

Sexualities and public policies: a queer approach for times of democratic crisis

Sexualidades e políticas públicas: uma abordagem queer para tempos de crise democrática

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ABSTRACT This work aims to understand a public policy of health equity related to sexualities that deviate from compulsory heterosexuality in a context of democratic crisis. For this, queer theory is used to analyze, in the light of categories such as power, resistance and transgression, what lies behind the discursive context of the health care policies of the Lesbian, Gay, Bisexual, and transgender (LGBT) population, producing a tension between norm, law, and social participation. It is perceived that, from a queer perspective, the instability of identity and the understanding of the networks of power within the health practices can provide conditions of resistance even in situations of crisis of the democratic state.

KEYWORDS Public policy. Sexuality. Gender identity.

RESUMO *Este trabalho visa a compreender uma política pública de equidade em saúde relativa às sexualidades que se desviam da heterossexualidade compulsória, em um contexto de crise democrática. Para isso, toma-se a teoria queer para analisar, à luz de categorias como poder, resistência e transgressão, o que está por traz do contexto discursivo da política de atenção à saúde da população de Lésbicas, Gays, Bissexuais e Transexuais (LGBT), produzindo uma tensão entre norma, direito e participação social. É percebido que, em uma perspectiva queer, a instabilidade das identidades e a compreensão das redes de poder no interior das práticas de saúde podem fornecer condições de resistências mesmo em situações de crise do Estado democrático.*

PALAVRAS-CHAVE Política social. Sexualidade. Identidade de gênero.

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Introduction

The process of the Brazilian Sanitary Reform inscribed as structuring principles of the Unified Health System (SUS) the notions of equity and integrality. Integrality, in its dimension of health practices, obliges to think the other one of the relation of production in health as the other one different from what we are. A difference with potential for creativity and exercise of otherness. Therefore, the relations with the other are mediated by the different looks that pass through the relationship, and may interfere in the access and quality of the care provided.

The principle of equity establishes itself in this place where there is, notably, the presence of vulnerable groups and where vulnerability is inscribed from the place of difference. The starting point for thinking about equity, apart from the comprehension of being a principle of social justice, is to point out that in the field of health inequities are not limited to the different social positions of people in an economic hierarchy, reaching determinations of gender, sexuality and different ethnic groups.

Gender, sexuality, race and ethnicity compose the set of the so-called minorities, that have in common not the fact of expressing a smaller population contingent, but, rather, represent values that have been constructed throughout history, as antagonistic to values expressed as superiors and desirable. Like that, the hegemonic construction of the masculine is made in opposition to the inferior constitution of the feminine, the one of the white in opposition to the one of the black, and the one of the heterosexual in opposition to the one of the homosexual.

Here, a series of questions that point to answers that are not easy to find begins to unfold. Here, one can, also, think of some paradoxes that are, today, in the scenario of the health processes and in health training itself. One might ask, for example, how does health, in its dynamic of changing in health

practices, consider minorities as subordinate actors and, therefore, outside the social order? How do education processes in the scope of health interfere in the processes of subjectivation, revealing a new individual? On the other hand, it can be configured as a paradox the fact that recent statements, inscribed in health policies, appeal to the constitution of a new autonomous individual, whose subjectivity is considered in the act of the health production, while the low capacity of these policies is capable of interfering in the daily lives of the actors that connect to each other in the social micro spaces. These issues, that, by themselves, are already complex, become challenging in contexts of democratic crisis, where the places of interlocution between the State with the civil society become more nebulous, while at the same time they are precisely the groups less permeable to the agenda of certain social groups (in particular, Lesbians, Gays, Bisexuals and Transsexuals – LGBT, gypsies or quilombolas) who are considered to be the formulators and implementers of public policies. The ascension of conservative and neoconservative groups, in a context of political crisis and fragility of the State, obscures the possibilities of interlocution.

In this essay, it is aimed to understand the possibilities of an equity policy for the LGBT population, in the light of a crisis context, with the purpose of taking the inputs of the Queer Theory to reveal the possibilities of a public policy of intervention about the dynamics of cultural inequalities, when related to the different forms of affection and homosexual practices. For contexts of crisis, it is proposed that questions relative to gender and sexuality can be aimed from the perspective of queer theorists. This perspective adopts as a field of analysis the processes of normalization of social life, especially, heteronormativity, and considers that it is within the scope of networks of power and resistance that the possibilities of rupture and transgression of the heteronormative processes are installed.

Speaking of difference, inscribing a queer possibility

In a first stage, the reflections around the idea of difference, when reflected from the Brazilian context, refer to the notion of multiculturalism as a presupposition to think of equity policies. To speak of, however, multiculturalism is to make explicit an arena of conflicts such as the words of Gonçalves e Silva indicate:

To speak of multiculturalism is to speak of the game of differences, whose rules are defined in social struggles by actors who, for one reason or another, experience the bitter taste of discrimination and prejudice within the societies in which they live. (GONÇALVES; SILVA, 2006, P. 9).

This game, this construction of identities and differences, the possibility of considering the other in its different condition, assuming difference as a value of positivity in the spaces of production and reproduction of knowledge, have to do with the understanding of historical processes and contexts that have propitiated its construction. One more time, the mentioned authors remind us that:

[...] it is very difficult, if not impossible, to comprehend the rules of this game without explaining the socio-historical contexts in which the individuals act, in order to interfere in the politics of meanings around which they give intelligibility to their own experiences, building themselves as actors. (GONÇALVES; SILVA, 2006, P. 9).

From the idea of diversity and tolerance to the understanding of language as a system that constructs the other, the difference is inscribed from the social and historical construction of the notions of normal, deviation and identity.

Thinking about identity is always thinking about what it is, but what it is only makes sense when it refers to what it is not. Therefore, identity always refers to the construction of difference. In this sense, Woodward states that the identity to exist depends on something outside of it; that is, of another identity, of an identity that it is not that it differs from identity, but that, however, provides the conditions for it to exist. Identity is thus marked by difference “[...] difference is sustained by exclusion” (WOODWARD, 2010, P. 9-10).

Therefore, we can understand that cultural identities are produced in the social practices, through a process of production of difference. The dynamics of the formation of identity refers to the existence of ‘another one’, what makes identity and otherness inseparable components. Woodward (2010, P. 11) points out that

Identity is marked by difference, but it seems that some differences [...] are seen as more important than others, especially in particular places and at particular moments.

Treating the different sexualities that escape from the heterosexual norm as inferiors, from some supposed natural or biological characteristic, is not simply an error, but the demonstration of the imposition of an “eloquent cultural grade upon a nature which, in itself, is – culturally speaking – silent” (SILVA, 2011, P. 145). The biological interpretations are, before being biological, interpretations, that is, they are no more than the imposition of a matrix of signification.

The marking of difference, which, according to Foucault (2010), is historically determined through different discursive productions, will depend on

numerous processes of exclusion, border surveillance, strategies of division that, in the last resort, define hierarchies, evaluation scales, systems of categorization. (FURLANI, 2007, P. 273).

For Hall (2011), an identity has to do not so much with the issues ‘who we are’ or ‘where we came from’, but much more with the questions ‘how we can become’ and ‘how we have been represented’. The question that becomes central, then, is how this representation about ourselves affects our way of life.

Identity and difference cannot be comprehended, therefore, apart from the systems of signification in which they acquire meaning. As Silva affirms (2011, p. 75), “they are not beings of nature, but of the culture and symbolic systems that compose it”. Saying it does not mean, however, saying that they are determined, once and for all, by the discursive and symbolic systems that give them definition. It turns out that language, understood here more generally as systems of signification is, itself, an unstable structure. This is exactly what the so-called post-structuralist theorists, like Derrida, have indicated in their texts.

In this sense is that Derrida will speak of philosophies of the difference. In the comprehension of Heuser (2005), from a synthesis of the thought of Derrida:

To the philosophies of difference are not about overcoming or surpassing the metaphysical tradition, since it is impossible to get rid of it, finally. It is a matter of questioning it; of calling into question their senses and no senses, their intrinsic paradoxes, their oppressions; of understanding metaphysics as a great text that is open to new interpretations. (HEUSER, 2005, p. 73).

The reading of Derrida leads us to understand the role of language in the conformation of difference and its allocation in positions of subordination and marginality, but it also makes explicit the human life as an open text, where it is not possible to universalize the singular forms of living of the different groups, in particular, groups that, at different moments and contexts of history, have been defined as aberrations, deviant and different.

In sum, the constitution of difference

from the delimitation of identity creates a permanent zone of tension and instability. This tension comes from the networks of power that circulate in the poles of identity and difference. This can activate practices of resistance, which can be thought of as discursive and non-discursive practices against states of domination and effects of power.

Santos (2003) brings up the idea of an ‘emancipatory multiculturalism’, that recognizes a permanent tension between policies of equality and policies of difference. For the author, equality policies have a redistributive assumption, that is, it is fundamental to provide a social redistribution, namely, at the economic level. In this way, we assume equality as a principle and a practice. The problem here rests on the fact that the policy of equality based on the struggle against class differentiation has left aside other forms of discrimination, such as ethnic, gender or sexuality. The policy of difference emerges from the field of struggles and resistance of populations that go through different levels of discrimination. Santos will defend the idea that a policy of difference is not resolved by redistribution, but, rather, by recognition. Here, the meaning is not that of a collision between equality and difference, but of setting ‘the objectives of the social-economic redistribution and the recognition of the cultural difference’.

Therefore, by taking equity in health, which considers determinations of gender and different sexualities, and, if these determinations constitute differences relative to the cultural pattern of the European white, male and heterosexual, an equity policy should not only reflect the statements that preach tolerance and diversity, but, rather, recognize and reaffirm the cultural difference as a creative power in the constitution of new subjectivities, new ways of being and feeling the world and the other.

By taking the difference as the place of counterpoint of what is within the norm, therefore, constituting the norm, at the same

time as it becomes marginal, because it does not fit in the space of the norm, different sexualities have been, through the human history, object of insults, discrimination and violence, often covered by the mantle of the public power. By proposing to shuffle the game of identities, while they bring out questions related to power, resistance and transgression, queer theorists become, at one only time, a radical way of responding to the demands of social movements for greater space of social and cultural inclusion and an opportunity to reconstruct the equity policies that still anchor in categories that originate in heteronormative matrices.

The term queer can be translated as strange, eccentric, rare, extraordinary, ridiculous. It comes to be used by a group of theorists who reflect upon questions of gender and sexuality based on a post-critical perspective. For Miskolci (2009, p. 151), the choice of this term to call themselves, that is, a curse that denotes perversion and deviation, highlights a “commitment to develop an analytic of the normalization focused on sexuality”. That way, they begin to reflect about how sexuality is shaped and crossed by discourses of normalization and, bringing it to the field of research, they will think “the dynamics of sexuality and desire in the organization of social relations” (2009, p. 150).

For Silva (2007, p. 105), the purpose of the queer theory is to “complicate the question of identity and, indirectly, also the question of cultural and social identity”. The queer politics consists, thus, in disturbing gender binaries. In this sense, queer theorists are going to be influenced by a strand of the american cultural studies, notably, some feminist studies. Among them, the writings of Judith Butler stand out. This author provokes a permanent tension over the binarism of genres, pointing out that:

The hypothesis of a binary system of genders implicitly closures a belief in a mimetic relationship between gender and sex, in which the

gender reflects sex or is restricted by it. When the constructed *status* of the gender is theorized as radically independent of sex, gender itself becomes a floating artifice, with the consequence that ‘man’ and ‘male’ can, with the same facility, mean both a female and a male body, And ‘woman’ and ‘female’, both male and female. (BUTLER, 2008, P. 24-25).

The queer theorists express a struggle in which, per Miskolci (2012), in its political perspective, instead of a simple defense of homosexuality, as claimed by LGBT movements, worries about the criticism to the normalization regimes, reaffirming not a perspective of diversity, but, instead, of difference. At the same time, they make a counterpoint to the conceptions of power centered on the repressive function, to denounce their forms of discipline and control.

The queer concern is, therefore, not to determine an identity, but to admit multiple forms of identity. Not only to fight for these multiple forms of identity, but to denounce the mechanisms through which they have been situated as abnormal.

Practicing a reflection over the policy of integral attention to the health of the LGBT population: weaving threads, revealing texts, looking beyond the look

Our field of analysis is the National Policy for the Integral Attention to the LGBT Population, that appears as a recognition to the notion that health is a complex problem and not just a biological event, therefore, it is also social and cultural. It is a policy that aims to produce at least three different levels of change, namely: a) production of knowledge in the and on the basis of working

spaces, that are capable of changing the nature of health practices; b) production of more horizontal social relations with the power to interfere in the processes of subjectivation of the individuals involved in health production; c) decrease or modification of social and cultural relations marked by differences and subalternity.

The Policy of Integral Attention to the LGBT Population has a recent history. It originates from the Brazil Without Homophobia program, an articulation of the federal government and the civil society, under the coordination of the Special Secretariat for Human Rights of the Presidency of the Republic, as part of the National Human Rights Program. It is launched in 2004, with the general objective of

promoting the citizenship of gays, lesbians, transvestites, transgenders and bisexuals, from the equalization of rights and the fight against violence and homophobic discrimination, respecting the specificity of each of these population groups. (NATIONAL COUNCIL FOR COMBATING DISCRIMINATION, 2004, P. 11).

The program consists of three basic principles: a) the inclusion of the perspective of non-discrimination based on sexual orientation and promotion of LGBT human rights in public policies; b) production of knowledge for the elaboration, implementation and evaluation of public policies aimed at combating violence and discrimination based on sexual orientation; c) reaffirmation that the defense, the guarantee and promotion of human rights include all forms of discrimination and violence. Around these principles are inscribed notions of law, repudiation of the violence generated by the difference related to the exercise of homoaffective diversity and the production of knowledge that generate new possibilities related to the constitution of public policies and their processes of implementation and evaluation (NATIONAL COUNCIL FOR COMBATING DISCRIMINATION, 2004).

We must emphasize that Brazil Without Homophobia highlights in its chapters V and VI the right to education and the right to health, consolidating attention and equal treatments. The right to health, on the other hand, will have as outcome the launch, in 2010, by the Ministry of Health, of the National Policy of Integral Attention to LGBT Population. It is based on the implementation of actions to eliminate discrimination against lesbians, gays, bisexuals, transsexuals and transvestites and affirms that “this must be an ethical-political commitment for all instances of the SUS, its managers, counselors, technicians and health workers” (BRAZIL, 2010, P. 3, FREE TRANSLATION).

By launching the program, the Brazilian State recognizes two important aspects of the national reality, systematically neglected by the public power. First, there are ‘inequities and differences in health’, in particular, for some specific population groups, such as the LGBT population, blacks, quilombolas, gypsies, prostitutes and people in street situation, among others. Second, it assumes that processes of exclusion and discrimination against the LGBT population have effects on their health-disease-care processes (BRAZIL, 2010).

Here, it is not possible not to emphasize that the experience of injury and abjection has become, over time, different brands. On the one hand, the LGBT population internalizes in its experience of abjection, producing representations about itself, almost always placing itself in a position of inferiority, living in a permanent state of tension, as if the other were always a threat to itself. On the other hand, homophobic actions become subtle, becoming almost always an element of masculine identity, a ‘guardian of sexual differentialism’ (BORRILLO, 2010).

In this sense, it is possible to think of an ‘identity politics’ for the LGBT population, even in a health system of universal nature such as SUS. It is assumed, here, the tension between the constitutional affirmation that ‘health is a right of all and a duty of the State’

and the daily reality of the individuals, a reality crossed by innumerable historical and cultural processes that constitute discourses of truth, which legitimize exclusion and, in the limit, till the physical threat of plots of the population.

That way, politics is intended to deal with the ‘repercussions and consequences’ of prejudices and homophobic actions. It recognizes that the reorganization of health services is an easier task than the deconstruction of prejudice, by positioning itself as follows:

The challenges in restructuring services, routines and procedures in the SUS network will be relatively easy to overcome. More difficult, however, will be the overcoming of prejudice and discrimination that requires, from each and the collective, change of values based on respect for the differences. (BRAZIL, 2010, P. 14).

The policy aims to promote the integral health of lesbians, gays, bisexuals, transvestites and transsexuals,

eliminating discrimination and institutional prejudice, contributing to the reduction of inequalities and to the consolidation of the SUS as a universal, equitable system. (BRAZIL, 2010, P. 16).

In order to give answers to its objectives and purposes, actions are structured that range from qualifying the network of health services, through educational processes, permanent education and production of knowledge.

It is possible, therefore, to look at these policies as fertile territories for the submission of pedagogical processes that, considering the ideas of autonomy and emancipation, recognize the difference and, in particular, the difference produced from the principles of compulsory heterosexuality and heteronormativity as fertile spaces of creation and production of knowledge, within health work relations.

We will follow a path that takes the policy

of integral attention to the health of the LGBT population from its discursive practices, that enunciate actions or intentions regarding the relations between education, knowledge and right.

Our view of this path will be driven by concepts that are central to the queer perspective, such as heteronormativity, the relations between power, resistance, freedom and transgression, in a context where the notion of subject is strongly crossed by the relation between identity and difference.

We must emphasize, yet, that, since they are speeches contained in political statements, we will take the idea that Mainardes (2006, p. 50), assumes from his reading of the cycle of policies proposed by Ball. The author states that

policy analysis should focus on the formation of the policy discourse and on the active interpretation that professionals working in the context of practice do to relate the texts of policy to practice.

The author points out three main contexts in which the policy cycle is structured: the context of influence, the production of texts and the context of practice. It emphasizes that they are contexts that are interrelated and do not have a temporal or sequential dimension. As our path follows the course of the lines drawn by the discourse, we will illuminate in our path the context of the production of texts, without, however, disregarding the other contexts.

The context of the production of texts results from an arena of political disputes, with the result that “political texts are usually articulated with the language of the more general public interest”. For the author, “such texts are, not necessarily, internally coherent and clear, and may also be contradictory”. The political texts are the result of disputes and agreements, because the groups that act within the different places of the production of texts compete

to control the representations of the policy (MAINARDES, 2006, P. 52).

Of course, policies are textual interventions, whose response can have real consequences. It is in the context of practices that it is possible to perceive its consequences, its limits and its possibilities. For the author:

The context of the practice is where policy is subject to interpretation and remake and where policy produces effects and consequences that may represent significant changes and transformations in the original policy. The key point is that policies are not simply implemented within this arena (practice context), but are subject to interpretation and, then, to be recreated. (MAINARDES, 2006, P. 53).

We know that contexts that involve social practices, such as health and education, have, in general, been constituted throughout history in contexts of normalizing practices of the individuals lives. Sexuality has been normalized since the construction of a heterosexist society, in which heteronormativity has been the space of legitimation of an excluding sexual order. Now, it would be naive to imagine that the context of the production of political texts, formulating statements with the power to intend this order, would be sufficient to produce ruptures in the same excluding order. The individuals in their daily work, in general, move through this naturalized order in their interiors.

In contexts of crisis, it is reaffirmed that the incorporation of a queer analytic to the reading of a policy of equity helps us to understand the limits and powers of this policy. Some strategic elements of a queer analytic can be stated as follows: a) textuality and its meanings and importance produce and constitute individuals; b) the daily spaces where the education and health practices are given should be destabilizing of a normalizing *status quo*; c) the local voices, the small narratives must occupy an essential space in the deconstruction of difference.

Norm and citizenship: am I or am I not a citizen?

It is considered that the ideas of normal and correct are historical constructions perpetuated as truths by means of the language and having as result, in the present time, its social legitimation. This places us before a great challenge, that of assuming that what is said to be normal and correct, socially accepted, becomes the standard of reference to the idea of law.

The idea of law, in turn, cannot be thought in the context of the notion of power. Power is exercised, penetrates and acts in institutions, in economic inequalities, in language, in the body. Here the notion of sovereign power and relational power must be emphasized. This distinction can be seen in Araujo:

The repressive hypothesis of power places it at the axis of sovereign power to legislate by means of contract. Political theories are elaborated from this power to which it is pertinent to the question of rights and duties. As for the relational power analyzed by Foucault, law does not legitimize power, but, rather, puts into operation the procedures of subjection. (ARAUJO, 2012, P. 28).

Thus, the notion of law may be in the midst of a tense intersection between sovereign power and relational power. In this way, policies are inscribed based on mechanisms settled in sovereign power, but gain materiality within the scope of relational power.

On the other hand, if it is accepted that there is the normal and the correct, it is because, equally, it is accepted that there is something or someone outside the norm, taken as incorrect. And if there is this something or someone, it must be admitted that one may be living on the margins of what could be considered reasonable, in what can be socially assumed to be a 'good state of living life'.

Here, one may be in front of a kind of

paradox, in which the idea of law can be constructed based on references of what is socially legitimized as normal and correct, therefore, as a duty of all those linked to a power sovereign. At the same time, it excludes of the right those who were left outside of what was considered normal or correct, that is, exclusion by process of subjection arising from relational power.

If there are excluded ones, there is a need to bring them into the field of inclusion. Inclusion strategies are strongly anchored in policy formulations that, in turn, are originate from possible agreement, although temporary, coming from the actors that circulate in the political arena. Therefore, there is, once again, the intersection between sovereign power and relational power. The individual becomes an effect and point of support of power relations (ARAUJO, 2012).

This paradox between a notion of law derived from what was socially considered as normal and correct throughout history and the exclusion of these rights by those who do not conform to normal and correct standards can be deepened as we look at the world of relations of the health work. The individuals of the work were constituted either through formal education, or through their daily experiences as individuals that introjected the ideas of normal and correct and assented that the right is almost a synonym of what is perceived as correct.

Therefore, policies need to operate in a double helix: on the one hand, relativize, from the epistemological point of view, the normal and the correct as inductors of the construction of the notion of law; and, on the other hand, to deconstruct this same notion in the individuals involved in health production.

The policy of integral attention to LGBT health, in its presentation, incorporates in its discourse, at least in general, the set of claims of the LGBT social movements. Thus, in its text, there is a clear incorporation of these statements, thus translated:

In general, the demand of the LGBT organized movements involves claims in the areas of civil, political, social and human rights, which requires articulated and coordinated action in all areas of the Executive Power. For the current government, whose guideline is to eliminate discrimination and marginalization, in line with the Yogyakarta Principles, the LGBT Policy represents another step in the change of a historical position to which these people are subjected in the Brazilian society. (BRAZIL, 2010, P. 7).

In this sense, there is a discourse that not only assumes these demands, but, also, recognizes that its response is possible only if it is based on an intersectoral articulation. This places the actions within the health sector as a potential protagonist of these intersectoral articulations. The discourse inscribed in the policy points as a horizon to be reached the Principles of Yogyakarta. These principles are the result of the work of 29 international lawyers and deal with the application of international human rights law with relation to sexual orientation and gender identity.

The national policy, by putting the principles of Yogyakarta on the horizon, assumes that:

Human rights violations that hit people because of their sexual orientation or gender identity, real or perceived, constitute a global and consolidated pattern that causes serious concerns. The group of these violations includes extrajudicial executions, torture and mistreatment, sexual assault and rape, invasion of privacy, denial of employment and education opportunities and serious discrimination against the enjoyment of other human rights. (CLAM, 2007, P. 7).

There is here a clarity in the discourses that make up not only the idea that the themes related to gender and sexuality are a matter of human rights (which refers to a previous violation), as, also, reaffirm the existence of an identity of gender. This theme

will be put under strain by queer theorists when they assume that identity is an unstable category, although they may, somehow, as pointed out in the conceptual reflection carried out in this article, be the marks for the construction of more inclusive social policies. Here, there is no lack of knowledge on the side of queer theorists of the serious human rights problems related to the LGBT population, but, rather, a warning so that rights do not eliminate, by themselves, the heteronormative basis of their constitution. Here, the idea is not to assume a role of tolerance, but, rather, to comprehend that difference is part of human existence and must be respected as difference and not tolerated.

Still in the path of the articulation of politics with a notion of law, there is a clear position of the same regarding some agendas of the social movements. That way, the text of the policy position itself as:

It is in this context that issues such as civil union, the recognition of homoparental families, the reduction of violence, the guarantee of sexual and reproductive rights, among other situations of inequalities of rights, become part of the set of the Governmental political agendas. (BRAZIL, 2010, P. 7).

We must make two distinctions here. On the one hand, there is the right as a rise to a place denied to homosexuality, such as civil union and recognition of homoparental families. On the other side, there is the law as human rights, that approximates 'sexual citizenship' to other historically discriminated forms of citizenship, namely, ethnic and racial minorities.

This distinction returns to the previously mentioned paradox between the notion of law arising from the construction of the normal and the correct. Thus, queer theorists will question this right with something that refers to a category of heteronormativity. Therefore, despite the

reconstitution of a 'right' denied to homosexual relationships, that is, 'civil union' and the full range of social effects arising from this condition, there is a reaffirmation of a presupposition constructed on the basis of heterosexual relations and for reproduction purposes.

In a background context is the queer positioning, in which power, resistance and criticism of this relationship are endless tasks. Being on the border, refusing the classification, investing in the hybrid, the lack of knowledge are forms of expression of resistance as survival, in the movement of life as unlimited. Thus, there is always a potentially destabilizing position in the queer perspective. For Ferrari, Almeida, Dinali:

The queer, in building another place also removes from the place what is around him, which relates to him. That's because the queer is only built in relation. In a relationship, when one changes his place, it's also altered the place of the other. (FERRARI; ALMEIDA; DINALI, 2010, P. 115).

This destabilizing place is, at the same time, a force field in crisis scenarios and low capacity for consensus. Destabilizing means, also, the power to move, to produce new processes of subjectivation in the workplace. It is to focus on the caregiving action as a territory of production of a new becoming, of a new creative possibility. Here, there is not an act of inclusion, but followed possibilities of inclusion.

In the same way, the inscription of the norm as a path to get to the rights will always be and potentially submitted to these displacements, in such a way that the notion of right can be emptied of meanings, when it refers to individuals outside the norm or incorrect from the point of view of a society project. The horizon here is a path of permanent quest for freedom, and the sense of freedom, in queer space, is the permanent breaking of the norm.

Final considerations

Although national policy statements format a more general letter of intentions of character, there is a strong stimulus for LGBT social movements to increasingly occupy the social control spaces of the national health system. This, if it happens, creates important spaces in the political arena where the context of text production is inscribed, as well as influencing the local actors who execute the policies to plan processes of rupture or emptying of politics.

Considering that LGBT social movements can increasingly assume important spaces in the forums of policy formulation is important in the struggle for rights, but, from the point of view adopted in this article, based on queer reflection, it becomes even more important because of two aspects: a) to promote the exercise of otherness as a condition to transform difference, not into a negative force, but into an agent of new creative possibilities in the production of care and health management; b) provide that the principle of integrality of health care, in fact, contemplate a new look on the health-disease-care process and new possibilities of welcoming the different one in care relationships.

In this article, we take the texts of politics as the idea presented by Foucault, that discourse would always take place because of power relations, even though there is a mutual conditioning between discursive and non-discursive practices. Thus, we can consider that, the more generic the political statements are, the more they inform us about the discourses that are not said, not positioned, and increasingly they are configured as non-discursive practices. To inscribe in non-discursive practical political statements means the risk of having as effect something contrary to what is expected. Instead of producing actions, silence is generated. In this dynamic, it is important to understand the power relations that permeate silencing processes. As Salih states,

if power, as Foucault states, instead of prohibitive, it is productive, so the censors of society may be involved in the generation and proliferation of discourses and representations that they propose to ban. (2012, P. 139).

Even in instances of silencing, constituted on the basis of effects of power, there is always, for Butler (2008), a relation between recognition, resistance and intensity of life. For the queer theory, recognition is about the construction of what is human. Non-recognition is also the denial of one's being. The one who is not recognized is not a possible being. For Ferrari:

The norms of recognition are placed in a cultural world already organized when we arrived, when we were born, which does not mean that they cannot be modified. Deconstructed and reconstructed, especially those about what is considered as recognizable as human. Our own capacity for persistence is related to that which is outside of us, and it is precisely in the relationships that we are capable to establish with this outside which is the basis of our resistance and our capacity for resistance. (FERRARI, 2010, P. 115).

It can be understood, in this first field of analysis, that queer theory shuffles the notions of law and citizenship when it refers to norms that support the principles of compulsory heteronormativity and heterosexuality. This does not mean a refusal of statements that go in this direction, but, rather, the comprehension that there is always a state of tension within the relationships inscribed in the context of practices. This tension, in turn, produces processes of subjectivation, generating new subjectivities based on displacements in relation to each other.

It is recognized, here, a clear concern in the scope of these policies in articulating actions that propitiate the autonomy of the individuals and break with the stigma of abjection. Although they are too generalized

statements, they end up constituting a roadmap for possible educational interventions that consider the other and their difference as a space not only for new ways of being in the world, but, also, as a power to (re)invent the ways of being in the world.

We understand that, in times of democratic crisis, something so radically annunciator of spaces of resistance, such as queer theory, not only brings up the discussion about the constitution of the subjects of sexuality, but, also, about the very limits of those models of construction of knowledge, where sex is confined to its biological perception, responsible for delimiting the boundary between

male/female, heterosexual/homosexual and normal/abnormal individuals.

By considering that the policy of integral attention to the health of the LGBT population is structured around axes that are organized around educational processes concerning the population of a territory and health professionals, the organization of new health practices and the production of knowledge, queer theory and queer pedagogy are capable of fostering the constitution of new ways of life and existence, calling attention to the experiences of non-capture and counter conduction in relation to body, desire and sexual and social practices. ■

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