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For a Politics of Complicity. Networks of Care and Friendship Beyond Heteronormativity

Beatrice Gusmano

Abstract: Friendship and complicity are underestimated sources of support and empowerment in the life of queer people who decide to counteract heteronormativity, mononormativity, and monomaternality. The feminist ethics of care, friendship and complicity are not just a matter of personal choice or individual satisfaction, but also a way of life intrinsically political in its aim of building another kind of social solidarity. The feminist ethics of care is the environment in which queer relationships flourish and in which solidarity can emerge when people become aware of their interdependency and vulnerability. Friendship has a subversive and transformative power in terms of questioning relational normativity and redefining care. Complicity underlines the marginal and non-normative position of people pooled by commitment to create another imaginary. Complicity could be what comes before friendship, and the lowest common denominator of solidarity built on a shared worldview. Based on qualitative interviews, the aim of the article is to answer to two important questions: how to take care of each other on the long-term? How to share the benefits of queer networks of care beyond friendship in order to encompass people who live at the margins?

Keywords, Friendship, Complicity, Feminist ethics of care, Heteronormativity

Introduction

Many of the institutions and practices central to patriarchy cannot be reconceived and replaced without the formation of new communities that alter how we meet our material, political, intellectual, and emotional needs. (Weiss, 1995, p. 4)

The management of the contention of the syndemic caused by Covid-19 is exposing the materiality of life, making us conscious of our privileges. The term ‘syndemic’ was first conceived by the medical anthropologist Merrill Singer and her colleagues (2017), but it became culturally accepted thanks to an article by Richard Horton who defined it as “characterised by biological and social interactions between conditions and states, interactions that increase a person’s susceptibility to harm or worsen their health outcomes” (2020). A syndemic poses the focus on social inequalities that affect the severity of the disease, and it is evident how portions of the population have been affected more than others. It is an opportunity to put under scrutiny privileges in Western society: for the majority of people, it is the first time that they are afraid of the contact with the other due to the fear of getting ill, a condition that many disabled and chronic-ill people live every day. For some, it is the first time that they witness break-ups in friendships due to the lack of answers to their basic needs of care, safety, material and economical support. For many, it didn’t happen so often that they had to quarrel outside places in order to enter, or were forced out of trains because they didn’t have a document to show. For many, working conditions have become unbearable due to cuts, overwork, unemployment or to the incapacity of managing smart working and childrearing. The positive features that they have learnt to love about their jobs vacillate: the social and relational aspects, the holy divide between working and private space, the structured daily life beaten by working hours. For many, the safety of dwellings has been put in danger by flat mates who turn out to be positive to the virus, putting anyone in the condition of choosing whether to stay at home close to their flat mates, risking to become infected and isolated, or to find another housing solution, with that feeling of abandoning the people they have chosen to live with.

It is in this context of extreme uncertainty that I keep thinking about two political questions. The first one arises in conversation with Marta Capesciotti, a close friend and feminist companion of mine: how are queer people going to take care of each other on the long-term, supporting the materiality of our lives on a daily basis? The second one was historically posed within the stream of thought regarding solidarity and the sense of community, but also within the activist discourse, for example by the *Sommovimento Nazio-Anale*, a transfeminist network of queer collectives and dissident people active in Italy between 2012 and 2017: how can queer people share the benefits of networks of care beyond friendship in order to encompass people who live

at the margins but that are not integrated in these intimate networks of care? I believe that friendship and complicity are respectively the answer to these questions. They are underestimated sources of support and empowerment in the life of queer people who decide to counteract heteronormativity (Warner, 1991), mononormativity (Pieper & Bauer, 2005), and monomaternality (Park, 2013), balancing the stability, never ending presence and long-term planning granted by the couple and the family. I employ the word 'queer' to refer to the bonds described by gay, lesbian, bisexual, and transsexual people interviewed for this article: such bonds pursue a non-normative project of calling into question the prioritization of the compulsory couple (Wilkinson, 2012) in our society, proposing an alternative model of long-lasting support. Here, queer could be used also as a verb to describe the challenge posed to the hierarchy of intimate relationships (Gusmano, 2022a, 2022b) that sustain institutionalized relationships above any other social tie, be it friendship, complicity, cohabitation, or political comradeship. Such a hierarchy is promoted, naturalized, enforced and supported by mainstream media, culture, and laws and obscures the centrality of friendship and complicity in queer people's lives.

Research design

In order to answer to these questions, I will sustain my thesis through an empirical research that was conducted in Rome (Italy) between 2015 and 2017 (thus, before the syndemic) on the experiences of partnering, parenting and friendship among LGBTQ people. The study was part of the comparative research *Intimate: Citizenship, Care and Choice – The micropolitics of choice in Southern Europe*, an ERC starting grant project based at the Centre for Social Studies of the University of Coimbra (Portugal) from 2014 to 2019. The research team carried out 60 semi-structured interviews to experts in the fields of law, politics, activism, academia, health, and 90 qualitative biographical interviews to LGBTQ people in three Southern European countries (Italy, Spain, and Portugal) on the topics of partnering (lesbian coupledom and polyamory); parenting (LGB mothers and fathers through artificial reproductive techniques); and friendship (transgender networks of care and living with friends in adult life). Within this project, I was in charge of the qualitative interviews conducted in Rome during three springs on the topics of 1) polyamory (2015); 2) mothering through assisted procreative reproduction (2016); 3) queer people living with friends in adult life (2017).

The sample was selected using a snowball method as well as a call for interviewees on websites of LGBTQ associations, groups on polyamory and rainbow families, institutions and social networks. Inclusion criteria required participants to be between ages 25 and 49, living in the capitol city,

and self-identify as either lesbian, gay, bisexual, queer or trans. According to the study, they were currently engaged in more than one relationship at the time of the interview (study 1); they became lesbian or bisexual mothers through artificial reproductive techniques (study 2); they were LGBTQ people currently living with their friends (study 3). A total of 15 participants were recruited for the studies conducted in Rome, and all of them are included in the subset of data for the present article¹. To protect their privacy, all interviews have been anonymized and their age has been defined by a 5-year range.

Empirical research was carried out using the biographical narrative interpretive method – BNIM (Wengraf, 2001) which encourages the interviewee to speak as freely as possible in response to a single initial question: ‘as you know, I’m interested in the study of polyamory/lesbian and bisexual assisted reproduction/queer people living with friends in adult life. Can you tell me the story of your life, all the events and experiences important to you?’. Whilst interviewees knew that they were asked to participate because they complied with the inclusion criteria of each study, the focus wasn’t explicitly on this but sought to elicit narratives about partnering (2015), parenting (2016) and friendship (2017). After the response to the initial question (which varied in length between ten and one hundred and seventy minutes), the interviewer sought further details about events and experiences that had

¹ Specifying their self-definitions on their gender, sexual orientation, partnership status, job and housing, this is the sample used in this article:

1) Polyamory:

- Nadia, 25-29, Ciswoman, Pansexual, Poly relationships, Temporary jobs in the educational system, Living in one of her mother’s apartments;
- Nicoletta, 25-29, Ciswoman, Lesbian/Queer, Non-monogamous, Temporary jobs in the educational system, Living in a friend’s flat;
- Bruno, 25-29, Genderfluid, Faggot, Relational Anarchy, PhD, Flat owned by parents;
- Morgana, 30-34, Ciswoman, Bisexual, Poly relationships, Multiple Administrative Jobs, Living with male partner;
- Rudy, 35-39, Transman, Gay, Poly relationship, Short-term contract, Shared rent.

2) Mothering through ARTs:

- Claudia, 40-44, Ciswoman, Lesbian, Single, Full-time job, House with mortgage;
- Eliana, 40-44, Ciswoman, Lesbian, Civil union, Full-time job, House with mortgage;
- Rebecca, 40-44, Ciswoman, Bisexual, Married, Freelance, Rented flat;
- Chiara, 45-49, Ciswoman, Lesbian, Divorced – now coupled, Full-time job, Rented flat;
- Federica, 45-49, Ciswoman, Lesbian, Single, Freelance, Own flat.

3) Friendship:

- Dario, 25-29, “I need to figure out a few things”, Gay, Single, Voluntary Civil Service, Living in a friend’s flat with her;
- Veronica, 25-29, Ciswoman, Lesbian, “Happy single”, Student, Squat;
- Edoardo, 30-34, Cisman, Gay, Single, Freelance, Living with his ex-partner;
- Emma, 45-49, Ciswoman, Bisexual/open, Coupled/open, freelance, Living with her partner in a friend’s flat;
- Alfredo, 45-49, Cisman, Gay, Coupled, Artist, Living with his friends.

been mentioned in the first part of the interview. The interviews lasted between one hour and a half and four hours and fifty-five minutes, with a mean length of three hours. In contrast to a traditional semi-structured interview, this method allows much greater space for spontaneous links and associations given by the interviewee.

Regarding data analysis, all interviews were audio-recorded and transcribed verbatim. Afterwards, they were analyzed through the NVivo software whose nodes were organized in 19 macro-themes decided by the research team and linked with sociological literature on intimate citizenship, care, choice, friendship, parenting, partnering, LGBTQ, violence, health, and sexuality.

The normative socialization path in the Mediterranean regime

This article applies empirical data from Italy, a Southern European country clustered in the Mediterranean regime (Ferrera, 2005), where well-being has historically been conceived as a private responsibility under the principle of ‘implicit’ familism (Leitner, 2003): the transfer of resources and services are based on solidarity supported by family and kinship (Poggio, 2008), with social policies structured according to this same assumption (Naldini & Jurado, 2013). Given this centrality of family ties, heterosexual marriage still retains much of its institutional strength based on a familistic approach that erases nonheterosexual support networks.

Moreover, when the financial crisis and austerity set in, the national inertia toward the three pillars of Mediterranean welfare since WWII—universal health and education systems, familism, social insurance tied to occupational status (Pavolini & Raitano, 2015) – turned into retrenchment (with substantial cuts to specific policies) within neoliberalism (León & Pavolini, 2014): access to services, education, healthcare, and employment thus becoming arenas of private responsibility (Bertone & Gusmano, 2013). In the Mediterranean regime, three powerful structures sustain the normative socialization path based on familism, order intimate life and impose to whom care is legitimate or mandatory, giving priority to kinship and blood ties: heteronormativity, mononormativity and monomaternalism.

Heteronormativity is defined as the practices and institutions “that legitimize and privilege heterosexuality and heterosexual relationships as fundamental and ‘natural’ within society” (Cohen, 2005, p. 24), reinforcing certain beliefs about the taken-for-granted alignment of sex, gender and sexuality. The concept of heteronormativity, coined by Michael Warner (1991), has its roots in Gayle Rubin’s notion of ‘sex/gender system’ (1975) and Adrienne Rich’s notion of ‘compulsory heterosexuality’ (1980). What is central in Rubin’s article is the formulation of the expression “sex-gender system”

to suggest a “set of arrangements by which a society transforms biological sexuality into products of human activity, and in which these transformed sexual needs are satisfied” (Rubin, 1975, p. 159). Thus, the system imposed by sex and gender on biological sexuality opens the road to a heterosexual drive. The other two classics that develop Rich’s definition of compulsory heterosexuality are Butler’s conception of the ‘heterosexual matrix’ (1990) and Wittig’s account of the ‘heterosexual contract’ (1992). Focusing on the hegemonic discourse, the heterosexual matrix is defined as the “grid of cultural intelligibility through which bodies, genders and desires are naturalized” (Butler, 1990, p. 151 footnote 6), thanks to the compulsory practice of heterosexuality (to a certain body are assigned a stable sex and a stable gender, and therefore a heterosexual desire), and to the Western tradition of dichotomizing concepts in an oppositional and hierarchical order (male/female, man/woman, heterosexual/homosexual). On the other hand, Wittig’s foregrounds how “to live in society is to live in heterosexuality (1992, p. 40). The heterosexual contract is the set of unsaid rules and conventions that specify what a person should and must do in order to be accepted and integrated into a society. All these concepts define a hierarchy between heterosexuality and homosexuality, valuing more the former in any aspect of legal, social and institutional life.

Heteronormativity is reinforced through another normative structure in our life: mononormativity, a term coined by Marienne Pieper and Robin Bauer (2005), refers to the idea that monogamy is “the only moral, normal, natural and healthy form of romantic relationship” (Pieper & Bauer quoted in Rothschild, 2018, p. 29). This idealization and naturalization of monogamy leads to devalue any alternative to sexual or romantic exclusivity, defining the couple as the apex of the hierarchy of intimate relationships. The couple relationship is meant to have primacy over any other social tie, based on the assumption that it is our partner’s duty to take care of all our anxieties, aspirations, and desires, thus causing a form of dependency that can lead to isolation (Acquistapace, 2015), as expressed by Veronica:

The end of the relationship with Gabriella... it is not so much the end of the relationship with her as it is the end of the common life project that we had. And... if you have difficulties and you lean on the person with whom you have a [couple] relationship, and that person moves, you fall. If, on the other hand, you have your solid basis of life, of balance, there is nothing that moves you. (Veronica, ciswoman, lesbian, single, 25-29)

Finally, monomaternality defines the heteronormative boundaries of motherhood:

Monomaternality, as an ideological doctrine, resides at the intersection of patriarchy (with its insistence that women bear responsibil-

ity for biological and social reproduction), heteronormativity (with its insistence that a woman must pair with a man, rather than other women, in order to raise children successfully), capitalism (in its conception of children as private property), and Eurocentrism (in its erasure of polymaternalism in other cultures and historical periods). (Park, 2013, p. 7)

In this dense quote, it appears evident how monomaterialism demands a child to have just one mother, defined by the gender role imposed by patriarchy, in a heteronormative relationship, within a capitalistic and Eurocentric context where the wellbeing of the child is normatively outlined by the nuclear family. Indeed, in the socio-economic context of Italy, choices outside heteronormativity, mononormativity, and monomaterialism are not granted by laws, since Italy is a Southern European country clustered in the Mediterranean welfare regime, where care is socially and legally supposed to be granted by the family. Therefore, as it will be shown in the present article, LGBTQ partners, mothers and friends develop relationship of deep care and material support outside the boxes of traditional institutionalized relationships. Questioning normative relational hierarchies allows people to give equal material and emotional weight to blood relatives, friends, lovers, ex-lovers, housemates, accomplices, mates, fellows and companions (Gusmano, 2021, 2022b, 2022a). It is also conducive to a wider reflection on kinship, on the materiality of life and support, and on the significance of networks of care in our life.

In the present article, I would like to delineate the features of care from a feminist ethics; those of friendship; and the reasons why I advocate for a politics of complicity. Friendship and complicity are not just a matter of personal choice or individual satisfaction, but also a way of life (Foucault, 1981), intrinsically political in its aim of building another kind of social solidarity. A solidarity that aims to fill the gaps of the Mediterranean welfare regime, showing alternatives to the kinship based on normativities, contracts and blood ties.

The feminist ethics of care

We need caring communities. We need localised environments in which we can flourish: in which we can support each other and generate networks of belonging. We need conditions that enable us to act collaboratively to create communities that both support our abilities and nurture our interdependencies. (Care Collective, 2020, p. 45)

Dislocating care from the feminine, the individual and the private (Gilligan, 1982; Parton, 2003; Tronto, 1987), a feminist ethics of care highlights how care is “produced inter-subjectively, in relation, and through practice” (Raghuram, 2016, p. 515). It reaches out to something other than the self and

it involves action (Tronto, 1993): thus, expressing an intention to care is simply not enough (Raghuram, 2016, p. 516). Care means “to watch over, look after or assist in practical ways as well as to feel attachment and fondness” (Jamieson, 1998, p. 10), involving both material support and affect. Rather than considering people as the self-sufficient independent individuals of the dominant liberal theories (Held, 2006, p. 13), the ethics of care considers people as relational. Showing how any of us is vulnerable, therefore avoiding the risk of infantilization, dependency, and subordination, Tronto revealed how care is a relational practice that blurs the boundaries between care-giver and care-receiver: care works through attentiveness (noticing the needs of others); responsibility (assuming responsibility to care); competence (the activity of care-giving); responsiveness (care-receiving, which comprises an awareness of one’s own vulnerabilities) (Tronto, 1993, pp. 127–134). Thus, care is much more than a personal responsibility (Brown, 2015): its features comprise vulnerability, solidarity and interdependency (Roseneil & Ketokivi, 2016). Nicoletta uses the metaphor of the ‘invisible thread’ to describe the interdependent, relational and empowering features of the care involved in her network:

It is as if there were invisible threads... that unite us... but they are invisible, so they do not tie us down. [long pause] That is, invisible in the sense that... they don’t bind us, but they connect us [...]. I am thrilled to feel the ties, the invisible threads that connect us. If you fall, there is always someone there. (Nicoletta, ciswoman, lesbian/queer, non-monogamous relations, 25-29)

In contrast, a neoliberal patriarchal system understands care as protection, charity, and economic productivity (Tronto, 2013). To counteract neoliberal accounts of care, Tronto (2017) advances a reading of care as contextual, collective, and interdependent. First, it is culturally and legally defined by our understanding of inequalities (such as gender, class, ethnicity, race, age, dis/ability) and by normative assumptions regarding relationships (for example, expectations regarding people from which care is ‘due’). Ultimately, care is collective because assuming responsibilities is a collective act, and interdependent since all humans are vulnerable and thus caregivers and care-receivers at the same time. I would add that the reciprocity comprised in the exchange of care from a feminist ethics constitutes a project of political redefinition of the hierarchy of intimate relationships in favour of collective bonds. In the same line, as we will see in detail in the paragraph dedicated to complicity, the Care Collective (2020) proposes a manifesto for a universal and promiscuous care, reaching out beyond family relationships, to redefine supportive relationships by moving away from the dependence on the market and the family created by both neoliberalism and Mediterranean welfare.

Since care is a process, it is necessary to understand how to take care one of the other giving attentiveness, assuming responsibilities, showing competence, accepting responsiveness, meaning that all partners involved are willing to share commitment, to notice each other's needs, and to show our own vulnerabilities. Within this framework, care assumes an overwhelming power that puts caregivers and care-receivers at the same level, giving both the responsibility of taking care not only of each other, but of themselves as well, thus warding off shadows of victimization. As affirmed by Virginia Held, "carers act in behalf of others' interests, but they also care for themselves, since without the maintenance of their own capabilities, they will not be able to continue to engage in care" (2006, p. 31).

Lastly, it is in this process of caring that trust is built: "it is not a series of individual actions, but a practice that develops [...] trust is fragile and can be shattered in a single event; to rebuild it may take long stretches of time and many expressions of care, or the rebuilding may be impossible" (Held, 2006, p. 42). In this process, moments of rupture are a fundamental step to fix things up according to the vulnerabilities of all people involved, and not just on a taken for granted account of a bond. As I showed elsewhere (Gusmano, 2019), this process recalls the technique of *kintsugi*, the Japanese art of repairing broken pottery with a mix of golden powder. This technique comes from a philosophy that considers breakage and its consequent reparation as part of the object's history, something to be proud of, since it embodies the signs of rupture, the flow of time, and the attempts to fix things. The *kintsugi* art of care works thus as a reparative metaphor involving the complexity of doing intimacy through the awareness of one's own limits, and other's vulnerabilities, where the golden powder used to repair broken pottery represents the multifaceted matrix of care, composed of caregiving, care-receiving, and care for oneself.

To conclude, the feminist ethics of care is the humus in which our relationships flourish and in which solidarity can emerge when we become aware of our interdependency and vulnerability. In order to take seriously the call for decentralizing the family and sexual relationships in the sociological imaginary (Roseneil, 2004; Roseneil & Budgeon, 2004; Wilkinson & Bell, 2012), I will now turn the gaze to the features of friendship.

The language of friendship

Supporting friends is a way of life. The story of friendships engages us in this messy cultural tale of connection, separation, and ongoing engagement. (Shepard, 2015, p. 15).

Literature and activism have highlighted the subversive and transformative power of friendship in terms of questioning relational normativity, blur-

ring the boundaries of intimate relationships, and redefining care. Shelley Budgeon (2006) summarizes as follows the empowerment given by friendship: it offers stable reference points for everyday life; it sustains nonconventional identities through the activity of care; it gives a sense of belonging. According to a study conducted on friendships and nonconventional partnerships, Roseneil (2004) highlights some features that counteract the isolation prompted by recent theorizing of individualization: the prioritization of friendship, as opposed to biological kin, particularly for the provision of care, emotional security and support in daily life; the embeddedness in complex networks of intimacy and care beyond the couple; the decenterization of sexual/love relationships, so that sexual relationships are not deemed the sole source of support, care and intimacy; the centrality of friends and practices of self-care in the recovering from painful relational breakdowns.

The basis of friendship lies on voluntary choice, giving rise to the stream of literature regarding lesbian, gay and trans people that theorized the concept of 'families of choice' (Weeks, Heaphy, & Donovan, 2001; Weston, 1991), where the term 'family' has been claimed on the basis of chosen ties and bonds rather than blood relations or kinship formed through marriage. As affirmed by Sally Hines talking about trans communities, the importance of partnering, parenting and friendship for people marginalized due to their sexual orientation or gender identity lies upon emotional agency rather than upon blood ties or kinship (2007). In my empirical research conducted in Italy, it also emerged how queer people rely on the language of family in order to be recognized in their intimate relationships. Many of the lesbian and bisexual mothers I interviewed referred to their friends either as 'aunt' or 'uncle' in order to highlight the centrality of the bond between their children and their friends. Many LGBTQ interviewees spoke about their friendships as 'family', including calling each other 'brother' or 'sister': "I basically consider Federico as my brother: we have a very good friendship, a very close confidential relationship" (Edoardo, cisman, gay, single, 30-34).

Additionally, a female pansexual polyamorous interviewee devised a neologism, namely 'polyfamily,' to refer to friends and lovers to counter the hierarchy between relatives and friends sustained by the Italian culture. These are just a few examples of how friends resort to the language of family to refer to each other, due to the lack of recognition and intelligibility of the social tie of friendship. Moreover, according to Jane Ribbens McCarthy, the language of 'family' is used to convey togetherness, belonging, care, support, and a sense of relationality (2012). She doesn't mention the negative affects attached to the notion of 'family', but a long tradition of feminist writings has shown how women and LGBTQ people try to find out other notions to account for the importance of friendship and other networks of care in their lives. For example, another expression that has been coined to refer

to these important chosen networks of support is ‘communities of choice’ (in contrast with communities of place such as family, school, work, ...) based on common (unconventional) values and interests: this is particularly true for people who have stood up against “what is socially assigned, ascribed, expected, or demanded” (Friedman, 1989, p. 286), such as people living outside heteronormativity, mononormativity and monomaternality. Emma recalls the roots of her community of choice as follows:

I met this companion, a lesbian too, who was the one with whom I started to imagine, because we both found ourselves on this desire, to imagine a life of extended cohabitation [...], starting from choosing and building a projectuality together [:] we really wanted to build something together. A place where there is a personal space, a collective space, and there is mutual support in the moments of trouble, as well as a sharing of the positive moments. Thus, there is also a payback to the whole group when there is a strength and a positivity to give back. So not only in the trouble moments, but also in terms of strength and energy that you give back. (Emma, ciswoman, bisexual/open, open lesbian couple, 45-49)

Friendship and politics go along, “by providing models of alternative social relationships as well as standpoints for critical reflection on self and community” (Friedman, 1989, p. 290). Thus, friendship deals with the construction of identities, selves, communities and relationships in practice.

Friendship, though, doesn’t always work as common ground for a community: not all people involved in a community are related through friendship, and friendship needs time to develop. Care can be a common feature, but it also comes afterwards. What might be a more useful concept to describe the rise of caring communities might be, first of all, complicity, as I will develop in the next section.

Complicity

Political complicities are the most difficult to build. I am convinced that in order to do so it is necessary to have common projects. (Gaviola & Korol, 2016, p. na)

‘Accomplice’ is defined as one associated with another especially in wrongdoing (the English dictionary Merriam-Webster) or “someone who helps another person to do something illegal or wrong” (the online MacMillan dictionary). Etymologically, it comes from Latin, meaning at the same time ‘involved’ and ‘folded together’, and refers to a person taking part with others in non-conventional actions, which is exactly what queer people do when they try to build non-normative ways of bonding. Complicity could be a synonym of what Marylin Frye and her lesbian feminist companions

called “ethical compatibility”: “some deep likeness of ethical and political intuition” (Frye, 1995, p. 157). According to Frye, though, ethical compatibility is not enough. What really held together her lesbian community was resistance to “heteropatriarchal forms of social organization [that] keep women apart from women” (Frye, 1995, p. 157). According to Frye, this resistance was sustained not so much by building something, but on clearing space for something. Thinking about queer mothers, partners and friends in Italy, I would say that the space cleared up by complicity allowed for their needs and desires to be answered to: the aspiration for loving more than one person that is not taken into consideration by mononormativity; the desire for mothering a child as a lesbian couple or as single (lesbian or bisexual) mothers that is not granted by the Italian law; the project of living together with friends that is not contemplated by the normativity of adulthood. They bond through complicity on the basis of shared strengths and resources, not on the basis of victimization. This powerful epistemological reading against victimization was taken forward by bell hooks (1995) while arguing why sisterhood as thought by white middle-class feminists was not an empowering conceptualization to comprehend all women’s experience: the common ground of their solidarity was sharing strengths and resources, not the fact of being subjected to male power as victims. In the same line, I argue that queer people don’t become accomplices through victimization, but through the drive to resist materially to the normativities that constrain their lives: heteronormativity, mononormativity and monomaternalism.

Complicity is always understood in negative terms, and I want to reappropriate it as a term that can challenge the private nature of friendship by providing models of alternative social relationships as well as standpoints for critical reflection on care and intimacy. In a heteronormative, mononormative and monomaternalistic society, some practices are strictly bond with a specific type of relationship. Let’s think about kissing each other on the lips or calling each other ‘amore’ [literally, it means love, and in Italian it is used in the same guise that ‘sweetheart’]: those are affective practices relegated to romantic or parental love. In many Italian feminist and transfeminist contexts, activists call each other ‘amore’ and, before Covid, they also kissed each other on the lips. I read those practices as a form of complicity against a heteronormative world that relegates these two practices to romantic or parental love.

Also the Care Collective coined an expression that relies on a negative term, ‘promiscuous care’ (Care Collective, 2020): taking inspiration from Douglas Crimp, an ACT UP activist and academic who prompted promiscuity as an intimate experimentation among gay men during the HIV/AIDS crisis in the 80s, the Care Collective defines promiscuous care as

an ethic that proliferates outwards to redefine caring relations from the most intimate to the most distant. It means caring more [...]. 'Promiscuous' also means 'indiscriminate', and we argue that we must not discriminate when we care [...]. It does [...] recognise that care can be carried out by people with a wide range of kinship connections to us". (Care Collective, 2020, p. 42)

Promiscuous care is a strategy to get out of the rigid boundaries of the familistic and Mediterranean care, and it could be the type of care encouraged by complicity.

Complicity is also a term that can encompass our bonding relationships without reckoning to the language of the family. In particular, feminists of color underlined the improper use of the term 'sister' by white feminists (Lugones & Rosezelle, 1995): it is a term learnt by white feminists in the United States of America during the Civil Rights movement thanks to the use made by feminists of color, who coined a non-biological use of the term as a form of resistance to racism and slavery. White feminists started to use it as a way of resisting the white male domination, even though they never sustained sisterhood as a biological bond of support within the family, an institution defined as oppressive by white feminists. Since the egalitarian relationship that sisterhood is supposed to uphold is not the reality of the relationship between white women and women of color, Lugones introduces the term "compañera" by Latin American women to depict "the sort of relation that consists of joining forces and efforts and imagination in common political struggles" (1995, p. 138). Egalitarianism is comprised in this use of the term, and it refers also to companionship and participation in common political struggles. Contrary to sisterhood, 'compañerismo' doesn't involve unconditional bonding: "if someone ceases to be involved or interested in or betrays the struggle, the relationship is at an end with respect to that person" (Lugones & Rosezelle, 1995, p. 138).

In Italian we also use the same term, 'compagna' (it could be translated as companion, comrade, fellow, mate), and the same happens in Portuguese ('companheira'): as my friend and researcher Gaia De Luca pointed out while she was reviewing this chapter, its etymology comes from Latin, meaning "the person who eats bread with others". According to the online Italian dictionary Treccani, 'compagna' refers to people who share common circumstances, or the same spiritual bond; to athletes in the same team; to the romantic partner; to a cohort of people who hangs out together; to people active in the Communist or Socialist party. Thinking about Kurmanji, the term 'heval' designates the kind of political commitment and deep relationship among Kurdish activists. A political understanding of the term seems to pool these four languages. While I appreciate the use of the term 'compagna' in Italian, I advocate for the use of 'accomplice' as it underlines more the

marginal and non-normative position of people pooled by commitment to create another imaginary. Complicity could be what comes before friendship, and the lowest common denominator of solidarity built on a shared worldview. You don't need to be best friend in order to speak up in front of an injustice. Many actions of solidarity happened between unknown people that refused to keep walking without stopping in front of an injustice.

An example can be given by lesbian and bisexual mothers interviewed in the project *Intimate* who affirmed how they were able to undertake the path of artificial reproductive techniques. Chiara declared:

Before we did everything [the insemination], I remember we used to do a peregrination from one family to another. Then we would go to dinner one week to one family, one week to another: "but how did you do it? What's it like? How do you feel?". People already with kids, right? To hear experiences, to collect testimonies, to know how it was going [...]. I remember it was... and it still is a pleasure, a pleasure to hear the stories of these people, to see their lives [...]. This has helped me so much. (Chiara, ciswoman, lesbian, divorced from her ex-wife, now coupled, 45-49)

In this occasion it would be inappropriate to talk about friendship. What was at work for Chiara, and for many other women, was complicity. Complicity has to do with solidarity, with a shared feeling of desire to stand up, to change things, to keep fighting, and to overcome the discriminatory laws that in Italy do not allow lesbian, bisexual, trans, single and straight² people to have access to reproductive rights. Accomplices make an agreement on a vision of the world; it is a daily choice based on material conditions; it means finding oneself accomplice because you face practical issues with the same tools and the same reading of the world around you. Complicity then occurs on a concrete basis; it is not assigned tout court: one can be complicit on some issues but not on others.

Thinking about the management of the Covid-19 syndrome, we could say that many social bonds were put at risk by the different choices that each one had to make regarding the degree of sociality to carry on. The strategy to contain the diffusion of the virus and to get political consensus carried out by the Italian government was that of spreading fear (to die or to infect fragile and older people) instead of solidarity and social bonds (Boni et al., 2022). The hegemonic discourse was that of protecting fragile people: people who get infected or people who shut their social ties are fragile, especially from an emotional and psychological point of view. Two years after the beginning

² Straight people are not allowed to use ARTs if they don't comply with the law on assisted reproduction, according to which only married or cohabiting different-sex couples with documented infertility can access them. When abroad, many interviewed mothers met straight Italian couples that had to go abroad to fulfil their desire to parent.

of the syndemic, the long-term effects of this strategy are evident: isolation; loneliness; depression and anxiety especially among young people (Racine et al., 2021). In complicity with their peers, but in secrecy with respect to the dominant groups, people carried out different strategies to cope with the spread of the virus, as mutual aid groups showed us during the outbreak of the syndemic. The Care Collective speaks of caring communities, understood as “localized environments in which we can flourish: in which we can support each other and generate networks of belonging” (2020, p. 44). In my reading, this practice must be built day by day, through recognition, reciprocity, and redistribution the 3Rs that Mari Luz Esteban proposes as basic dimensions of a new social theory that foresees “forms and alternatives of solidarity and cohabitation, more or less formal, and acknowledging and visibilizing those that already exist but are hidden by the power of the familistic and romantic ideology” (Esteban, 2011, p. 183).

Conclusive thoughts

The collective desire to make a better world for the affects we shared, a world we could live in as dykes with the fantasy of a good communal life sustained minimally by existing social infrastructures, and above all by our connections with friends and with past, present and future lovers. (Borghi, 2016)

As a lesbian, feminist, white ciswoman, I have been reading my findings through shared experiences within networks of care, complicity, feminist and transfeminist activism, friendship. First of all, I would like to thank all the friends, colleagues and accomplices that shared with me their thoughts and comments regarding the topics of my research and of our lives.

This article represents my farewell to academy: I gather here some of the main reflections that I have developed in these years of research concerning care, intimate relationships beyond the couple and the family, friendship. Here, I add the concept of complicity as a proposal to describe the lowest common denominator of caring relationships within communities that develop solidarity beyond heteronormativity, mononormativity and monomaterialism. I identified these three structures as the socialization path that leads to put in place a hierarchy of intimate relationships where the family and the romantic couple are deemed the apex of this hierarchy.

A key contribution to the redefinition of the hierarchy of intimate relationships (Gusmano, 2022a, 2022b) is provided by the feminist ethics of care. Care is a relational practice that brings to light our vulnerabilities, strengths and interdependence. It is a contextual and collective process in which we develop solidarity notwithstanding the normative ideal that legally and socially legitimizes blood ties over any other kind of relationship. Reading care

through a feminist ethics allows for an egalitarian bond among care-receivers and care-givers, where care for oneself is deemed necessary to be present in this caring exchange. This understanding of care fends off risks of victimization and puts at the centre our shared strengths and resources.

In the beginning of the chapter, I posed two questions that led my interpretation. Even though the research was conducted before the syndemic, some interesting features emerged from the fieldwork, and they could be very useful in promoting other strategies of caring beyond the family. I offer a reading of friendship as the bond that can support us on the long-term, caring of each other also in the materiality of our lives on a daily basis. A bond that is based on voluntary choice and emotional agency (Hines, 2007), giving rise to communities of choice (Friedman, 1989). On the other hand, I proposed complicity as the tie through which we can share the benefits of our communities of choice beyond friendship in order to encompass people who live at the margins but that are not integrated in our intimate networks of care. Complicity is a way to resist heteronormativity, mononormativity and monomaternalism, clearing space for non-normative desires and projectualities to flourish. Prompted by the Care Collective (2020), a universal and promiscuous care could represent the aim of our solidarity bonds on a large scale, setting off caring communities based on recognition, reciprocity and redistribution (Esteban, 2011). In my reading, recognition is fundamental in outcast communities where identities and bodies struggle against the normativities of the mainstream world; reciprocity is the root of an egalitarian relationship where vulnerabilities, strengths and care are shared; redistribution aims at sharing affective and material resources in a Mediterranean welfare regime that disallows social bonds outside the family and the romantic couple.

As wisely noted by Sara Ahmed (2017), in neoliberalism resilience is considered a high value. Resilience is “a technology of will [:] be willing to bear more” (Ahmed, 2017, p. 189) in order to comply with the promise of happiness. This happiness, though, is built and sustained around a heteronormative, mononormative and violent ideal:

the violence of the elevation of the family, the couple form, reproductivity as the basis of a good life [...]. We will expose the happiness myths of neoliberalism and global capitalism: the fantasy that the system created for a privileged few is really about the happiness of many or the most. (Ahmed, 2017, p. 257)

When you decide that you won't follow that path of happiness, because it's not your happiness, you start to snap some bonds, to end “your connection to those who put you under pressure to go in a direction you are not willing to take” (Ahmed, 2017, p. 194). Sometimes it is better to break those ties that lock us back into dependence, normativity, and into an expectation

of happiness that doesn't correspond neither to our material means nor to our emotional and affective desires. Thus, we choose caring communities in which there is the lowest common denominator of complicity, in which we know that the ethical cornerstones of our lives are valued and that, as a result, so are our lives and our desires of happiness. The basis of this community turns out to be not so much friendship, which can develop over time in communities of choice, as complicity. Neither friendship nor complicity can simply be relegated to intimate relationships: they represent the basis of inclusive social solidarity.

Consequently, the feminist ethics of care, friendship and complicity are tools we can use to dismantle the hierarchy of intimate relationships, giving equal weight to our relational ties with which we resist the normativity of life in order to exist.

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