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Gone Awry:
The Campaign Against
Legalized Prostitution in
Latin America
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Concepts of public health, particularly as they were espoused by leaders of the nineteenth-century European sanitarian movement, formed a powerful ideology that united science with discriminatory social control. Rapidly growing urban areas afflicted by plagues and epidemics brought on by lack of cleanliness, ignorance of germ theory, and contaminated drinking and sewage facilities, demanded scientific assistance. Insalubrious port cities were especially trouble-some because epidemics interfered with the growth of European trade and commerce.

Ideally public health policy rested upon several strategies. Prior to the nineteenth century, contagion theory dominated traditional practices through the practice of quarantine and isolation. Once ill people were identified, city officials separated them from the rest of the population and disinfected their possessions, usually by burning them. If an epidemic were raging in one specific locality, the entire area might be cordoned off for forty days (hence the word quarantine). Eventually the development of vaccines against smallpox, diphtheria and tuberculosis, as well as new systems of water and sewage purification, were added to the arsenal of sanitarians. When added to a growing body of information about nutrition, these technologies combined to lower the rate of infant, child and adult mortality all over the continent.¹

Behavior modification, particularly of the poor and despised classes, was also a significant public health strategy. Particular groups or individuals were often identified as inherently contagious because of their association with immoral behavior, poverty or national identity. Policies aimed at isolating or controlling the mobility of the socially

unacceptable, the mentally ill and the contagious became an integral part of European municipal plans. Nevertheless, public health, due to its targeting of the poor and the marginal, created unexpected critics.²

As Europeans tried to clean up their cities and ports, migration to regions outside of Europe highlighted the need to ensure the health and safety of citizens residing abroad. International sanitarian campaigns were particularly influential in modernizing countries where European physicians resided, or where the training of local physicians was based on contemporary European practices. However, some of these campaigns backfired when they were applied to countries experiencing significant European immigration. Indeed, certain modern European public health programs in non-European countries were identified as policies derived in backwardness and immorality. Such was the fate of legalized female prostitution, a public health program designed to lower the incidence of venereal disease. The modern anti-venereal disease program of licensed houses of prostitution was perceived as immoral and backwards when it became known that European women were often found in foreign bordellos. To defend the purity of European women, a moral reform movement developed that relied upon racism, sexism and nationalism in order to close down houses or to remove European women. In the process two forms of cultural imperialism - medical programs involving female prostitutes, and moral reform movements to protect European women against involuntary sexual slavery - came into direct conflict and Latin American cities were their battleground.

THE MEDICAL CAMPAIGN TO LEGALIZE FEMALE PROSTITUTION

The identification of Latin American brothels as a target of moral reform ignored the fact that such institutions were deeply rooted in European traditions. Municipally-licensed houses of prostitution became prevalent in Europe during the fifteenth and sixteenth century. Whether towns were controlled by noblemen, the Catholic Church or a monarch, bordellos were established to monitor the activities of unacceptable women in order to protect the reputation of others.³

The advent of syphilis in the sixteenth century eventually linked female prostitution to the spread of venereal disease. This was particularly true in Paris where in 1684 prostitutes were supposed to

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be incarcerated in hospital (the Salpêtrière) if obligatory medical examinations determined them to be ill. Although these regulations were not put into general use in France until the early nineteenth century, the idea of uniting government and medical vigilance of female prostitutes was already hotly debated there in the eighteenth century. Houses of prostitution sanctioned by local or national governments, with obligatory medical examination and treatment of female prostitutes, commenced in France and subsequently became an essential part of public health legislation throughout Europe. By the 1870s legal bordellos, supervised by a combination of police and medical personnel, operated in France, Germany, Belgium, Great Britain, Italy, Austria, Sweden, Spain and Norway. An international medical conference on venereal disease had favorably discussed licensed female prostitution as a form of disease control in 1867.6

Many physicians in Latin American countries also advocated legalized prostitution as an appropriate way to lower the incidence of venereal disease. European colonial governments aided this process. Mexico became one of the first Latin American countries to experiment with the new system. Invaded by the forces of Emperor Maximillian in 1864, French occupation included a system of legalized prostitution. Cuba, in the throes of a prolonged campaign of independence from Spain, instituted similar laws in 1873.

Argentina, already independent and experiencing the beginning of massive European immigration and increased urbanization, contemplated municipal control of bordellos as early as 1864. Five years later a local physician, Dr Luis Tamini, supported the idea, arguing that legalized prostitution would help prevent the birth of defective children, promote social control, and create new sources of revenue for the municipality. Such views were persuasive, and by 1875 Buenos Aires, the capital city, passed its first prostitution ordinance. The public bordellos soon filled with foreign women and this led Europeans to dub Buenos Aires the 'Sin City' of South America. 8 Argentina was certainly not the first nor the only Latin American country to legalize prostitution as part of a medical campaign. In 1887 a Peruvian physician, Dr Manuel A. Muñiz, argued that prostitution and venereal disease had plagued his country even before the era of the Inca Empire. Unless prostitution were regulated not only would venereal disease run rampant, but pederasty, lesbianism and masturbation would become alternatives to commercial sex. Despite his personal concerns about the wisdom of advocating licensed prostitution because it condoned activities he defined as vice-ridden, the

doctor still believed that the campaign against venereal disease necessitated consideration of legalized prostitution.9

The self-confidence of public health physicians, both European and Latin American, masked the limited effectiveness of both prostitution control and venereal disease treatment. Female resistance to coerced registration in bawdy houses and required stays in venereal disease hospitals was directly related to the fact that there was neither a sure and effective treatment for either syphilis or gonorrhea, nor for other sexually transmitted diseases. It was not known until 1837 that syphilis and gonorrhea were two separate illnesses. The role of gonorrhea in preventing fertility and causing subsequent infections was also obscure. Mercury treatments, often a prolonged and painful course of treatment, could not necessarily prevent the onset of secondary or tertiary syphilis. Even the discovery in 1905 of Salvarsan, an arsenic-based cure for syphilis, was not the 'magic bullet' it was proclaimed to be. Only the invention of penicillin during World War II offered patients a quick and effective cure. 10

Nevertheless, well into the twentieth century most Latin American physicians and many European doctors still advocated medical supervision of government-licensed bordellos. They held fast to their beliefs because theories of disease and criminality were intimately linked to gender as well as non-scientific criteria. The notion that females somehow were more contagious than males defied yet somehow reinforced germ theory. The belief that immorality was linked to the transmission of disease further countered yet justified the increasing use of medical knowledge as part of venereal disease prevention. These ambivalent views enabled male health professionals to obtain extended political and medical power over the marginal female population.

Criminal anthropologists' description of prostitution as a female form of criminality paralleled paradoxical medical theories. The works of Pauline Tarnowsky, Cesar Lombroso and William Ferrero claimed that prostitutes suffered from biological defects evident in the shape of their skulls and bodies. It was no coincidence that the groups studied comprised the despised poor, Russians and Jews, and such views helped promote the belief that social problems were caused by outsiders and unacceptables rather than by inappropriate economic and social policies. Yet, despite the extensive 'evidence' compiled by scientists, all these theories were later rejected when Europeans contemplated the consequences of legal bordellos outside their own countries.¹¹

THE ANTI-WHITE SLAVERY MOVEMENT

The sexist implications of prostitution control were first challenged by the feminist Josephine Butler in order to have the British Contagious Diseases Acts repealed. According to their provisions, unaccompanied women found on the streets of certain British port cities could be forced to undergo a gynecological exam and placed in a licensed bordello. Under these circumstances, some innocent women found themselves infected by unsterile examining instruments. Feminists rushed to their defense and criticized the mandatory medical exam as being as unacceptable as the licensed bordello.

Butler's Social Purity League also criticized the double standard that led to the persecution of female prostitutes but not of their customers, and made the British public aware of the potential danger that the Contagious Diseases Act held for any British woman. With these tactics they managed to have the laws repealed in 1885. By then their campaign had spread to Europe in the belief that English women were being kept against their will in continental bordellos. Five years later successors of Josephine Butler, the National Vigilance Association, expanded their target to Latin America. As the movement progressed, more emphasis was placed on the legally sanctioned bordellos than on reformers' objections to forced medical exams. 12

Feminists had revealed the gender prejudices of legalized prostitution, but depended upon nationalistic sentiment to build support for local and international campaigns. The fear that decent women could be caught by nefarious men and sent to bordellos abroad managed to unite diverse groups into an effective battle against any foreign country or city that exposed foreign women to the dangers of legalized prostitution. To these reformers, women were victims rather than immoral or biologically defective, and their outrage justified the conflation of legal bordellos with 'white slavery'.

Racism further united the efforts of moral reformers to stop medically supervised prostitution. In 1870 Victor Hugo coined the term 'white slavery' to denote the international traffic in women and children for the purposes of sexual exploitation. He specifically intended to link experiences of reputedly innocent young white women, and the generations of Africans who had been sold into slavery by Europeans, in order to enlist those who were active in the anti-slavery campaign. This strategy also relied on the view that European society was superior to that encountered in Latin America.

For these reasons Hugo's description of legalized prostitution did more to promote racism than to eliminate it. ¹³ The word choice was not a casual one. The inclusion of the word 'white' was calculated to rally as much support as possible from Europeans who cringed at the thought of their women being forced to have sex with men of foreign nationalities and mixed races. Thus the campaign to promote the purity of poor white women had a distinctive racist and nationalist component that was to affect the European perception of women in Latin America.

Anti-white slavery societies were deeply concerned about the plight of some women in Latin America, but not all. They limited their inquiries to European immigrants, and usually saw Europe as the source of the supply rather than the cause. Reformers rarely linked moral views to economic, social and familial issues that might have clarified the European role in the process, nor did they examine factors other than legalized prostitution that might have led women to engage in commercial sex. Furthermore they focused principally on Latin American nations where European or North American women of European descent were supposedly most endangered by economic conditions and sexual mores such as machismo and concubinage. The result was that only a few Latin American nations became a daily topic of conversation among European reformers, while others evaded scrutiny. Similarly, while the status and plight of European women were examined, at least from a moral perspective, the problems of non-European women were generally ignored. The factors that led to a concentration of men in Latin American cities, the bustling ports, opportunities for male employment, tourism and military bases, were acknowledged, but rarely did reports contemplate female work opportunities, familial disruption caused by urbanization, and the high cost of urban living and its consequences for native-born women. The tendency to focus on the plight of European women in Latin America, European refusal to condone medicallysupervised prostitution in Latin America, and the belief that moral reform rather than economic, social or ideological change would improve the female condition, all had a lasting effect on venereal disease treatment strategies in Latin America.

The anti-white slavery campaign began in the last quarter of the nineteenth century and culminated in a major League of Nations study in 1927 of the international traffic in women and children and its relationship to legalized prostitution. Moral reform society data, interviews with pimps, and statistics from medically-supervised bor-

dellos formed the principal evidence for this campaign. Given the sources, underlying medical, economic and ideological issues were rarely referred to directly. Throughout these years bordellos were accused of promoting the victimization of innocent women, while reformers rarely contemplated whether or not medical supervision had accomplished its specific mission of reducing the incidence of venereal disease.

Conditions in Latin America preoccupied many participants in these international conferences. Special attention was always paid to Argentina in these reports because of its high proportion of European-born residents and officially-registered European prostitutes. In addition to Argentina, other Latin American nations such as Uruguay, Chile, Brazil, Cuba and Panama were also discussed, while countries like Guatemala, whose bordellos were filled with Indian women, were not studied.¹⁴

THE ANTI-WHITE SLAVERY CAMPAIGN

In 1875 the first international anti-white slavery, anti-legalized prostitution meeting was held in Liverpool. A forerunner of the International Abolitionist Association, it was called The British, Continental and General Federation for the Abolition of the Government Regulation of Prostitution, thereby directly identifying legalized prostitution as an obstacle to moral reform, regardless of its purported medical virtues. Organized by religious, political, and social reformers, within a few years such groups met with increasing regularity and it became evident that national representatives were concerned principally with the fate of their own women. What held these organizations together was mutual fear, and the possibility that goals like an international treaty to ban white slavery would offer succor for their women. 15 The increased emphasis upon nationalistic or religious concerns served other purposes as well. It allowed moral reformers to blame others for the ills befalling female nationals in foreign lands. Rather than recognize their own religion or country's complicity in the fate of economically, socially and religiously marginal women, European societies perceived the roots of the problem to be the inherent vulnerability of women and the immorality of host societies. The fact that the ports receiving these poor women were in colonial or post-colonial societies, in countries where the dominant race or religion was often distinct from that of the immigrant,

provided comforting political, racial and religious criteria to explain the supposed deviant society. These motives complicated the antiwhite slavery campaigns at the same time that they obscured the underlying medical issues.

Immigration of European females, rather than licensed prostitution, was therefore the original basis for anti-white slavery protests. Reports about sexual slavery in South America began in the late 1860s and reached an hysterical peak at the turn of the century. At an 1899 anti-white slavery conference sponsored by the National Vigilance Association, it was announced that the international traffic had two paths: 'One large branch of the trade goes through Constantinople, another has its destination in the South American ports, chiefly Buenos Aires'. ¹⁶ At the same meeting a letter from a German representative of a moral reform group informed the audience that:

There are hundreds of wretched parents in Europe who do not know whether their daughters are alive or dead, for they have suddenly vanished... Well, we can tell where they have been brought to and what has become of them. They are in Buenos Aires or Rio de Janeiro.... This trade is a very lucrative one, for the men in South America are of a very amorous disposition, and 'fair merchandise' from European lands easily finds buyers. If anyone wants to find out how the girls are treated they may simply take a walk along the Calle Juan and Calle Lavalle, those two streets that have been nicknamed by the people 'Calle Sangre y Lagrima' [the streets of tears and blood]. 17

The early belief that Argentine bordellos relied on the international white slave traffic began with immigration and was reinforced by the medical program to license prostitutes there after 1875. The concern grew as the proportion of foreign to native-born registered prostitutes increased at a phenomenal pace. Between 1889 and 1901, 6413 women were registered of whom only 25 per cent were Argentine. When the time period is extended to 1915, the percentage of registered Argentine women decreased. It was not until the 1920s that the number of registered Argentine prostitutes began to increase, and by 1934 they represented 43.9 per cent of the total while Polish and Russian women totalled 48.6 per cent. ¹⁸

The high percentage of foreign-born women in Buenos Aires bawdy houses led to direct accusations that the municipal government encouraged white slavery. As Sir Percy W. Bunting commented

at the tenth International Abolitionist Federation meeting in September 1908, one only had to look at the nationality of registered women in the Argentine capital to realize that 'prostitution is controlled by the international traffic and there in Buenos Aires it is fed by the houses that receive these women and live off their sexual commerce'. 19

The problem with these statistics was that they gave absolutely no real information about the number of prostitutes in the Argentine capital city, nor their nationality. Most women evaded registration, and those who signed up rarely appeared on a list the following year. Meanwhile physicians routinely estimated the number of licensed women to be as little as 1 to 10 per cent of all those who engaged in sexual commerce in Buenos Aires. The same situation existed in most countries favoring legalized prostitution. Nevertheless the bordellos, rather than the conditions that led women to engage in sexual commerce or the validity of such a medical campaign, became the object of the European moral reformers' scorn.

In 1904 delegates of twelve nations (Belgium, Denmark, France, Germany, Great Britain, Italy, the Netherlands, Norway and Sweden, Portugal, Russia, Spain and Switzerland) ratified an agreement to create agencies to monitor the movements of people suspected of importing or exporting 'women and girls destined for an immoral life'. These women, within 'legal limits', were to be repatriated if they so desired. Signatory countries were also asked to supervise companies that specialized in finding employment for women in foreign countries. A second international document was signed in Paris in May 1910. Signatory parties agreed to prosecute those who procured women and girls for immoral purposes. This time representatives from thirteen countries (Austria-Hungary, Belgium, Brazil, Denmark, France, Germany, Great Britain, Italy, the Netherlands, Portugal, Russia, Spain and Sweden) signed. Argentina, in contrast to Brazil, never signed any agreement. As a result, even though European prostitutes were as highly prized in Rio as in Buenos Aires, Brazil was less frequently criticized than Argentina.²⁰

These two countries were the special concern of a 1906 anti-white slavery congress held in Paris. At the request of the German National Committee, a Major Wagener travelled to Brazil and Argentina to ascertain whether German women were to be found in local bordellos. At each port city where his vessel landed, he asked specifically if there were German prostitutes, and what measures had been taken to rescue them. After his visit he concluded unhappily that German ships were used to transport women destined for South American

bordellos, but was relieved that most European prostitutes there were Polish, Russian and Hungarian, and he objected to their being labeled 'Germans'.²¹

Major Wagener was not the only investigator who went to Argentina and Brazil in search of the truth about white slavery. William A. Coote, president of the National Vigilance Association, went to Buenos Aires in 1912. So did Samuel Cohen, Secretary of the Jewish Association for the Protection of Girls and Women, the following year. Both returned and reported that the situation was not as bad as they had imagined, but they still blamed the existence of legal bordellos filled with foreign women in Argentina on immorality, rather than on the desire of Argentine officials to lower the incidence of syphilis through medically supervised houses of prostitution.

Within Latin America, progressive doctors continued to support programs of medically-supervised prostitution regardless of prostitute nationality. Dr Emilio R. Coni, an Argentine public health physician educated at the University of Buenos Aires in the 1870s and taught the latest European medical theories, had been involved in the debates about legalized prostitution since 1880. More than twenty years later he reaffirmed his belief in registration, examination and moderate treatment of prostitutes to the audience of the Fourth Scientific Latin American Congress in Santiago, Chile in 1909. Eight years later he wrote his memoirs and pronounced that he had to make a 'profession of faith that as far as venereal disease was concerned, I lean more to the regulationist camp [i.e. legalized prostitution no matter how many objections can be presented'. Even after the Committee of the International Office of Public Health in Paris (where legalized prostitution was still in effect) insisted in 1919 that the only effective medical strategy was one that targeted the entire population, Coni criticized efforts undertaken the same year in Buenos Aires to close down the Prostitutes' Registry, thereby ending mandatory medical exams for prostitutes. In his 1921 study of The Present State of the Anti-Venereal Campaign in America, he presented case reports of Latin American nations where medically supervised prostitution was complemented by other public health programs designed to treat or prevent venereal disease.²²

Other physicians were even more adamant about the need to license female prostitutes. In Cuba Dr Juan Santos Fernández argued that the suppression of a red light district in Havana in 1913 would lead to consequences as dire as those in Sodom and Gomorrah. Despite his moral qualms regarding legalized prostitution, he con-

cluded his article by directly linking the prevention of syphilis with prostitution control.²³

THE LEAGUE OF NATIONS

When World War I broke out in Europe, immigration to the Americas diminished in a drastic fashion and the white slavery controversy became less critical than in earlier years. Nevertheless, as soon as the war ended, the fate of post-war female immigrants to Latin America again became a topic of international debate. In 1921 the newly founded League of Nations organized a special committee to investigate the international traffic in women and children. It was not supposed to concern itself with the plight of the native-born, because the League had no right to challenge national sovereignty. It also consciously dropped the phrase 'white slavery' and replaced it with the 'international traffic in women and children' in order to separate the organization from earlier racist overtones. The results, however, were quite different. In its quest to 'persuade . . . nations to agree on simultaneous concerted action' the League's 1927 report implicitly criticized countries like Argentina for failing to enact adequate laws to protect foreign women from female sexual commerce, while it offered few suggestions for improving the plight of the native-born. It did, however, argue that the medical profession supported its views: 'It behoves [sic] all Governments which place reliance on the older system of preventing the spread of venereal diseases to examine the question thoroughly in the light of the latest medical knowledge and practice, and to consider the possibility of abandoning a system which is fraught with such dangers from the point of view of the international traffic.'24

Originally the committee was supposed to focus only on the traffic from Western Europe to Central and South America. Eventually the research extended to North America, the Mediterranean, North Sea and Baltic countries. Twenty-eight countries and 112 cities were visited, and more than 5000 prostitutes and pimps were interviewed. South America was the first and the principal geographic area reported on by the Committee on International Traffic in Women and Children. More time was spent in cities in Argentina and Brazil than anywhere else, and Argentina provided convincing proof that many foreign-born women registered in foreign bordellos almost as soon as they arrived:

In Buenos Ayres 79 foreign-born prostitutes were interrogated; 75 out of the 79 inscribed themselves within a year of their arrival... Even more significant is the fact that 56 per cent inscribed themselves within two months of their arrival, and in one case inscription actually followed within four days of arrival. Assuming, therefore, at a conservative estimate, that 75 per cent of the foreign prostitutes newly inscribed each year have arrived in the country that same year, we may take it, from figures available, that 197 women came or were brought into the country in 1922 and 179 were brought in 1923 for the express purpose of registering as prostitutes. 26

This statement was made without reference to data, presented later, that verified the ever decreasing numbers of legal prostitutes, nativeborn and foreign, in Buenos Aires. Thus a system that had registered 510 new women in 1915, only licensed 20 in 1920 and 143 in 1921. Furthermore in 1923, although 335 women registered for the first time, 2960 women were dropped from the registers. All this occurred at a time when it was estimated that there were five to 10 000 clandestine prostitutes in the city. 27

Uruguay and Brazil were cited in the Argentine report as important stopping points for European traffickers intent upon importing women to Buenos Aires. To avoid Argentine port officials, pimps reportedly sent victims to the Uruguayan city of Salto where they would board river vessels that would take them to the nearby Argentine city of Concordia. From there the merchants of flesh and their purported victims made their way to Buenos Aires.²⁸

When the League of Nations investigators studied conditions within both Brazil and Uruguay, they found themselves in a difficult situation. Superficially these two countries had adopted all the policies suggested by the international organization. Nevertheless it was clear that prostitution, including that of foreigners, flourished. The League's report on Brazil noted that even though the country had eventually signed the 1904 Agreement as well as the one in 1910, many foreign-born prostitutes worked in the port city of Rio de Janeiro. In fact, the majority of the 1700 prostitutes interviewed were of foreign birth. Unlike Buenos Aires, however, Rio de Janeiro did not utilize a system of regulated prostitution. Instead it merely licensed boarding houses where prostitutes lived. League of Nations' investigators also discovered that it was a common practice for an older, wealthy man to seek a nubile European prostitute to maintain

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as a mistress. The Brazilian case seemed to prove that adherence to treaties and the campaign to abolish state licensed bawdy houses, the two principal goals of the League of Nations Committee, would neither eliminate male demand, nor the presence of foreign-born women in Latin American bordellos. Nevertheless the report ignored these implications.²⁹

Uruguay, the other country identified as an intermediate stopping-point for European pimps and prostitutes enroute to Buenos Aires, had an equally problematic record. It too had agreed to honor the international conventions regarding sexual slavery, even though it had a formal system of licensed bordellos and prostitute registration. The smallest of the three South American countries, its capital city of Montevideo between 1913 and 1923 registered an average of 246 women each year, 42 per cent of whom were foreign born. Despite the large number of bordellos and prostitutes in that diminutive city, the report optimistically noted that recent Uruguayan legislation designed to expel all immoral aliens and threaten nationals with prison sentences for procuring sexual services would solve the problem.³⁰

Panama was included in the League's report because of the presence of the US military personnel in the Canal Zone. In the cities of Colon and Panama many minor females were found in bordellos, but since they were native-born, and mostly black, their problems did not merit much consideration from the investigators. They did note, however, that the one local institution designed to rehabilitate local prostitutes, a Catholic home, would no longer accept fallen women.³¹

In the two Panamanian port cities at least 600 women were registered as prostitutes, although they represented but a fraction of the women who were believed to be engaged in sexual commerce. Women lived a precarious life, although the report did not dwell on this problem, because prostitutes could not depend on a consistent business with the US Canal Zone. Instead they relied upon the arrival of naval and freight vessels travelling through the Canal. The reason business was sporadic was that redlight districts of these two cities were off-limits for resident Canal Zone military personnel, and this situation probably prevented more stable prostitution patterns from developing. Panama, however, was less of a concern than Argentina for the League of Nations, because most of the women in Panamanian bawdy houses were not Europeans.

Cuba, another country where females relied upon the tourist traffic to make a living in port cities, was also visited by League inspectors. Like Brazil, Cuba had signed many international agreements, and in 1913 a presidential decree had abolished licensed houses of prostitution. Nevertheless as late as 1924 foreign-born as well as native women operated from clandestine houses. In 1925 another presidential decree marked the beginning of a concerted effort to close down these establishments, one that treated foreign-born women more harshly than Cubans because foreigners could be deported irrespective of the number of years they had resided in Cuba. As a result, many foreign prostitutes went to Mexico in search of work.³²

League of Nations observers were probably pleased to hear that foreign-born women might be deterred from a life of sin in Havana, even though it had already been pointed out to them that such views were fraught with problems. In 1924, at an earlier League committee meeting, it had been proposed that an international treaty be formulated to guarantee the deportation of any foreign women suspected of engaging in prostitution. It took the wisdom of the female delegate from Uruguay, Dr Paulina Luisi, to point out that the only result of such laws would be to 'allow our nationals to commit crimes We should be nationalizing prostitution and not admitting foreign competition'. The problems of prostitution, as she so cogently pointed out, had to be broadened to include concern for all women, both native-born and foreign. ³³

Despite the admonitions of the Uruguayan delegate, the 1927 report helped serve notice to Latin American countries that, regardless of the economic and social factors that led women to engage in prostitution, the international community would not tolerate the presence of Europeans in local bordellos. The League of Nations targeted Argentina because it not only condoned medically supervised bordellos, it also refused to sign international agreements. The only way to placate European moral reformers was to sign treaties, restrict the admission of dubious immigrant women, deport immoral foreigners and abolish the licensed houses that purportedly allowed the international trade to continue.

These superficial conclusions encouraged exaggeration, and perpetuated the belief that it was a justifiable moral battle to keep European women out of foreign bordellos while ignoring the plight of Latin American women. In 1928 H. Wilson Harris published Human Merchandise, A Study in the International Traffic in Women, which sought to introduce the League of Nations report to wider audience. His preface interjected his own opinions about why the traffic existed. He denied that economic factors encouraged prostitution;

rather women's inherent moral weakness and passivity were the principal causes: 'Girls slip into prostitution – not plunge into it – from one cause or another. Rarely, if ever, is it considered a choice... Bad advice, moreover, ... can have its demoralizing effect.'

When Harris reported on the South American studies, he once again had his own perspective. He de-emphasized the forces pushing women away from their homeland and argued that in Argentina a life of vice was too attractive:

Investigators into commercialized vice in its most systematized and varied forms could find no more fruitful field of enquiry than the Argentine Republic, and its capital city, Buenos Aires, in particular... The general conclusion emerging is that Argentina is largely a paradise for souteneurs.³⁴

As late as 1929 pamphlets such as Lettre Ouverte addressé par un Homme aux Jeune Filles circulated warning French women of white slavers who, 'under the pretext of marriage, promise them a trip . . . to Buenos-Ayres', where they would be forced 'to live a life of debauchery and prostitute themselves to men of every color, race and social condition'. 35 Written by an over-zealous Frenchman interested in preserving the reputation and honor of women abroad, this pamphlet was dismissed by the National Vigilance Association in private correspondence as too alarmist, but its journal never apprised the public of this fact. Consequently the French reading public was most likely unaware of the NVA's efforts to de-emphasize such literature. A number of Latin American countries were embarrassed by the League's report and the subsequent popular accounts of it produced by Harris and by French journalist Albert Londres, who wrote the infamous The Road to Buenos Ayres. This book, published in 1928, praised French pimps and prostitutes in Buenos Aires while blaming the Polish Jewish pimps and prostitutes for giving the business a bad reputation.36

Even Argentina, considered the most incorrigible nation due to its refusal to adhere to earlier anti-white slavery agreements, finally bowed to international and local pressures and abolished medically-supervised bordellos. In 1936 the Law of Social Prophylaxis was enacted by the Argentine Congress. Its provisions included the closing of municipal bordellos and the establishment of more public venereal disease treatment facilities. Once again such laws did little

to halt the spread of venereal disease or prostitution, although it accomplished its principal goal of placating European and local moral reformers.³⁷

One country, Chile, was more embarrassed by what it considered the consequences of abolishing licensed prostitution. After having closed legal bordellos in 1925 and implemented compulsory treatment of venereal diseases in 1931, Enrique J. Gajardo, Chief of the Permanent Bureau of Chile to the League of Nations, in 1934 declared the laws had failed because clandestine prostitution was flourishing. In response to the Committee on the Traffic in Women and Children's resolve to promote the abolition of licensed houses, Gajardo suggested that the problems of Latin American countries were unlike those of Europe and that 'an enquiry in Latin America would indeed have proved that prostitution there present features different from those in the rest of the world and that the abolition of licensed houses raises various problems which are very difficult to solve'. 38

He attributed the increase of clandestine prostitution in Chile to the adverse effects of romantic movies, Don Juanism and, most importantly, to the impact of the world depression that wiped out the demand for copper, Chile's principal export and source of government income. As he put it,

If we analyze the problem objectively, we must also admit that the aggravation of this state of affairs was...due... also to the world crisis, which affected our country very severely and involved unemployment and poverty. In these circumstances, many mothers and girls had recourse to prostitution in order to find means of existence.³⁹

This was one of the first reports of the League of Nations' Committee to ignore the question of nationality and simply ask how effective prostitution control measures were in Latin America. It enabled Gajardo and other respondents to discuss clandestine prostitution and incidence of venereal disease, and to explain how unemployment, both female and male, might affect family life and female sexual commerce. Poverty did not distinguish between and among nationalities and races, only among classes. Equally important, Gajardo found it pointless to describe economic conditions in moral terms.

Other respondents were less specific about the impact of econ-

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omics on prostitution, but the Committee's willingness to print the Chilean response and to reexamine the situation in Latin America without regard to nationality marked a new phase in the white slavery campaign. Even though Latin American nations would be periodically accused of allowing traffickers to transport innocent women to major city bordellos, the issue of prostitute nationality slowly disappeared.

The history of legalized prostitution and anti-white slavery campaigns in Latin America clearly demonstrated the attractiveness of European medical ideology to Latin Americans. Confronted by rapid urbanization, internal migration and international population movements, Latin American physicians and politicians seized upon legalized prostitution as a facile way to deal with imbalanced sex ratios, limited work opportunities for women and fears of venereal disease. In contrast they were much more reluctant to embrace the ideology of reformers who argued that legalized prostitution was ineffective because it was immoral and backwards. Despite these predilections, moral reformers proved to be more persuasive than medical advocates of legalized prostitution. Even European doctors who earlier advocated legalized prostitution increasingly doubted its efficacy as an anti-venereal disease strategy. Together the European medical establishment and moral reformers eventually found common grounds to criticize public health programs in Latin America through the diplomatic pressures of the League of Nations.

By the time Argentina abolished legalized prostitution in 1936 to protect European women from victimization, Latin Americans had learned important lessons about cultural imperialism. They found out that European health policies based upon the social control of undesirable individuals were considered 'modern' and 'scientific' in foreign lands so long as no Europeans were exploited. German women were considered victims if found in Argentine bordellos at the same time that these same women would have been compelled to enter bordellos in German cities. The same would have been true for other European women, while native-born Latin American women continued to be subjected to various forms of legalized prostitution so long as there were few foreign women present in the same bawdy houses. The cynical use of prostitute nationality to criticize legalized prostitution abroad acknowledged the reality that European imperialism in Latin America did not end with political independence. Instead it lived on in so-called campaigns of moral reform.

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