitalia/5042-l-italia-ha-un-piano-nazionale-aids-lila-ma-ancora-troppi-non-sanno-di-avere-l-hiv-2.html> [last visit: 7 November 2017]; <http://www.lila.it/it/dal-mondo-aids/919-pna2017> [last visit: 7 November 2017].

⁶ ‘Enacted’ stigma refers to openly discriminatory acts and norms; ‘felt’ refers to the sense of stigma perceived and internalized by the subject, in the case of HIV this being associated to a sense of moral condemnation (for ‘risky’ and ‘despicable’ sexual conduits).

beyond the rural-urban perspective characterizing most studies on gay migration. Research partners were recruited through specific advertisements on websites/apps (Gay Romeo, Grindr) and snowballing. The mean age of the participants was 33.4, the youngest aged 27, the oldest 42. The participants seemed to embody the 'homonormative' model which, according to the international literature (e.g. Clarke, 2000; de Oliveira, Gonçalves Costa and Nogueira, 2013; Duggan, 2002; Rosenfeld, 2009; Yep and Elia, 2012), is based on the following norms: reproduction of a hegemonic masculinity, i.e. the "ability to pass off as straight" (de Oliveira et al., 2013: 1478); the exaltation of coupledness, marriage and the family; and the importance of consumption for self-realization. In fact, all participants devote efforts and energies to sport and body shape as ways to express masculinity (some statements on this topic being 'gym is my religion', 'my body is my personal card', 'I could not accept myself with a ugly body', 'a man should be fit'); the majority (13/16) made reference to the importance of being masculine and the lack of desire towards effeminate men; and, with respect to coupledness, 11/16 state they would like to marry one day and one quarter would like to have children. Moreover the 'pink market' (in the forms of clothing, holidays and beauty products, among others) occupied a central role in their lives, some statements being 'you need specific clothes brands to look sexy' and 'you are no one in this scene if you don't go to the Circuit or you don't travel to places like Mykonos and Gran Canaria'.

However after the seventh interview I realized that all the guys I had interviewed were HIV-positive and their narratives assigned a great significance to the change in their sero-status as a driver of migration. The main explanation I gave myself for this concerned the snowballing, although I recruited the first two research participants through Grindr and the research advertisement made no mention at all of HIV - neither I

mentioned HIV when asking the first research participants to address me to someone suitable for the research. In order to explore this issue more in-depth, I decided to continue the research by adding an extra-criterion in the selection of the research partners, i.e. having become HIV-positive before moving to Barcelona. All of the participants contracted HIV less than 10 years before the interview (the 'oldest' in terms of HIV-status got it in 2006); this is important information since it implies that all of them have had access to effective ARTs⁷.

The fieldwork in Rome was conducted in the summer of 2016 and involved interviews with 8 HIV-positive gay men. Participants were recruited through personal interaction at different venues (clubs, bars, parties) and snowballing. The mean age of the participants was 32.1, the youngest aged 25, the oldest 35. The main difference with the Barcelona fieldwork concerned nationality, with all participants being Italian, so the focus was on domestic migration from cities of different size (main metropolitan areas such as Milan and Naples as well as province towns like Pescara). All participants contracted HIV not more than 10 years before the interview (the 'oldest' in 2006), so, like the Barcelona participants, all have had access to effective ARTs, with 5 out of 8 being under a single pill-therapy⁸. With respect to performing the homonormative model, all of the Rome participants devote efforts and energies to body shaping and during the interview they made references to the importance of the 'pink market', mostly in the form of gay holidays venues. Half of them were in coupledness at the time of the interview and the majority of them (6/8) expressed the desire to marry and have

⁷ 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.

⁸ At the time of the interview, 8 out of 8 declared they were on ARTs.

children, although they were pessimistic on this last point given the legal barriers to adoption in Italy. Moreover during the interview 7/8 made reference to their lack of attraction to effeminate men while stressing how they see themselves as masculine (*maschio*). Table 1 summarizes the main characteristics of participants, including their occupation at the time of leaving, their experiences of stigma in their former cities and the kinds of relational ties they had in the new city at the time of moving.

Unpacking the complexity of factors shaping the decision to migrate

The aim of this section is to show how a complex mix of factors informed participants' decision to migrate, thus avoiding unidirectional and reductive narratives around the need to escape stigma (both enacted and felt). While escaping stigma and establishing a 'new life' were key concerns for the people involved, such a decision needs to be both materially and relationally situated: as the following sub-sections will show, other factors also played a central role, notably issues of sexual desire and the imagery of the big city; the configuration of the welfare regime giving free access to ARTs; urban economy and occupational segregation; and the absence of strong ties in the new city, where the newcomers rely more on 'weak' ties.

Escaping stigma and the "second closet"

In interviews all 24 participants reported having experienced stigma in the cities where they had previously lived, no matter the size of the settlement. In particular all of them spoke of felt stigma around them, while 15 out of 24 had experienced enacted stigma.

With respect to felt stigma, most participants pointed to the widespread lack of knowledge about HIV both within and outside the gay community, discussing how they felt most of the people are not aware of the fact that people with an undetectable viral

load cannot transmit the virus. Moreover social condemnation of 'risky' behaviour seemed to prevail, as noted by SX (who moved from Palermo to Rome): "I really wanted to share my status with others because I'm aware I should not be ashamed of it but then you hear your friends misjudging HIV-positive people blaming an irresponsible sexual life. (...) The same with my mum, she's pretty open-minded but then one day she was blaming hardly someone for their sexual life and saying something about these people being vector of disease and pain". Such a perception of stigma seems to pervade every aspect of social life, as noted by UR (who moved from Milan to Barcelona): "One day I was at a debate with several LGBT and feminist activists, the discussion was around HIV prevention and bareback sex and I was shocked by hearing so many people blaming those who practice bareback sex, defining them with very offensive words, and the worst thing was that they continued to stress how they did not blame HIV-positive people but...".

While felt stigma seemed to involve mostly emotional closure and being closeted, the experience of enacted stigma narrated by several participants highlights the very strong emotional (and sometimes physical) violence associated with concrete rejection by loved ones. In the experience of the research participants, rejection had come from dating partners, family members and friends. For instance AQ (who moved from Paris to Barcelona) experienced rejection and blame from a man he was dating and a friend of his. In the case of the man he was dating, AQ deliberately chose to inform him since he felt calm because of his undetectable viral load; however the man started to blame him, saying that he was not interested in dating irresponsible people and suggesting that AQ avoid dating HIV-negative guys. In the case of his friend, one night they were out together when his friend asked him: 'How do you manage to stand with the feeling of guilt?' Although acknowledging that his friend was not aiming to insult

him, AQ felt hurt and lonely. Physical rejection and violence were also reported by RC (who moved from Catania to Rome); when telling his parents about his HIV-status, they reacted very violently, insulting him, saying that they would prefer not to have him around, his father slapped him while his mum refused to hug him when he was leaving. Such violence was unexpected, leaving him very hurt: “I have never felt so rejected, I could not stop crying, I thought I would not have found any kind of comfort anymore”.

In line with the work of Berg and Ross (2014), the narratives of the research participants show how they found refuge in the “second closet” to avoid stigma. The following words of OK (who moved from Naples to Barcelona) reveal how painful this process can be: “you feel trapped, I didn’t feel comfort anymore, I felt as a stranger to anybody, it reminded of when I was a teenager, it was very tough (...), occasional hook-ups with HIV-positive gay men were the only moments I felt relaxed, I did not feel judged, I did not feel rejection”. Several research participants openly spoke of confusion, depression and lack of self-esteem; for instance SD (who moved from Bologna to Barcelona and experienced stigma from both his brother and a friend) said: “I felt so alone and confused, I could not imagine how to survive feeling like that, I was just shit, no will to do anything, no desire to plan, no imagination, nothing”. An important issue to highlight here is that most of the men who came out of the “second closet” in some circumstances still decided to avoid coming out with either family members or in the workplace. For instance, JU (who moved from Montpellier to Barcelona) came out to his brother who reacted very supportively but still suggested that JU avoid coming out to other members of their family; when asked how he felt about this suggestion, JU’s response revealed the emotional troubles of this kind of situation: “He[*the brother*] wants just to protect me because our family is pretty conservative, but I feel somehow blocked by his suggestion because if my parents

reacted badly then he could say ‘Why did you this? I told you not to do so’ and maybe being angry with me. I need his support in my life so I’ll follow his tip”.

How to overcome these feelings? Several research participants spoke of the support received through specialized clinics and, more generally, psychotherapy as well as the importance of partially coming out of the “second closet” by sharing with others (even just occasional sexual partners). However, when asked about the long-term actions and decisions taken to come out of the “second closet” and the pain associated with it, migration emerged as the main response. In the words of GQ (who moved from Pescara to Rome): “This is not a big physical distance, but for me it was important to fix an emotional one, I needed to leave the province, (...), I did not want to feel so lonely, constantly fearing that my family could get to know my status”. Most participants openly spoke of the need to ‘get a new life’ (phrase used in 17 interviews), and the big city was perceived as offering multiple possibilities. As the following sub-sections will show, such an active strategy to escape stigma and the “second closet” is connected to other material and relational factors.

The (sexualized) imagery of the big city

The migration trajectories analysed for this paper are multiple, both transnational (although intra-EU) and domestic, both between metropolitan areas and from provincial towns to metropolitan areas. Despite these different trajectories, all the narratives reveal the new comfort offered by moving to a big city where services for HIV-positive people are easily available, social and sexual life is diverse and there are multiple employment possibilities. What is important to stress here is that I am not arguing that specific cities are more or less welcoming to HIV-positive people than others; rather it is the process of relocating to these cities that is perceived to offer the chance to ‘get a new life’. This

argument is exemplified by the case of Rome, which represents both a city of departure (towards Barcelona for 3 participants) and destination (from different Italian cities for 8 participants). In order to illustrate the role played by the imagery of the new city, we can consider the narratives of NN, who moved from Naples to Rome, and VF, who moved from Rome to Barcelona.

In the words of NN, “moving to a new city is really exciting, new places to discover, new people to meet, you can re-imagine your social life”. For him Rome offers an entertaining nightlife and the possibility to experience an intense sexual life; when asked if he thinks Rome offers a better sexual life than Naples, his answer was: “I don’t think it’s the city, I think it’s just me now able to enjoy more and feel more sexually relaxed. (...) Moving has certainly helped me to explore more my sexual fantasies”. The words of VF in relation to moving from Rome to Barcelona echo those of NN: “In Rome there is a lot going on, (...), I had a very active sexual life but in the last period I was living there I was becoming a bit paranoid, sex was not that fun anymore, I was travelling as much as I could to have fun so I realized it was maybe time to leave the city and moving to a place offering me the possibility to have that fun daily. (...) Barcelona is a new phase in my life, sure the city is very sexual, *very sexual* [emphasis] and so amazing for positive guys, but I think it’s my mind that has changed, moving was the right decision”.

Most research participants (20 out of 24) emphasized the importance of the sexual imagery of the city as a factor in their relocation. For instance, talking about his choice to move from Milan to Barcelona, FB spoke of the will to move to a ‘dirty city’, while JD, who moved from Naples to Rome, said: “I need new sexual partners all the time, I can’t be in a place where you fuck with the same people the whole time”. In both cities sites for encounter are multiple and diverse, both virtual (Grindr and Gay Romeo

were the most frequently used apps) and physical (like saunas, parties and cruising bars). With respect to the choice of sexual partners, participants' narratives tended to follow a similar path; 14 out of 24 said that when they moved they tended to have sex more with HIV-positive gay men or people with unknown status but practicing bareback sex, while after some time they have started also to have sex with HIV-negative guys informed by their status and still practicing bareback sex thanks to an undetectable viral load. As explained by DQ (who moved from Marseille to Barcelona), "the more you start to feel comfortable with yourself and your sexual life, the more you are able to open to sexual partners. (...) Actually my Grindr profile now indicates that I'm HIV-positive, there are idiot guys who write me bad things or tell me they don't want to meet because of my HIV-status but in most cases I have no problems, I regularly have bareback sex with HIV-negative guys and feel comfortable about it". So moving to a new city with multiple possibilities for hooking-up offered research participants a new feeling of sexual comfort, leading them to disclose their HIV-status more easily.

Occupational segregation and the configuration of the welfare regime

As shown in table 1, after relocating a majority of research participants found employment in low-wage service sector jobs. For example, 13 out of 24 participants were working as shop assistants in clothes and other beauty services retailing. Occupational segregation was therefore a recurring trend, thus raising an important question: why did participants decide to move to a city where they were trapped in low-paid and precarious jobs, often being unable to live by themselves and save anything? Examining the life narratives of the research participants, two main factors appear to play a pivotal role.

The first one is the powerful imagery of living in the big city analysed in the previous sub-section, and particularly the possibility of easily finding ‘people like you’. The second factor is strongly connected to the first, i.e. the importance of having ‘people like you’ (in this case HIV-positive gay men) present in your workplace and/or the ability to share your own condition in the workplace because most of your colleagues are gay men. A sort of paradoxical situation then emerges: occupational segregation provides the basis for a comforting experience (of course not in economic terms since precarity still has a strong impact on participants’ material conditions).

Several research participants openly discussed the comfort of working with other HIV-positive gay men or, more broadly, in a very ‘gay’ environment. For instance DQ (who moved from Marseille to Barcelona and works in a big clothing retail shop) says: “It’s such a good feeling having the possibility not to hide yourself, I can say to my colleagues ‘I need that day free because I have my check-up’ and then they come to you and ask ‘Was everything ok? What about the viral load?’(...) It’s really refreshing and creates a good vibe”. However when questioned about income security and future expectations, most of them stress the difficulties of saving money and the desire to get a better job in the future. For instance JD (who moved from Naples to Rome) said: “The last days before getting the salary are always a struggle, I can’t really save anything, rent is expensive and you have to take care of so many things”. When discussing the high cost of living compared to their wages, several participants (15 out of 24) pointed to the cost of being ‘a pretty-looking gay’: gym, nice clothes, clubbing, recreational drugs, holidays. In this respect, SD (who moved from Bologna to Barcelona) said: “I know that in order to keep my lifestyle I can’t save anything, living the gay life is expensive”. So we see how precarity and low income are balanced by enjoying the environment around and the pleasure of ‘gay consumption’.

However when analysing these narratives of occupational segregation, precarity and the pleasure of homonormative consumption, it is important to consider the role of the welfare system, particularly health care and access to ARTs. As already mentioned, accessing ARTs in both Italy and Catalonia/Spain is free, people do not require private health insurance. This is important because some research participants would not otherwise have chosen to move to these cities. For example, two research participants (AQ and UH) framed their decisions to move to Barcelona and Rome respectively rather than Berlin because of the need to obtain private health insurance in the German capital. So here we see the particular entanglement characterizing the political economy of these gay lives in big cities: precarious work in the service sector combined with occupational segregation; the desire and sense of freedom of living in a new city; free access to ARTs, keeping HIV-positive gay men healthy and able to work. These results are in line with recent work on Italian queer migration by Di Felicianantonio and Gadelha (2016) who emphasized the role of welfare regimes in shaping migration choices. They also align with existing studies on HIV health-care provision as a push factor leading gay migration towards some US metropolitan areas (e.g. Berk et al., 2003; London et al., 2004).

The importance of 'weak' ties

The results of my research on HIV-positive gay migrants in Barcelona and Rome challenge Wimark's (2016b) emphasis on the importance of family and 'strong' ties in general (e.g. long-time friends), with the exception of those people who had HIV-positive gay friends in the city of relocation. In fact the majority of participants (15 out of 24) did not have any kind of strong ties in the new city when moving, most of them having occasional sexual partners or friends (e.g. people met at parties), who were often

also HIV-positive. Several participants expressed the need to move to a city where they did not know many people, while avoiding alternative options where they had some family members or friends. As explained by UH (who moved from Milan to Rome, an ‘unusual’ trajectory given the economic status of the cities and his well-remunerated job in Milan), “most of my friends live between Milan and Turin, I needed a change far from them, I wanted to live in a city where I had almost no contact, this was the beginning of something new for me, so I wanted to have the feeling that I needed to reinvent everything, (...), if I was living in Milan or Turin, my HIV-status would not be open and I would not feel comfortable in sharing it with new partners”. So UH’s narrative makes an association between living in the same city with close people and the “second closet”; family and ‘strong’ ties are implicated in an emotionally challenging condition.

In some cases participants’ choices to distance themselves from family and long-time friends caused tensions. For example, FB (who moved from Milan to Barcelona) said that his family was “shocked” at the news of his move. FB had earned a Masters degree from one of the most prestigious Italian universities in Milan so his family expected he would stay in the Milanese area. Despite having been in Barcelona for almost 5 years at the time of the interview, he said his family had still not fully come to terms with his decision, his mother complaining all the time about his decision and his father being very angry.

When asked to elaborate about the kind of support received from these ‘weak’ ties when relocating, research participants emphasized three aspects. As in the case of UH mentioned above, the first aspect consists in stressing the will not to rely on someone close (e.g. family members, lifelong friends) in order to establish new social relations and have a stronger sense of ‘getting a new life’. The second aspect refers to

questioning the ‘weak’/‘strong’ tie divide: people known for a short time and not perceived as close initially can soon become important elements of their emotional life. As said by EH (who moved from Rome to Barcelona), “people understand your needs and are there to help, I was very surprised by the availability of two people I barely knew before moving, (...) now they are family to me”. Through his narrative we see how new sorts of ties and ‘family’ are established, while the family of origin tends to be associated with painful feelings and the “second closet”. Finally the third aspect calls into question a key-characteristic of the study, i.e. the migratory journeys analysed do not involve very long physical distances, so almost all research participants (22 out of 24) said they return often (i.e. at least twice per year) to the cities where they had previously lived or to their hometown, allowing them to keep a close connection with previous places of residence. Moreover this combination of relocation and the frequent visits to previous places of residence appeared to open new possibilities for encounter and emotional connection for several research participants. For instance, thanks to the positive experience in the new city EH (who moved from Rome to Barcelona) has been able to disclose his HIV-status to his family, finding himself “more attached than ever to my sister, (...), moving has given me the strength not to fear what I am and share it with people around me”.

Conclusions

Building on insights from the international literature on gay migration that stress the need to develop situated and multidimensional analyses, in this paper I have analysed the migratory trajectories of HIV-positive gay men towards two Mediterranean cities, Barcelona and Rome. In so doing, the paper has started to fill the analytical gap concerning HIV-positivity in the geographies of sexualities, while analysing

geographical contexts that remain under-researched. In the paper I have framed the decision to migrate as an active strategy to escape the “second closet” (Berg and Ross, 2014), although I have emphasized the need to unpack the complexity of factors leading to such a decision. My analysis demonstrates that these factors include issues of sexual desire and the imagery of the big city; the configuration of the welfare regime, particularly health care and access to ARTs; questions of employment and occupational segregation, especially in retailing; and the importance of ‘weak ties’ in the new city.

The data analysed in the paper are characterized by two main limitations, which future research might usefully confront. The first one is the focus on domestic and intra-EU migration, so for the research participants migrating (and accessing health services) to the new destination was relatively easy. Despite ARTs being freely accessible to anyone, a focus on the migration of HIV-positive gay men from outside the EU would have likely produced different results because of the difficulties in accessing residency permits and the persistent moral panic linking HIV to specific ethnic/migrant communities (for an example see Pezeril and Kanyebe, 2013). How do HIV-positive gay migrants deal with formal institutions in charge of issuing residency permits? This is undoubtedly a key-question that needs to be addressed by future studies analysing the relation between HIV-positivity and migration.

The second limit concerns the racial and ‘generational’ profile of the research participants. All of them but one are white; this is an important factor to keep in mind when considering notions of inclusion/exclusion, given the persistence of racism/xenophobia in both Italy and Spain. Several studies have shown the tight connections between race discrimination/privilege and the impact and management of HIV/AIDS, although most of them focus on the US and Canada (e.g. Catungal, 2013, Cohen, 1999), while less work, especially in geography and social sciences, has

concerned Europe (for an exception see Doyal, 2009). The 'generational' bias is strongly connected to the drug-regime: all the participants have been treated with effective ARTs producing limited side effects, with the consequence that the 'visibility' of HIV is significantly reduced. This is a crucial issue to consider when discussing about HIV-related stigma; for instance, previous research showed that HIV-related lipodystrophy makes HIV-status a 'public spectacle' (Persson, 2005: 239, cited in Berg and Ross, 2014: 187), thus enhancing the possibilities for discrimination. An intergenerational perspective including different migratory trajectories would be able to address these limits while highlighting the changing forms of stigma under different regimes of visibility and invisibility.

Despite these limits, the results can be still considered relevant because HIV-related stigma (not to mention homophobia) remains prominent for European gay men. In this respect, it is important to re-assess here that in the paper I have not tried to establish a ranking of the most welcoming cities for HIV-positive gay men. On the contrary I have aimed to show the primary importance of movement and relocation rather than the specific characteristics of a city, as revealed by the inclusion of Rome as both a city of departure (for some) and a city of destination (for others), thus showing how the factors of attraction emphasized by some participants are not universal.

The multidimensional qualitative approach to HIV-positive gay migration developed in this paper informs different debates across social sciences, and starts to address important questions that need further investigation. The first one concerns the broad debate about HIV and migration that tends to reduce migration to a 'risk factor' by focusing only on pre-exposure migration. Although this is undoubtedly an important topic, we cannot exclude from our analysis those who already have HIV; in fact advanced ARTs have terrifically improved the everyday life and the health status of

HIV-positive people, but stigma remains persistent. It therefore results important to investigate how this ambivalence influences the relocation choices of HIV-positive gay men across generations, social groups, places with different legal and health systems, and ethnic communities. The second one is the interdisciplinary debate on gay migration that has also tended to exclude HIV as a push-factor for relocation. In this growing debate there has been a shift from unidirectional to multidimensional analyses, so health status and a socially stigmatized condition cannot be ignored, especially in current times of severe austerity policies and privatizations in health across the globe. How are HIV-positive gay migrants framed under such process? How does neoliberal health discourse on ‘personal responsibility’ and ‘cost efficiency’ impact upon the self-perception and the wellbeing of HIV-positive gay men? How are they able to make long-terms plans in the city of relocation? These are just some the questions opened by the inclusion of HIV in the analysis of gay migration and its challenges. These challenges concern more broadly the relation between place, health, migration and non-normative sexualities, this relation shaping the experience of relocation, the life aspirations and the material possibilities for those involved in such a complex and widespread process.

References

- Arnold, E.A., Rebchook, G.M., and Kegeles, S.M. (2014). ‘Triply cursed’: racism, homophobia and HIV-related stigma are barriers to regular HIV testing, treatment adherence and disclosure among young Black gay men. *Culture, Health & Sexuality*, 16, 710-722.
- Balibrea, M. (2001). Urbanism, culture and the post-industrial city: challenging the ‘Barcelona model’. *Journal of Spanish Cultural Studies*, 2, 187–210.
- Balter, M. (1996). AIDS Research: New Hope in HIV Disease. *Science*, 274, 1988.

- Berdini, P. (2008). *La città in vendita. Centri storici e mercato senza regole*. Rome: Donzelli Editore.
- Berg, R.C. and Ross, M.W. (2014). The Second Closet: A Qualitative Study of HIV Stigma Among Seropositive Gay Men in a Southern U.S. City. *International Journal of Sexual Health*, 26, 186-199.
- Berk, M.L., Schur, C.L., Dunbar, J.L., Bozzette, S., and Shapiro, M. (2003). Short report: Migration among persons living with HIV. *Social Science & Medicine*, 57, 1091-1097.
- Binnie, J. (2004). *The Globalization of Sexuality*. London: Sage.
- Blidon, M., and Guérin-Pace, F. (2013). Un rêve urbain? La diversité des parcours migratoires des gays. *Sociologie*, 2, 3–22.
- Bonamici, S., Ciccarelli, S., Gemmiti, R., and Paragano, D. (2011). Roma turistica e competitiva. *Working papers del Dipartimento di Metodi e Modelli per l'Economia, il Territorio e la Finanza*, 77, 1-66.
<https://www.memotef.uniroma1.it/sites/dipartimento/files/wpapers/documenti/FullTextWP77.pdf> [last visit: 06 October 2017]
- Borghi, R. (2012). <<Hai detto geografia?>>: dell'intricato rapporto tra studi lgbtiq e spazio. *Contemporanea*, 15, 703-709.
- Brown, M. (1995). Ironies of distance: An ongoing critique of the geographies of AIDS. *Environment and Planning D: Society and Space*, 13, 159-183.
- Brown, M. (2000). *Closet Space: Geographies of Metaphor from the Body to the Globe*. London: Routledge.
- Brown, M. (2014). Gender and sexuality II: There goes the gayborhood?. *Progress in Human Geography*, 38, 457-465.
- Buehler, J.W., Frey, R.L., and Chu, S.Y. (1995). The migration of persons with AIDS: data from 12 states, 1985 to 1992. *American Journal of Public Health*, 85, 1552–1555.
- Cadwell, S. (1991). Twice removed: The stigma suffered by gay men with aids. *Smith College Studies in Social Work*, 61, 236-246.
- Castles, F., and Ferrera, M. (1996). Home ownership and the welfare state: is Southern Europe different?. *South European Society and Politics*, 1, 163–185.
- Catungal, J. P. (2013). Ethno-specific safe houses in the liberal contact zone: Race politics, place-making and the genealogies of the AIDS sector in global

- multicultural Toronto. *ACME: An International E-Journal for Critical Geographies*, 12, 250-278.
- Cellamare, C. (ed.) (2016). *Fuori raccordo: Abitare l'altra Roma*. Rome: Donzelli Editore.
- Christiansen, A., and Hanson, J. (1996). Comedy as cure for tragedy: Act up and the rhetoric of aids. *Quarterly Journal of Speech*, 82, 157-170.
- Clarke, E.O. (2000). *Virtuous Vice: Homoeroticism and the public sphere*. Durham: Duke University Press.
- Cohen, C. (1999). *Boundaries of Blackness: AIDS and the Breakdown of the Black Community*. Chicago: University of Chicago Press.
- Degen, M., and García, M. (2012). The Transformation of the 'Barcelona Model': An Analysis of –Culture, Urban Regeneration and Governance. *International Journal of Urban and Regional Research*, 36, 1022-1038.
- de Oliveira, J.M., Gonçalves Costa, C., and Nogueira, C. (2013). The Workings of Homonormativity: Lesbian, Gay, Bisexual, and Queer Discourses on Discrimination and Public Displays of Affections in Portugal. *Journal of Homosexuality*, 60, 1475-1493.
- Di Felicianantonio, C. (2016a). Subjectification in times of indebtedness and neoliberal/austerity urbanism. *Antipode*, 48, 1206-1227.
- Di Felicianantonio, C. (2016b). In Italy it's different: Pride as a space of political contention. In G. Brown and K. Browne (eds.) *The Routledge Research Companion to Geographies of Sex and Sexualities* (pp. 97-104). London: Routledge.
- Di Felicianantonio, C. (2017a). Spaces of the Expelled as Spaces of the Urban Commons? Analysing the Re-emergence of Squatting Initiatives in Rome. *International Journal of Urban and Regional Research*, 41, 708-725.
- Di Felicianantonio, C. (2017b). Social movements and alternative housing models. Practicing the “politics of possibilities” in Spain. *Housing, Theory & Society*, 34, 38-56.
- Di Felicianantonio, C., and Gadelha, K. B. (2016). Situating queer migration within (national) welfare regimes. *Geoforum*, 68, 1-9.
- Di Felicianantonio, C., and Aalbers, M. B. (2018). The Prehistories of Neoliberal Housing Policies in Italy and Spain and Their Reification in Times of Crisis. *Housing Policy Debate* 28, 135-151.

- Doyal, L. (2009). Challenges in researching life with HIV/AIDS: an intersectional analysis of black African migrants in London. *Culture, Health & Sexuality*, 11, 173-188.
- Duggan, L. (2002). The new homonormativity: the sexual politics of neoliberalism. In R. Castronovo and D.D. Nelson (eds.) *Materialising Democracy: Towards a Revitalized Cultural Politics* (pp. 175-194). Durham: Duke University Press.
- Ellis, M. (1996). The postdiagnosis mobility of people with AIDS. *Environment and Planning A*, 28, 999-1017.
- Ellis, M., and Muschkin, C. (1996). Migration of Persons with AIDS- A Search for Support from Elderly Parents?. *Social Science & Medicine*, 43, 1109-1118.
- Elmore, K. (2006a). Southern Discomfort: AIDS Stigmatization in Wilmington, North Carolina. *Southeastern Geographer*, 46, 215-230.
- Elmore, K. (2006b). The migratory experiences of people with HIV/AIDS (PWA) in Wilmington, North Carolina. *Health & Place*, 12, 570-579.
- Flowers, P., Knussen, C., and Duncan, B. (2001). Re-appraising HIV Testing among Scottish Gay Men: The Impact of New HIV Treatments. *Journal of Health Psychology*, 6, 665-678.
- Fortier, A.-M. (2001). Coming home: queer migration and multiple evocations of home. *European Journal of Cultural Studies*, 4, 405-424.
- Fuster Ruiz de Apodaca, M.J. (2011). La percepción del estigma en las personas con VIH: sus efectos y formas de afrontamiento. PhD thesis, National Distance Education University (UNED), Spain.
- García-Ramon, M.D. (2012). Las diferencias que crea el lugar. Una mirada crítica a la hegemonía angloamericana en geografía. *Documents d'Anàlisi Geogràfica*, 58, 307-319.
- García-Ramon, M.D., and Albet, A. (2000). Commentary. Pre-Olympic and post-Olympic Barcelona, a "model" for urban regeneration today?. *Environment and Planning A*, 32, 1331-1334.
- Gorman-Murray, A. (2007). Rethinking queer migration through the body. *Social & Cultural Geography*, 8, 105-121.
- Gorman-Murray, A. (2009). Intimate mobilities: emotional embodiment and queer migration. *Social & Cultural Geography*, 10, 441-460.

- Halle, R., Padilla, M.B., and Parker, E.A. (2011). 'Stuck in the quagmire of an HIV ghetto': the meaning of stigma in the lives of older black gay and bisexual men living with HIV in New York City. *Culture, Health & Sexuality*, 13, 429-442.
- Knopp, L. (2004). Ontologies of place, placelessness, and movement: queer quests for identity and their impacts on contemporary geographic thought. *Gender, Place & Culture*, 11, 121-134.
- Kulpa, R., and Silva, J.M. (2016). Decolonizing Queer Epistemologies: Section Introduction. In G. Brown and K. Browne (Eds.) *The Routledge Research Companion to Geographies of Sex and Sexualities* (pp. 139-142). London and New York: Routledge.
- Lelleri, R. 2016. *Convivere gay + e -: Parliamo di noi stessi? I risultati della ricerca*, online document: http://www.plus-onlus.it/media/Report_convHIVere.def_.pdf [last visit: 7 October 2017].
- Leontidou, L. (1990). *The Mediterranean city in transition: Social change and urban development*. Cambridge: Cambridge University Press.
- Lewis, N. (2012). Remapping disclosure: gay men's segmented journeys of moving out and coming out. *Social & Cultural Geography*, 13, 211-231.
- Lewis, N. (2013). Beyond binary places: the social and spatial dynamics of coming out in Canada. *ACME: An International E-Journal for Critical Geographies*, 12, 305-330.
- Lewis, N. (2014a). Moving "Out", Moving On: Gay Men's Migrations Through the Life Course. *Annals of the Association of American Geographers*, 104, 225-233.
- Lewis, N. (2014b). Rupture, resilience, and risk: Relationships between mental health and migration among gay-identified men in North America. *Health & Place*, 27, 212-219.
- Lewis, N. (2015). Placing HIV beyond the metropolis: Risks, mobilities, and health promotion among gay men in the Halifax, Nova Scotia region. *The Canadian Geographer/Le Géographe Canadien*, 59, 126-135.
- Lewis, N. (2016). Urban encounters and sexual health among gay and bisexual immigrant men: perspectives from the settlement and aids service sectors. *Geographical Review*, 106, 235-256.
- Lewis, N., and Mills, S. (2016). Seeking security: Gay labour migration and uneven landscapes of work. *Environment and Planning A*, 48, 2484-2503.

- Lippert, L. (2010). "How Do You Think We Get to Pottery Barn?" Mainstream Gay Drama, Homonormativity, and the Culture of Neoliberalism. *South Atlantic Review*, 75, 41-59.
- London, A. S., Wilmoth, J. M. and Fleishman, J. A. (2004). Moving for care: findings from the US HIV cost and services utilization Study. *AIDS Care: Psychological and Socio-medical Aspects of AIDS/HIV*, 16, 858-875.
- Loutfy, M., et al (2012). Gender and Ethnicity Differences in HIV-related Stigma Experienced by People Living with HIV in Ontario, Canada. *Plos One*, 7, 1-10.
- Mirandola, M., et al (2009). HIV bio-behavioural survey among men who have sex with men in Barcelona, Bratislava, Bucharest, Ljubljana, Prague and Verona, 2008-2009. *Eurosurveillance*, 14, <https://doi.org/10.2807/ese.14.48.19427-en> [last visit: 07 October 2017]
- Meulbroek, M., et al (2013). BCN Checkpoint, a community based-centre for men who have sex with men in Barcelona, Catalonia, Spain, shows high efficiency in HIV detection and linkage to care. *HIV Medicine*, 14, 25-28.
- Murphy, P.J., Hevey, D., O'Dea, S., Ní Rathaille, N., and Mulcahy, F. (2016). Serostatus Disclosure, Stigma Resistance, and Identity Management Among HIV-Positive Gay Men in Ireland. *Qualitative Health Research*, 26, 1459-1472.
- Nakagawa, F., May, M., and Phillips, A. (2013). Life expectancy living with HIV: recent estimates and future implications. *Current Opinion in Infectious Diseases*, 26, 17-25.
- Parker, R., and Aggleton, P. (2003). HIV and AIDS-related stigma and discrimination: a conceptual framework and implications for action. *Social Science & Medicine*, 57, 13-24.
- Persson, A. (2005). Facing HIV: Body shape change and the (in)visibility of illness. *Medical Anthropology*, 24, 237-264.
- Pezeril, C., and Kanyebe, D. (2013). A Congolese Virus and Belgian Doctors? Postcolonial Perspectives on Migration and HIV. *African Diaspora*, 6, 46-71.
- Rodó-de-Zárate, M. (2014). *Geografies de la interseccionalitat: L'accés de la joventut a l'espai públic de Manresa*. PhD thesis, Autonomous University of Barcelona, Spain.
- Rodó-de-Zárate, M. (2016). Feminist and Queer Epistemologies beyond Academia and the Anglophone World: Political Intersectionality and Transfeminism in the Catalan Context. In G. Brown and K. Browne (Eds.) *The Routledge Research*

- Companion to Geographies of Sex and Sexualities* (pp. 155-164). London and New York: Routledge.
- Rosenfeld, D. (2009). Heteronormativity and homonormativity as practical and moral resources: The case of lesbian and gay elders. *Gender & Society*, 23, 617-638.
- Salvati, L. (2015). Dinamiche economiche e cambiamenti sociali: la città mediterranea ancora in transizione. *Sociologia urbana e rurale*, 107, 70-87.
- Searle, K. (2014). *Aspirational Identity in British "Gay Masculinity" 1991-2011*. PhD thesis, University of Birmingham, UK.
- Silva, J. M., and Ornat, M. J. (2016). 'Wake up, Alice, This is Not Wonderland!' Power, Diversity and Knowledge in Geographies of Sexualities. In G. Brown and K. Browne (Eds.) *The Routledge Research Companion to Geographies of Sex and Sexualities* (pp. 185-192). London and New York: Routledge.
- Silva, J.M., and Vieira, P.J. (2014). Geographies of Sexualities in Brazil: Between National Invisibility and Subordinate Inclusion in Postcolonial Networks of Knowledge Production. *Geography Compass*, 8, 767-777.
- Silva, J.M., Ornat, M.J., and Chimin Junior, A.B. (2013). *Geografias Malditas: Corps, Sexualidades e Espaços*. Ponta Grossa: Todapalavra.
- Soggiu, A. (2015). *Gli spazi LGBTIA a Milano*. PhD thesis, University of Padua, Italy.
- Teeraananchai, S., Kerr, S.J., Amin, J., Ruxrungtham, K., and Law, M.G. (2017). Life expectancy of HIV-positive people after starting combination antiretroviral therapy: a meta-analysis. *HIV Medicine*, 18, 256-266.
- Waite, G., and Gorman-Murray, A. (2011a). "It's about time you came out": sexualities, mobility and home. *Antipode*, 43, 1380-1403.
- Waite, G., and Gorman-Murray, A. (2011b). Journeys and returns: home, life narratives, and remapping sexuality in a regional City. *International Journal of Urban and Regional Research*, 35, 1239-1255.
- Wimark, T. (2016a). Migration motives of gay men in the new acceptance era: a cohort study from Malmö, Sweden. *Social & Cultural Geography*, 17, 605-622.
- Wimark, T. (2016b). The impact of family ties on the mobility decisions of gay men and lesbians. *Gender, Place & Culture*, 23, 659-676.
- Yep, G.A., and Elia, J. P. (2012). Racialized Masculinities and the New Homonormativity in LOGO's *Noah's Arc*. *Journal of Homosexuality*, 59, 890-

Table 1. Main characteristics of the research participants

| Code | Age-group | Trajectory | Years being HIV+ | Previous & current occupation | Experience of stigma in prev. city | Ties when moving |
|------|-----------|-----------------------|------------------|--|--------------------------------------|--|
| AQ | 26-30 | Paris- Barcelona | 5 | - Designer - Shop assistant | Enacted (dating guy; friend) + felt | Online sexual partners |
| TL | 31-35 | Montpellier-Barcelona | 6 | - Self-employed - Shop assistant | Felt | Former boyfriend |
| JU | 26-30 | Montpellier-Barcelona | 3 | - Student - Call centre employee | Enacted (friend) + felt | None |
| GT | 26-30 | Paris- Barcelona | 8 | - Student - Escort/ go-go boy | Enacted (parents; friend) + felt | Online and occasional sexual partners |
| GY | 36-40 | Marseille- Barcelona | 8 | - Employee (high income) - Employee (lower income) | Felt | Occasional friends |
| AD | 31-35 | Paris- Barcelona | 5 | - Employee - Shop assistant | Enacted (friends) + felt | Sexual partner |
| DQ | 26-30 | Marseille- Barcelona | 4 | - Student & Shop assistant - Shop assistant | Felt | Online sexual partners |
| VT | 26-30 | Naples- Barcelona | 6 | - Student & Shop assistant - Shop assistant | Felt | Online sexual partners + a former sexual partner |
| VR | 31-35 | Rome- Barcelona | 8 | - Architect - Call centre employee | Enacted (sister; dating guy) + felt | HIV+ gay friend |
| VF | 41-45 | Rome- Barcelona | 5 | - Self-employed - Shop assistant | Enacted (friends) + felt | Occasional friends |
| UR | 31-35 | Milan-Barcelona | 7 | - Student - Shop assistant | Enacted (dating guy) + felt | Online friends |
| SD | 31-35 | Bologna- Barcelona | 7 | - Student & Shop assistant - Shop assistant | Enacted (brother; friend) + felt | Occasional friends |
| RF | 26-30 | Milan- Barcelona | 4 | - Shop assistant & gym trainer - Gym trainer & escort | Felt | HIV+ gay friend + occasional sexual partners |
| EH | 26-30 | Rome- Barcelona | 3 | - Student & Shop assistant - Employee | Enacted (dating guy; friends) + felt | Occasional friends |
| OK | 26-30 | Naples- Barcelona | 5 | - Intern - Architect | Enacted (dating guy) + felt | HIV+ gay friend |
| FB | 31-35 | Milan- Barcelona | 7 | - Student | Felt | Online sexual partners/friends |

| | | | | | | |
|----|-------|---------------|----|--|--|---|
| | | | | - NGO | | |
| UH | 31-35 | Milan- Rome | 3 | - Advertising - Employee | Felt | Occasional friends and sexual partners |
| JD | 31-35 | Naples- Rome | 4 | - Employee - Shop assistant | Enacted (dating guy) + felt | Former boyfriend |
| GN | 26-30 | Perugia- Rome | 6 | - Student & shop assistant - Shop assistant | Enacted (sister; dating guy) + felt | Former boyfriend |
| SX | 31-35 | Palermo-Rome | 10 | - Student & waiter - Shop assistant | Felt | Online sexual partners and friends |
| SE | 31-35 | Lecce- Rome | 7 | - Student - Gym trainer | Enacted (friends) + felt | Former boyfriend |
| GQ | 21-25 | Pescara- Rome | 5 | - Student - Student & Shop assistant | Felt | HIV+ gay friend |
| NN | 26-30 | Naples- Rome | 4 | - Student - Shop assistant | Enacted (dating guy; mother) + felt | None |
| RC | 31-35 | Catania- Rome | 6 | - Student & waiter - Waiter | Enacted (dating guy; friends and family) + felt | HIV+ partner |