

**Homosexuality, Eugenics, and Race: Controlling and Curing “Inverts”
in Rio de Janeiro in the 1920s and '30**

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Significant transformations occurred in Brazil between 1920s and 1945. During these two and a half decades, Rio de Janeiro and São Paulo--the economic, political and cultural centers of Brazil--became the battlegrounds for contested notions of national identity and divergent visions of the country's political and economic future. The events that took place during this period and the disputed ideological and social constructions of the nation, race, cultural identity, gender, and the body shaped a nascent urban homosexual subculture and a medicolegal discourse about it. This paper examines the relationship between two related developments: the growing visibility of male homosexuality in Brazil's two most important urban centers and the increase in writings about same-sex eroticism by physicians, criminologists, and jurists, especially as they relate to the construction of race and homosexuality as two interrelated perversions of the “degenerated” Brazilian body.

In 1928, Dr. Viriato Fernandes Nunes presented a keynote speech entitled “Sexual Perversions in Legal Medicine” to the São Paulo School of Law. In his presentation, he emphasized the increasing visibility of men who engaged in sexual activities with other men. Nunes further noted that “invertidos (inverts) come from all ages and classes” and that “this

depravation is very prevalent and seems to become more and more widespread.”¹ Inverts, he argued, could be easily identified by their appearance, dress and the jobs that they chose.

Nunes also presented a psychological profile of typical homosexuals:

From childhood they are more troubled than other children: they are well-mannered, delicate, and reveal feminine attitudes and aptitudes in all of their actions. Their interest is in pleasing other boys and young men. At a later age and with better reflection and wiser judgment, they note how ridiculous their inversion is; and, if they have any moral force left, they try to correct it. Others, however, who are impotent, dominated and defeated by their inversion, continue to practice their perverted loves and do so as naturally as if they were carrying out a morally equivalent noble action.²

Nunes then referred to two widely publicized sex crime cases of the previous year: the killing of three young boys by Febrônio Índio do Brasil and the slaying of four youth by Prêto Amaral. Both men were of African heritage, and both cases involved rape and the brutal murder of the victims. Linking homosexuality to sadism, Dr. Nunes emphasized the threat that homosexual “perversion” presented to society. Unable to control their sexual impulses, he argued, “degenerate” figures such as Índio do Brasil and Prêto Amaral, and by extension all homosexuals, posed a serious danger to Brazil's social fabric, to the family, and to the proper ordering of gendered relationships. The subtext of his speech also evoked the ominous image of dark, sinister forces preying on the purity of innocent white Brazilian youth. His solution to containing homosexuality was to apply medical-legal knowledge and science, which along with the assistance of courts and prisons, would contain, control and cure homosexuality and, therefore, assure social tranquility.

¹ Viriato Fernandes Nunes, “As Perversões em Medicina Legal.” Tese Inaugural da Faculdade de Direito de São Paulo. (São Paulo: Irmãos Ferraz, 1928), 11.

In the next decade, over a dozen additional doctors and criminologist wrote over thirty books, pamphlets, and articles about homosexuality. These authors did not share a monolithic view about the origins, expressions, and possible cures of same-sex erotic behavior. However, their overlapping training in law, medicine, psychiatry, and criminology suggests viewing their work as a whole within the broader interdisciplinary context of medicolegal investigations and discourses. Many held multiple positions as professors in university and directors of government institute or agencies while maintaining private practices, all of which provided multiple income sources.³ Their training in medicine and law, and sometimes in both fields, placed them among the small elite of middle and upper-class professionals who relied on family ties, patronage, and personal loyalty to their mentors as vehicles to establish and advance their careers.⁴ This reduced

² Ibid.

³ For example, Leonídio Ribeiro, the most prolific of these authors, had a chair in legal medicine and criminology at the Flumenense Medical School. He also taught at the Medical and Law Schools in Rio de Janeiro and simultaneously was the director of the Institute of Identification, linked to the Federal District Civil Police, and the head of the Laboratory of Infant Biology. Edmur de Aguiar Whitaker, second only to Ribeiro in the number of articles published on the subject, was a psychiatric physician attached to São Paulo police’s Identification Service, as well as a professor of Juridical Psychology for the São Paulo Police Academy. Antônio Carlos Pacheco e Silva, another leading “expert” on homosexuality, was professor of Clinical Psychiatry at both the University of São Paulo and the Paulista Medical Schools, as well as the director of the state-run Juquery Mental Asylum and the privately-owned Pinel Sanatorium. Pacheco e Silva was also an active leader in the most important Brazilian eugenics association, the League of Mental Hygiene. Leonídio Ribeiro, De médico a criminalista: depoimentos e reminiscências (Rio de Janeiro: Livraria São José, 1967), 1-5; Edmur de Aguiar Whitaker, Manual de psicologia e psicopatologia judícia (São Paulo: Serviço Gráfico da Secretaria da Segurança Pública, 1958), 3; Antônio Carlos Pacheco e Silva, Psiquiatria clínica e forense (São Paulo: Companhia Editora Nacional, 1940), 354.

⁴ Talisman Ford, “Passion in the Eye of the Beholder: Sexuality As Seen by Brazilian Sexologists, 1900-1940” (Ph.D. diss., Vanderbilt University, 1995), 32-48. For a study of the links between Brazilian intellectual and the state in this period, see Sérgio Miceli, Intelectuais e Classe Dirigente no Brasil (1920-1945) (São Paulo: Difel, 1979).

circle of physicians, lawyers, criminologists, and psychiatrists interacted in the same medical schools and professional organizations and published articles in the same handful of journals on subjects related to crime, sexuality, law, and medicine.⁵ Their writings on homosexuality, while divergent in many details, were ultimately similar in their overall approach to the subject.

Among the most influential of this circle of professions was Dr. Leonídio Riberio, who at the beginning of Getúlio Vargas’s rule in the early 1930s served as the head of the National Institute for Identification that was attached to the Federal District Civil Police in Rio de Janeiro. In 1938, Riberio published Homossexualismo e Endocrinologia, in which he linked homosexuality to hormonal disorders.⁶ Riberio had conducted morphological studies on 195 homosexuals arrested by the Rio de Janeiro police in the mid-1930s. In the results of his “research,” he argued that there was a relationship between a defective endocrine system and this sexual “perversion.”

In the same year that Riberio’s book on homosexuality came out, students from the São Paulo Institute of Criminology organized a project to study the “habits, customs and the living conditions of homosexuals in that city.”⁷ They visited the main areas in downtown São Paulo where homosexuals congregated and interviewed nine men. Their goal was to establish “the

⁵ Among the publications that printed these men’s articles on homosexuality were: Arquivos de Polícia e Identificação (São Paulo), Arquivos da Polícia Civil de São Paulo, Arquivos da Sociedade de Medicina Legal e Criminologia de São Paulo, Arquivos de Medicina Legal e de Identificação (Rio de Janeiro).

⁶ Leonídio Riberio, Homossexualismo e Endocrinologia, with a forward by Gregório Marañón (Rio de Janeiro: Livraria Francisco Alves, 1938).

⁷ E. de Aguiar Whitaker, Eddi Kraus, Magino Roberto de Loliveira, Joel Botto Nogueira and Ald Sinisgalli, “Estudo Biográfico dos Homossexuais (Pederastas Passivos) da Capital de São

bases for a better understanding of homosexuality in all of its aspects through observing the phenomenon by scientific means and analyzing its repercussions in the social realm.”⁸ Gaining the confidence of their subjects, these medical students entered the latter’s apartments, took explicit pictures, recorded the details of their lives, and noted slang, dress and daily habits. Dr. Edmur de Aguiar Whitaker, professor of psychology and Juridical Psychiatry of the Institute of Criminology and the director of the project, summarized the findings of the report:

With this [information], we are able to act with confidence in our fight against this abnormality. It is easier to ignore homosexuality than to remedy it since homosexuals own attempts to correct themselves are not crowned with success. Thus, we look toward contributing to the solution of this problem which has assumed such serious proportions among us.⁹

This process of increased awareness of homosexuality within Brazilian society and the fear and anxieties about its ever more visible manifestations reached a peak in 1940. In that year, jurists in charge of rewriting the Brazilian criminal code of 1890 seriously considered introducing a provision that would subject homosexual acts between consenting adults to up to five years in prison.¹⁰ [Sodomy had been decriminalized in the beginning of the nineteenth century as a part of reforms of Brazil’s legal system that were inspired by the Napoleonic Code.]

Why was homosexuality suddenly the object of so much scholarly interest in the late 1920s and 1930s? Why were physicians, criminologists and jurists researching the links between same-sex erotic behavior and physical, mental, and social disorders? Why did medicolegal

Paulo. Aspectos da sua Atividade Social (Costumes, Hábitos, ‘Apelidos,’ ‘Gíria.’)” Arquivos de Polícia e Identificação Vol. II, No. 1, 1938-1939, 244-262.

⁸ Ibid., 262.

⁹ Ibid.

discourse about homosexuality contain a racial subtext? In short, why did homosexuality become a threat to the proper ordering of Brazilian society?

The answer lies in part in the dramatic transformations that occurred in Brazil in the 1920s, '30s and early 1940s. During these two and a half decades, Rio de Janeiro and São Paulo, Brazil's two largest urban areas and the economic, political, and cultural centers of the nation, became the battle grounds for contested notions of national identity and divergent visions of the political and economic future of the country. The events that took place during this period and the disputed constructions of the nation, race, cultural identity, and gender also shaped the medicolegal discourse about homosexuality.

Let's look at these social changes that took place in the 1920s and 1930s. First of all, modernization and industrialization after World War I had a tremendous impact on men, women, the family, and gender relations. Migration and immigration and the process of urbanization crowded hundreds of thousands of new people into the country's major cities. The population of Rio de Janeiro doubled between 1906 and 1940, jumping from 811,443 inhabitants to 1,764,141.¹¹ The increase for São Paulo was even more dramatic. In 1900, the city had 239,820 inhabitants. In 1920 that figure increased 140% to 579,033. In the next two decades, that is, from

¹⁰ Leonídio Ribeiro, O Novo Código Penal e a Medicina Legal (Rio de Janeiro: Jacintho, 1942).

¹¹ Instituto Brasileiro de Geografia e Estatística, Recenseamento geral do Brasil [1º de setembro de 1940], Parte XVI-Distrito Federal (Rio de Janeiro: Serviço Gráfico do Instituto Brasileiro de Geografia e Estatística, 1951), 1.

1920-1940, the population increased another 120% to 1,326,261.¹² Traditional patriarchal familial institutions began to bend under modernization trends. Middle-class women entered the workforce in increasing numbers, joining working-class immigrant women and poor Brazilians in the double toils of being both housewives and breadwinners. Industrialization promoted a culture of consumption and brought women out of the cloistered domestic sphere. Hollywood films and women's magazines glamorized the “new woman” and promoted new cultural values that encouraged women to assume a more public profile. Changes in fashions triggered widespread unease about the apparent “masculinization” of women and “feminization” of men. As Susan K. Besse has stated in Restructuring Patriarchy: The Modernization of Gender Inequality in Brazil, 1914-1940:

Rapid change generated so many conflicting messages that men and women frequently expressed anxiety over how to adjust their values to new realities and how to define proper behavior in light of new necessities and opportunities. Women who failed to acquire a lacquer of modernity suffered ridicule and social ostracism, which those who took to heart messages that communicated the possibility and desirability of women's social, economic, and sexual emancipation were either regarded as immoral or stereotyped as ugly old battleaxes. Women were expected to cultivate an outward appearance of modern sophistication while carefully preserving the “eternal” female qualities of modesty and simplicity. They were to be both symbols of modernity and bastions of stability against the destabilizing effects of industrial capitalist development, shielding the family from “corrupting” influences.¹³

The modernization of Rio de Janeiro and São Paulo that included transformations in the urban landscape created new public social spaces, including new public plazas and parks, movie

¹² José Roberto de Araújo Filho, “A população paulistana,” in A cidade de São Paulo: estudos de geografia urbana, ed. Aroldo de Azevedo, vol. 2, A evolução urbana (São Paulo: Editora Nacional, 1958), 169.

theaters, and train stations. Some of these news spaces were soon appropriated by homosexuals, who, like heterosexuals, flocked to Rio and Sao Paulo from small towns and rural areas throughout the country in search of work and a better life. Their growing visibility provoked further anxiety about properly gendered social roles.

Another plausible cause for the growing attention to homosexuality in the 1920s and '30s was the general process of post World War I increased intervention of Brazilian physicians, jurists, and criminologists in social matters. Social and moral issues, these professionals argued, were not concerns for the police or the church but problems to be addressed by science and medicine. Eugenic theories, imported from Europe and the United States and adapted to the unique Brazilian circumstances, dominated the Brazilian League for Mental Hygiene, as well as the thinking of leading criminologists and social anthropologist. The positivist ideology, which had provided the theoretical underpinning for the 1889 overthrow of the monarchy and the establishment of a republican government, also encouraged the interference of scientists and physicians in issues of daily life.

These two developments, namely, the growing visibility of homosexuality and the increased medicalization of social issue took place within a larger context of political instability that continued uninterrupted throughout the 1920s and '30s. In 1917 and 1919, anarchists and socialists led two unsuccessful general strikes in São Paulo, the emerging industrial center of the nation. Throughout the 1920s, young army officers staged a series of unsuccessful revolts against

¹³ Susan K. Besse, Restructuring Patriarchy: The Modernization of Gender INequality in Brazil, 1914-1940 (Chapel Hill: University of North Carolina Press, 1996).

the government and articulated a vague program in opposition to the ruling oligarchy and in favor of reforms in the electoral process.

In 1930, the Brazilian economy took a tail spin as coffee prices crashed with the onset of the Great Depression. That same year the unsuccessful presidential candidate and former governor Getúlio Vargas headed a military revolt that catapulted him into the presidency and ended the thirty-five year long political hegemony of the states of São Paulo and Minas Gerais. The internal political conflicts that ensued--the rebellion of São Paulo against the central government in 1932, the failed communist insurrection of 1935, the aborted fascist coup d'etat in 1938--all increased anxieties about the stability of the entire political and social order.

Within this context, homosexuality in the 1920s and 1930s represented sexuality that had not been contained and controlled. Just as the social body was out of control, so too was the physical body of the homosexual whose malfunctioning hormonal systems caused immoral and degenerate behavior. The solution presented by some physicians, such as Professor Rocha Vaz of the Medical School in Rio de Janeiro, included a strategy of legal or criminal sanctions combined with medical treatment. In a paper presented at a conference of the Society of Medicine and Surgery of Rio de Janeiro held in 1933 he stated his position clearly: “Don’t tolerate homosexuality, but cure it; the problem is resolved with the police and with the doctor.”¹⁴

Other physicians and jurists argued that since homosexuality was caused by hormonal imbalances, it should be treated exclusively within the realm of medicine. Ribeiro in his book Homosexualismo e Endocrinologia argued: “The practices of sexual inversion can no longer be

considered a sin, vice, or crime since in most cases it has been shown to involve sick or abnormal individuals who should be not punished since they need treatment and assistance above all else.”¹⁵

The positivist tradition in Brazil which supported the state's intervention in solving social ills encouraged physicians, jurists and criminologists to play a role in discovering, studying and proposing cures for those sicknesses in the social body of an otherwise vigorous and healthy nation. This tradition served as a backdrop to debates about race, eugenics, the place of the women in Brazilian society, and the causes of homosexuals' sexual degeneration. The Brazilian social body was sick with communists, fascists, criminals, degenerate blacks, and homosexuals. These maladies had to be controlled and/or cured. The 1930s became a testing ground for how to best purify and heal these ailments of the Brazilian nation.

Social anxieties and medical-legal writings about homosexuality were not, obviously new inventions of the 1920s and 30s. In fact both a Brazilian homosexual subculture and medical writings about it existed already in the 1870s, '80s and '90s. In 1872, Dr. Francisco Ferraz de Macedo published a study on prostitution in Rio de Janeiro that included a detailed account of same-sex erotic behavior practiced by “sodomites.”¹⁶ Twenty-two years later, in 1894, Francisco José Viveiros de Castro, a professor of criminal law at Rio de Janeiro's Law School wrote a

¹⁴ Rocha Vaz, “Aspectos clínicos da intersexualidade.” Arquivos de Medicina Legal e Indentificação 3:7 (August 1933) 200.

¹⁵ Ribeiro, Homossexualismo e Endocrinologia, 27.

¹⁶ Francisco Ferraz de Macedo, Da prostituição em geral e em particular em relação ao Rio de Janeiro (Medical thesis, Faculdade de Medicina da Universidade do Rio de Janeiro, 1872).

volume entitled Assaults on Decency: Studies On Sexual Aberrations that described same-sex erotic activity in downtown Rio de Janeiro. He wrote:

They groomed themselves so that they could be easily recognized. They used very short jackets, silk scarves hanging from their pockets, very tight pants designed to fit the form of their thighs and buttocks. They approached the passers-by asking for a match to light a cigarette in a sweet voice with provocative and lascivious body movements.¹⁷

In 1906, Dr. Pires de Almeida added to this literature. He published a treatise on homosexuality in Rio de Janeiro that confirmed the observations about a vibrant subculture described thirty-five years earlier.¹⁸ According to the doctor, homosexuals could be found in “entrances of theaters, cafes, restaurants, billiard halls, doorways of convents, the stairways of the churches, the trees around Campo de Santana, [a popular public park] the bath houses, and the basements of theaters.” Almeida noted that they socialized in groups of two or three, or cruised the streets alone, dressed elegantly, hid their real age with the appropriate clothes, and used red ties as a coded indication of their sexual proclivities, a practice that seems to date back to the mid-nineteenth century in Brazil.

¹⁷ Francisco José Viveiros de Castro, Atentados ao Pudor: Estudos sobre as Aberrações do Instinto Sexual, 3rd ed. rev. and enl. (Rio de Janeiro: Livraria Editora Freitas Bastos, 1934). 221-22. This work, originally edited in 1894 was republished in a 1934 expanded edition based on the manuscripts left by the author. Viveiros de Castro relied largely on the writings of turn-of-the-century European medical experts to elaborate his theories and provide examples of sexual aberrations. The chapter on "Pederasts" (pederastas), the author confessed, is a summary translation of the French work by Dr. Chevalier entitled Une maladie de la personnalité. L'inversion sexuelle (1893) and Dr. Moll's German volume, Kontrare Sexualempfindung (1891). The author used the term sexual inversion and pederast interchangeably. On page 221, he uses the term pederast to refer more specifically to the crime of rape of minors, an offense set down in the 1890 Criminal Code.

¹⁸ Dr. José Ricardo Pires de Almeida, Homossexualismo (A libertinagem no Rio de Janeiro): Estudo sobre as Perversões do Instinto Genital (Rio de Janeiro: Laemmert, 1906).

[Interestingly enough, in Gay New York: Gender, Urban Culture, and the Making of the Gay Male World, 1890-1940, George Chauncey documented that the “fairies” of New York wore red ties, plucked their eyebrows, used rouge, and wore powdered make-up in the 1910s, ’20s, and ’30s “to signal their anomalous gender status.”¹⁹ These same styles were prevalent in Rio de Janeiro at the turn of the century, and equally common Rio and São Paulo in the 1930s as reflected in the pictures taken by the students of the School of Criminology in 1938].

These three observers from the late nineteenth and early twentieth century documented a vibrant social scene where men met in public places and used clothing, slang and gestures to attract sexual partners. These areas also became sites of cross-class and cross-racial mingling of different sectors of Brazil’s rigidly stratified society.²⁰ What distinguished the 1920s and 1930s, then from the turn of the century were not the forms of same sex contact and the fact that physicians were documenting this activity but the intensities of both the subculture and the anxiety it provoked.

Viveiros de Castro and Pires de Almeida at the turn-of-the-century based their ideas about homosexuality on European medical literature. So, too, the Brazilian physicians and criminologists who wrote on the subject in the 1920s, ’30s, and ’40s, summarized theories imported from France, Germany, England, Spain, and occasionally the United States to explain the nature of this “perversion.” As historian Nancy Leys Stepan has noted, Latin Americans,

¹⁹ George Chauncey, Gay New York: Gender, Urban Culture, and the Making of the Gay Male World, 1890-1940 (New York: Basic Books, 1994), 54.

²⁰ For a detailed historical account of the same-sex erotic subcultures of Rio de Janeiro and São Paulo, see James N. Green, Beyond Carnival: Male Homosexuality in Twentieth-Century Brazil (Chicago: University of Chicago Press, 1999).

including Brazilians, looked to European thinkers and “embraced science as a form of progressive knowledge, as an alternative to the religious view of reality and as a means of establishing a new form of cultural power.”²¹ These appropriations related to new research being conducted in Europe and the United States in endocrinology and hormonal functioning in the 1920s and ’30s, as well as general theories about eugenics, criminal behavior, and social deviancy.²² Two international figures particularly stand out in this regard as exerting the most influence in shaping Brazilian notions about homosexuality and its relationship to race, gender, criminality, and the biological causes of homosexuality. They were Cesare Lombroso, the Italian criminologist, and Gregório Marañón, a professor at the University of Madrid.

Cesare Lombroso (1836-1909), one of the pioneers in the field of criminal anthropology, defended the theory of the born criminal, delinquente nato, whose weakened nervous system predisposed him to engage in degenerate behavior, which included mutilation, torture, homosexuality, and the tattooing of the body.²³ Lombroso and his followers used phenotypes to determine criminal degeneracy. His work influenced Ribeiro, who employed Lombroso’s anthropometric techniques to measure the body parts of the 195 men arrested in Rio de Janeiro in 1932 in order to prove the link between hormonal imbalances and homosexuality. Ribeiro

²¹ Stepan, “The Hour of Eugenics,” 41.

²² For a detailed description of the transmission of the eugenics theories to Brazilian physicians between the two world wars see Stepan, “The Hour of Eugenics” and Jurandir Freire Costa, História da psiquiatria no Brasil: um corte ideológico, (Rio de Janeiro: Editora Documentário, 1976).

²³ See Renzo Villa, Il deviante e I suoi segni: Lombrosos e la nascita dell’antropologia criminale (Milan: Angeli, 1985).

received the Lombroso Prize in 1933 for his criminal-anthropological investigations, including his 1932 study of Carioca homosexuals.

The other influential international figure was Gregório Maraño (1887-1960), a professor of medicine at the University of Madrid who penned the introduction to Ribeiro’s 1938 work, Homosexualismo e endocrinologia. In 1930 Maraño published La evolución de la sexualidade e los estados intersexuales in Spain.²⁴ He also wrote a summary of his theory about intersexuality for the Brazilian medicolegal journal, Arquivos de Medicina Legal e de Identificação, where so many articles on homosexuality appeared in the late 1930s.²⁵ Arguing that homosexuals possessed both masculine and feminine characteristics due to an endocrinic imbalance, Maraño’s offered a biological explanation for homosexuality. The term intersexual described this liminal positioning between the two sexes. Maraño, however, recognized that this condition was merely a predisposition toward homosexuality. Exogenous factors, such as religion and ethics, could moderate or annul it.²⁶ By suggesting that it was possible to change one’s homosexual condition, Maraño created a space for the intervention of the Church rather than medicine as a possible vehicle for the recuperation of the intersexual. In this respect his theories, and those of many of his followers in Brazil, looked to science without abandoning more traditional notions of how to contain manifestations of deviant behavior. Although biology played a significant role in the making of the intersexual, morality, ethics, and sexual restraint might prove sufficient to overcome physiological deficiencies.

²⁴ This work was also published in English in 1932.

²⁵ Gregório Maraño, “Una clasificación de los homosexuales desde el punto de vista médico-legal,” Arquivos de Medicina Legal e de Identificação, 7, no. 15 (January 1937): 90-100.

Marañón’s ideas about the endocrinic origins of homosexuality were adopted by most other Brazilian physicians and criminologists writing on the subject in the 1930s. Among them was Afrânio Peixoto, a leading forensic physician, who argued for another term, missexual, because of the mixture of the masculine and feminine he diagnosed in these “abnormal” and “degenerate” beings.²⁷ Peixoto and other physicians also agreed with Ribeiro and Marañón that external, non-biological factors could also effect homosexual behavior and even modify the sexual desires of a given individual. Nor was there actually any substantive differences in the various terms employed by these physicians to describe homosexuality. Both the intersexual and the missexual were persons whose malfunctioning biological make-up had produced both masculine and feminine sexual characteristics with the resulting erotic desires for the same sex. The term inversion emphasized the sexual-object choice of the individual; intersexual and missexual explained the biological causes of this disorder. The cure, while primarily biologically-based, might also involve psychological and moral efforts, that is to say, physicians, psychologists, and the Church.

²⁶ Gregório Marañón, “Prefácio,” in Ribeiro, Homossexualismo e endocrinologia, 15.

²⁷ Other physicians adopting Marañón theories of endocrine imbalance included Santos, Caracteres sexuais neutros e intersexualidade, 161; Afrânio Peixoto, “Missexualismo.” Arquivos de Medicina Legal e Identificação 3, No. 6 (February 1933): 67-73; Antônio Bello da Mota, “Homossexualismo em medicina legal,” Tese de concurso à cátedra de Medicina Legal da Faculdade de Direito do Estado de Ceará (Rio de Janeiro: Typ. do Jornal do Comércio, 1937), 20-21; Edmur de Aguiar Whitaker, “Contribuição ao estudo dos homossexuais,” Arquivos de Polícia e Identificação 2, No. 1 (1938-39): 32-35; P. Moncau Junior, “Pesquisas endocrinológicas em criminosos,” Arquivos de Polícia e Identificação 2, no. (1938-39): 92-101; Pacheco e Silva, Psiquiatria clínica e forense, 354; Sinisgalli, “Consideração gerais sobre o homossexualismo,” 282-303; Silvio Marone, “Considerações em torno de uma nova classificação de missexuais,” Arquivos da Polícia Civil de São Paulo 10 (December 1945): 103-136.

The combination of these ideas, namely, the theory of the biologically degenerate nature of homosexuality and the notion that those who suffered from this organic defect possessed a mixed and undefined sexual identity, held disconcerting implications for physicians, who, in general, were members of Brazil’s elite and defenders of the moral order.²⁸ As anthropologist Carlos Alberto Messeder Pereira has noted:

The categories of “missexualidade” or “intersexualidade” point basically to the “mixture,” “the confusion” of masculine and feminine characters, which should be separate. Even the category “sexual inversion” points to something that is “out of place”--inverted. Thus, when the medicolegal profession employs these categories in the 1930s, their main concern is the need for a “correct ordering,” or “putting things in their correct places.”²⁹

The ambiguous nature of the intersexual or missexual’s biological make-up and his inverted sexual desires also destabilized gender categories. Homosexuality, as conceived by the physicians and criminologists, upset notions of proper gender roles. Most of the individuals whom they observed had feminine behavior that was considered part and parcel of their disorder. These “passive pederasts,” as they continued to be called, engaging in sexual acts associated with traditional notions of feminine “passivity.” Understanding the exact causes for this biological degeneration and possibly finding a cure for this disorder would also mean the correction of improper comportment. Men behaving in womanly ways could once again be returned to appropriate masculinity.

²⁸ For an analysis of the social background and the professional ties among Brazilian sexologists see Chapter II, “The Sexology Club: Background, Goals, and Motivations of Brazilian Sexologists,” in Ford, “Passion in the Eye of the Beholder,” 27-56.

²⁹ Carlos Alberto Messeder Pereira, “O direito de curar: homossexualidade e medicina legal no Brasil dos anos 30,” in Micael M. Herschmann and Carlos Alberto Messeder Pereira, eds. A

Not satisfied with merely repeating European theories, Leonídio Ribeiro also attempted to verify them by conducting research on Brazilian subjects. The political and administrative requirements of the new regime headed by Getúlio Vargas facilitated his study of “deviant” behavior along the lines suggested by Lombroso and Marañón. This was partly the result of the reorganization of the Federal Police in the nation’s capital, an element of Vargas’s overall strategy of modernizing and centralizing governmental power, as well as controlling rebellious workers and the restless underclass. After 1930, government-issued identification cards and employment passbooks assisted employers and the police in keeping track of anarchist and socialist labor agitators, undisciplined employees, and vagrants.³⁰ Improved fingerprinting methods aided the accurate identification of citizens and immigrants alike. Perfecting blood-type tests and “discovering” the links between race and criminality offered more “scientific” means to contain and control an unruly urban population. The research conducted by Leonídio Ribeiro, as the director of the Department of Identification of the Federal District Civil Police, was part of this effort. His study of the 195 homosexuals arrested by the Carioca police in 1932 used modern

invenção do Brasil moderno: medicina, educação e engenharia nos anos 20-30 (Rio de Janeiro: Rocco, 1994), 109.

³⁰ Efforts by the Brazilian government to control intractable workers began before Vargas came to power in 1930s. After the 1917 general strike in São Paulo and another strike movement in 1919, employers drew up a blacklist of “undesirable workers” and established the Department for Political and Social Order in 1924 to facilitate the repression of anarchists, socialists, and communists. Barbara Weinstein, For Social Peace in Brazil: Industrialists and the Remaking of the Working Class in São Paulo, 1920-1964 (Chapel Hill: The University of North Carolina Press, 1996), 53. For details of the growing police repression in Rio de Janeiro during the early years of Vargas’s rule, see Michael L. Conniff, Urban Politics in Brazil: The Rise of Populism, 1925-1945 (Pittsburgh: University of Pittsburgh Press, 1981), 138-42. For the impact of employment pass books on workers see also Warren Dean, The Industrialization of São Paulo (Austin: University of Texas Press, 1969), 186-92.

criminological methods to identify Brazilians with “pathological deviations” and cure their inappropriate, anti-social sexual activities. Whereas turn-of-the-century studies of same-sex erotic behavior in Rio de Janeiro had relied on the personal, anecdotal observations of physicians and jurists, Ribeiro used his position and the power of the police to obtain a sizeable sampling for his investigation.³¹ The increased influence of the state in the 1930s aided his efforts to recognize, classify, and possibly cure them.

In order to carry out his study, Ribeiro employed the same anthropometric system of categorizing body types that he had previously used in examining thirty-three blacks and mixed-race men convicted of murder.³² His classification scheme measured the trunk of the body in relationship to the arms and legs of the individual and offered three general groupings--normo-linear (normal), brevi-linear (short), and longi-linear (long)--with sub-divisions in each group. Ribeiro found that 54.61 percent fell within the longi-linear group; 5.12 percent were brevi-linear; and 38.46 percent were normo-linear. Isolating individual physical characteristics and comparing them to a “normal” standard, he came up with a series of “abnormalities” among the men he observed.³³ (See Table 1)

³¹ Ribeiro, *De médico a criminalista*, 237-43.

³² Ribeiro, *Homossexualismo e endocrinologia*, 104-5. That study was among the four projects included in Ribeiro’s three-volume work which won him the Lombroso Prize in 1933. After citing European studies that linked biotypes to criminality, Ribeiro presented statistical result of his study of the thirty-three Afro-Brazilian men charged with criminal offenses. He pointed to the predominance of men with long legs in relationship to the trunks of their body. Ribeiro came short of drawing a direct correlation between this physical characteristic that he observed and the tendency of black Brazilians to commit violent crime, observing that the alterations due to disturbance in the endocrine glands could be a consequence of infectious diseases contracted in infancy or adolescence.

³³ *Ibid.*, 106-07.

Table 1: Physical Characteristics of Homosexuals Studied by Ribeiro, Rio de Janeiro, 1932

Physical characteristic	Percentage studied with characteristic
Excessive superior members (arms)	62.05
Excessive inferior members (legs)	59.4
Deficient abdomen	69.23
Deficient thorax	52.82
Deficient trunk of the body	63.58
Normal height	74.74
Deficient weight	70.61

Ribeiro never described the prototypic homosexual based on the results of his measuring efforts, but it would appear to have been an underweight young man of normal height with longer than normal arms and legs, and a shortened thorax. Ribeiro also never explained the actual relationship between these characteristics and homosexuality. Presumably, bone development was linked to the hormonal system, yet Ribeiro failed to make this connection explicit. Ribeiro’s scientific reasoning was itself more circular than linear. His logic was simple: these are the physical characteristics of almost two hundred declared homosexuals; the most common phenotype noted, therefore, represents the physical attributes of the typical homosexual.

To further link the physical characteristics he observed with the supposed endocrine imbalances in his subjects, Ribeiro also examined the distribution of body, pubic, and head hair,

arguing that secondary sexual characteristics served as an excellent means of identifying hormonal malfunctions, and, therefore, homosexuality.³⁴ (See Table 2)

Table 2: Secondary Sexual Characteristics of Homosexuals Studied by Ribeiro, 1932

Type of Hair ³⁵	Number	Percentage
Masculine distribution	177	90.76
Feminine distribution	18	9.23
Body Hair		
Normal distribution	117	60.00
No body hair	72	36.92
Abnormal or exaggerated	6	3.07
Pubic Hair		
Masculine distribution	91	46.66
Intermediate distribution	58	29.74
Feminine distribution	36	18.46

According to Ribeiro, Marañón had found feminine hair distribution in seventy-five percent of the homosexuals he examined. Using Marañón’s criteria, Ribeiro compared the shape of his subjects’ pubic hair to that of what he considered to be ideal, masculine, hexagonal-shaped

³⁴ Ibid., 108.

³⁵ In his report, Ribeiro never fully explained the significance of head hair other than to note that baldness was considered to be a sign of virility.

hair growth covering the stomach, thighs, and the area between the scrotum and the anus.³⁶ His findings, however, did not live up to those of his mentor. Most of the men Ribeiro studied had “normal” body hair distribution (60 percent) or no body hair at all (37 percent). A mere three percent had “abnormal or exaggerated” body hair. Moreover, only 18.46 percent had “feminine” triangulated pubic hair.

As if to compensate for inconclusive statistical findings, Ribeiro provided numerous line-up shots of nude men with captions that pointed to their “feminine forms and physiognomy, with pubic hair distributed in a triangular shape.”³⁷ He also published photographs of subjects who lacked public hair, but then went on to point out that these men normally shaved it off. Ribeiro did not comment on why the men engaged in this practice, but it may be the reason why he found nearly twenty percent of the men with triangulated pubic hair. Perhaps some homosexuals in the 1930s shaped or shaved off the hair around their genitals to evoke the image of seductive women, just as they used a bit of rouge or make-up to suggest the feminine. Whereas this explanation points to the conscious construction of an effeminate persona through the use of physical markings associated with women, Ribeiro suggested that the distribution of body hair represented an essential and inherent biological characteristic of the homosexual.

Without presenting any quantitative data to back up his conclusions, Ribeiro argued that other physical characteristics caused by endocrine malfunctioning were also linked to homosexuality. They included gynecosmatia (the abnormal enlargement of the breast in a male), “feminine distribution of body fat,” wide hips, and enlarged genitals. Ribeiro illustrated his

³⁶ *Ibid.*, 41.

assertions through a series of photographs, although in some cases his criteria and definitions drew no relationship to the point he was trying to make. For example, four photographs of male genitals were captioned as “different passive pederasts with exaggerated development of the penis.” In another section of his work, the subjects of the same four photographs were described as “homosexuals showing the normal or exaggerated development of their external organs.” One is at a loss to determine which of the four examples of male genitals is normal and which is exaggerated in size.³⁸ In addition to ignoring or falsely presenting his own empirical evidence, Ribeiro never addressed the contradiction in his argument that both feminine characteristics and “oversized” sexual organs, presumably due to some endocrinal excess, were signs of homosexuality.

The criminologist then presented another conclusion based on Marañón’s work, again unsubstantiated by the data, to argue his thesis: “In two-thirds of the cases studied by us, there was at least one sign of disturbances of an endocrine nature, revealing alterations of the genital and adrenal glands.”³⁹ In other words, homosexuality could be traced to biological abnormalities in a majority of the subjects observed. In another part his study on homosexuality, he acknowledged other theories which pointed to exogenous factors. Failed love affairs, poor moral up-bringing, separation of the sexes in schools, and over-protective mothers were among the psychological factors Ribeiro mentioned.⁴⁰ After recognizing these exogenous factors in the

³⁷ Ibid., photographs between pages 105 and 106.

³⁸ Ibid., photographs between pages 104 and 105.

³⁹ Ibid.

⁴⁰ Leonídio Ribeiro “O problema medico-legal do homossexualismo sob o ponto de vista endocrinológico,” *Revista Jurídica* (Rio de Janeiro), 3 (1935): 146-47.

causation of homosexuality, Ribeiro quickly returned to his biological explanation: “Even though some of the arguments presented by the psychoanalyst are to a certain point acceptable, the theory which has gained more and more ground affirms that in the majority of cases of sexual inversion there is an organic cause or predisposition which can be provoked, favored or aggravated by environmental influences.”⁴¹ As this statement makes clear, Ribeiro was not a strict biological determinist. He recognized other factors that could cause homosexual behavior. The “essential” homosexual, however, was a man whose hormonal chemistry dictated his sexual desires. External factors might strengthen or attenuate homosexual tendencies, but the disordered body was the ultimate cause of this degeneration.

In short, other than the finding that fifty-six percent of the men examined had longer than “normal” arms and legs, Ribeiro’s investigation provided little morphological evidence of any links between hormones and homosexuality. Indeed, his entire research model was seriously flawed because he did not conduct a control study on two hundred declared heterosexuals to verify his results. Nor did Ribeiro provide adequate explanations as to why thirty-four percent of the men he measured showed no observable physiological manifestations of homosexuality. Nevertheless, over the next decade, over a dozen physicians and criminologists cited Ribeiro’s study without ever questioning his dubious statistical findings, inconsistent logic, and unscientific procedures. His theories, research methods, and analysis became the model for other mini-research projects conducted in Brazil, especially in São Paulo, which in turn influenced

⁴¹ Ribeiro, Homossexualismo e endocrinologia, 36.

further thinking and writing about the subject.⁴² One such study was conducted by Edmur de Aguiar Whitaker, a psychiatrist working for the Anthropology Laboratory of the São Paulo Police Department’s Identification Service.⁴³ Following Ribeiro’s methodological approach of using arrested subjects for his study, Whitaker examined eight homosexuals, again without a control group. All eight men were diagnosed with “secondary feminine sexual characteristics,” such as triangulated pubic hair and a wide pelvic structure. Whitaker further reported that most were psychopaths (without explaining how he reached that conclusion), with limited or normal intelligence. He conceded, however, that “in addition to endogenous degenerative disorder, this abnormality can be, in its exogenous form, the result of an unbalanced personality [or] a poor adaptation to one’s environment.” Whitaker recommended a correctional medical cure without specifying what that might entail.

According to Dr. Viriato Fernandes Nunes’s 1928 legal essay, mentioned at the beginning of this paper, the moral perversions of homosexuality, masturbation, sadomasochism, and bestiality “violently attacked social norms.” However, unlike Ribeiro and other physicians who wrote about homosexuality in the 1930s, Nunes did not argue that this degeneration was based on inherent biological factors. Rather he pointed to the social impact of the behavior. Loyal to the positivist tradition still influential in Brazilian intellectual circles, Nunes acknowledged that “the punishments which in former times castigated perverts such as Prêto

⁴² These studies included Moncau Junior’s “Pesquisas endocrinológicas em criminosos,” which examined eighty-six delinquents including several “passive pederasts” to determine the endocrinological influences on them, and the research carried out by the students of the São Paulo Institute of Criminology under the direction of Whitaker.

⁴³ Whitaker, “Contribuição ao estudo dos homossexuais,” 32-35.

Amaral and Febrônio Índio do Brasil were excessively rigorous and without any scientific basis.”⁴⁴ Comparing them to punishments of the day, Nunes assured his reader that progress had been achieved: “Society benefited very little from the elimination of these criminals. They should be removed and regenerated if possible. Today, with modern therapeutic processes, with the study of psychoanalysis, one can restore the psychiatric balance that these perverts lack. And when that is not achieved, the criminal will be detained but with comfort and humanity while unable to commit other offenses.” On a practical level, Nunes pointed to the proposed establishment of São Paulo’s Manicômio Judiciário, an asylum for the criminally insane, as the privileged place to achieve this goal. He argued that its location next to the Juquery State Mental Hospital, either as an independent hospital or as a dependency of the State Hospital, would facilitate its objectives.⁴⁵

The writings of the late 1920s and the 1930s never drew an explicit link between race and homosexuality, but the connection was embedded in the underlining themes of the text. The choice of certain figures to symbolize the extreme excesses of the “perversion” relied on pejorative cultural stereotypes about non-white Brazilians held by many in the medicolegal profession as well as among sectors of the intellectual elite in general.⁴⁶ The work of Leonídio Ribeiro and Antônio Carlos Pacheco e Silva exemplify this approach. While Ribeiro only used a page or two to describe effeminate men such as “Marina,” “Zazá,” and “Tabú,” he devoted an

⁴⁴ Ibid., 45-46.

⁴⁵ Ibid., 46-47.

⁴⁶ See the chapter, “The Whitening Ideal after Scientific Racism,” in Thomas E. Skidmore, Black into White: Race and Nationality in Brazilian Thought (Durham: Duke University Press, 1993), 173-218 .

entire chapter of Homossexualismo e endocrinologia to the celebrated case of Febrônio do Brasil.⁴⁷ Readers of his book could only extract a extremely limited vision of the lives of ordinary homosexuals in the 1930s, distorted as they may have been by the physician’s own prejudices. But they received voluminous information about an alleged dark-skinned sadistic murderer and rapist of innocent children.

Ribeiro’s interest in Febrônio Índio do Brasil was not merely didactic. He had a personal stake in the case. Ribeiro was one of three criminologists who testified at the trial on behalf of the defense and argued that Febrônio was insane and therefore should be sentenced ad vitam to the Manicômio Judiciário (Mental Hospital for the Criminally Insane). From Ribeiro’s perspective, the case took on a broader significance as a study of how society should deal with homosexuality that degenerated into insanity. In an unusual twist, Ribeiro linked homosexuality and sadism and noted that “the known cases of sadism do not occur among excessively masculine individuals, as is the popular notion, but rather among those of effeminate organization, such as the Marquis de Sade.”⁴⁸ Unlike most sexologists who associated sadism with extreme forms of masculine sexual energy, Ribeiro strangely enough feminized the infamous symbol of sadism to prove his point. Ribeiro then presented a detailed account of Febrônio’s life, emphasizing his long arrest record. The physician culminated his account with

⁴⁷ For a detailed analysis of the role that Ribeiro played as a psychiatric adviser in the case and the ways in which the medicolegal profession constructed the link between sadism, homosexuality, spiritual prophecy, and insanity to justify his commitment to a mental institution instead of prison see Peter Fry, “Febrônio Índio do Brasil: onde cruzam a psiquiatria, a profecia, a homossexualidade e a lei,” in Caminhos cruzados: linguagem, antropologia e ciências naturais (São Paulo: Brasiliense, 1982): 65-80.

⁴⁸ Ribeiro, Homossexualismo e endocrinologia, 116.

the accusations that Febrônio had attracted several youth to deserted places where he tortured, sexually molested, and then killed them.

Ribeiro’s description of Febrônio began by defining him racially: “Febrônio is a dark mestiço [mixed racial background] whose characteristics [are a result] of the crossing of caboclo [in this case Indian] with prêto [black].”⁴⁹ In the medical language of the 1920s and ’30s, influenced as it was by eugenics theories, Febrônio’s racial mixture implied degeneration. Three line-up photographs of Febrônio accompanying the chapter seem carefully placed in the volume to substantiate Ribeiro’s theory of the link between homosexuality and hormonal disorder. The caption reads: “Homosexual--sadist, Febrônio, author of three homicides by strangulation, besides other crimes, showing signs of endocrine disturbances.”⁵⁰ Paradoxically, as in the line-up shots of the 195 homosexuals mentioned earlier, it is difficult for the observer to note any difference between Febrônio’s appearance and that of any other average naked man of his age. One again, to compensate for the inconclusive proof presented in the book’s images, Ribeiro relies on captions to contradict his visual documentation.⁵¹

⁴⁹ Ibid., 123.

⁵⁰ Ibid.

⁵¹ Nor was Ribeiro the only medicolegal expert to insist on the link between physical traits and criminality. Murillo de Campos, a psychiatrist who also served as a defense witnesses, echoed this perspective: “The psycho-sexual tendencies shown in Febrônio’s crimes coincided with a physical constitution rich in developmental abnormalities of a eunuchoid nature (large pelvis, gynecomastia, no hair on the trunk or members, etc.)” Ibid.,130. The third member of the defense’s expert panel, Heitor Carrilho, then the director of Rio de Janeiro’s Hospital for the Criminally Insane, argued that Febrônio should be hospitalized for life instead of receiving the maximum sentence of thirty years for homicide. The judge agreed with him, and Febrônio remained in the Manicômio Judiciário for over fifty years. Fry in his article “Febrônio Índio do Brasil,” recounts a visit to the Hospital for the Criminally Insane to meet Febrônio in 1982. Peter Fry, “Febrônio Índio do Brasil, 79.

Antônio Carlos Pacheco e Silva, the director of the Juquery State Mental Hospital in São Paulo, similarly used images of race, crime, and sadism to create the specter of the homosexual as a danger to society.⁵² In a chapter titled “Constitutional Psychopaths. Atypical States of Degeneration” in his 1940 award-winning book, Psiquiatria clínica e forense (Clinical Psychiatry and Forensics), Pacheco e Silva outlined and defined an array of sexual perversions.⁵³ The eminent professor of Clinical Psychiatry at both the University of São Paulo and the Paulista Medical Schools listed these perversions as sadism, masochism, necrophilia, bestiality, exhibitionism, homosexuality, frigidity, nymphomania, satyriasis, and onanism. To illustrate these degenerate behaviors he provided four examples. One was a two-paragraph description of a man who molested the corpse of a six-year-old girl. A second example of sadism and necrophilia

⁵² The acclaimed psychiatrist publicly identified with the racial and eugenic notions that inferiorized non-whites. He made a point of inserting his ideas into the political debate of the 1930s. Pacheco e Silva was elected to the Constituent Assembly that wrote the 1934 Constitution. One of the issues vehemently discussed in the Assembly was the relationship between race and immigration. Some representatives argued for restricting Asian and other non-white immigrants, due to the sharp increase in the number of Japanese immigrants that had entered Brazil in the 1920s. Pacheco e Silva spoke against non-white immigration, using psycho-racial arguments to make his point. He declared emphatically that the “Japanese are extremely subject to certain mental disturbances and that, when mentally ill, they manifest accentuated tendencies to practice crimes.” Quoted in Flávio Venâncio Luizetto, Os constituintes em face da imigração (Master’s thesis, Universidade de São Paulo, 1975), 27. Pacheco e Silva’s speeches on race, eugenics, immigration and the need to maintain the purity of the white race can be found in Antônio Carlos Pacheco e Silva, Direito a saúde: documentos de atividade parlamentar (Brazil: n. p., 1934).

⁵³ “Psicopatias constitucionais. Estados atípicos de degeneração,” in Pacheco e Silva, Psiquiatria clínica e forense, 346-81. The book won an award from the Medical School of the University of São Paulo and from the São Paulo Society of Legal Medicine and Criminology.

involved a thirty-two-year-old “pardo” (person of mixed racial background) who had sex with and then strangled a young boy.⁵⁴

Two other cases received more prominent treatment in the chapter. One described a lesbian, photographed both in a dress and in men’s clothes. Pointing out that Ribeiro’s study of 195 homosexuals only referred to men, Pacheco e Silva, explained how he and his colleagues discovered their subject: “A curious case of feminine homosexuality, which is the origin of this study, recently passed through the Psychiatric Clinic of the Medical school of the University of São Paulo. It is interesting in multiple ways. . . . It proves that cases of feminine sexual inversion also deserve to be explained in detail in light of modern endocrinological learning.”⁵⁵

On numerous occasions, the author stated that the subject, who was only referred to as E. R., was “sick.” One gets the impression that his aversion to her was linked to the fact that she shamelessly cross-dressed, assumed a traditional masculine identity, and aggressively sought out female sexual partners. While E. R. was not accused of any criminal offense, the fact that she was black stood out. Her two portraits are prominently placed in the text, and she is described by reference to her race several times. We are told that she only liked white women. As one of only a few examples of female homosexuality portrayed by medicolegal professionals in this period,

⁵⁴ Ibid., 369-74.

⁵⁵ Ibid., 374-81. The same case study appeared as an article, “Um interessante caso de homossexualismo feminino.” Arquivos da Sociedade de Medicina Legal e Criminologia de São Paulo 10 (1939): 69-81. It was also reprinted by the São Paulo Society for Legal Medicine and Criminology as a pamphlet.

the emphasis placed on her race conveyed a subtext that linked darker-skinned people to perversion⁵⁶

E. R. was not involved in criminal behavior, but Pacheco e Silva’s fourth example, J. A. Amaral, was. The joint presentation of the two subjects offered a unified discourse: non-whites were inclined to homosexuality, degeneracy, and even at times criminality. Throughout this case study J. A. Amaral is referred to as “Prêto Amaral” (literally, Black Amaral), a pejorative nickname which was a direct reference to his dark skin color. Amaral’s first alleged victim was also discussed in racialized terms. “He was a white boy, fair, [with] green eyes, brown hair, looking fourteen years old.”⁵⁷ The image was clear: a black man, a “prêto,” had seduced, raped, and strangled an angelic boy. Two large mug shots captioned “O prêto Amaral” accompanied the case study, as if to emphasize the point. The section on “hereditary background” stressed his African origins: “His parents were born in Africa--the father in the Congo and the mother in Mozambique. They came to Brazil as slaves and here were bought by the Viscount of Ouro Preto.”⁵⁸ His physical examination also highlighted his race: “This is an individual whose color is black, but is of a physiognomic type rare in his race. The nose, far from being flat, is aquiline and slightly curved.”⁵⁹

⁵⁶ Sueann Caulfield has uncovered three other cases of women who dressed as men in her review of Vida Policial, a weekly police journal from Rio de Janeiro. For her discussion of these “women-men,” as they were called, see Sueann Caulfield, “Getting into Trouble: Dishonest Women, Modern Girls, and Women-Men in the Conceptual language of Vida Policial, 1925-1927,” Signs: Journal of Women in Culture and Society 19, no. 11 (Autumn 1993): 172-74.

⁵⁷ Pacheco e Silva, Psiquiatria clínica e forense, 361.

⁵⁸ Ibid.

⁵⁹ Ibid., 365.

The author described the alleged seduction, murder, and molestation of four young victims. He then cited European authorities—Von Kraft-Ebing, Forel, and Lombroso—to explain Amaral’s sadistic and necrophilic behavior. Finally, Pacheco e Silva argued for isolation in a mental hospital rather than incarceration: “It is to the asylum and not to prison that these obsessive impulsive people should be sent, and the hideous character of the crimes committed by some of them should not be separated from the pathological nature of the act. It is rare for sexual perversion to be the only syndrome in these degenerates.”⁶⁰ Like Nunes in 1928, Ribeiro and Pacheco e Silva a decade later argued for a “modern,” scientific, and “humane” treatment of “perverts” who had committed other crimes. However, just as Ribeiro pointed to the homosexual acts of Febrônio as a way of linking homosexuality to criminality, so Pacheco e Silva connected sexual acts with murder and pathological behavior.

Why were the “scientific” observations and research results of Ribeiro, Pacheco e Silva, and other medicolegal professionals so readily accepted by their colleagues without any criticism of the obviously faulty methodology of their observations and the flawed logic of their arguments? In part this had to do with the nature of the investigation related to race and crime taking place at the time. Many Brazilian intellectuals wholeheartedly embraced eugenic notions of the inferiority of certain races and the degenerate nature of certain social types, especially when the proponents of these theories were European. Moreover, the system of patronage and the hermetic character of this area of study discouraged criticism of mentors, sponsors, and colleagues. Rather than recognize and confront the inconsistency in European or Brazilian

⁶⁰ Ibid., 369.

theories or research methods regarding crime, race, or homosexuality, this reduced number of intellectuals praised each other's work, wrote glowing introductions to each others monographs, and cited each other's "findings." The culture engendered within this interlocking web of Brazilian professionals discouraged critical reflections on the research results, whether it related to identifying degeneracy or offering an antidote for the sickness of homosexuality.

Paradoxically, there was a noted decline in writings about homosexuality by medicolegal professionals in the early 1940s, precisely at the moment when the Brazilian physical body under the Vargas-led authoritarian Estado Novo (1937-45) was taking on such importance.⁶¹ Several

⁶¹ Most historical works on the Estado Novo emphasize the centralization of political power and the restructuring of class relations during this period. See, for example, Edgard Carone, O Estado Novo (1937-1945) (São Paulo: Difel, 1977); Vamireh Chacon, Estado e povo no Brasil: as experiências do Estado Novo e da democracia populista: 1937-1964 (Rio de Janeiro: J. Olympio, 1977); Eli Diniz, "O Estado Novo: estrutura de poder, relações de classes," in O Brasil republicano: sociedade e política (1930-1964) vol. 3, pt. 2, ed. Boris Fausto (São Paulo: Difel, 1981), 77-120; Nelson Jahr Garcia, O Estado Novo: ideologia e propaganda política. A legitimação do estado autoritário perante as classes subalternas (São Paulo: Loyola, 1982).

Other historians have examined the regime's political ideology, showing how the Estado Novo relied on authoritarian practices that were part of Brazilian traditions, but were now modernized and incorporated as the regime's propaganda and educational vehicles for Vargas's policies Lúcia Lippi Oliveira, Mônica Pimenta Velloso and Angela Maria de Castro Gomes, Estado Novo: ideologia e poder (Rio de Janeiro: Zahar, 1982).

The growth of the state's power under the Estado Novo in the regulation of ordinary life, from Carnival parades to trade unions, has been widely documented. Alcir Lenharo has noted that "the broad project of the reordering of society--corporatism--was supported entirely in the image of the organic nature of the human body. The parts that composed society were thought of in the same way as the relationship among the organs of the body: integrated and without contradictions. The objective of the project, therefore, aimed at neutralizing the foci of social conflicts and, making the classes (organs) in solidarity with each other." Alcir Lenharo, Sacralização da política (Campinas: Papyrus, 1986), 16-17. Dissolving political parties, outlawing strikes, and maintaining strict press censorship, all were parts of the reordering of the political body.

The physical body itself was not left out of this reconstruction of the Brazilian nation. New magazines entered the market, emphasizing health, hygiene, and physical education. The

hypotheses might explain the decrease in intellectual production about the subject. First of all, one must remember that most of the theoretical work about homosexuality has been borrowed from Europe, and, to a much lesser extent, from the United States. With the European continent in turmoil during the 1930s and the world at war in the '40s, Brazil did not have easy access to new writings that were produced which could have added to the literature at hand or inspired new intellectual production. Secondly, no immediate medical cure accompanied the main endogenous medical explanation for homosexuality, namely hormonal imbalances. Testicle transplant therapy, a medical solution proposed by Leonídio Ribeiro, did not become a popular treatment, indeed there appears no indication that Brazilian physicians ever attempted to test this possible remedy for homosexuality. Marañón's and others theories on “intersexuality” and “missexuality,” based on erroneous understandings of embryo development, had become discredited. Moreover, Brazilian physicians did not have the resources to establish laboratories to conduct their own research in endocrinology or biochemistry.⁶² Most reputable intellectuals

government promoted a “new” masculinity which idealized strength, youth, and power. One physical education magazine summarized this ideal: “The new Physical Education should form a typical man who has the following characteristics: figure thinner than fuller, graceful muscles, flexibility, light-colored eyes, agile, . . . sweet, happy, virile, . . . sincere, honest, pure in acts and thoughts.” *Educação Física*, 73, (1943), 11, quoted in Lenharo, *Sacralização da política*, 78-79. Schools and factories became sites of group exercises, sports, and marching.

Brazil's entry into World War II in 1942 only accelerated this process, as production became militarized. Vargas proclaimed on May Day that year to a crowd of industrial workers that “in the end, we are all soldiers of Brazil.” Lenharo, *Sacralização da Política*, 86.

⁶² Scientific investigation in Brazil was hampered from the fact that there were few institutions of higher education equipped to carry out such work. While the Instituto Oswaldo Cruz and similar entities conducted specific research projects in tropical medicine or in infectious diseases, they had limited resources. The University of São Paulo, the first modern university capable of conducting scientific research in diverse fields of biology and chemistry as well as the social science, was only founded in 1934. See Simon Schwartzman, *A Space for Science: The*

began to abandon eugenics theories, especially those regarding racial issues, by the 1940s, partially because of the association of these ideas with Nazi Germany. Writers, such as Gilberto Freyre, who had redefined the contribution of Africans to Brazilian culture, began to assume a prominent role in national intellectual debates, further discrediting racist-ridden eugenics ideas.⁶³ After a decade of intense discussion, writing, and “research,” homosexuality as a topic of debate among medical and legal professionals retreated into the margins.

In less than two decades, the body of the “homosexual” had been extensively studied, classified, and pathologized. Although this process had begun in the late nineteenth century, the consolidation of the role of the medical and legal professions under the Republic (1889-1930) and during Vargas’s rule (1930-45) vis-à-vis the state facilitated the “medicalization” of the homosexual. Medicolegal professionals won the campaign to have more jurisdiction over the subject although they had to share their authority with the police and the state. Under the Estado Novo, the governing elite decided not to establish a specific hospital to cure homosexuality or pass a law explicitly naming homosexuals in crimes against public decency. It was not necessary. The sick social body of the previous two decades was becoming robust with the exercise, regimentation, and discipline of the new order. Emphasis was placed on a healthy, positive image of the social body and not the notion of degeneration that had received such emphasis in the previous two decades.

Development of the Scientific Community in Brazil (University Park, Pennsylvania: The Pennsylvania State University Press, 1991).

⁶³ Stepan, “The Hour of Eugenics”, 167-70.

This did not mean, however, that the writings of the medicolegal profession on the subject became relegated to obscurity. The ideas and theories about homosexuality that were developed during the 1930s were popularized in the 1940s through sexual manuals, which reached broader sectors of Brazilian society. According to Celeste Zenha Guimarães, who researched the “myths” of homosexuality, “from the 1930s on, there was a expressive dissemination of this kind of product [vulgarized sex manuals] which increased even more in the 1940s. These compendiums presented in accessible language the concepts already analyzed, such as making the population fear engaging in certain acts as well as in having contact with the ‘physical and moral types’ described in the treatises of legal medicine and psychopathic forensics.”⁶⁴

Ultimately, the writings of physicians and other professionals dovetailed with these popular manuals on sex that reinforced long-held traditional views about homosexuality. Although Brazil experts constantly cited European theories, they tended to adapt the models they borrowed to conform to prevalent Brazilian notions of sexuality and popular ideas about same-sex sexual activity. Talisman Ford has argued that Brazilian sexologists de-emphasized the importance of classifying homosexuals based on their sexual object choice, which was a key component of the European medical construction of the homosexual by the turn of the century. Instead, Brazilian writers focused more on specific gender-based behavior and hierarchical sexual roles in categorizing homosexuals. Thus, according to most European sexologists, a given man was a homosexual if he had or desired to have sex with another man, regardless of the

⁶⁴ Celeste Zenha Guimarães, “Homossexualismo: mitologias científicas” (Ph.D. diss.,

specific fantasies or practices carried out in bed. Innate characteristics, whether congenital or acquired, produced a unique being, the homosexual, with a unique essence. In anal intercourse, both the man penetrating another man and the person being penetrated were, therefore, considered homosexuals. As Ford points out, in interpreting European theories of homosexuality Brazilian physicians and other observers reframed them along lines that conformed to popular assumptions that associated male homosexuality with effeminacy and passive anal sexuality. Brazilian writers acknowledged the existence of “active,” as well as “passive” pederasts, as had Viveiros de Castro and Pires de Almeida at the turn of the century, but the emphasis was on the individual who conformed more closely to traditional representations of women in Brazilian society, namely the effeminate man who to all appearances was anal receptive in sexual intercourse. The “active” partner presumably possessed masculine characteristics and, therefore, did not have the same fixed homosexual essence typical of the effeminate man. This adaptation by Brazilian sexologists of European theories to local understandings of same-sex eroticism may explain why the model of the homosexual based on sexual object choice which lumped all those who engaged in same-sex erotic activities into the same category did not become a pervasive construct in Brazil in this period, as Ford has suggested⁶⁵

“Passive pederasts” and effeminate men, indeed, were the main focus of these professionals’ writings and research. In part this was due to their greater visibility in the urban landscape of Rio de Janeiro and São Paulo, as well as their vulnerability to police harassment, arrest, and at times “scientific” research. With plucked eyebrows and rouged cheeks, they simply

Universidade Estadual de Campinas, 1994), 346-7.

did not melt into the crowd. But the actual sexual practices of the alleged “passive pederasts” was more complicated than the models that the sexologists brought with them to their investigations. The fluidity in the sexual behavior of certain individuals and the slippage between “active” and “passive” anal intercourse often defied the “Brazilian” paradigm that defined and categorized same-sex comportment.

Equally important, however, in measuring the influence of European theoretical models as screened through Brazilian sexologists on the construction or reconstruction of popular conceptions of homosexuality is the actual effect that these medicolegal professionals had on the day-to-day lives of men engaged in same-sex erotic activities or on the population at large. Although the stated goals of many writers on the subject was to elucidate society about this social disease, much of their material was written in professional journals directed to the police, criminologists, and physicians. Their ideas about homosexuality certainly influenced the medical and legal professions, as well as criminologists, and thus had an impact on patterns of treatment by police, physicians, and psychiatrists. But, there is no indication that these publications reached broad audiences. Thus, the effects of their writings on most homosexuals was indirect at best.

More widespread propagation of their theories and ideas through sexual education manuals tended to water down the enlightened elements in these professionals’ proposals for the treatment of homosexuality. The new, popular publications about sex often combined synthetic summaries of the theories of European and Brazilian sexologists with moralistic and religious

⁶⁵ Ford, “Passion in the Eye of the Beholder,” 162-70, 183-4.

statements that associated homosexuality with vice and corruption. One such book, Psicoses de amor by the prolific sexologist Hernâni de Irajá was already in its fourth edition in 1931 with four more editions out by 1954. Literary and scientific circles highly respected the work of its author. A front-page article in the popular magazine Fon-Fon, for example, heralded Irajá as one of the most important intellectuals of the day and the book as “a notable work about the subject of the pathology of love.”⁶⁶ Illustrating the chapter entitled “Homosexuality: Sexual Inversion” was an ink drawing of ghoulish figures whose fingernails and teeth dripped with blood. Skeletal heads and suffering men crowded together to convey the message that homosexuality led straight to hell.⁶⁷ The author left no room for doubt about his views on the subject: “Homosexuality is love or the practice of sexual acts between individuals of the same sex. Morally and physically wasted individuals in the state of total corruption and decadence try to relive numbed sensations with new and strange pleasures. From hence comes the vice of pederasty.”⁶⁸ Regardless of the efforts of Ribeiro and others in the medicolegal profession to present a less moralistic and more “scientific” view of homosexuality, this perspective remained dominant in popular literature well into the 1970s.

⁶⁶ “Psicoses do Amor de Hernâni de Irajá,” Fon-Fon (Rio de Janeiro) No. 6 (7 February 1931): 1.

⁶⁷ Hernâni Irajá, Psicoses do amor: estudos sobre as alterações do instinto sexual, 9th ed., (Irmãos Pongetti: Rio de Janeiro, 1954), 185.

⁶⁸ *Ibid.*