

## THE CRITICAL INTERSECTIONS OF DISABILITY AND NON- NORMATIVE SEXUALITIES IN SPAIN

Paco Guzmán & Raquel (Lucas) Platero

### Abstract

Critical approaches on disability and non-normative sexualities are an emergent space for debate in Spain nowadays, where most of the discussion had formerly focused on fighting discrimination and gaining rights. Nonetheless, there is a legacy of critical approaches that is not sufficiently explored, tracing a critical history that does not come out of the blue. The emergence of the Independent Living Movement, transfeminism and the queer activisms are a result of the democratization process, global influences and the experience gained over time, which have produced certain sexual and bodily citizenship rights. These critical approaches pose new challenges and opportunities that are discussed with five interviewees, whose intersectional experiences as crip and queer activists go beyond the divide between private and public. Their testimonies approach identity formation, recognition and interrelations between sexuality and disability. Today these testimonies are even more relevant, since the situation of austerity cuts and backlash highlights the issues discussed of passing, coping, invisibility/hipervisibility and community building, revealing a dynamic context that requires further research.

**Keyword:** activism, disability, crip theory, queer theory, intersectionality

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*In memoriam* of Paco Guzmán<sup>1</sup>  
(Madrid, 2013)

For more than a century there has been an ongoing critical debate about the intersections of “compulsory heterosexuality” and “ableism” (Peers, et. al., 2012). Being aware of this legacy implies questioning the “novelty” of the critical activisms, artistic practices and literatures surrounding representations of sexuality and disability. These debates have not generally been carried out in terms of “compulsory heterosexuality” or “ableism”. Moreover, these debates have not always implied an intersectional analysis, and they have also not been frequent in Spain. In Spain, the critical standpoint is best represented by the experiences and debates developed by the “Independent Living Movement” (*Movimiento de Vida Independiente*) as well as the work of some individuals who, in their personal lives and activism, have questioned social norms. Spanish debates also include international influences which contribute to the possibility of this debate in the current moment.

We would like to begin by introducing the term “*capacitismo*,” which is the translation of *ableism*, a term that is still looking for its place in Spanish to designate those with a disability, or as it is known here now, “*diversidad funcional*” (functional diversity), and who are still being discriminated against. It is problematic how, in Spain, since the 80s and 90s, certain structural discriminations have been progressively understood as such and have been acted on, such as sexism, homophobia, xenophobia, classism, and other “isms and phobias”. But, it has taken a long time to face the need to establish a concept such as “*capacitismo*.” The use of this term, however, is still very limited. Even those who deny that these discriminations even exist, or that they are structural in nature (conceiving of them as an individual matter and therefore, private and outside the realm of State action), need these very same concepts, which are key for communicating realities that often remain invisible.

Ableism is rooted in the belief that some capacities are intrinsically more valued than others, and that those who have these capacities are better than other people; that some bodies are able, and others are not, some people have disabilities or functional diversities, and others are free from those, and that this binary is clear (Toboso & Guzmán, 2010). Ableism is also constructed through a medicalized notion of the “normal body,” along with a pattern of normative beauty which is demanded by capitalist societies. Well-known intellectuals such as Garland-Thomson (2002) underlined that some crucial occidental values (such as normalcy) are built upon the disabled body, even pointing out the relevant role played by notions such as the “cripple” or the “miracle” in some Christian religions. Both the disabled body and also the female body, are critical for articulating the privilege embod-

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<sup>1</sup> Paco Guzmán passed away recently in 2013, a great friend. I would like to pay tribute to his memory by recommending reading his farewell letter, “Panegírico”, which was published in several newspapers. Accessible online at (last access October 20th, 2013): [http://www.eldiario.es/retrones/Voces-Panegirico\\_6\\_138646141.html](http://www.eldiario.es/retrones/Voces-Panegirico_6_138646141.html)

ied by men without functional diversity. This hierarchy of privilege and historical legacy determines that how society is unable to conceive of people with disabilities as subjects and objects of desire (Guzmán & Platero, 2012), to mention just a few ways to understand the relevance of critically studying ableism and sexuality. Our analysis will show that ableism relies on compulsory heterosexuality and occidental values of what is acceptable, including racist and classist bias. In addition, we believe that an intersectional analysis is needed in order to study ableism.

This essay critically discusses the experiences of people who embody both disability and non-normative sexualities. This discussion includes not only the concrete forms in which people are excluded but also how they have agency to direct their lives, including their standpoints in regard to desire, sexuality, sex and love and in regard to the normal body, beauty and health, and the standards established by society. Our work is inscribed in a specific social context: Spain, which in its current situation of crisis and austerity politics, is applying global capitalist tendencies which require productive subjects, in this case able and heterosexual (McRuer 2006:1-2; Ferreira y Rodríguez 2008:163). Interestingly, capitalism is tolerant of queerness and disability as long as people follow the logic of production and consumerism, but it's a society that still considers "disability" and "homosexuality" as de-articulations of normalcy.

This article is organized in three sections; the first one briefly addresses the global and domestic intersections of disability and non-normative sexuality. Afterwards, we discuss the tools of analysis, starting from situating the researchers, then discussing theories of intersectionality and later how we designed the dialogues with five people who identify as LGBT and disabled. Lastly, we discuss the narratives that appear in these dialogues, which are the basis for our conclusions.

## I. Critical discussions over disability and non-normative sexuality.

Many authors call attention to the parallelism of those critical theories that focus on disability (such as 'crip theory') and its equivalent in theories that focus on sexuality (such as queer theory) (among others, McRuer, 2003, 2006; Kafer 2013). Both critical theories are useful to understand that neither sexuality nor disability are natural or biological but, instead, are extremely rooted in cultural values, being a product of concrete historical moments. Briefly, we would like to underline that crip theory has appeared after a long struggle against the injustice lived by those people who have been (and often still are) considered second-class citizens. Literally crip is slang, an offensive word used to designate a person who has a disability or cannot use his or her limbs. It derives from the offensive English term "cripple", and does not have a direct translation in Spanish, which creates a strong difficulty in using the theory as such. Some have tried to use Spanish terms such as "tullido" or "cojo" to translate "crip", but only time will show if they are appropriate.

Focusing now on "queer theory", the term "queer" also is used with a derogatory intention, an insult that does not have a translation into Spanish. Sometimes it has been

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translated into “*maricón*” (faggot), “*raro*” (weird) or “*torcido*” (crooked). The term “queer” is difficult to translate into Spanish, since often has been reduced to sexuality and gay men, and frequently ‘queer theory’ is presented separated from feminism. Nowadays, the term “queer” has been imported into Spanish and is used without translation, losing the insult and the reappropriative connotation and meaning that it has in English.

As Robert McRuer (2003) states, these two critical approaches – queer and crip theories -- deal with subjects who have inherited a historical legacy of pathologization, who are conceived as individuals that require medical and/or legal surveillance, which in turn functions to position them as minoritized subjects who depend on being recognized and accepted by society as “persons”. Homosexuals and cripples have historically been called “sinners”, “evil” or “defective”; individuals who experience daily discrimination that affects relevant areas of their development and socialization, such as family acceptance, access to education, housing, employment or leisure, among others (McRuer, 2003). As a consequence, they experience isolation even within their own families, neighborhoods, or the most immediate surroundings in which they live (Sandahl, 2003: 25-56). Being constructed and presented as a “minority” or a “collective”, not so much in the quantitative sense, but as being different from the common majority has various effects. On the one hand, through becoming aware and being empowered, they can create a sense of community and identity. On the other, being marked as minority contributes to stigmatizing and separating their concerns from mainstream discussions on privilege and discrimination, while presenting non-normative sexualities and disabilities as particular and individualized problems that do not challenge normative ideas of ‘the normal’. The identity politics of the LGBT and disability movements have a possible negative impact of presenting all individuals in these collectives as homogenous; although these politics focus on critiquing social discrimination, oftentimes ableisms and compulsory heterosexuality are not challenged.

Lastly, it is also relevant that these minoritized subjects have created social movements, intellectual and artistic productions that question the naturalization of the social norms linked to normal sexuality or the normal body. In turn, disabled and LGBT movements try to relocate people as subjects of social change, not so much as objects of study or treatment (McRuer, 2003). These critical movements, artists and intellectuals promote agency and empowerment, sometimes using social protests, but also using another strategy, one based on humor, including reappropriating negative names such as “*cojo*” (cripple), or making jokes about themselves, or presenting paradoxes. Humor allows individuals to cope with a society that often asks them questions that it would not dare ask others, a society that does not understand their daily difficulties, a sense of humor that is useful to make fun of stereotyped representations (Allué, 2003).

### 1.1. Critical discussions of disability and non-normative sexualities in Spain

Critical approaches on disability and non-normative sexualities are an emergent space for debate in Spain, where most of the discussion had formerly focused on fighting discrimination, and gaining rights and respect. Nonetheless, there is a legacy of critical approaches

that is not sufficiently explored, and some initiatives remain unknown to the majority. This is the case of the Basque artist Asun Balzola (1940-2006), who wrote a book called “*Desde mis ruedas*” (“*From my wheels*”) (2002), in which she explored both her disability (that resulted from an accident) along with her bisexuality. In this delicious, cruel and unexpected book, Balzola is ahead of her time (Pérez Sánchez, 2007); her work could be compared to the recent work of Alison Bechdel, author of “*Dykes to Watch Out For*”, “*Fun Home*” and “*Are You My Mother?*”. In her time, Asun Balzola used to be compared to Frida Khalo, a comparison she rejected, since she did not want to be the subject of pity, or understood as a victim of a tragic situation. She represented herself as someone who smiled and was in motion, closer to the rather different model of Flannery O’Connor, who was characterized by a strong sense of humor (Pérez Sánchez, 2007: 220). Balzola is an example of the kind important writing that is ignored, minoritized just like the subject matter under discussion.

We also find traces of this intersectional reference to sexuality and disability in the press, as with these two relevant examples. The first addresses the life of Julio Cuesta, the first transgender person who was able to change his identity in official documents without having to undergo surgery. He is also a man who has a 79% disability as recognized in his State-granted certificate (*El Mundo*, 2007). The second article discusses the marriage of a lesbian couple, a Roma woman and her partner, a woman with a physical disability. The article documents how both faced harassment, including name-calling (Morán, 2009). On the other hand, as positive references, we found an essay by Jesús González Amago (2005) titled *Reinventarse. La doble exclusión: vivir siendo homosexual y discapacitado (Re-inventing Oneself. The Double Exclusion: Living as a Homosexual and a Disabled Person)* (Madrid: CERMI), as well as the wonderful documentary by Frank Toro (2004) *El sexo de los ángeles (The Sex of Angels)*. On the Internet there are some Spanish sites on non-normative sexualities and disabilities, such as [www.discapacitados-gay.com](http://www.discapacitados-gay.com) and <http://lgtbdiscapacidad.blogspot.com>. Lastly, we would like to highlight the work of queer and disabled activists such as Beatriz Gimeno, Isabel Lodeiro and Antonia Llera who are active in the LGBT movement and represent its most visible leaders. But, aside from the above mentioned, there are few people who have publically represented or spoken about the needs of people who embody disabilities and non-normative sexualities. This absence can be better understood by taking into account the political history of the LGBT and disability movements, which, since the return of democracy up to the present, have focused on ‘urgent matters’, such as gaining visibility, achieving rights, and presenting themselves as useful and productive members of Spanish society, a politics that marginalizes critical approaches.

Moving into a different sphere of critical activism, we have the example of the Independent Living Movement (*Movimiento de Vida Independiente*), which has helped create a new, self-assigned, term to refer to themselves, substituting “disability” and “handicapped”, for “functional diversity”. This term intends to demonstrate that people with functional diversity have the capacity to choose and control their own lives. The term “functional diversity” emerged in the Independent Living Forum (*Foro de Vida Independiente*) in 2001, where Manuel Lobato, Juan José Maraña and Javier Romañach generated a virtual community on the net, which filled a gap in the world of disability, and offered insights and critical thinking on these matters (Lobato & Romañach, 2003: 1). The Independent Living Movement in Spain has been successful in introducing a critical perspective to people who a priori were not familiar with the ableism critique. Some feminist and LGBT activists, art-

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ists and political leaders are now including functional diversity in their agendas. This is the case of the encounter between the feminist group in Madrid “Agenda de Asuntos Precarios Todas aZien” (Precarious Affairs Agenda Everything for a 100) and the Independent Living Movement, as is documented in the book *Entre cojos y precarias haciendo vidas que importan* (*Between Crips and Precarious Women, Making Lives That Matter*) (Traficantes de Sueños, 2012). This polyphonic book reviews the debates held over the course of three years by these groups. In these discussions, people only represented themselves, and talked about the debates that brought them together. From these conversations emerged the need to re-conceptualize the value of “care” and interdependence in our society, naming the vulnerability and the norms that limit [our] bodies. It is not that two “marginal groups” in activism bring “particular problems”; but that they conceived themselves as activist groups that produced a fruitful discussion, questioning the role given to care, the productive subject, and the necessary interdependence of people.

The second activist and artistic example is the collective project called “Yes, We Fuck” (<http://vimeo.com/yeswefuck>), developed in 2003 by Raúl de la Morena and Antonio Centeno. It consisted of a documentary with the same title, aimed at providing a critical discussion of human sexuality, re-conceptualizing the sexual experiences of people with functional diversity. While preparing this documentary, they interviewed and cooperated with critical activists (mostly linked to the functional diversity movement), but also from the post-porn movement (collaborating with the Barcelona collective ‘Post-op’). As they state in their website, and confirmed later in a personal interview (July, 1<sup>st</sup>, 2013):

*“We want to promote ways of understanding sexuality outside of the heteronormative framework, including the joy provided by prosthetics, de-genitalizing sexuality, and promoting the search for new forms of obtaining pleasure, along other emancipatory reflections, clearly promoting people’s agency”.*

Experiences such as the Catalanian “Yes, We Fuck” project are not *mainstream*, but still make visible the emerging critical standpoint of those subjects with functional diversity who think about themselves as people with desires, and who are, at the same time, desired. The future impact of this work on the general understanding of sexuality and disability in Spain is unknown, but it will surely include the legacy of social movements and artistic practices that present new role models and those representations that are not found in mainstream media.

The examples presented in the Spanish context describe a situation in which non-normative sexualities and functional diversity communicate to create emerging critical activism that challenges normative approaches, but that also fails to present a larger criticism of the relationship between queerness, feminism and disability, where in race and class could be included in the analysis. It also makes evident that there is a lack of interest within mainstream LGBT and disability movements in discussing the needs of queer people with functional diversity, who are most often perceived as a “minority within a minority”.

## 2. Analysis

In this section, we develop our position as situated subjects researching in the fields of Independent Living Movement and non-normative sexuality. We introduce ourselves briefly, and then move into the intersectionality theories we used as a method for research, and which allowed us to understand the tangled and embodied plural position of those people with functional diversity and non-normative sexualities. Finally, we discuss how we faced the methodological question of developing dialogical relationships with the interviewees.

### 2.1. Researching situated subjects.

In this section we begin by doing an exercise of situated knowledge (Haraway, 1995; Hill-Collins, 2000), which allows us to show who we are in regard to the subjects of the study. Our interest is marked by our life trajectories, which causes a personal interest that motivates this essay. Paco Guzmán (1976-2013) was a researcher at the Philosophy Institute CCHS-CSIC in Madrid, and an activist with the Independent Living Movement. He had a physical congenital functional diversity, with reduced mobility. He used a wheelchair and had several personal assistants who helped him with all of his daily life's physical activities. Paco Guzmán passed away in 2013; this posthumous paper can be understood as a tribute to his memory, since Independent Living was one of the issues he cared about the most. Raquel (Lucas) Platero, who is part of the Deaf<sup>2</sup> community since Lucas' parents are Deaf, teaches on functional diversity in public high school and university courses, and is a queer activist. Both of us see ourselves as part of the discussion about the intersections of Independent Living and non-normative sexualities, being aware of not wanting to represent anyone from a distance, but only ourselves. This article is rooted on the dialogues we sustained with people with disabilities, as agent subjects who direct their own lives, breaking the normative idea that conceive them as "victims". Therefore, we want to locate the relevance of the personal experience of people with functional diversity when they speak of their bodies and minds in the "comprehension of our reality in the context of our struggle, resistance and survival" (Morris, 1997:20).

### 2.2. Intersectionality

Here, we will introduce the theories of intersectionality, a concept that emerged within 1970s and 80s North American Black feminism, rooted in the interactive and relational effects of class, race, sexuality, migration, age and disability, among others. Two authors are called up when discussing the origins of intersectionality, the Combahee River Collective (1977) with their "A Black Feminist Manifesto" and the entrance of the intersectional analysis in the academia with Kimberle Crenshaw (1989, 1991). Other relevant authors have been Angela Davis, Alice Walker, Audre Lorde, Patricia Hill Collins, Barbara Smith,

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2 In Spain the Deaf community refers to itself by capitalizing the adjective 'Sordo' or 'Sorda' when used as a self-descriptor. We honor that usage by translating Sordo as Deaf, maintaining the capitalization.

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bell hooks, Cherrie Moraga, Gloria T. Hull, Chandra Talpade Mohanty<sup>3</sup>, among others who have mostly focused on the study of the interrelation of race, gender and class. They represent the North American perspectives on intersectionality developing from the antiracist and feminist movements to discuss the continuities found in different axes of oppression. In the United Kingdom, authors such as Stuart Hall (1980, 1992), Paul Gilroy (1987), Avtar Brah (1996), Nira Yuval Davis and Flora Anthias (1992) built a constructionist approach, within the cultural studies departments (Prins, 2006; Romero Bachiller, 2010: 14-15). This UK approach focused on race much latter than the American one, manifesting the impact of not only US women's studies but also the EU policies on diversity. Also, the debates in UK and in Europe have often focused on the hierarchies among different categories (Puar, 2011).

In Spain, it is within social movements and the academy where there is a growing interest in studying multiple forms of discrimination, which slowly progressed to a more complex and updated approach to intersectionality. Authors such as Dolores Juliano<sup>4</sup>, Verena Stolcke<sup>5</sup> or Raquel Osborne<sup>6</sup> have made critical contributions in Spain to the study of the living conditions of "other" women, discussing central feminist issues, and contributing to prior discussions of otherness. Also, there are numerous publications since the end of the twentieth century, which are rooted in intersectionality and an analysis of multiple forms of discrimination. These Spanish authors call attention to intersectionality as tools for social analysis research, as seen in the book edited by Platero (2012) on non-normative sexuality and intersectionality in Spain. Also there is a clear impact of those studies completed with funding from the European Union (see MAGEEQ and QUING Projects, directed in Spain by María Bustelo) and the United Nations (see the Project coordinated by Raquel Osborne on LGBT migrants in Spain). This approach also contains a significant transnational perspective, such as the research conducted by Joseli Maria Silva (2012) on Brazilian trans women who migrated to Spain. These intersectional research projects include a focus on anti-discrimination linked to the application of European directives and/or the influ-

3 Despite the fact these authors are well known and widely published in English and other languages, only some of their work is translated into Spanish:

- Davis, Angela (2004). *Mujeres, Raza y Clase*, Akal, Madrid.
- hooks, bell (1996), «Devorar al Otro: deseo y resistencia», *Debate Feminista*, 7 (1), México.
- hooks, bell (2000), *Todo sobre el amor*, Ediciones B, Chile.
- hooks, bell; Avtar Brah, Chela Sandoval, Gloria Anzaldúa, Kum-Kum Bhavnani, Margaret Coulson,

Chandra Talpade Mohanty, Jacqui Alexander (2004), *Otras inapropiables. Feminismos desde las fronteras*, Traficantes de Sueños, Madrid.

- Lorde, Audre (2008), *Los diarios del cáncer*, Hipólita, Rosario.
- Lorde, Audre (2010), *Zami. Una biomitografía*, Horas y horas, Madrid.
- Moraga, Cherrie (2007), *La última generación*, Prosa y poesía, Horas y horas, Madrid.
- Sandro Mezzadra, Gayatri Chakravoty Spivark, Chandra Talpade Mohanty, Ella Shohat, Stuart

Hall, Dipesh Chakrabarty, Achille Mbembe, Robert J. C. Young, Nirmal Puwar, Federico Rahola (2008). *Estudios Postcoloniales. Ensayos fundamentales*. Colección: mapas-19, Traficantes de sueños, Madrid.

• Smith, Barbara (2005). Homofobia, ¿por qué hablar de ello? «*El eje del mal es heterosexual*». *Figuraciones, movimientos y prácticas feministas queer*. Carmen Romero; Silvia Dauder y Carlos Bagueiras, Traficantes de Sueños, Madrid, pp. 61-67.

- Walker, Alice (1995). *El color púrpura*, Plaza & Janés, Barcelona.

4 See Juliano 1992, 1998, 2001, 2002, 2004, 2012,

5 See Stolcke 1998, 1992, 1993, 1995, 1997, 2003, 2004, 2007.

6 See Osborne 1991, 1996, 2004, 2009, 2011.

ence of international literature. Lastly, there are still too few translations of international writings on intersectionality, which are relevant to promote further discussion (Eskalera Karakola, 2004; Rodríguez Martínez, 2006; Platero, 2012).

Since the first perspectives in 70s that dealt with simultaneous identities and discrimination, to current perspectives of how discrimination is articulated, intersectional theories have used concepts such as “simultaneous oppressions” (Combahee River Collective, 1977), “intersectionality” (Crenshaw, 1989), “matrix of domination and interlocking systems of oppression” (Collins, 1990); “axes of inequality” (Knapp, 2005; Klinger y Knapp, 2007; Yuval-Davis, 2006; Marx Feree, 2009; Winker y Degele, 2009), “interdependent axes of oppression” (Dietze, Walgenbach y Hornscheidt, 2007), “multiple discrimination” (Duclos, 1993; Fredman, 2005; Grabham, 2006; Grabham *et al.*, 2009), “multiple inequality”, “assemblages” (Puar, 2007). If we had to define what intersectionality is, we could say that its central focus is how different sources of inequality such as gender, ethnicity, class or sexual orientation, as well other social categories, are far from being “natural” or “biological”, and therefore are constructed and interrelated. It is not about listing endlessly to all possible existing inequalities, but instead to study those manifestations and identities that are key in each context, and how these inequalities are embodied to provide a temporal meaning. The reiterative use of the etcetera when discussing the different inequalities demonstrates a multiplicity of intersectional and complex situations that may be making invisible relevant questions; lacking this comprehension of social problems and people’s experiences may result in presenting only partial explanations (Platero, 2012). Our goal is not only to acknowledge sex, sexuality and disability, but also how privilege and legitimacy operate, often relating directly at least to gender, class and race (and to other inequalities, of course). Most early Spanish intersectional literature on disability has focused on the “double discrimination” of women, including a gender analysis that often denounced that feminism or the disability movement did not pay attention to disabled women and their particular needs<sup>7</sup>. Since the start of the 21<sup>st</sup> century, these approaches have become slightly more complex, including sexuality in their analyses. Lastly, some emergent work has been done in LGBT and disability issues, still framed as double discrimination issue (González Amago, 2005; Gimeno, 2006).

### 2.3. Dialogic relationships

Our methodology consists of establishing an in depth dialogue with five people, chosen for their leadership, knowledge, and experience with functional diversity and non-normative sexuality, establishing a fruitful space for discussion. Our critical analysis is based on these dialogues, from which we selected those fragments that better represented the discussions, which and are included in this article.

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7 See: Shunt, Conde e Iglesias, 1998; Iglesias, 1998; Cristóbal *et al.*, 2002; Dones no Estàndars, 2002; Cristóbal, 2002, pp. 13-38; Platero, 2002; Aranda *et al.*, 2003; Jiménez y Ramos, 2003; Iglesias Padrón, 2003; García de la Cruz y Zarco, 2004; Iniesta Martínez, 2004; Moya Maya, 2004, 2009; Malo Ocaña y Dávila Quintana, 2006; Susinos Rada, 2006; VVAA, 2006; Arenas Conejo, 2009; Liesa Orus y Vived Conde, 2009; Mañas Viejo, 2009; Moya Maya 2009, pp. 133-156; Ramos García, 2009; Arnanz Villalta, 2011.

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These five people are not anonymous, and when we asked how to introduce them in this article, most chose to use their real names. This is the case of Jesús González, Antonia Llera and Pilar Lima., One person chose to remain anonymous, so we picked a pseudonym, Lola. And, lastly, one person just wanted to be referred to by her first name, Isabel. As has been said before, our role as researchers is to bring forth the reflections in the discussion using an intersectional analysis, to show the difficulties and social representations they deal with. As the European Women with Disabilities Manifesto (1997) stated, discrimination is not produced by two single factors (in this case it referring to gender and disability, but which is equally applicable to sexuality and other sources of structural discrimination) but by playing out several elements through which a new and different situation is produced which needs to be recognized in order to act on it.

### 3. Personal and political approaches

As we have stated before, we interviewed five people from different regions of Spain with openly visible functional diversities and non-normative sexualities. Each of them has a different disability. Antonia Lleras is paraplegic as a result of a medullar lesion. Pilar Lima is a deaf woman. Jesús González has congenital cardiopathology. Lola has a functional motor diversity, and Isabel labels herself as someone with a “psychological diversity”. We would like to call attention to the fact that these people live with different disabilities and sexualities, and we want to distance ourselves from the risk of producing a homogeneous view. Their testimonies and viewpoints are by no means representative of all people in similar situations; these statements are especially interesting because they highlight both the difficulties these individuals faced, as well as the strategies of resistance they used to cope with discrimination, lack of positive role-moles, and stereotyped representations.

#### 3.1. Rubik's Cube

Sex, sexuality and disability could potentially disable recognition of one another, since one perceived identity (if it seen or felt as exclusionary in a given situation) can obscure and hide others (Mollow & McRuer, 2012: 24-25). Some functional diversities are very visible, as Antonia remarked, “when meeting someone in person my disability shows itself, my wheelchair introduces itself, even before I can introduce myself. With a long struggle under my belt, my lesbianism is now more readily visible.” In this case, disability may act on perceiving her as heterosexual, unless there is a process of making lesbianism visible and evident, sometimes causing surprise –according to Antonia.

Other functional diversities are not as visible at first, and are more clearly articulated in their statements regarding to other forms of exclusion. For Isabel, identity is more complex:

*“I have 3 or 4 exclusions, one for being a woman; two for having a disability (a problem that no one talks about), three for being a lesbian, and four, for living in a small village and having been born there. When it comes to my lesbianism, my friends do accept me, but*

*my family doesn't know anything, because for them, I live with a friend. Many sincerely question: Do people with mental health problems have sexuality? And in the end, some don't think so, making us out to be asexual".*

In this segment of the conversation, the entangled relationships between sexuality, gender and disability may work to increase invisibility and lack of recognition. The first issue that emerged was, what relevance did their functional diversities and non-normative sexualities have in how these people constructed their identities? Isabel named "3 or 4 exclusions," which suggests that her concept of exclusions was that each one of them was separate and different from the other, although visibility, legitimation and recognition created an order within these inequalities. On multiple occasions during our conversations, we found that people identified a certain order that emerged in certain situations, which were context-specific and were highly dependent on how they were perceived. This selection, and sometimes lack of choice on how identities were recognized, is a kind of Rubik's game in which all identities may be present, but differently acted on and recognized by others.

Pilar's first priority among her multiple identities is her functional diversity, her deafness: "When I talk about my identity, often I talk more about my Deaf identity, with this I say that I still feel that I haven't shaped within myself that "lesbian" identity, or whatever you want to call it. It is about setting a priority, every person follows his or her principles...". The issues of visibility and legitimacy are embedded in most conversations; the Deaf identity for Pilar creates a space of belonging and a feeling of being part of community, whereas non-normative sexuality is still a weak identity that does not provide the same recognition. This notion of independent and separated identities was also confirmed by Lola, who said: "firstly I fought for being a woman, and later to be a "coja" (cripple)". Every time someone introduces herself or himself and states who she or he is, there is a choice on how to label (or not label) themselves in certain ways. The daily practices of choosing name(s), how to talk about ourselves makes people calculate and manage identity according to the audience and the expected response. This 'identity economy' implies for Pilar:

*"In general, I introduce myself using my sign<sup>8</sup> (in Spanish Sign Language) and my name, and remark that "I am Deaf, very Deaf", and according to the interest that I get from the person I add "I like women... The only label that I assume proudly is Deaf... Although step-by-step I am assuming the "lesbian" label in a political sense. What I have done is add "lesbian".*

If we discuss the strategic uses of identity, or when it is more relevant to use functional diversity, non-normative sexuality or other types of identity, for Antonia there is a con-

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8 In the Deaf community, a personal sign is a linguistic inclusive way to designate a person in Sign Language. It substitutes pronouncing the name in lip-reading, or spelling in Sing Language, or describing the person, which are all timely processes. A personal sign is similar to a nickname, since it is a name given by the Deaf community, which is comprised of both deaf and non-deaf people who communicate by signing. This community has a strong social, cultural, and linguistic link based on signing. A personal sign can be based on a personal characteristic, a personality trait, a profession, a family name that you have inherited, a sign that can be associated with the first letter of your name, or a place, etc.

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scious choice, it is never random. Their identity politics are dependent on recognition and lived experience, and for some physical and visible disabilities is impossible to pass or hide, therefore sexuality is at stake:

*“Identity is directly related to the space in which you participate. In a lesbian space you talk about yourself as a lesbian, and in a space of functional diversity you talk about that other peculiarity of yours. In my private life I have always felt myself to be more a lesbian than a woman, even now, more a lesbian than a woman with a disability. There was a time in which I even felt like a “third gender” (...) Identity is shaped by your interactions with the world around you, in which you have to define yourself. Today, after several experiences I can, for example, use my lesbian identity “strategically” in a gathering of women aware of human rights, but who do not know much about lesbianism, or have never met a lesbian who presents herself as such. I think it is interesting to gain complicity and build connections through direct interaction. The concepts allow us to “categorize” people, with our daily interactions in the world, we can construct different identities when we are involved with people close to our hearts”.*

Following the same argument, Lola pointed out that for her identity is a matter of choice, even if there are situations in which “both things go together”, whereas disability is more dependent on visibility and being recognized and ineligible by others. When making this choice, Pilar was aware of favoring her disability which is visible and but also possible to hide, yet she wonders, “What is a woman? Showing yourself as heterosexual?” Pilar realized that gender identity implied the obligation of meeting the norm of compulsory heterosexuality, constructing each other, while disability is under the regime of (in)visibility. What is clear from these dialogues is that identity is important for everyone, and they all have their own preferences on how or when to act on their multiple identities. That identity is built on relationships with others that provide recognition and legitimation, and, lastly, that identity is a crossroad of gender, sexuality, and functional diversity (among others) creating tensions on how they unravel or enable each other. One final quote may help clarify certain awareness of how identities may not be independent for her, and how certain experience and identity may illuminate and provide skills for one another.

*“Identities integrate into one another to make a ‘whole’ one. My way of living is as a lesbian, because I live with another woman, and we are surrounded by lesbian friends. The accident outed us, and thus I found myself, at the age of thirty something, having to explain to my mother who I was.*

Antonia’s closet experience as a lesbian became impossible and the new experience as disabled also influenced, not only the impossibility to hide her lesbianism but also a new sense of price and acknowledgement of that these ‘new’ identities were relevant to one another. Later in this dialogue, Antonia was explicit on how the intertwined relationships between disability and lesbianism were relevant on how we represent herself to the world, gaining a personal and also a political perspective.

## 3.2. Passing

When a disability is not (very) visible it is common that people may use this opportunity to strategically manage the information about their difference (Goffman, 1963: 91); this strategic use of personal information, disclosing one's sexuality or disability, is useful in order to become political (Fuss, 1999), as well as have effects on individuals that go beyond their intentions. That is Jesús's case, he commented:

*“Supposedly, my partner did not find out I had a disability, I think, until two years after living together, then suddenly I said that I had to go to renew my disability certificate and he said, ‘what? Excuse me?’ We have the advantage, I mean, we have a disability that is not visible, and because it is not visible our lives are totally normal. It is up to you, based on what you believe, about how this society allows you to develop normally and without a problem.”*

In this dialogue, the reality of having a non-visible disability is discussed, and even conceived as a advantage in a given situation, but ultimately we can see that it comes with an added cost of not being “conceivable” or “credible” as disabled person for others in these situations, because people could not fit him into the “stereotype of a person with a disability”. This very same ability to *pass* (but in regard to sexuality) allowed Antonia to be in the closet up until the accident, at the cost of having to handle a secret and hide relevant parts of her life. The functional diversities of Pilar, Jesús, and Isabel (Deafness, a cardiopathology, and a mental health issue, respectively) are not necessarily visible, and often people fail to acknowledge them unless something happens that reveals their condition. These realities can be situated at the borderline between the private and the public. The impact of the medical perspective on disability invades repeatedly the lives of disabled and LGBT people, who often see their self determination evaporate, lives that expose the fragility of the division of the private and the public (Siebers, 2012:44).

In general, dominant stereotypes (about gender, race, class and other inequalities) are acquired during the socialization development process (see for instance Perry, White & Perry, 1984). Children learn early what is considered “normal” and what falls outside this social category, including those stereotypes that legitimize which bodies are (or are not) sexually desirable. These stereotypes may encourage hiding, when possible, a functional diversity or/and a non-normative sexuality, in an attempt to avoid conflicts or discrimination. *Passing* is a common practice in many border spaces, those spaces in which individuals can be perceived as different with regard to ethnicity, gender, sexuality, class, etc. The study and theories of passing often refer to the experience of Black people that could pass as white in the USA, whose experiences were questioning the established rigid classification systems of race (Romero Bachiller & Platero Méndez, 2012: 169). As Butler states (1990), any identity is based on a repetitive exercise that imitates a certain ghostly ideal, and the imitation is always destined to fail, as the perfect body and sexuality do. Passing can be understood as a strategy of experimentation, trying to achieve assimilation, and could also be viewed as an indication of the degree of exclusion present in these spaces. In a similar fashion, some trans or intersex people may pursue recognition, allowing this to become a daily struggle that correlates with the degree of discrimination experienced. In this sense,

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the passing of a disability and the passing of a non-normative sexuality have similar costs. Isabel offered her insight on this topic: “It is the same with the LGBT people, there are men who hide that they are married, or whatever, and there are people who do not say that they have a disability”. Following Isabel’s statement, not only LGBT people with disabilities use passing, but it could be conceived that any sort of identification includes certain use of passing (Butler, 1993), therefore, identity is supported by certain ideal and impossible stereotypes, which on the other hand, guide our daily practices (Romero Bachiller & Platero Méndez, 2012: 169). Not only are there benefits, but there are also costs for those who adopt this strategy of passing. However, it is a strategy that highlights the notions of normalcy that everyone uses.

Linked to passing, a person with a functional diversity may do everything possible to achieve physical and mental autonomy. Often, the goal is not hiding, but avoiding any tension or embarrassing situation that could arise as a result of the disability (Goffman, 1963: 123). A typical phrase among people with functional diversities is “don’t worry, I can do it”, which may result in extra effort physically, mentally and emotionally, a continuous overexertion of oneself in order to avoid discomfort, as Isabel stated. In sexual terms, it may imply a continuous effort to fit into the institutionalized practices of courtship and performance of sexual acts. Not only is this double effort very difficult to attain, it can also be simply unsatisfying. These strategies hope to alleviate the stigmatizing differences that often result in personal costs. The notion of negating sexuality was present in Pillar’s narrative:

*“Hiding is pretty common, and the struggle to maintain relationships can bring you to the point of renouncing “being a lesbian”, so as to keep those heterosexual relationships that have been so difficult to maintain. On the other hand, (as deaf people) we are pioneers in the creation of paths for and by the LGBT movement because the national organizations of disabled people do it. We achieved a Deaf LGBT Committee, at the World Federation of the Deaf Meeting in Madrid”.*

Somehow, people with disabilities fight, not only to bring their personal and private issues into the public, but also their claim that can be reframed as part of sexual citizenship, in which they no longer are people with defects who require repair, but a claim for complex embodiments and sexualities, and the recognition of the political dimension of this act (Siebers, 2012).

### 3.3. Challenging stigmatizing discourses

In many of the interviews, medical and religious factors were noted as playing a relevant and influential role in the process of constructing an identity, highlighting their importance in Spain today. Lola was clear in this regard: “When you are first diagnosed, every part of your life becomes focused on your illness and what the doctors say, but as time goes by, all this medical chit-chat becomes relative.” For those whose functional diversity is a product of an event that took place later in life, the reality of living a non-normative sexuality has effects on being in the closet, causing situations not explored before. This is the situation described by Antonia:

*“With my spinal-cord injury I faced new obstacles, not only physical ones, but also mental ones, that were barriers for my integral development as a person. I have always felt as a lesbian, it wasn’t easy to find out what was happening to me, of course. No one talks about it, nor could I find a book in which a girl would dream about kissing another girl on the lips. Disability came to me, fortunately, much later in life, when I already had some of the “tools” I would need to survive it.”*

Antonia stated that her identity was “built practically from scratch”, in the sense that she did not identify with the hetero-normative model and lacked alternative role models. Instead of thinking about sexual diversity as an added difficulty for someone with a disability, she viewed it as an opportunity to understand her own body, to make her experience part of her politics, and all the ways in which she could express herself sexually, and to feel content with who she was, instead of with who she was expected to be. The relevance of Antonia’s awareness goes beyond the question of public expressions of sexuality, or of bringing a new issue into her public sphere, but extend into her becoming political. Another related statement was presented by Marta Allué (2003:167), who wrote in her book *(Dis)Capacitados* [(Dis)Abled] precisely this idea: the discussion of how looking at disability may help break down some of the expectations built on compulsory heterosexuality. Allué interviewed a woman, who said:

*“in my twenties, I would have been traumatized by the idea of being homosexual, but step by step I was recovering the sense that I was attractive, so I felt free to love whoever I wanted. So finally I had my first relationship with a woman, without any of the trauma that most of my lesbian friends had had. I did not have to face my family’s’ reaction “why didn’t you marry?” or society’s reaction “why don’t you have a (male) partner?” because no one expected that, I (in a wheelchair), could have any of these things”.*

For this woman, disability promoted certain lack of expectations in regard to compulsory heterosexuality; Antonia’s experience of disability provided coping skills to face her formerly closeted non-normative sexuality. The negotiation of identity, the new skills developed and the need for recognition that we found can illustrate the need to understand how sexuality and disability interact.

Going back to our research regarding medical discourse impact, Pilar spoke about deafness and the need to create an alternative framework for people with functional diversity:

*“We consider that medical discourses are ‘destructive’. There is not understanding between the medical community and the Deaf community, in fact the progress made with cochlear implants have taken place without a dialogue between those two communities. They do not ask what we want, or what we wish for... They only want to cure the “deafness” as a pathology, without even attempting to understand deafness as a cultural product”.*

In this section, Pilar demonstrates how some Deaf people resist the notion of deafness as an illness, how they reject the idea that deafness is an object of rehabilitation or medical intervention, and instead choose to be the authors of their own destinies. The sense of

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belonging to a community was relevant for Pilar, who showed that a political Deaf identity was necessary for her, and was something she had chosen. The medical framework of disability is combined with the relevant influence of Catholicism in Spain that condemns non-normative sexuality, creating an interpretive framework of pity and guilt. As Antonia stated, the religious factor has a strong impact on people, especially regarding how Catholicism has shaped people's lives:

*"Concerning my lesbianism, the religious factor was more relevant than the medical one. In my teens I was in anguish because I felt that I was "abnormal," and that I was sinning just by thinking about my friend, who I was in love with."*

In Isabel's opinion, it is both the medical and the religious factors that shaped her parents', and her own, mentality concerning normalcy, giving meaning to her disability and lesbianism. In a society like Spain, the bounds of normalcy are set by the standards of a majority that is clearly permeated by disciplines such as science or religion, two powerful spaces that in turn influence society in a cycle. Both Catholicism and medicine have a clear impact on how citizenship is built, discussed and framed. We can cite many examples of how medical standards shape access to civil rights, such as the recognition of rights for transgender people (see 2007 Act<sup>9</sup>) in which the Diagnostic and Statistical Manual of Mental Disorders permeates the legislation, transferring medical requirements into legal requirements, and therefore, have material effects on how people conceive of themselves (Platero, 2011).

Going back to the testimonies, one relevant issue that emerged is how the overprotection and doubts about the capabilities of people with functional diversity are especially strong when discussing mental health issues, as Isabel said:

*"Everywhere I was told that I was going nowhere, or that I looked foolish. When I arrived at college in Ferrol (Galicia) I was told by a professor that this class would be too difficult for me (making me believe I was stupid), and that it would best if I quit. She added that helping me out was positive discrimination and it was wrong... I was able to turn this situation around through reading a lot on feminism and LGBT stuff. It helped me find a place in the world... At one point I worked with the Leftist Party office in Ferrol. Perhaps with all these things I was becoming empowered".*

This overprotection that Isabel mentioned does not help people with functional diversity to become aware of their situation or empowered; instead it is an example of the way in which people with mental health issues are treated, which encourages docility and maintaining a low level of social activity. It is the very same low profile behavior that is linked with the diagnosis of the mental disorder. Isabel disagreed with this medical perspective that patronizes people with disabilities:

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9 Law 3/2007, March 15th, regulating the rectification of the register, concerning the people's sex. BOE 65, March 16th 2007 p. 11251.

*“Doctors and society do not want us to have a voice. We can protest but only a little bit and softly. A psychiatrist used to tell me that maybe I was getting stressed out if I said “all of that”. It made me want to say that if I were to carry on with the life that you recommend, not doing anything, I might just commit suicide, because I don’t know which is worse, social suicide or the physical one. I think it is best to fight society”.*

Another idea that appeared frequently in the interviews when discussing mental health issues was the strongly rooted and stereotyped Spanish notion of *“la loca del pueblo”* (the crazy woman in town). It is a culturally specific way to point out an outsider, with which any possibility for her to attain credibility is eliminated, and she is identified as a target of any potential insults or abuses. Society often promotes the idea that “women are more likely to go insane”. In fact, Julie McNamara (2006: 217) said that, being a woman in our society comes with the risk of being labeled as crazy. Isabel added:

*“(…) even if you do not know anything about what it is to be insane, some still think we all spend our entire day in delirium, but in reality we do not find ourselves listening to voices all day (...). People think that we are always in the middle of an intense crisis (...). The label “crazy” is always derogatory, for the average person it does not have a single positive connotation, but what if the world never had Virginia Wolf, Van Gogh, Camille Claudel (...). For most people, discussing mental health is a discussion of them, a group of people separate from themselves. Yet later you can go out at night and see that the majority of people are experimenting with their own mental health, and may even end up in a mental institution, living under far too much stress, trafficking drugs, jobless, abandoned by his or her significant other, or as the victim of a traffic accident...”.*

People with mental disabilities, in particular women, are often used as scapegoats, and in this way, the powerful perpetuate the stigmatization of this portion of society (Goffman, 1963:164). Nonetheless, every person makes an effort to recreate his or her body and skills in whatever way he or she is able to. We are faced with a double standard, in which, on the one hand we are de-sexualized, but on the other hand, any small provocation can lead to us being re-sexualized, most likely in a heterosexist way. Isabel talked to us about the de-sexualization process that she faces because of her disability:

*“In this town they do not know anything, or maybe they do not want to know anything. I used to have a friend who was also a lesbian, and we spent a great deal of time together, we used to bring books to the park, and I don’t know, surely someone saw it (laughter)”.*

Lesbianism is often portrayed as an invisible sexuality in society, which is enhanced by the fact that Isabel was diagnosed with a mental disorder, creating a representation for which her sexuality and desire just vanished. The feminist critique to the division of the public and private realms becomes again relevant for the lives of people with non-normative sexualities and disabilities. Isabel’s sexuality and disability are discussed in private with her family and doctors, but also, the medical procedures and social dynamics bring the discussion of her life choices to the public, without the limits set for non-disabled people. In fact, it is difficult to maintain a balance between private and public life, as Isabel remembered:

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*“During a Christmas family dinner, one of my brothers-in-law took out his phone and started to look up my name in “Google,” my father soon joined him, so I left and went to the kitchen to do the dishes, and I told my sister not to read any of the information about me on the Internet. If they don’t know anything, it is because they do not want to”.*

Clearly, there is a double standard in which knowing and pretending not to know go together, and this works against people with functional diversities. Trespassing the limits of privacy is allowed, once one’s sexuality or capability is questioned, allowing abuse that often goes unreported.

### 3.4. Desire and sexual practices

There are many stereotyped ideas concerning the sexuality of people with functional diversities which limit their lives and how they are perceived by the people around them. One of the most prevalent ideas is thinking that they are unable to perform satisfactory sexual relations, both for themselves and for their partners, as a direct result of their physical or cognitive impairments, whether these limits are real or not. This prejudice has various ramifications for all possible actors in a given relationship, creating false stereotypes, such as the portrayal of people with disabilities as not being sexually desirable, not even by those in similar situations, or raising suspicion about those people who feel attracted to them. Or even that people who have relationships with people with disabilities do so out of pity, obligation, or a hidden intention to take advantage of their partner. Or that there are people (devotees) who develop an abnormal attraction to people with disabilities, which is perceived as pathological. It is inconceivable that they would enter these relationships voluntarily, with a sincere desire to do so. Society will either accuse them of taking advantage of someone who is helpless or naive, or say that he or she is either wasting opportunities to find a better partner, or that they are pathological. At the same time, those people with disabilities who are involved romantically with people who do not have disabilities are accused of depriving their partners of a better sexual option. These prejudices are present throughout the development of a person’s sexual identity, pushing him or her to renounce his or her sexual life, and become what society expects him or her to be: asexual.

In the intersectional situation of women with functional diversities, we can add asexuality to the long list of myths and stereotypes, which include lacking maternal instinct or sex appeal, not being fit for sexual relationships, questioning their capabilities as mothers, lacking control over their sexuality, being eternally infantile, etc. Also another issue that goes beyond the scope of this article is the sexual abuse of women with functional diversities in care. In sum, sexuality is portrayed as taboo, a danger from which women with disabilities need to be protected. Society and their families perceive them both as delicate and ugly, protecting them from a possible rejection and also depriving them of the opportunity to access socializing spaces in which they could find resources regarding sexual and reproductive health information. Additionally, these women are vulnerable to all kinds of violence—especially sexual violence—, sometimes perpetuated by the people close to them, sometimes by their caretakers, but above all, from a society that makes them believe that no one will ever love or desire them (Dones no Estàndars, 2002; García de la Cruz y Zarco, 2004; Iglesias, 1998; Moya Maya 2009; Morris 1997; Susinos, 2006)

Discussing the “double closet” or “multiple closets” of the many identities and experiences regarding sexuality and disability, and whether people are able or want to to hide or show themselves, we faced the issue of desire. Who is desired, or who is supposed to be desired, who do you desire or for whom are you desirable. The hegemonic standards in sexuality include not only heterosexuality, but also the coital imperative, directing our attention to the (im)possibility of pregnancy, erection, and penetration, while forgetting about other desires and erotic possibilities. Nonetheless, when people with a functional diversity speak up, often they are critical of these normative and asexualizing ideas, as can be seen in *Hojablanca* (August, 13<sup>th</sup>, 2013) magazine in which the author states<sup>10</sup>:

*“Every day I am becoming more and more convinced that the relationship between pleasure and oppression is closer than we once believed. Oppressed people are always characterized as objects of desire in a fetish framework to those that desire them. Oppressed people are not thought of in an environment of pleasure. People with disabilities are either sexual aggressors, or they do not know what sex is, or they do not like sex. Women are either virgins or nymphomaniac bitches. Gays are either pedophiles or promiscuous. Sex between women is lifeless (in a Gerlein style). All transvestites are prostitutes. We should imagine people in the way that they want us to. We should start by questioning why we only desire certain type of body. In sum, we should understand pleasure as a political issue”.*

Clearly, this consciousness of sexuality as a part of politics, and therefore within the sphere of social struggle, contains a demand for radical transformation, in which a person with a functional diversity is no longer a victim of a tragic life, but instead is an activist who combines personal experience with social struggle. This is also made evident in the “Yes, we fuck” project (2013), as well as in the name of the project itself and that implies a shift in paradigms. In reflecting on the issue of who is desirable, as well as the de-sexualization already mentioned, Isabel stated:

*“I have been rejected just for the mere fact of having a mental health problem and taking pills (...) Sometimes you enter a relationship, and you wonder, how am I going to tell her that I am on medication, that I have been in the hospital...? It is common to hide it, but I have always been more honest and direct. I just say it, if you want to we can stay together, if not I will just go my own way.”*

In the case of Isabel, she has made a decision to disclose her mental health situation to potential lesbian lovers, at the cost of losing them. For Pilar there are subjects of desire everywhere, not only within the Deaf community. Obviously, people with functional diversities do not only look for relationships with others in similar situations. There is a problematic dynamic embedded in creating a community to share experiences and fight for shared struggles, because it often results in the creation of a “ghetto”. Nonetheless, it is often the case that in order to find other people with non-normative sexualities to date, flirt and hopefully hook up, people choose to go to certain places such as gay or lesbian bars

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10 Accessible on-line: <http://www.hojablanca.net/clitorisanal/2013/08/13/mi-pene-encorvado-y-mi-fantasia-sexual-discapacitada/> (last access October 17th, 2013).

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or neighborhoods, join certain activities, not simply for creating a sense of community, but also for finding potential sexual partners. For some functional diversities there are a similar socialization processes. In this sense, Pilar reminds us that:

*“Deaf people are an object of desire for others first entering the Deaf world, learning sign language... Some think we fuck differently (...) There is a mutual advantage in this, we are different but equal”.*

The initial fascination with sign language that most students have at first can influence their relationship with Deaf people, providing a perception of a “exotic difference” that soon vanishes. The “enhanced” sexuality or the lack of it is inherent to the representation of disability. Concerning this issue, Antonia spoke about asexuality, in terms of priorities and status:

*“Non-normative sexuality is not visible for all women with disabilities (...) The development of self-esteem is chosen as the primary priority while sexuality may be relegated to a second or third place priority, or even silenced. Often (as women with functional diversities) we are portrayed as “asexual” women. Our desire is negated, making invisible one of the fundamental functions of human life”.*

In this sense, Antonia also referred to her personal experience regarding desire, making sexuality not only a personal experience, but also part of a political project that claims the status of humanity for people with disabilities and non-normative sexuality. Antonia’s acknowledgement of having certain privileges and awareness provides her the capability to conceive of herself as a sexual person, which impacts also on how people see her.

*“In the collective of women with disabilities, in general, sexuality needs to be vindicated, even more so in the case of non-normative sexuality. I am very lucky to have been able to live my life in such a way that allowed me to develop my desires. It was not free. A long journey was required to re-stimulate the damaged circuits through education, and to re-learn sexuality after the accident that damaged my spine. The hope for a life that did not lack of the magic of fantasy and desire was worth the work. At that time, depending on my self-esteem, I could see myself as a desired woman. I guess it happens to all of us, but it is true that after the accident my world was turned upside down and this transformed my capacity for physical exercise in general into a severe physical disability, and from there you have to endure a long road in regard to achieving desire. I cannot complain, I feel my desire sparkling my life when I go to a “women’s party” and I am part of the fresh impulse and happy for the novelty of “young women”, also enjoy the “glamour” of “mature women”. Sometimes also I get the high of knowing someone likes me”.*

In regard to desire, Lola added that over time she realized that “desire is free”, which also indicates certain internal tension with being perceived as asexual and having to fight for desire and sexuality. In a less positive light, most of those interviewed discussed the issue of renouncing their sexualities, due to the great difficulties that they encountered. Lola was specific about this:

*“Living your life the way you want, having a functional diversity is very difficult already. The way people look at you is very biased. Furthermore, if your sexuality is a minority one, and you depend upon others who do not respect your opinions on basic things, such as feeding yourself or getting dressed, you just simply do not think about it, you just live without sex. It is one more thing to renounce, and you are already used to renouncing things because of your disability”.*

In fact, this situation is especially difficult for people with functional diversities that make them very dependent on help from others in order to engage in life activities, one such activity being sex. In this case, it is not only that people are perceived outside of the normative beautiful and desired body model, but also that the functional diversity sexuality requires a lot from the potential sexual partner, or at least help from a third person acting as a sexual assistant<sup>11</sup>, in case the partner also has a functional diversity that causes dependency.

In regard to micro prosthetics, the use of applied technology for sexual pleasure, and how sexual practices are linked to certain sexual and gender roles, Antonia stated that:

*“The hegemonic norms and the current sexual models have been suffocating me since I was young (...) When I was very young, were times in which I wished to be a boy in order to be in love with a woman, I would have done anything (...)”. Lola joked about how “I use some toys, but for some other toys you have to be a total athlete!” meanwhile for Antonia “for some time my friends and I have been joking about organizing a tuppersex meeting, but so far we haven’t done a single one. Contrary to what some would expect, the people we talked to did not use toys or sexual prosthetics as part of their erotic practices.*

Those people with functional diversities who are not very physically dependent, and can perform some activities on their own, including sexual activities, have more options when thinking about sexual relationships. They “only” require a partner who understands that, even though their bodies can be different, they have feelings and desires, and their sexual skills can be equally satisfying. By not meeting the standards for having a body that has been socially legitimized as desirable, all people with functional diversities, even if they are not very dependent, are continuously exposed to exclusion in regard to sexual practices.

### 3.5. Self-perception and recognition

Moving on to a different question, we wondered if it was possible to generate a notion of “collective self” as political identity, naming a “we”, for instance, to refer to women with functional diversities and also non-normative sexualities. This raises the question of heterogeneity in regard to “functional diversity”, which is something that shows up in all interviews. On the other hand, as Isabel said:

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11 The profession of sexual assistance is recognized in several European countries, in other countries some of the tasks are covered informally by prostitutes. This is the case in Spain, although it is clear that the nature and scope of sexual assistance is quite different to prostitution.

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*“Sometimes we attend mental health associations, and there they assume that we all are straight, then we go to the LGBT organizations, and if you dare to say you are on medication they say, oh... At the same time, these LGBT organizations that demand rights for people are also discriminating against the people right next to them, which for example could be a transgender person. I think we can make more progress for our causes if we are all together, at least by creating a common language”.*

The crossroads of non-normative sexuality and functional diversity create a possible space in which people can fight for being considered sexualized and gendered, this empowerment can be used to claim visibility within LGBT and functional diversity activism, but also in every socialization space in which people wish to participate.

Lastly, when we discussed coping strategies, how they dealt with their difficulties, we got different narratives. Most of the participants were aware of the social gaze, how people look at those with disabilities, a gaze that infantilizes, asexualizes and negates people with functional diversities, especially women. Nonetheless, as Antonia highlighted, there are resistance strategies that are linked to being more mature, as well as being able to generate a social capital that engenders a positive attitude, and grants recognition. In regard to the personal way in which they cope with the lack of understanding and ignorance about their needs, Lola added that she chose to present herself just as she is, with complete honesty, which implies disclosing her sexuality and disability and facing positive and negative reactions. Somehow, she was discussing how “living with others naturally” (implying “in normalcy”, and making common what may be perceived as rare because of her identities), creates a different answer that implies some awareness and empathy. On the other hand, Pilar added that the struggle is centered in fighting ignorance, understanding that the two communities (non-normative sexualities and independent living movement) can live together, but it is not easy. Currently, a growing mutual recognition is becoming visible, creating shared experiences (along with differences with these groups) that sometimes inspire small groups to form at LGBT or functional diversity organizations, usually linked to the impulse created by certain activists who bring their own personal experiences into the social movements. Furthermore, Antonia mentioned the possibility of generating an identity based on difference, as well as the need to generate models and references for others:

*“I know a lot of lesbian women, and some lesbians with disabilities, who live with their ‘difference’ naturally. Nonetheless, I believe that you need to know who you are, and what you want, in order to live “consciously out of the norm”. Also it is important to offer ‘new models’ to all the children that we care about. It can be our small, important contribution. Previous generations had a hard time. We had a tough time too. People who are young now have it a little easier, so I would like to think, and I even trust that future generations will have a life that is more free than ours”.*

The emphasis on “living naturally” that both Antonia and Lola used, was described as an attempt to “normalize” what it is portrayed as uncommon, showing openly their sexuality along with their functional diversity.

## Conclusions

The accumulated experiences of social movements in Spain, such as feminism, LGBT and queer organizations, and the independent living movement, have made it possible to critically discuss desire and plural sexualities, which was unthinkable a few decades before. The influences of medicine and religion remain relevant – as the participants stated -- although dissidence is growing and widespread. These social movements promote the empowerment of subjects formerly considered marginal, people who no longer want to be victims, but rather agents of their own lives, lives that are now conceived of as more livable, challenging the normative notions of a body built *a priori* as heterosexual, male, and abled. Such premises also result in a reductionist notion of sexuality, mostly focused on genitalia, and those practices that only a legitimized body can perform. The bodies of people with functional diversities do not always fit in the hegemonic model, and therefore society dissuades them –and those who feel attracted to them – from having a full sexual life. In addition, there are mistaken notions that disabled people are sick, and that their only priority and focus in life should be their cure or rehabilitation. This implies that they should not have any kind of interest or desire to engage in any sort of sexual life, normative or otherwise. In the same fashion, any divergence from sexual or gender norms can be interpreted in the same pathological framework, and might not be recognized as deliberate and legitimate choices made by the person whose body and capacities are not considered normal.

The interviews conducted for this article have been fruitful in discussing issues of identity formation, recognition and interrelations between sexuality and disability. They show a panoramic of how people negotiate personal experiences that challenge normative notions of normalcy, and how some of these ruptures come with a cost. Also, these intimate lived experiences show that despite social norms, desire and sexual identity are areas of constant discussion, not only in the private realm, but also in the public. They have turned into political identities and struggles, for which the divide between private and public is again challenged. This political turn implies a new framework of sexual citizenship for people with functional diversity in Spain, which requires new scenarios and actors who discuss civil rights. But this political turn comes at a critical moment, when, after a period of achieving sexual rights (same-sex marriage; transgender rights; support for families with dependent individuals, etc.) the economic and ideological crisis has arrived transforming the social debate, and producing a backlash.

Overall, the conversations include reflections on the material or practical realm, people's practices and sexual skills are quite different from the normative expectations. It is possible that the emergent experiences such as the *Yes, we fuck* project, along with the activists we talked to may seem exceptional. They seem to live their sexuality freely, more or less fully, or that they are able to articulate their experiences in a positive way, not only in a personal way, but also within a social perspective. Though they may be exceptions, these examples make evident that there is an emerging transformation as a result of many factors; among them it is relevant to remark the experience accumulated by social movements and the transformation of people in regard to their own sense of agency.

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In the interviews conducted we found a positive vision in which some people try to minimize the difficulties they encounter related to their functional diversity. It is possible that the people we talked to wished to discuss in a positive perspective their sexual orientation and the barriers they have overcome to live it freely, since they reject the normative victim identity. Even if we admit that their optimism may be a psychological self-preservation mechanism of seeing themselves in a positive scenario, the reality is that they emphasized and focused on overcoming difficulties. Often, they chose to discuss the possibilities of becoming a subject with agency, and the capacity for joy and recognition, rather than focus on their problems. Once asked to discuss the obstacles, they narrated the daily struggles in detail, but it was surprising that neither the term or the concept of 'ableism' (capacitismo) was used.

The narratives of the five people inform the critical discussion of how identity is used in strategic ways with participants sometimes prioritizing their identity as "disabled" or as "lesbian" or "gay", depending on what barriers they face or what spheres they are operating in, or how they realized their sexuality, or when the disability took place in their lives. On an individual level, the five activists often perceived themselves as sets of isolated identities, sometimes acknowledging the interactions between functional diversity and sexuality and how they embodied the intersection of both. Nonetheless, on a political level, these voices expressed the need to advance within their own social movements, as Pilar suggested, with pioneering actions that present political identities instead of pathological ones. In addition, every one of them reinforced the heterogeneous experiences of those people with non-normative sexuality and functional diversity. As activist Beatriz Gimeno stated, "in my case, the most stigmatizing discrimination is, clearly, my disability, although being a woman multiplies my 'type of discrimination' exponentially" (Gimeno 2006:56). That is to say, that it is not about every the peculiarities of each identity isolated, but rather about the effect of the interactions and layers of discriminations that produce the life conditions of an individual from which he or she strategically constructs his or her identities.

Passing was a relevant issue discussed, which questioned the notion of having or performing a perfect body or the most accepted sexuality, in which not only people with disabilities or visible disabilities engage and fail in meeting ideal standards. The costs and sustainability of hiding sexuality and disability were central in the narratives we analyzed. In Jesús' narrative we found the value of passing, along with the need to disclose a secret to his partner, who receives this information with surprise. Jesús presented his passing as an individual choice, but it can also be seen as an indicator of discrimination in Spanish society; the passing strategy may imply difficulties in building an identity around a disability when one's sexual orientation is publicly disclosed and vice versa. But for other participants such as Antonia, the experience in having a disability that arrived later in life improved the coping skills with non-normative sexuality, and passing was not used in the same way. Antonia's experience showed that it proved more fruitful to openly show her sexual orientation and to fight for support from her family and social network. For Isabel the signs and symptoms of mental health diversity make passing impossible, due to the unsustainable overexertion of effort it would require. Having to decide if you handle a secret or disclose your mental health issues, whether or not to reveal your disability to potential sexual partners along with considering the impact of disclosing your lesbianism in a hostile environ-

ment, can cause great stress (which can become overwhelming), even if also providing a great deal of agency.

The experience of constructing an identity around non-normative sexualities sometimes serves as training for an eventual identity reconstruction incited by a functional diversity acquired later in life, as in Antonia's case. However, as Pilar's case indicates, this is not always the case. Having the experience of functional diversity does not necessarily help one accept and build an identity based on sexual diversity. Having the experience of being discriminated against in one area of life does not always imply empathy; neither does it make it easier to accept another one, even in one's own case.

There is a possible antagonistic relationship between the possibility of making community (sharing experiences and common struggles) and the notion living in a "ghetto" (understanding ghetto as a limited place/space of relationships among equals, disabled or same sex for this matter). This dual perspective is resolved in daily life, in which none of the people with which we spoke feel their world is only made of gay or disabled people. Nonetheless, queer and crip people need to meet other people, not only for community building, but also for finding partners. This may also be the case for the independent living movement, sharing coping strategies and generating positive models is needed. In both arenas, sexual diversity and the independent living movement, people who are at the crossroads of functional diversity and non-normative sexuality find unique difficulties that have intersectional nuances.

Finally, we would like to point to the need for future research in the area of sexuality and functional diversity in Spain, trying to understand the role played by the critical approaches to sexuality and disability. The rapid changes Spain has experienced since the transition to democracy and the promotion of civil rights brings us to a postmodern era, in which differences are not only stigmatized but also can be used to appropriate the discourses generated within social movements (McRuer 2006:2). The current situation of a neoliberal recession, imposing austerity politics, is relegating citizens' needs to a secondary place, and this has a strong impact on people with functional diversities, so-called "dependent people". Therefore, it is an important moment to consider whose voices are heard, how political demands are successfully created, how to mobilize, in which terms social rights are constructed, and finally, how ableism and hetero-centered power regimes are perpetuated. We would guess that the independent living and LGBT movements have caused critical advances in Spanish society, and now these movements have to face the task of overcoming the univocal understanding of discrimination, trying to fight discrimination with intersectional strategies, while taking into account the needs expressed by those people with functional diversity and non-normative sexualities, and also including the neglected experiences of migrants, elderly, HIV+ people, youth, and infants, etc. These needs are especially urgent in a moment of precariousness and inequality such as the one we live now in Spain.

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*The  
critical  
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P. Guzmán &  
R. (Lucas) Platero