

Introduction

Alberto talked about Golden Toes as much as anyone else in the section. No one suspected that he knew about Huatica and its environs only by hearsay, because he repeated anecdotes he had been told and invented all kinds of lurid stories. But he could not overcome a certain inner discontent. The more he talked about sexual adventures to his friends, who either laughed or shamelessly thrust their hands into their pockets, the more certain he was that he would never go to bed with a woman except in his dreams, and this depressed him so much that he swore he would go to Huatica Street on his very next pass, even if he had to steal twenty soles, even if he got syphilis.

Mario Vargas Llosa, *The Time of the Hero*.

For just under 30 years, between its creation in 1928 and its closure in 1956, the *barrio rojo*, or red-light district, around Huatica Street, originally known as 20 September Street, in La Victoria district, was the centre of brothel prostitution in the Peruvian capital, a place where many thousands of men, like Mario Vargas Llosa's character Alberto and, indeed, Vargas Llosa himself, went in search of Golden Toes and others like her.¹ The creation of Lima's *barrio rojo* in 1928 was the culminating

¹ As Vargas Llosa explains in his memoir, *A Fish in the Water*, Alberto's experiences in Lima's *barrio rojo* were based on his own: "The majority of the characters in my novel *La ciudad y los perros* [*The Time of the Hero*], written using memories of my years at Leoncio Prado as a basis, are very free, distorted versions of real models, while others are completely imaginary. But the elusive 'Goldfeet' is there as my memory preserves her; self-assured, attractive, vulgar, facing up to her humiliating job with indomitable good humor and giving me, on those Saturdays, for twenty soles, ten minutes of bliss." Vargas Llosa, *A Fish in the Water*, p. 105. On Vargas Llosa's *La ciudad y los perros*, see Aguirre, *La ciudad y los perros*.

achievement of the promoters of *regulation*, the attempt to control the spread of venereal disease through the medical policing of female prostitutes. As they did in most of Latin America (and parts of Europe, Africa, and Asia) at this time, elites in Peru also argued that the regulation of prostitution was not only imperative from a moral and public health perspective; it was also the “modern” way to deal with prostitution and venereal disease, and particularly with syphilis, a disease that affected the health of the individual and, because of its presumed hereditary effects, the vitality of the nation as a whole. By the 1950s, however, few held such views. Lima’s red-light district was now seen as a source of moral and epidemiological danger. This book examines what both the creation and closure of Lima’s *barrio rojo* tells us about Peruvian society in the first half of the twentieth century.

Although doctors and others had begun to put forward proposals to regulate prostitution in the mid-nineteenth century, little progress was made, in contrast to several other Latin American countries such as Mexico, Argentina, or Cuba, where regulation was introduced in the second half of the century. In the early twentieth century, however, Lima’s authorities finally introduced regulation. The implementation of regulation to manage prostitution in Lima reflected, and contributed to, two connected developments that characterized the so-called medicalization of Latin American societies, or the process whereby “biological and medical metaphors organized the way modern nations and states were imagined.”² On the one hand, these societies were increasingly pathologized, i.e. perceived and represented by “experts,” particularly lawyers and doctors, but also increasingly social scientists, as fundamentally unhealthy, both physically and morally, if not fully degenerate, a condition often associated, in a period when European racial thought influenced Latin American elites’ views of themselves, to perceived national racial deficiencies.³ In Peru such a diagnosis was reinforced by explanations of Peru’s defeat in the War of the Pacific (1879–1883), which stressed the weakness of the Peruvian “race” and the treachery of the country’s elites. Although a minority of observers blamed defeat on the failure of elites to integrate the nation and to incorporate the Indian, others concluded that defeat in the war, and more generally Peru’s backwardness, were consequences of the country’s racial configuration and in

² Cueto and Palmer, *Medicine and Public Health in Latin America*, p. 58.

³ See, among others, Armus (ed.), *Disease in the History of Modern Latin America*; Hochman, di Liscia and Palmer (eds.), *Patologías de la Patria*.

particular of the backward cultural and racial characteristics of its indigenous population.⁴

At the same time, the pathologization of Peruvian society nevertheless allowed for the possibility of regeneration and “civilization.” Particularly during the so-called Aristocratic Republic (1895–1919) and the “Onceño” of President Augusto B. Leguía (1919–1930), elites argued that material progress, to be gained through a growing insertion into the world economy and the exploitation of the region’s natural resources, would enable national progress. In some countries, elites sought to redeem their populations through the racial “improvement” that, they believed, would result from the immigration of “superior” Europeans. In others, elites pursued a discursive revalorization of a national *mestizo* identity, even embracing, in name if not in deed, “racial democracy.”⁵ In all countries, elites sought, albeit often half-heartedly and with limited success, to re-mold their populations by developing projects of “improvement” in education, public health, housing, and labor policy, as well as through military conscription. In Peru, as elsewhere in Latin America, such projects were highly racialized. Once the promise of mass European migration as a source of national regeneration proved unworkable, elites split on whether the Indian was redeemable and could, once improved (i.e. once de-indianized), become an agent of progress for the nation.⁶ Such projects reflected a new (often racialized) understanding of “the social” and of the state and of how the latter might act upon the former.

In the nineteenth century, Latin American elites typically viewed the city as the space of progress and the countryside as the space of backwardness. Particularly after the mid-nineteenth century, when many countries achieved greater political stability and began to experience faster economic growth, elites conceived of progress as irradiating from the civilized cities to the barbaric countryside, where both nature and the population, idle and untamed, were to be mastered and made productive through injections of capital (at first national, later increasingly transnational), technology and science (including medical science), and the

⁴ For the intellectual history of this period, see among others, Rochabrún, “Sociología y pensamiento social.”

⁵ See, for example, Graham (ed.), *The Idea of Race in Latin America*; Appelbaum, Macpherson and Roseblatt (eds.), *Race and Nation in Modern Latin America*; Earle, *The Return of the Native*; Gotkowitz (ed.), *Histories of Race and Racism*; Foote and Goebel (eds.), *Immigration and National Identities in Latin America*.

⁶ See Poole, *Vision, Race and Modernity*; de la Cadena, *Indigenous Mestizos*; Larson, *Trials of Nation Making*; Drinot, *The Allure of Labor*.

imposition of new regimes of free and, where necessary, coerced labor. In Cuba and Brazil, of course, such processes occurred in the context of, indeed were made possible by, slave labor systems. Networks of communication, railways and the telegraph first, automobiles, planes, the radio, and the telephone later, would link the modern space of the city with these new archipelagos of modernity, connecting the wealth produced in the “chimneys in the desert” with the cities that served as gateways to the world’s markets.⁷ However, by the late nineteenth century, problems arising from growing urbanization, class stratification, racial mixing, and contentious politics, as well as crime and disease, particularly epidemic disease, resulted in the growing perception that Latin America’s “ailing” cities too were in desperate need of “civilizing.”⁸

Peruvian elites conceived of Lima as whiter and therefore less pathologized than the rest of the country, and particularly the highlands and the Amazon.⁹ However, by the late nineteenth century, Lima too was deemed in need of “civilizing.” In his detailed study of the city of Lima and its population published in 1895, Joaquín Capelo, an engineer and politician, concluded that “Peru is today a sick man close to death,” but he believed that he and others like him could save the patient.¹⁰ Subject to contestation and less coherent than is sometimes assumed, the twinned pathologization and “improvement” of Lima in the late nineteenth and early twentieth centuries, its *modernization* perhaps, had a visible effect on the city.¹¹ In a context of limited if symbolically significant industrialization, this twin process was imagined and implemented by a new cohort of hygienists, architects, engineers, urban planners, and property developers, with support from diverse governments, from oligarchic *Civilistas* (1895–1919) to the military regime of Manuel Odría (1948–1956). It resulted in an evident physical transformation of the city, which grew in size, from 1,292 hectares in 1908 to 2,037 hectares in 1931 to 5,630 hectares in 1940, and in population, from 140,884

⁷ Rocchi, *Chimneys in the Desert*.

⁸ See, for example, Pineo and Baer, *Cities of Hope*; Meade, “Civilizing” Rio; Rodríguez, *Civilizing Argentina*; Armus, *The Ailing City*.

⁹ On the social and “racial” structure of nineteenth-century Lima, see Cosamalón Aguilar, *El juego de las apariencias*.

¹⁰ Capelo, *Sociología de Lima*. Vol. 3, p. 333.

¹¹ Of course, attempts to sanitize the city were not entirely new. As Adam Warren and Jorge Lossio have shown, municipal authorities and doctors attempted to address Lima’s unsanitary conditions at different times in the colonial and early republican periods with varying levels of success. See Warren, *Medicine and Politics in Colonial Peru*; and Lossio, *Acequias y gallinazos*.

inhabitants in 1908 to 273,016 in 1931 to 645,172 in 1940.¹² This was a transformation that combined the construction of new structures, such as boulevards and public buildings, as well as general transport, communications, and public health infrastructural development (from new hospitals to medical inspectors to sewage works) with the destruction of those structures, such as, most famously, the Callejón Otaiza (a street inhabited by Chinese immigrants destroyed by municipal authorities in 1909), which were considered to be sources of biological and moral infection.¹³

At the same time, but less evidently achieved, the process involved the “moral” transformation of the city’s inhabitants, as exemplified by the attempts of hygienists, or medical social reformers, and other experts to inculcate “civilized” values in the city’s population and to eradicate unsanitary practices and behaviors perceived as expressive of uncivilized traits.¹⁴ As in other cities in Latin America, this was a process that combined the encouragement of certain habits and practices, linked to leisure and sport for example, and the prohibition of others, such as gambling and alcohol consumption. The construction of this “city of hygienists,” as Mannarelli has called it, was a process informed by specific understandings of class, gender, and race, but also by more general concerns regarding public order, health, and morality.¹⁵ Although the population as a whole was deemed amenable to civilizing, different groups were subjected to different treatment. The intellectual architects of this process viewed the poor generally as sources of political threat, epidemiological danger, and immorality. However, in their campaigns to eradicate what they came to understand as social ills (criminality, alcoholism, gambling, vice, etc.), they typically targeted, through policies that sought ostensibly to address issues such as inadequate housing or poor nutrition, specific groups such as Chinese or Japanese men and women,

¹² The period from 1940 to 1960, moreover, saw an exponential expansion of the city. By 1960 it had reached an extension of 20,612 hectares and a population of 1,845,910. See Calderón Cockburn, *La ciudad ilegal*, p. 65.

¹³ See Rodríguez Pastor, “La Calle del Capón, el Callejón Otaiza y el Barrio Chino;” and Ramón Joffré, *La muralla y los callejones*; Ramón Joffré, “El guión de la cirugía urbana, 1850–1940.”

¹⁴ See Cueto, *El regreso de las epidemias*; Parker, “Civilizing the City of Kings;” Mannarelli, *Limpias y modernas*; Muñoz Cabrejo, *Diversiones públicas*.

¹⁵ See Mannarelli, *Limpias y modernas*, chapter 1. On public order, and attempts to address criminality, see Carlos Aguirre, *The Criminals of Lima and their Worlds*; and Huertas, “Imagining Criminality.”

Afro-Peruvians, and, poor, usually non-white, women, such as market sellers and washerwomen, and, of course, prostitutes.¹⁶

In Lima as elsewhere, urban and social reformers and particularly medical doctors singled out prostitutes for particular attention. Prostitutes, as the perceived primary source of venereal disease, were thought to embody one of the main contributors to the unhealthy city, and therefore were central to the pathologization of Peru's capital. In turn, as "fallen" women, they were considered to be one of the key groups in need of redemption or "civilization." Gradually, in the first two decades of the twentieth century, a medico-legal apparatus, part of a broader expanding "sanitary state" or "republic of health," was put in place to oversee the registration of brothels and prostitutes, levy licenses, medically inspect prostitutes, impose fines when the regulations were flouted, and generally police prostitution in the city, a process that resulted, as part of a broader process of spatial reordering of prostitution that began in the 1900s, in the establishment of the *barrio rojo* in La Victoria in 1928.¹⁷ At the same time, treatment centers were set up where prostitutes, and their male clients, could be treated for their venereal ailments. By the 1950s, such centers existed in most major cities in the country as part of a national venereal disease program. During this period, moreover, venereal diseases, such as syphilis, gonorrhea and soft chancre, and their epidemiological and social consequences, became a major concern for Peru's biomedical establishment, who helped shape public debate on prostitution and its public health impact.

In 1956, however, Lima's municipal authorities closed down the *barrio rojo* in La Victoria on the grounds that its existence did nothing to address either the social or epidemiological effects of prostitution and created other types of problems. "Even if he got syphilis," Vargas Llosa's character Alberto was willing to risk a visit to Huatica, a place that had been created as part of a strategy to control the spread of venereal disease. If the establishment of the *barrio rojo* in 1928 was the high point of regulation, its closure in 1956 was arguably the high point of abolitionism, a transnational movement inspired by Josephine Butler's campaigns against the Contagious Diseases Acts in 1860s Britain, that argued that regulation was not only ineffective from a public health perspective but

¹⁶ On the Chinese as a source of moral and biological corruption, see the discussion on Chinese eateries, or *chifas*, in Drinot, *The Allure of Labor*, chapter 5.

¹⁷ On the idea of a sanitary state, see Cueto and Palmer, *Medicine and Public Health in Latin America*. On the republic of health, see Araya, *República de la salud*.

also morally and politically wrong. In Peru, this campaign was led by a group of doctors, lawyers, and feminists, influenced by eugenic ideas, with limited success in the 1930s and 1940s. However, when the campaign was embraced, in the late 1940s, by “popular” newspapers that catered to an expanded public sphere, it finally gained traction. Like other Latin American countries, Peru too experienced a familiar cycle in the way it sought to address female prostitution, though it adopted regulation relatively late by regional standards, and, similarly switched to abolition much later than, say, Argentina or Cuba.¹⁸ Why regulation was adopted and why it was eventually seemingly abandoned, and what this tells us about the history of Lima and Peru more generally, is the subject of this book.

THE SEXUAL QUESTION

As Elizabeth Clement notes, “prostitution raises larger issues than just the treatment of the women involved, indicting patriarchy, the class structure, conditions caused by capitalism, and new understandings of the role of the state in people’s lives and health.”¹⁹ Although the narrative arc of this book follows the rise and decline of regulation and the apparent triumph of abolition as paradigms governing the management of prostitution, my goal is to explore a broader set of issues. In particular, I am interested in what the management of prostitution tells us about, in the very broadest sense, the interplay of sexuality, society, and the state in Peru in the nineteenth and twentieth centuries, and more specifically what it can tell us about “the sexual question.” Like the social question, a term that came to encompass the (perceived) social issues that stood in the way of the flourishing of industrial society (in particular, the problems that arose as a consequence of the unequal distribution of the gains of industrial capitalism) and the solutions that were devised to address those problems, the sexual question refers to the sexual issues that stood in the way of the

¹⁸ In fact, in some ways, regulation was never fully abandoned. Today, women over 18 who pay a license and have a health certificate can work legally as prostitutes. Brothels regulated by the state continue to operate in the Peruvian capital. Most prostitution is illegal or clandestine both in Lima and elsewhere. Of late, the trafficking of women and children for sex work in parts of the Amazon has received growing attention from the press and campaigners.

¹⁹ Clement, “Prostitution,” p. 219.

flourishing of *the population* and the solutions that were devised to address those problems.²⁰

The sexual question, as turn-of-the-twentieth-century sexologists such as August Forel argued, “is of fundamental importance for humanity, whose happiness and well-being depend largely on the best solution of this important problem.” For Forel, “the fundamental axiom of the sexual question” was as follows: “*With man, as with all living beings, the constant object of all sexual function, and consequently of sexual love, is the reproduction of the species.*” Forel argued that sexual instinct and sentiment “had their roots in life itself.” However, social life had perverted instinct and sentiment. It had therefore become necessary to act upon human sexuality: “human society has guided them [instinct and sentiment] into false and pernicious ways. It is important to turn them from these in order to tranquilize and regulate their course by damming them up and canalizing them.”²¹ Experts concerned with the labor question sought to codify the biological, social, and political pathologies that resulted from industrialization in order to channel workers’ efforts away from militancy. Similarly, sexologists sought to codify sexual behavior in order to channel men and women away from sexual pathology. As Lucy Bland and Laura Doan have noted, sexologists like Forel were concerned with labeling bodies and desires (as normal or pathological), but they were equally concerned “with populations as an object of study and set about delineating the criteria for human and ‘racial’ betterment through the regulation of procreation and biological heredity.”²²

Concretely, then, the sexual question evokes the ways in which sexuality became a political issue in the nineteenth and twentieth centuries, a matter for *government* in the Foucauldian sense.²³ As Foucault noted in the first volume of *The History of Sexuality*, published in 1976, from the eighteenth century, “the sexual conduct of the population was taken both as an object of analysis and as target of intervention [...] It was essential

²⁰ I use here the term *population* in the sense given to it by Foucault in his governmentality lectures. See Foucault, *Security, Territory, Population*.

²¹ Forel, *The Sexual Question*, pp. 3–5. On the development of sexology in this period, see among others, Bland and Doan, *Sexology Uncensored*; Waters, “Sexology;” Fuechtner, Haynes, and Jones (eds.), *A Global History of Sexual Science, 1880–1960*. See also Porter and Hall, *The Facts of Life*.

²² Bland and Doan, “General Introduction,” p. 2.

²³ As Foucault states, “What can the end of government be? Certainly not just to govern, but to improve the condition of the population, to increase its wealth, its longevity, its health.” Foucault, *Security, Territory, Population*, p. 105.

that the state know what was happening with its citizens' sex, and the use they made of it, but also that each individual be capable of controlling the use he made of it. Between the state and the individual, sex became an issue, and a public issue no less; a whole web of discourses, special knowledges, analyses and injunctions settled upon it."²⁴ Drawing inspiration from Foucault's approach to the study of sexuality, while being attentive to the limitations of such an approach, historians such as María Emma Mannarelli, Lissell Quiroz, and Raúl Necochea have examined the sexual question in Peru in the nineteenth and twentieth centuries from the perspective of discourses on, and policies toward, motherhood and the construction of femininity, and the development of family planning policies.²⁵

This study builds on such perspectives but focuses specifically on prostitution and venereal disease and their *government*. In particular, I explore how ideas about male and female sexuality informed attempts to govern prostitution and venereal disease. The regulation of prostitution, as a paradigm adopted by state actors to address the public order and public health effects of prostitution, reflected but also constructed understandings of normal and abnormal or desirable and undesirable male and female sexuality and of the role of the state in regulating sexuality and channeling it for the purposes of nation building and national progress. Scientific, and specifically medical, knowledge on venereal disease proved central to elite support for regulation in the nineteenth and early twentieth centuries, since it served to identify prostitutes as the primary vector of venereal disease and male clients as its primary victim. Doctors believed that, because men found it difficult to marry, and because of the dangers posed by the lure of sexual perversions such as homosexuality and masturbation, it was imperative that prostitutes satisfy male sexual needs. It followed that prostitutes needed to be made safe for men. In turn, the shift away from regulation toward abolition, and the eventual closure of Lima's *barrio rojo* that resulted from this shift, expressed different understandings of male and female sexuality, as well as new biomedical understandings of how venereal disease spread, understandings that shifted focus away from prostitutes as the main vector of contagion to the population as a whole.

²⁴ Foucault, *The Will to Knowledge*, p. 26.

²⁵ Mannarelli, *Limpías y modernas*; Necochea López, *A History of Family Planning in Twentieth-Century Peru*; Quiroz, "Mettre au monde."

Historians who have studied prostitution in contexts as different as imperial Russia and colonial India or nineteenth-century Havana and twentieth-century London reach similar conclusions about the ways in which the government of prostitution and venereal disease both reflected and in turn shaped ideas about sexuality.²⁶ Nevertheless, the Peruvian case is instructive because this general pattern is inflected in ways that reflect specifically local issues: elite anxieties about male sexuality, and the threat of homosexuality and masturbation, in the late nineteenth century, for example, were linked to broader anxieties about the nation's "virility" in the aftermath of the War of the Pacific; perceived changes in female sexual mores in the 1920s, and the emergence of a transgressive sexuality linked to the "modern girl" and the flapper, were understood with reference to the allure as well as the threat of things European but also as expressive of the moral contagion produced by the visibility and proximity of female prostitution in the streets of Lima. More generally, elites understood the dangers of venereal disease in ways that reflected the specific racializations that shaped Peruvian society: they blamed Asian immigrants in the early twentieth century for the spread of venereal disease in Lima while a pathological indigenous sexuality came to be seen as an explanation for high rates of venereal disease infection in the mid-twentieth century in the context of growing rural to urban migration and the expansion of public health services to the rest of the country.

But the history of prostitution and venereal disease explored in this book was shaped not only by ideas but also by the actions of a range of social actors. In this sense, though, like many other scholars, I draw in this book on the work of Foucault, I share the view that one cannot write a history of sexuality as a "history without agents." As Rita Felski notes, "what is missing from Foucault's version [of the rise of sexual science] is any substantive account of the messy and complicated interaction, conflict and negotiation between the discourses of sexual science, other aspects of nineteenth-century culture and the experiential realities of human subjects."²⁷ Indeed, elite ideas about prostitution, and the policies that derived from them were subject to contestation, first and foremost, from the women who were the object of such policies. Women targeted as prostitutes sometimes rejected and sometimes tried to enforce the policies

²⁶ See Bernstein, *Sonia's Daughters*; Tambe, *Colonial Bombay*; Sippial, *Prostitution, Modernity, and the Making of the Cuban Republic*; Laite, *Common Prostitutes and Ordinary Citizens*.

²⁷ Felski, "Introduction," p. 2.