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CONTINUUM *Complete*
International
ENCYCLOPEDIA
OF SEXUALITY

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· THE ·

CONTINUUM *Complete*
International
ENCYCLOPEDIA
OF SEXUALITY

Updated, with More Countries

2004

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Argentina

(República Argentina)

Sofia Kamenetzky, M.D.
Updates by S. Kamenetzky

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This miraculous indigenous America
Made everything at a fantastic scale
Wanting to look at the sky,
she raised herself on the Andean Mountains
And her cross, instead of wood,
is made of stars.¹

Demographics and a Brief Historical Perspective

ROBERT T. FRANCOEUR

A. Demographics

Argentina, the second-largest country in South America with 1,073,518 square miles (2,780,399 km²), occupies most of the southern tip of the American continent. It extends from slightly above the Tropic of Capricorn to Antarctica, on which it keeps a constant military and research presence. Hence, it has a variety of climates and the different natural resources associated with them, although it is best known for its fertile pampas of the temperate region. The Patagonia plateau in the south is flat or rolling. The rugged Andes Mountains mark Argentina's western border with Chile on the west. Bolivia and Paraguay are Argentina's northern neighbors, while Brazil and Uruguay lie to the northeast.

In July 2002, Argentina had an estimated population of 37.8 million. (All data are from *The World Factbook 2002* (CIA 2002) unless otherwise stated.)

Age Distribution and Sex Ratios: 0-14 years: 26.3% with 1.05 male(s) per female (sex ratio); 15-64 years: 63.2% with 1.0 male(s) per female; 65 years and over: 10.5% with 0.7 male(s) per female; *Total population sex ratio:* 0.98 male(s) to 1 female

Life Expectancy at Birth: *Total Population:* 75.48 years; *male:* 72.1 years; *female:* 79.03 years

Urban/Rural Distribution: 90% to 10%

Ethnic Distribution: Caucasian: 97%; Mestizo, Indian, or otherwise nonwhite groups: 3%

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(CIA 2002)

Religious Distribution: Nominally Roman Catholic: 92%, with less than 20% practicing; Protestant: 2%; Jewish: 2%; other: 4%

Birth Rate: 18.23 births per 1,000 population

Death Rate: 7.57 per 1,000 population

Infant Mortality Rate: 17.2 deaths per 1,000 live births

Net Migration Rate: 0.63 migrant(s) per 1,000 population

Total Fertility Rate: 2.41 children born per woman

Population Growth Rate: 1.13%

HIV/AIDS (1999 est.): *Adult prevalence:* 0.69%; *Persons living with HIV/AIDS:* 130,000; *Deaths:* 1,800. (For additional details from www.UNAIDS.org, see end of Section 10B.)

Literacy Rate (defined as those age 15 and over who can read and write): 96.2% (1995 est.); attendance in school is compulsory to age 14

Per Capita Gross Domestic Product (purchasing power parity): \$12,000 (1997 est.); *Inflation:* 4%; *Unemployment:* 25% (end of 2001); *Living below the poverty*

line: 37% (2001 est.). By the end of 2002, half of Argentina's population was living below the poverty line. In 2001 and 2002, the economy of Argentina went into a tailspin and the nation came close to bankruptcy (see update at the end of Section 1B, A Brief Historical Perspective, below).

B. A Brief Historical Perspective

Nomadic indigenous tribes roamed the pampas when the Spaniards arrived in 1515 and 1516. The land quickly became a part of the Spanish empire. By the late 19th century, nearly all the native peoples had been killed.

The long period of disorder that followed the colonists' declaration of independence in 1816 ended only when a strong centralized government developed. Large-scale Italian, German, and Spanish immigration after 1880 spurred modernization, and major social reforms were instituted in the 1920s. Military coups were common from 1930 to the 1946 election of General Juan Perón as president. Perón and his wife, Eva Duarte (died 1952), effected labor reforms, but suppressed freedom of speech and the press, closed religious schools, and ran the country into serious debt. A series of military and civilian regimes followed Perón's ouster in 1955. After an 18-year exile, Perón returned in 1973 and was elected president. When he died ten months later, his second wife, Isabel, who had been elected vice president, succeeded him, becoming the first woman head of state in the Western Hemisphere. Mrs. Perón was ousted in 1976, amid charges of corruption.

The military junta that followed existed in a state of siege with guerrillas and leftists. An estimated 5,000 people were killed and thousands jailed and tortured. Democratic rule returned in 1983 after Great Britain successfully defended the Falkland Islands in 1982. In 1985, five former junta members were found guilty of murder and human rights violations. By 1989, the nation suffered, as severe hyperinflation and political problems sparked looting and rioting in several large cities. Perónist President Carlos Saúl Menem, elected in 1989 and again in 1995, has introduced harsh but necessary economic measures to curtail hyperinflation, control government spending, and restructure the foreign debt.

[Update 2003: The presidency of Carlos Menem that started in 1989 with hopes of a long period of stabilization and prosperity ended with the deepest economic crisis known since Argentina organized itself as a modern nation by the end of the 19th century. Neither the International Monetary Fund, nor the World Bank or the Interamerican Development Bank, explained clearly to the world how such a profound economic deterioration took place.

[Just a few years ago, Argentina was largely a middle-class nation with the highest per-capita income in Latin America. The Gross National Product (GNP) per capita that was \$9,950 in 1997 is estimated to have fallen in 2002 to less than \$4,700, which is the threshold above which the country becomes a contributor to international organizations rather than being just a borrower (World Bank Development Report 1999; Executive Board UN Development Program 2002).

[Foreign public debt started mounting and reached \$132 billion by the end of 2001. At the same time, unemployment is estimated as being as high as 25%.

[The absence of political leaders with a clear vision of the future, and the cynicism and greediness of those in power who dispose of government revenues as their private property, led to disastrous policies. Bank assets were stripped, leaving the average citizen without access to their deposits, while rich Argentines and foreign enterprises timely sent their money to foreign accounts. The Argentine peso that remained pegged to the dollar since the early 1990s was deval-

uated, and is above three pesos to a dollar at the time of writing this update. As *The New York Times* reports, the situation of most Argentines has dramatically changed:

According to the most recent statistics, issued in January 2003, at least 60 percent of the country's 37 million people now lives in poverty, defined as an income of less than \$220 a month for a family of four. Even more alarming, more than a quarter the population is classified as 'indigent,' or living on less than \$100 a month for a family of four (Rohter 2003).

[Every day children and old people die of hunger. People in the affluent neighborhoods of Buenos Aires put leftovers from their meals in separate garbage bags to provide a concentration-camp ration for the survival of night scavengers.

[Survival, a powerful human force, is originating other, more-positive initiatives as a response to the economic and social chaos. One creative scheme is the organization of bartering networks where people can exchange goods and services. Professionals, farmers, health service workers, homemakers, teachers, and people from all occupations participate in these exchanges. (End of update by S. Kamenetzky)]

1. Basic Sexological Premises

A/B. Gender Roles and Sociolegal Status of Males and Females

In Latin American societies, the sexual behavior of women is always much more conditioned by norms, rules, regulations, and taboos than the sexual behavior of men. Argentina is no exception. Women were supposed to reach marriage in a virginal state, and then take care of the home, go to church, bear and educate children, and support their men in political, professional, and economic activities.

For a long time, this double standard was accepted without open criticism. But since the late 1940s, women have taken steps towards equal rights and independence from parents, spouses, and lovers. Of course, the first steps were taken by women with college degrees and businesswomen. They started painfully opening spaces in Argentina's political, economic, legal, and educational arenas. The governments have also opened opportunities for them in political and administrative positions. Today, we see women in university chairs, legal benches, large corporations, research laboratories, journalism, medicine, and all fields of art. However, it is still possible to observe discrimination against women and privileges given to men, not because of their excelling in a job or profession, but simply because they are males.

C. General Concepts of Love and Sexuality

Virginity is no longer a condition for marriage. On the contrary, before deciding to engage in a permanent relationship, most women want to know their future spouse in bed. Argentine women are exercising their new roles in markets and societies with a flexible mental attitude that tries to integrate all aspects of their complex new situation. They know that it is not easy to balance their responsibility as mothers and lovers with their workplace obligations; they need to walk a tightrope and compromise, giving, when needed, more visibility to their men. They do not want to renounce breastfeeding their babies, because they know its importance for healthy development; hence, they are fighting to increase the availability of daycare facilities close to their workplace. Accepting now their share of responsibility in maintaining a healthy sexual life, they take the initiative in foreplay and learn techniques to introduce variety in sexual intercourse, while at the same time, they try to increase both

depth and scope in the emotional and intellectual communications within the couple.

For males, it is sometimes difficult to internalize these changes in the patterns of family life. However, most are starting to perceive that they enrich the relationship and are beneficial for both partners. The advantages of sharing two incomes, and participating in the rearing and education of the children, awakens emotions and provides a joy never felt before. Men are also learning to relax when making love, enjoying alternate passive and active roles, and accepting the fact that they can also be seduced and excited.

Women's liberation from submission to parents, brothers, and spouses is slowly harmonizing male and female energies and leading to a win-win situation for both, although the way to this end is not yet free of obstacles that will take pain to remove. Most of the population still believes in a double standard, but increased dissatisfaction with their sexual lives shows that their rigid positions of the past are cracking.

2. Religious, Ethnic, and Gender Factors Affecting Sexuality

A. Source and Character of Religious Values

The influence of the Catholic Church was and is hegemonic. Ninety percent of Argentina's population identify themselves as Roman Catholic, although the percentage of active churchgoers is much less.

A very conservative interpretation of Catholic dogma shaped life during colonial times. The powerful grip of the Church in Argentina's life was not relaxed after independence from Spain in 1810, nor when the country was finally organized as a modern state towards the end of the 19th century. Throughout the history of Argentina, secular powers have had to battle against a Church determined to maintain its hold on the institutions of civil life, like education, the availability of contraception and abortion, and even the registration of major events in the lives of the people, like births, marriages, and deaths.

The values and beliefs of Catholic doctrine have been inscribed in the minds of the Argentine people in a way that has proven difficult to delete. Outstanding among these are the Church's views on the social roles of males and females, its insistence on seeing the body as a root of evil, the need to free the spirit from the urges of the flesh, and sexual intercourse viewed as a curse brought upon humans with no other objective or justification than the preservation of the human species.

The influence of this dogma has led, as one might expect, to a dichotomous, often-schizophrenic pattern of behavior. Recently, three Catholic women in Uruguay, Argentina's neighboring country, investigated Catholic women's ideas on and practices of sexuality and maternity. Their sample included hundreds of women from Argentina, Uruguay, and Paraguay, countries which share a similar historical and cultural evolution. The women commonly expressed dissatisfaction with their sexual lives, and had developed the strategy of "not feeling" or "getting used to putting up with it." Others were oppressed by the idea that sex is sinful and felt bad after each sexual encounter. While many of the women interviewed felt God as a close friend, they viewed the Church as distant, disciplinary, and controlling.²

B. Source and Character of Ethnic Values

Before the arrival of the Spaniards in 1516, Argentina was inhabited by fierce, indomitable tribes that valued their freedom and had learned to survive by adapting to the climate and resources of the different regions of the country. Except for the Northwest, which was conquered by the Pe-

ruvian Incas, the indigenous populations of Argentina did not develop the complex, and, in some aspects, advanced civilizations whose remains can still be seen in Mexico and Peru. The indigenous people who inhabited the pampas were mercilessly condemned to extinction by the thirst for land of the Spanish conquerors first, and the new South American nation later on. A few still survive in small reserves, especially in the Northeast, where the Jesuits had organized them in productive communities that were destroyed after the expulsion of the order in 1767 from Spain and all her colonies.

This, and the fact that Argentina never had a very active slave trade, explains the predominance of a population of European origin. Between 1850 and 1940, some 6.6 million Europeans joined the 1.1 million people already living in the country in 1850.³ In 1991, Argentina's population was 32.7 million, having grown in the previous decade at the rate of 1.3% per year.⁴

From 1810, when the links with Spain were severed, to 1853, when a unified nation started its organizational development, Argentina was a field of constant quarrels among feudal provincial warlords and between these *caudillos* and the two aristocracies of money and of culture based in the port city of Buenos Aires. The two aristocracies were trying to control the chaos, often for their own benefit, and neglecting the needs of the rural population.

From 1853 on, Argentina moved solidly on the roads of social and economic development until it ranked in the early decades of the 20th century among the ten most-developed countries of the world. In his study of Argentine history, David Rock comments:

By the outbreak of World War I, per capita income equaled that in Germany and the Low Countries, and was higher than in Spain, Italy, Sweden, and Switzerland. Having grown at an average annual rate of 6.5% since 1869, Buenos Aires had become the second largest city of the Atlantic seaboard, after New York, and by far the largest city in Latin America. . . . By 1911, Argentina's foreign trade was larger than Canada's and a quarter of that of the United States. Argentina was the world's largest producer of corn and linseed, second in wool, and third in live cattle and horses. Though it ranked only sixth as a wheat producer, it was third, and in some years the second, largest exporter. Despite the competition for land from cattle and forage crops, the expansion of wheat farming after 1900 outpaced Canada's. . . . By and large, working-class conditions in Buenos Aires were much the same as in Western European cities. . . . By comparison with American [U.S.A.] cities in this period, Buenos Aires was relatively free of ethnic ghettos, and its highly mobile labor force made it also a city with little permanent unemployment.⁵

However, the brightness of these figures hides the shadows and contradictions of the Argentine society and economy of that time. As the same historian points out:

By 1914 Argentina had . . . evolved into an extremely mixed and diverse society. Across the regions extreme modernity and immutable backwardness coexisted. Expectations remained high that the imbalances would steadily recede as the present wave of growth continued, for there was still much to accomplish.⁶

In 1930, with the global economic crises and the first local military coup, the development trend stopped and reversed. Instead of being included among the high-income economies in the World Bank tables, Argentina is now among the upper-middle-income countries, where it shares positions with Brazil, Uruguay, Mexico, and Venezuela from

the American continent, Gabon and Botswana from Africa, and Latvia, Lithuania, Portugal, and Greece from Europe.⁷

The economic and cultural mismanagement of the country could not, however, destroy one of the main achievements of the organizational period of the country: the establishment of a gratuitous, compulsory, tax-sustained, and public education. Although the quality of education suffered from all those years of regressive, and sometimes fascist attacks, quantitatively it still is reaching the whole of the country, allowing everybody at least to read and write, and with these instruments, giving the vast majority of Argentines access to information offered by a large market of diverse publications. In 1990, the pupil-teacher ratio in the primary schools was 19 students per teacher; 1970 data put the ratio in secondary schools at 44:1, and for colleges at 22:1.⁸

Argentina can be seen as a large tapestry woven with different threads, each thread representing the diverse nationalities and cultures that came to the country from different regions of the world, among them Spaniards, Italians, British, French, Germans, Polish, as well as Jews and Muslims of different ethnic origins. The basic canvas on which this tapestry is woven is the native Argentines themselves, descendants of the early *conquistadors* and the populations that inhabited the land when the *conquistadors* arrived in the 15th century. While a few represent a pure white or native lineage, most are products of hybridization. The result is a tapestry without a clear-cut design, a tapestry whose lines twist and appear as a *sfumato*.

Because the plantation economy never was important in Argentina, the introduction of African slaves never reached large proportions. The few slaves that were in the country at the time of its independence from Spain (in 1810) were freed immediately after in 1813. They gathered in the suburbs of Buenos Aires, mixed quickly with the remaining population, and gave birth to a cultural group, the *mulattos*, who have produced their own artistic expressions. From their music evolved the tango of which I will say more later.

Jorge Luis Borges, a great Argentine poet and writer, saw Argentina seesawing between the search for progress through mimicking foreign cultures, especially the European and North American cultures, and a deep-seated provincialism that refused to change inherited colonial patterns. Borges sought to transcend these trends by developing an ability to understand and talk with both the universal and the local.⁹

The period of accelerated economic development and social transformation (1860-1930) was a period of mimetism promoted in the school system and marketplace. During this period, provincialism found refuge among limited social groups at both ends of the economic spectrum. At the bottom level, it translated into the crude behavior of the persecuted *gauchos*, the *mestizo* cowboys of the Argentine pampas, and of the *compadritos* of the suburbs of the large cities, whom Richard Powers, a dance historian at Stanford University, defines as "a folk antihero somewhere between a bully, a thief and a pimp."¹⁰ At the upper economic scale, some large land owners and church members remained nostalgic of bygone days when they were masters of the country and kept the mind of the people restrained by dogmas and myths.

Paradoxically, the provincialism of the lumpen-proletariat engendered a form of music, the tango, that would acquire universal acceptance and soon invade the salons of the sophisticated outer-oriented aristocracy. The tango expresses the sadness of displacement: from rural fields to crowded suburbs for the natives and for the immigrants from their many diverse landscapes of Europe. It also mixes instruments from the natives—the guitar—and the immigrants—the fiddle and the *bandoneón*, a concertina-

like German instrument. The words often speak of crude, brothel-oriented sex, and of betrayal and revenge, but there is also tender romance and the longing for stable relationships. Some tangos shift from individual feelings to social criticism and become vitriolic pictures of a face that Argentina hides under its economic and cultural exploits.¹¹ A few examples in Table 1 illustrate this. Somehow, the chronology of these examples reflects a parallel slow zigzagging movement of Argentine society towards more gentleness.

The tango was created by males for males. It reflected well the traits of the social structures among the poor urban population and those immigrants who decided to join them. The tango muses about the hybridization, the resentment, the sadness, and the longing for women that were scarce, because most of the immigrants who stayed in the city were single, while those who came with families looked for a piece of land in the countryside. The hybridization in the poor neighborhoods of Buenos Aires produced insecure males who resorted to macho postures when observed or ridiculed by their peers.¹⁴

[*Comment 1997*: In addition to the value of *machismo* mentioned above, Argentine sexual attitudes and behaviors are strongly influenced by three other values—*marianismo*, *ediqueta*, and *pronatalism*—which are commonly shared with some minor variations across the Latino world of South and Central America. To avoid duplication in several chapters, these four basic values are described in detail in Section 1A, Basic Sexological Premises, in the chapter on Puerto Rico in this *Encyclopedia*. (*End of comment by R. T. Francoeur*)]

Since 1953, provincialism has made repeated attempts to regain the dominant position it held before 1853, but it was often infiltrated by foreign fascist and Nazi influences. These attempts, beside damaging the country's cultural and economic development, succeeded in drastically changing the image of Argentina in the rest of the world. David Rock's seminal book on Argentina summarizes this change in two beautiful paragraphs.¹⁵ Before 1930:

Indeed, for many decades many Europeans believed that Argentina offered an opportunity equal to, if not greater than, North America. The *pampas estancieros* enjoyed the reputation that Texas or Arab oil magnates have today, and the expression *riche comme un Argentin* remained a commonplace among the French until the 1930s. In 1907, George Clemenceau perceived the genesis of a great new national community originating from a spirit he equated with Manifest Destiny in the United States. "The real Argentinio [sic]," he commented, "seems to me convinced there is a magic elixir of youth which springs from his soil and makes of him a new man, descendant of none, but ancestor of endless generations to come." The Spanish philosopher José Ortega y Gasset issued a similar pronouncement in 1929. The Argentine people, he declared, "do not content themselves with being one nation among others: they hunger for an overarching destiny, they demand of themselves a proud future. They would not know a history without triumph."

In his second paragraph, David Rock reflects on the Argentina of 1987:

Such copious expectations and laudatory reflections form a stark and bitter contrast with more recent judgments. For at least the past two decades economists have classified Argentina in the underdeveloped or "third" world, and by the 1960s Argentina was becoming a byword for political instability, inflation, and labor unrest. During the 1970s a

Table 1
Sexual Implications of Tango Music

Tango	Spanish Text	Translation
(1905) <i>La Morocha</i> Words: Angel Villoldo Music: Enrique Saborido Subject: feelings of a woman from Buenos Aires (as seen and written by a man, of course!)	Soy la morocha argentina, la que no siente pesares y alegre pasa la vida con sus cantares, Soy la gentil compañera del noble gaucho porteño, la que conserva el cariño para su dueño.	I am the dark Argentine, who never has sorrows and happily goes through life singing her songs. I am the gentle companion of the noble “gaucho porteño,” who keeps her love for her master.
(1924) <i>Griseta</i> Words: José González Castillo Music: Enrique Delfino Subject: prostitution	Mezcla rara de Museta y de Mimi con caricias de Rodolfo y de Schaubard, era la flor de París que un sueño de novela trajo al arrabal. Y en el loco divagar del cabaret, al arrullo de algún tango compadrón, alentaba una ilusión: soñaba con Des Grieux, quería ser Manon.	Strange mixture of Museta and Mimi with strokes from Rodolfo and Schaubard, ¹² she was the flower of Paris that a romantic dream brought to the suburb [of Buenos Aires]. In the crazy rambling of the cabaret, with bully tangos for lullabies, she was cherishing an illusion: she was dreaming with Des Grieux, wanting to be Manon. ¹³
(1926) <i>Íntimas</i> Words: Ricardo Luis Vignolo Music: Alfonso Lacueva Subject: romantic	Hace tiempo que te noto que estás triste, mujercita juguetona pizpireta Que te pasa? Desengaños que has sufrido? Hay recuerdos de amor inolvidables . . . Y hay vacíos imposibles de llenar!	Since long I see you sad, little playful and lively woman. What happens? Disappointments that hurt? There are memories of love that are unforgettable . . . And there are voids impossible to fill!
(1928) <i>Silbando</i> Words: José Gonzalez Castillo Music: Sebastián Piana y Cátulo Castillo Subject: betrayal and punishment.	Una calle . . . Un farol . . . Ella y él . . . y, llegando sigilosa, la sombra del hombre aquel a quien lo traicionó una vez la ingrata moza . . . Un quejido y un grito mortal y, brillando entre la sombra, el relumbrón con que un facón da su tajo fatal.	A street . . . A street light . . . She and he . . . and, silently approaching, the shadow of the man that she once unmindfully betrayed . . . A whine, a deathly scream, and shining from under the shadows, the flash of bright light of a knife piercing its fatal stab.
(1933) <i>Si Volviera Jesús</i> Words: Dante A. Linyera Music: Joaquín M. Mora Subject: cultural criticism	Veinte siglos hace, pálido Jesús, que miras al mundo clavado en tu cruz; veinte siglos hace que en tu triste tierra los locos mortales juegan a la guerra. Sangre de odio y hambre vierte el egoísmo.	For twenty centuries, pale Jesus, you are looking at the world nailed to your cross; for twenty centuries in your sad land crazy mortals play war. Egoism is shedding blood of hatred and hunger.
(1968) <i>Balada para un Loco</i> Words: Horacio Ferrer Music: Astor Piazzolla Subject: modern, pure poetry.	Quereme así, piantao, piantao, piantao . . . Abrite a los amores que vamos a intentar la mágica locura total de revivir . . . Vení, volá, vení!	Love me as I am, wild, wild, wild . . . Open up to love, we will attempt the magic insanity of a total renovation . . . Come, fly with me, come!

sudden procession of horror stories emanated from Argentina—unbridled popular riots, guerrilla warfare, assassinations, abductions, imprisonment of dissidents, institutionalized torture, and eventually mass murder. For a time Argentina elicited a single association: *los desaparecidos*, the thousands of students, workers, writers, lawyers, architects, and journalists, men and women alike, who had “disappeared,” simply vanished without trace. At this time too, Rio de Janeiro, Mexico City, Los Angeles, Paris, New York, London, and Rome became refuges for a vast Diaspora of political and economic exiles from Argentina.

David Rock asks: What went wrong? My response, based on my own and my husband’s studies of the socioeconomic evolution of Argentina, and our existential experience there, is that the 1930 regressive coup stopped the process by which Argentina, inspired by Jeffersonian philosophy, was con-

stantly redesigning her coat of laws and regulations in order to adjust to changes in her growing physical and economic body, these changes being in turn induced by changes in the global economy and by the scientific and technological advances that humankind was achieving. That coup pushed Argentine society into the seesawing mentioned above, and from 1930 to 1983, with successive coups, the regressive forces became increasingly powerful.

Since 1983, Argentina is slowly and painfully regaining its democratic structures and its ideals of constant progress of both economies and minds. Will she be able to go beyond mimetism and provincialism and realize the synthesis that Borges and many others were longing for?

This summary of Argentine evolution as an independent nation should help readers to see Argentine sexual mores as the result of a complex mix of influences from the regressive and progressive periods of Argentine history. More details

on Argentine history and sociology will be given in the following sections of this chapter when required for a better understanding of a particular subject.

3. Knowledge and Education about Sexuality

A. Historical Perspectives

Argentina really started its life as a modern country in 1853, when a generation of progressive politicians organized the country, promoted public education, and produced a radical transformation in the economy and society.

A census in 1869 reveals that:

four-fifths of the population was illiterate and housed in mud and straw shacks. Twenty years later, although conditions varied greatly among the regions, in some areas education, housing, and consumption standards bore comparison with the most advanced parts of the world. By the late 1880s, the nation's population was increasing by threefold every 30 years.¹⁶

Outstanding among those new politicians is Sarmiento, an Argentine educator who was president of the republic between 1868 and 1874. In his inaugural address he said: "We need to transform the poor 'gauchos' into people useful to society. For this purpose, the whole country should become a school."¹⁷

In 1847, Sarmiento had traveled through Europe to learn of the successes and failures of educational systems. Nothing of what he saw satisfied him. He wanted to know of a school system capable of developing reasoning power in the magical and mythical minds of poor peasants.

Then, one of his friends suggested that he visit the United States and get acquainted with the work that Horace Mann was doing in the school system of Massachusetts. He crossed the Atlantic and visited not only with Horace Mann, but also with other brilliant Bostonian Unitarians who were meeting at the Divinity School of Harvard, among others, Henry W. Longfellow and Ralph W. Emerson.

The friendships he established then were further cultivated during his second sojourn as Argentine Ambassador to the United States, from 1864 through 1868. When Sarmiento assumed the presidency of Argentina, Mary Mann, the widow of Horace Mann, was instrumental in sending to Argentina a group of 65 American schoolteachers, with whom Sarmiento and his Ministry of Education, Nicolás Avellaneda, who succeeded Sarmiento as president of Argentina, began to organize the country's educational system. Primary schooling was free and compulsory for all. The number of well-furnished schools constantly increased, and teachers, who were quickly formed by their American counterparts in normal schools, were conferred high social status and adequate monetary rewards.

Prior to this, the monopoly of the Catholic Church over education kept the common people ignorant of the advances in science, technology, and political organizations that were taking place in the world. The education of people of certain rank and fortune was a little better, but ineffective for the development of the country. Only a small number of young men, and even fewer young women, managed to break the fences that an education based on theology created in their minds. However, these few opened the doors to the outside world, other cultures, and great foreign thinkers. Even if they were studying in a Church-managed university, they would smuggle in, often with the help of prominent and open-minded priests, books from Jefferson and the great philosophers of the French Revolution, which they secretly read and discussed with friendly priests.

All this changed when Sarmiento and Avellaneda decided to organize the new school system to provide an education for life in the here and now. It is for this reason that Sarmiento and Mrs. Mann agreed that all the schoolteachers sent from the United States would be females, so as to serve as role models for Argentine households. Sarmiento and Mrs. Mann wanted them to bring new knowledge through words, and a new vision of life through the example of their lives. Since then, the children of poor and uneducated native peasants, and of equally poor and uneducated immigrants, had access to scientific knowledge and learned about their own nature, about what it meant to be human. They would learn how babies are born, how to cut their umbilical cords, how to change and clean their diapers, and how to take care of babies and their own bodies.

In the years of political freedom, social progress, and economic growth that followed, issues on sexuality and the status of women began to be discussed. They were introduced mainly by female politicians of the Socialist Party, and by the youth who by 1918 had achieved success in their fight to change the university system that resisted Sarmiento's reform and, although no longer managed by the Catholic Church, had remained scholastic. It is interesting to observe that while the socialists were bringing a message of sexual liberation, the communists, when they split from the democratic socialists, adopted a moral code based on strict monogamy.

Sarmiento's progressive work on the schools affected many other aspects of Argentine life. One of these aspects was a surge in bookstores that would offer writings of the most-varied orientation, writings to which youth had access and which often supplemented and amplified the information they were given at school.

The 1930 military coup started a slow process of reversing Sarmiento's ideas on education. The purpose of education now focused on keeping pace with the advances in the natural sciences and technology, while preventing students from acquiring a vision of life that would contradict the obsolete moral codes of a narrow theology. However, the alliance of the most-reactionary members of the Catholic hierarchy with the military never managed to take the schools completely backwards. Argentina's life had irreversibly changed, and what was not taught in the classrooms, the students would learn in their households and in the streets, although sometimes the information would reach them distorted or incomplete. For quite a while after the first military coup, books on sexuality could still be freely obtained in the bookstores. Later on, more-reactionary military coups would censor even this source of information.

B. The Situation Today

Currently there are no sexual education programs at the primary-school level. It is left to the teachers to give some information as part of the classes on biology. In the few cases in which a teacher decides to do so, it is no more than a description of the reproductive organs in plants and animals, and some references to the role of ovaries and testes in human reproduction, with no explicit mention, or even less, showing of pictures of the genitals.

It would be easy, however, to introduce full courses on sexual education in all Argentine public schools. All that is needed is an order of the National Educational Council, which by law decides on the nature and extension of primary-school programs. The members of the council are appointed by the president of the country following advice of the ministry of education. Once decided at the level of the central government, there are no elective local educational boards where parents could either oppose or suggest the

idea of providing sexual education to the students. The provincial educational councils have jurisdiction only over provincial schools, not on those established by the national government. Although a few sophisticated private schools have developed advanced programs of sexual education, these schools reach only a tiny minority of children of rich urban households.

The same possibilities of organizing national programs of sex education are open for secondary schools (high schools), because they too report to the authority of the central government. But here again, the situation changes from one school to the other, depending on its director (principal), and is, in general, well behind the demands of the present. Neither primary nor secondary schools have recovered yet from the regressive trend imposed on them by decades of regressive military coups and brief civilian intervals.

For further information about sex education, see Section 5, Interpersonal Heterosexual Behaviors, below.

4. Autoerotic Behaviors and Patterns

In Argentine society, despite official Catholic negative views of sex outside the marital union, it is usually seen as normal for preteenage boys to play exploratory games with other boys, and girls with other girls. These games are seen by most parents as part of the process of growing up. It allows the child to reassure him- or herself of the normality of his or her body by comparing it with the body of a friend, relative, or schoolmate, although sometimes, instead of being a reassurance, it could generate anxieties, as when girls compare the size of their breasts and boys the size of their penises. It is also a source of anxiety when a boy feels sexually excited by another boy and fears he is becoming gay.

Freedom for these kinds of exploratory games was greater in bygone days when Argentine society had less violence, and drugs were not as common. In the past, boys would gather in parks and compete to see who threw their semen further while masturbating. Parks were also a place where couples would meet for sexual encounters, and teenagers would peep on their activities without disturbing the partners.

5. Interpersonal Heterosexual Behaviors

A. Children

See Section 4 immediately above.

B. Adolescents

What is known about the sexuality of Argentine adolescents is limited to anecdotal reports, most of which deal with middle- and upper-class urban teenagers, rather than with rural poor and urban street children. In this limited context, my personal experience in the 1970s in developing a sexual education program for students, ages 13 through 17, of middle-class households may be informative. This program was for a prestigious coed secondary school of suburban Buenos Aires, the Colegio Nacional San Isidro. After a dialogue with the parents aimed at interesting them in the sexual education of their sons and daughters, an integrated approach led the students to discuss biological and social aspects of sexual behavior in relation to their personal development and the establishment of interpersonal relations.

Although the students were offered the possibility of presenting their questions anonymously in writing, they preferred to come out openly with their questions. Their greater concerns were with the emotional and spiritual aspects involved in a sexual relationship. One vividly remembered example is typical of the concerns and perspective these youth had. A 15-year-old male student asked: "Can you know when your partner is pregnant without perform-

ing a lab test?" I left the student to share first his own views, and his answer was: "I think that when one is deep in love, one can detect subtle changes in mood and behavior of his lover that indicate a potential pregnancy."

Among the biological issues, girls were more interested in knowing more about the physiology of menstruation, pregnancy, and delivery, while boys wanted to reassure themselves that masturbation and nocturnal involuntary ejaculations were normal and could be enjoyed free of guilt and shame. Both sexes converged in expressing that they were facing the awakening of their sexual potential with anguish and feelings of being all alone in this experience. They all needed to be reassured that there was nothing abnormal in their bodily sensations, and in the fantasies and feelings these sensations often evoked.

In 1931, when Argentina's freedom to experiment with and discuss these subjects was not yet fully eroded, an Argentine scholar, Anibal Ponce, studied the problems of growing up in Argentine society in a book titled *Ambition and Anguish among Adolescents*. Regarding the common feelings of being isolated and alone, he said:

With a personality not yet formed, and while trying to awkwardly build the structures of his ego, the adolescent suffers more than anybody else, the anguish of solitude, because he or she needs more than anybody else the support of the others.¹⁸

Unfortunately, since my experience in 1970, the situation has deteriorated for Argentine adolescents, who find in their society less and less support for their existential anguish. In 1993, while researching this paper, this deterioration was obvious in my talks with adolescents. In a meeting with a group of them, ages 15 to 17, they told me about the typical pattern of a course on sexual education in a school that chooses to implement it. The teacher does not allow questions from the students during the presentations. At the end, he agrees to receive a few. Sensing that the instructor is insecure and unable to facilitate a dialogue in depth, the students then prefer to end the class quickly, declaring they have nothing to ask.

The teenagers confessed that it is attitudes like this, repeated in their homes, that make them view society and family cynically. Surrounded by injustice and hypocrisy, they feel they can do little to get the adults to change. They were, for instance, very disturbed by the expulsion of two students from their schools when they became pregnant.

The situation is no better at the college level. There are no courses of sexual education in Argentine universities, except, and this only since the 1960s, at their schools of medicine (see Sections 11, Sexual Dysfunctions, Counseling, and Therapies, and 12, Sex Research and Advanced Professional Education, below).

Premarital Sexual Activities

Sexual behavior differs from one group of Argentine youth to another depending on their social class and place of residence. Social belonging and location determine different levels of knowledge, repressions, and attitudes towards life in general, and sex in particular.

In the larger cities, like Buenos Aires, Cordoba, Mendoza, Rosario, and Santa Fe, youth are exposed to a cosmopolitan vision of life and receive more information on sex and sexuality. They are also freer to experiment with this vision and information than youth living in smaller towns, where family control is strong and where cultural patterns are rather narrow.

For rural youth, it is quite different. On the one hand, they receive information on sex and sexual behavior just from observing nature in which they are totally immersed, and from

the relation between genders in the family where members enjoy little privacy, if any. On the other hand, the prevailing Catholic Church writes deep into the unconscious of every boy and girl, but especially of the latter, ideas of guilt and sin that trouble the pleasure that the early awakening of the senses in the rural milieu can bring. Neither boys nor girls are taught about the relational and recreational aspects of sex, and the possibilities offered by modern technology for keeping under control the reproductive aspects. Hence, the purely instinctive sex leads to pregnancy, confronting the boy with the responsibility of an early marriage that he is not yet ready to assume, and the girl with the responsibility of an unwanted motherhood for which she also is not prepared.

Youngsters in the big cities have easy access to magazines where sexuality is soberly analyzed, even if their parents and the Church hide such information from the youngsters. They know about contraceptive techniques and can acquire contraceptives in the pharmacies without problem. However, the guilt and shame associated with sex are also present here and, as usual, instead of promoting either safe sex or abstinence, these only lead to quick sexual contacts. Under the uncontrollable pressure of a hormonal flood released in a hurry and in the most unromantic places, boys and girls neglect prevention of pregnancy and disease. For youth in the poverty belts around the big cities, the situation is compounded by the lack of money. Even if they would prefer to use contraceptives, they cannot buy them and there are no places where they can get these free. Only the army distributes free condoms to the soldiers when they leave the barracks on their weekly leave days. Knowing the limited budget for healthcare within the army, the Church has not complained to the military, with which they keep good relations, pretending instead to ignore a practice that otherwise they could not openly accept.

First Sexual Experiences

In late 1993, the author had long conversations with different groups of young people in Buenos Aires. These mainly middle-class youths, ages 18 to 24, were encouraged to bring to the meetings problems related to their sexual life and development.

One subject recurrent in these meetings was their difficulty in establishing a fruitful dialog with their parents. Repeatedly, they expressed regret that aspects of their lives that engender so many anguishes and fears could not be explicitly discussed in the intimacy of their households.

Contrasting the information gathered in these meetings with my previous experience in medical private practice in Argentina, it became clear that sexual activities are initiated at increasingly earlier ages. Most of the interviewed youths defined their first experiences as disappointing. Asked why, they always responded that it was so because of a lack of romance. Most boys had been initiated in whorehouses, under the pressure of fathers who would arrange the visit, and this happened without a previous intimate talk that could soothe the anxiety of the teenager by discussing what he may expect to happen and how to protect himself from diseases, mainly AIDS, about which the teenager had already heard at school. Such experiences, they said, left bitter memories, which for some disappeared when they fell in love and discovered the ingredient they were longing for: romance. The boys all agreed that the experience at the whorehouse was felt as an obligation to fulfill in order to affirm their virility.

Among girls, the memories of their being deflowered were somewhat different from the boys. Some did not bother to get prior information about the meaning and the possible consequences of their first sexual encounter. They perceived their first intercourse as the fulfillment of a strongly felt de-

sire that, at the same time, would transgress a social taboo. Hence, they reached the situation with many expectations, and as much anxiety as boys said they did. For other, more-entrepreneurial-type female students, it was a calculated action to get rid of their virginity, which they perceived as an obstacle to enter into a more mature and fulfilling sexual life. These girls sought information from doctors in private gynecological practice and acquired the necessary contraceptive technology to protect themselves.

Reflections about Sex Policies and Politics from Meetings with Youth

The young's perception is that society is not providing appropriate responses to their needs of knowing more about sexuality and sensuality. The information they get at home, school, and church is incomplete and biased by the prejudices of the adults. Although short articles dispersed in different magazines are useful, they cannot fully fill the gap. They would prefer an honest, open, uninhibited dialogue with parents, teachers, and priests.¹⁹ They see the AIDS epidemic slowly changing the situation, although they consider that their survival is in danger, because society is reacting too slowly and is still not assuming full responsibility, preferring to stick to old patterns of thought and behavior rather than save lives.

The more-enlightened youth perceive many deficiencies in the information process, deficiencies that they say may risk the future of a stable relationship. For instance, they are not told that, although syphilis and gonorrhea can still be easily cured, these diseases may make it easier for the AIDS virus to invade the immune system. Girls are not told that chronic or repeated inflammation of the genital tissues may lead to infertility and ectopic pregnancies.

A generalized opinion among youth is that it is necessary to invest in improving and updating education and information to secure the future of the country. The impression left on me by my meetings in Buenos Aires is that middle- and upper-class youth are slowly evolving from a macho behavior, which still is deeply programmed into their minds by their acculturation, to an attitude of better understanding of their own and the opposite sex's sexuality. They are learning to integrate male and female traits in their own personality, and to harmonize the roles of males and females in the marketplace, households, and political arenas. They are also starting to understand and respect those who show preferences for intimate relationships with persons of their own sex.

However, the majority of the Argentine population is unchanged. It is unclear at this time whether the elite youth of the urban middle and upper class, as they mature, will influence the democratic process that reopened in 1983 to introduce changes in the educational and legal systems that could usher larger groups into a new vision of their sexual life.

[*Update 2003:* Argentine teenagers face serious risks in their sexual life, especially concerning sexually transmitted diseases and premature maternity. Those risks arise from the lack of information, of deficient health services, and of disregarding responsibilities towards oneself and one's partners.

[The health and sanitary authorities are not lending sufficient attention to these risks, despite statistics indicating that the number of cases of AIDS among Argentine children is the highest in Latin America. Their mothers, who often are less than 20 years old, infected about 90% of those HIV-positive children (CRLP 2000).

[Around 86% of women between 15 and 19 years of age use contraceptives in the City of Buenos Aires, while the percentage is much smaller in the rest of the country—between 31% and 45%. However, these figures do not indicate the degree of responsibility and of knowledge with which

those contraceptives are being used. Independently of their diverse lifestyles, most youngsters, when interviewed, express needs for emotional support and for a complete sexual education that should include knowledge on contraceptive technologies, but not be limited to this subject alone. Public health services do not satisfy these needs.

[During the interviews sustained while writing the original chapter for this encyclopedia, youngsters expressed different approximations to sexual activity. But all of them—those who had begun to exercise their sexuality at a very early age as well as those who were not yet active, those who had multiple partners as well as those in more-stable and long-term relationships—confessed not to know much about their own bodies and about the sexually transmitted diseases. They were ashamed to seek preventive information or early treatment from medical services. The economic crisis that the country has suffered, since the 1997 publication of this chapter, adds poverty to ignorance in increasing the emotional and physical damages that Argentine youth is suffering.

[Argentina should take immediate measures to establish programs of sexual education in all the country, teaching youngsters how to protect themselves, resist pressures when sexual activity is not yet desired, and diminish the risk of their sexual encounters by negotiating with their partners. The provinces of Rio Negro, Neuquén, and Mendoza have assumed leadership in this direction by establishing services in the area of sexual and reproductive health for adolescents by law.

[Those who oppose these programs argue that discussing human sexuality at an early age awakes prematurely the curiosity of the youngsters and advances their initiation in sexual activity. After evaluating 1,000 sexual programs of education in diverse countries of the world, the World Health Organization has arrived at the contrary conclusion. Courses in sexual education do not advance the age at which sexual activity usually starts in the respective culture. Moreover, in some cases, the major and better knowledge defers the experimentation (Population Information Program 1995).

[Because young Argentines are making decisions with neither knowledge nor responsibility, they compromise their health and the economy of their homes. Because the Argentine State ignores its role in the sexual education of its youth, it compromises the future of the country with a long-term social and economic overload of sexually transmitted diseases and unwanted pregnancies. (*End of update by S. Kamenetzky*)]

C. Adults

Marriage and the Family

Mature people, who married before the recent shift in sexual behavior towards more openness and gender equity acquired the intensity and spread they now have, are being bombarded by the mass media and performing arts with messages that carry a heavy sexual and sensual content, telling about new techniques for lovemaking, new roles within the couple, new risks in extramarital relationships, and so on. These issues are also conversation matter among friends and families, and at business meetings and almost any social gatherings.

Inevitably, mature couples start imitating the open and direct language of their younger counterparts. This, and the perceived risks of extramarital affairs since the AIDS epidemic, is leading them to recreate their sexual life and expand their erotic horizon. They are discovering that fantasy and playfulness within the couple are the best antidotes of boredom. Men are learning to ask their spouses to use new

forms of stimulation with them; they are learning that it is more important for them and their partners to be mutually tender and understanding than it is to count their performance points. Oral sex and anal intercourse are losing their status, especially among younger Argentines, as techniques practiced only with prostitutes. Masturbation is increasingly viewed not only as a form of self-satisfaction, but also as a means of sharing sensual and orgasmic experiences without penetration.

Extramarital Sex

We still find married men who maintain a longstanding relationship with a second woman, sometimes with the knowledge and approval from his spouse, and even of his grownup children. For some couples, it is a solution that keeps their marriage alive: The man is free to express sexual needs that he does not dare to reveal to his wife, and the woman is relieved from pressures to change her sexual behavior, a task that for her heavily structured personality may be so painful that she prefers to share her partner with another woman. These are generally women with limited horizons in their lives and a very low sexual appetite.

Fewer are the number of couples where the man and woman both have temporary extramarital relationships under mutual knowledge and agreement. This is the most risky modality in today's Argentina, because many of the men resist the use of condoms and ignore whether their occasional partners may be HIV-positive.

Older Adults

The new ways of thinking and making love are also re-sounding among couples over age 55. Often it is their own children and grandchildren who awaken them to the new sexual behavioral patterns. In Argentina, there is still strong interaction among the generations, and the oldest easily perceive the freedom that the new generations have won. Nowadays, a granddaughter moving from home to the apartment of her boyfriend is not grounds for scandal. And grandparents do not stay away from a wedding where the bride in a long white gown shows signs of pregnancy.

Indeed, these are open-minded elderly who keep their own sensuality and vitality alive; they are not ashamed to show tenderness between them through hugging and kissing. These are people who consult the urologist at the first signs of impotence in the man, or the gynecologist when the woman's sex drive declines. Most elderly couples, however, have not reached this openness. They let their sexual drive disappear without seeking remedies. Many drift into depression and develop hypochondriac behavior.

Incidence of Oral and Anal Sex

In Argentine society, both oral and anal sex carry a negative connotation, especially for older persons and among the traditional middle- and upper-class families. Argentine youth, however, seems to be taking a new look at these sexual expressions, according to what they said at the meetings.

Girls were divided in their responses. One group accepts and practices oral sex as a way of avoiding the risk of pregnancy and maintaining their virginity until marriage. For another group, it was a more-intimate form of sexual relationship, somehow more romantic than intercourse. Youth holding this latter view believed that oral sex should only be engaged in with a stable partner, and not in the first exploratory encounters. Some other girls joined some boys in rejecting this way of expressing love to a partner, and thought that only prostitutes could practice fellatio on boys. The older the boys are, the more easily they accept oral sex as a normal part of dating and within marriage.

Prejudices against anal sex are even stronger among older adults, and even the younger set. A minority of the youths in the groups I spoke with accepted anal sex, and then only for fully committed couples and not as part of dating. The boys agree that: "A woman will never ask for it." The old injunction against sodomy is still well alive in their subconscious.

6. *Homoerotic, Homosexual, and Bisexual Behaviors*

Argentina still is, to a large extent, a macho society, and machos detest gays, whom they see as effeminate. For a majority of the population, including physicians and psychologists, homosexuality is felt to be a perversion and a disease. Teenagers who feel a strong attraction to members of their same sex experience, first, extreme confusion about their feelings. When the picture becomes clear in their mind, they awake to the unpleasant reality of belonging to a group that society marginalizes.

Gayness, however, is increasingly being tolerated, and a gay movement is gaining increased strength and fighting for its rights, which ten years ago was impossible even to think of. The scorn for gays is higher among lower- and middle-class men than among members of the upper class. There always were artists and writers whose homosexuality was known among the elites, but carefully kept out of scrutiny from the media and the masses.

Lesbians are still not too visible in Argentine society, in keeping with the Victorian tradition, which never wanted to think about sexual activities in a relationship between two females.

Contrasting the social attitude that openly scorns gays, although sheltering them when they belong to special groups, we see Argentines as quite uninhibited in publicly expressing tenderness and affection among people of the same or different sex. Men of all ages will embrace and kiss each other when meeting, and there are also exchanges of kisses among men and women who are relatives or friends, and, of course, among women themselves. The increased publicity about the spread of AIDS has not acted as a deterrent of these affectionate expressions.²⁰ (See the discussion of same-sex sex rehearsal play in Section 4, Autoerotic Behaviors and Patterns.)

To be gay or lesbian in a repressive environment whose stereotypes are the macho man and the submissive reproductive woman is not an easy task indeed. Anyone who deviates from a strict heterosexual behavior is ridiculed: A gay is not a man, a lesbian is a degenerate woman. However, to be bisexual is not so annoying, as long as one's same-sex behavior is kept very private.

The young gay faces the hostility of society by withdrawing from his heterosexual circles to a subculture where he can find both lovers and understanding study and sport mates. Successful professionals have solved their problems by choosing to retreat into more-accepting cultures where they can be openly gay without jeopardizing their future. In private discussions, young gays report that their most traumatizing experience is when they decide to open up to their families and are rejected.

With a population of 12 million in Buenos Aires, one would expect a larger number of gay and lesbians than the numbers one can estimate from the few who have left the closet. These few, however, are very active in promoting the rights of the whole community. They speak for the visible and the invisible, helping the latter to openly assume their identities. They have formed organizations that have been given legal status, they have an official meeting and business place, and they publish and distribute documents to the

press and public. In these documents, they tell of their suffering, explain their lifestyles, and ask support for their fight for more legal freedom to be themselves and for equal rights with people of other sexual orientations. There is a whole gay and lesbian culture that is emerging, with gay masseurs who announce their services in the most-important papers and gay bars and discos. (I have not heard of any lesbian bar.)

I also did not find neighborhoods exclusively or predominantly homosexual. Most mix with the mainstream population of their own social class. Those who have a well-defined and highly visible economic or political role are still in the closet. The same is true for members of the armed forces and the Church. To confess their lifestyle and orientation would be suicidal. On the other hand, among artists, writers, moviemakers, actors, dancers, and university professors, to admit openly they are gay may bring rejection from the most conservative members of society, but they end up being accepted, and sometimes even see their popularity increase.

Who are those conservative members of the Argentine society? First, of course, are the orthodox Catholics who still believe that sexuality and sensuality ought to be repressed to achieve spiritual development. If all sexual and sensual manifestations are sinful except in marriage, homosexuality is particularly so. It is unnatural, a perversion of nature. Second, the orthodox Jews who still follow the Torah's abomination of this kind of relationship that in the past deserved capital punishment.

Third, in the domain of medical science, many have not yet evolved to a humanist, integrative, harmonizing approach. Orthodox psychoanalysts still consider consistency in the male or female physical and mental development as essential to a normal personality. They believe homosexuality originates in conflicts and traumas that therapy can face and resolve. In the chairs of sexuality of the schools of medicine, complex biological schemes are used to disguise the view among traditional physicians that homosexuality violates the laws of nature.

The irrational fear of physical love between partners of the same sex still pervades Argentine society. The overall situation can be described with the same words that Erwin J. Haerberle used to describe the prevalent attitude of society in the United States 20 years ago:

Typically, they do not know any homosexuals, do not want to meet them, but would like them to be controlled, contained, put away, locked up or eliminated.²¹

Argentine society still is far from taking seriously the role of sexuality in the physical, emotional, and spiritual life of men and women. It still has to reflect on other words of Haerberle:

The ultimate liberation of both homosexuals and heterosexuals can lie only in the abandonment of all labels and in everyone's freedom to explore his own sexual potential, whatever it may be.²²

7. *Gender Diversity and Transgender Issues*

Argentina was always a male-dominated society where those who do not behave in the macho way were scorned by men and women alike. However, with the return to democratic freedom, and TV messages from foreign countries penetrating into the intimacy of households, attitudes are slowly changing. Thus, the erotic minorities have had a chance to come out of the closet and express themselves.

For the moment, the masses react to them with neither violence nor acceptance, rather with curiosity. In the world of the performing arts, cases are well known of transvestism, and because these persons are celebrities, the public accepts them with smiles and gentle jokes.

If things are not easy for noneffeminate gays or nonmasculine lesbians, they are even more difficult for those who identify themselves with the opposite sex in manners and clothing, and even more so for those who want to see their bodies change towards the features of the other sex.

Some heterosexual transvestites have acceptance from their mates, and sometimes from their children, to cross-dress in the intimacy of their homes. In this way, men, who seem to outnumber women in practicing this sexual behavior, can safely express the feminine part of their personalities. In their work and social environment, these men usually return to macho stereotypes.

Those who desire to change their sex physically and be socially recognized as a member of the other sex should seek legal authorization for both procedures, the surgical acts and biochemical treatments needed, and the right to change names and status. Usually the authorization is denied on the basis of Article 91 of the Criminal Code that considers them as mutilations that would affect the capacity of women to engender children, which is considered as their primary social role. The law punishes with jail the patient who has changed sex and the doctor who performed the operation; the medical license of the latter is also revoked.

Change of sex in Argentina has a tragic history. In 1958, a prestigious physician, Dr. Defacio, went into self-imposed exile after suffering several years in prison because he had changed the sex of a man, Mauro Fernandez Vega, who, in turn, was never able to get new identity documents. Now another man, Javier Alberto Urbina, who claims to feel uncomfortable with his sexual identity and desires to be transformed into a woman, has started a public campaign for the right of any person to own his or her body. For this purpose, he has challenged government and society alike, standing before the doors of the Argentine Congress with billboards asking the abolition of Article 91. The Permanent Assembly for Human Rights is supporting his actions, according to a letter he proudly exhibits. In the letter, the President of the Assembly acknowledges Mr. Urbina's contributions to the cause of civil rights and individual freedom. The letter says that Mr. Urbina's actions may result in the legal recognition of the right to decide freely on matters that concern one's own body. However, legislators seem insensitive to this claim.

8. Significant Unconventional Sexual Behaviors

A. Coercive Sexual Behaviors

Sexual Abuse and Incest

There are no statistics on incest. Professionals in the medical and legal fields who deal with family violence and abuse encounter cases at all social levels, but they seem to be more frequent in rural areas and among poor people.

Adolescent girls are often raped by the older males of the family, and fathers often use them as sexual objects after the death of the mother, or when the spouse's work keeps her for long periods outside the home. Abusive males are usually unemployed people with a past of family violence, high consumption of alcohol, social inadequacy, and impulsive behavior. However, although less frequent, cases are also known in which the male is the head of a well-to-do household and respected by his community.

Lawyers at the Office for the Protection of Minors who mainly deal with cases of incest among the lower classes are surprised at how often they find that the abuser has no perception of having committed a crime. This office is now working with a multidisciplinary team of professionals. This, and the recent institution of oral court hearings, is increasing knowledge about the extent and motivations of this unconventional sexual behavior.²³

It is in private medical practice that cases of incest within middle- and upper-class families surface. Young females acknowledge the trauma of an early unwanted incestuous relationship when coming for treatment of sexual dysfunction in their marriages.

Sexual Harassment

On December 19, 1993, a decree of Argentina's federal government introduced the legal concept of sexual harassment in its administrative procedures and Criminal Code. The decree was prepared by the Secretariat of the Civil Service with the help of the Women's National Council.

The decree punishes sexual harassment independently of the hierarchical levels occupied by aggressor and assaulted, and regardless of their respective sex. Sexual harassment is defined as:

Any reiterative activity, whether this be a behavior, a purpose, a gesture, or a bodily contact, that is not accepted and reciprocated by the person to whom it is aimed, that humiliates her or him, and that involves a threat against the stability of employment or the opportunities for advancement.

This action by the administration was promoted by the Secretariat for Women of the civil servants' labor union (Unión del Personal Civil de la Nación) that provided information on the increase of this type of behavior in different government organizations: the Ministry of Public Health and Social Action, the Secretariat of Tourism, the National Atomic Energy Commission, the National Institute of Technology, the Ministry of Economy, Customs, National Parks Service, and many others. After the decree was issued, more than 700 cases were initiated in the city of Buenos Aires alone.

Sexual harassment is punished through an administrative indictment that may end with a dismissal from public service. The administrative procedure, however, does not preclude legal action by the offended person, because the same decree introduces in the Criminal Code, Article 124B that reads as follows:

Those who use their hierarchical position or any other situation of employment to induce another to satisfy his or her sexual requirements, be this or not carnal intercourse, will be punished with two to four years of prison.

This decree is important because it shows that Argentine women are expanding their political presence and are winning the collaboration of men who know, from well inside the system, the injustices perpetrated against women. Men and women both hope that the new legal situation will not be spuriously used to either accomplish personal vengeance or obtain undue economic gains.

Rape and Family Violence

Despite these aspects of sexual violence in Argentine society, such behaviors have been affected by the educational reforms instituted at the end of the 19th century, producing a more genteel society. However, violence within the household is still considerable, especially from husband to wife. Abuses of this kind are seldom reported to police, because women know that the members of the latter usually behave in the same manner in their homes.

Among the poorest households, since their early infancy, girls observe the violent behavior of their fathers, particularly when they return home intoxicated with alcohol. The mother is beaten and bruised, and a sexual encounter may follow that amounts to a rape. Faced with a society that, until recently, did not recognize female rights, the woman capitulates, represses her feelings, closes herself within her taciturn dreams, and continues laboring for the survival of her family, especially her offspring. Even then, if she does not manage to hide at least some of her earnings, the male may spend them with another woman and with friends imbibing alcohol.

Once more the tango draws on this popular behavior. A male songwriter puts on the lips of a female protagonist who falls in love with a hoodlum the following words:

Now, even if he beats me
my boy from the shanties
knows that I love him
with all my passion
that I am all his
that for him is my fond attention
and that it will be ours the child
product of this love sickness.²⁴

The lawyers at the judicial branch that deals with family violence estimate that there has been recently an increase of some 40% in the cases of women beaten and practically raped. However, rape in public places of the large cities or by intruders in private homes is not as frequent as in other countries, although with an increase in unemployment, especially among youth, this violent behavior is also starting to increase.

Lawyers admit that, when a girl or young woman is raped, the experience of going through the legal procedures and crude and insensitive examinations by forensic doctors could be more traumatic than the rape itself. The Argentine Criminal Code punishes with four years of prison the culprit of an incest with or rape of a minor.

A new brand of young lawyers, judges, psychologists, and sociologists are trying to uncover the economic and social roots of this violent behavior. As Martha Mercader, an Argentine writer of whom I will write more later, says, "Rape is not an animal act. Because it is a denial of human rights, it is an aberrant product of human culture."²⁵

[Update 2003: In Argentina's daily life, whether in the households, in society, or even in cultural circles, it is easy to perceive what in the popular language is called "machismo." It is a male attitude of superiority that disregards the human dignity, intellectual merits, and economic worth of females.

[The situations in which women are victims of violence and criminal attacks have recently multiplied because of the deep political and economic crisis the country is undergoing. Corporal punishments that may end with death, forced sexual engagements that hurt the women physically and mentally, rapes, and child abuse, are all common features in Argentine society. Most of these events are not reported. There are fears of reprisals, concerns for how they may affect the offspring, worries about being left without means of subsistence, and lack of support from parental families. Women do not trust the police, because they know that the same *machista* mentality pervades its members.

[Argentine legislators have tried to modernize the laws related to acts of sexual violence against women, children, and teenagers. In 1999, laws were passed on crimes against sexual integrity. The new laws have changed most of the problems of sexual violence from the category of crimes to

that of conflicts, which authorizes the judges to arbitrate or seek conciliation.

[Rape goes well beyond conflict. Raping is a criminal attack that involves many physical and mental consequences. The attacked person may contract AIDS or other sexually transmitted diseases, could subsequently suffer depression, even suicidal thoughts, and could have difficulties in re-assuming a pleasant, satisfying sexual behavior. Legal protection and social equity for both genres of all ages require more than just changes in the laws. True protection and equity will be achieved through a profound educational reform aimed at structuring people's consciousness in the appreciation of the physical, mental, emotional, and spiritual benefits of a sexuality exercised with mutual respect and responsible freedom. (End of update by S. Kamenetzky)]

B. Prostitution

The Past

The *gauchos*, the native inhabitants of the country, themselves products of the heavy breeding between the early *conquistadors* and the indigenous population, and of the lower-class Spaniards who arrived in the wake of those *conquistadors*, seldom commercialized the sexual favors of women. A *gaucho* would take a woman as his sexual partner and could abandon her after some time without remorse. His mind was not programmed into thinking marriage, nor seeking stability, but neither did it contain programs that would make it acceptable, even less desirable, to make profits by exploiting his or any other woman. The *gauchos* were fearless, quarrelsome, but honest *machos*, skilled in the use of knives and *boleadoras*,²⁶ who wandered on their horses through the vast expanses of flat land that are the Argentine pampas.

After the efforts by Sarmiento and Avellaneda to build more rational structures on the magical and mythic mind of the Argentine population (see Section 3A, Knowledge and Education about Sexuality, Historical Perspectives), the situation changed for both the *gauchos* and their women. In 1880, the image of a country that would develop following European models was well set in the minds of the country's leaders. The *gauchos* had to transform themselves from vagrant free hunters who lived with women practicing subsistence gardening and husbandry into a rural labor force for the large ranches that the wealthy started to organize, or find a place in the smaller agricultural undertakings of the immigrants that started to flock to the Argentine pampas. The new generations were prepared by Sarmiento's schools to assume the new role, but they were betrayed by the large landowners, who did not treat them as salaried labor within a capitalist system, but rather as peasants attached to the lord's land who rendered services to the lord in exchange for a place where they could build their shacks and where their wives could tender a garden and raise some chickens, in addition to work as maids or cooks in the landlord's house. The older *gauchos*, not enough acculturated into the new system or economic and social relationships, would often rebel. The police would then seize them and send them to the armies that were battling the remaining southern indigenous populations and expanding the agricultural frontiers for the "civilized" land-based entrepreneurs. In brief, the displaced *gauchos* were making room for the *estancias* of the old native oligarchy and the settlements of the newly arrived middle-class Europeans.

The women of the older *gauchos* sent to the frontiers as cannon fodder were left without support and would often join the wives of the settled laborers as servants and sexual objects of the landowner families. They also became prostitutes in the small villages of the rural areas with their population of

single rural laborers and traveling salesmen. An Argentine writer, José Hernandez, who knew well the mindsets and lifestyles of the *gauchos*, wrote an epic poem about their suffering because of their inability to adjust to the transformational process, and the often rough way in which this process took place. It was a process that sacrificed the human dignity of the lower classes to the purpose of building a modern, productive nation. And the women suffered the most from this process.²⁷

Most of the immigrants came seeking possibilities for earning their livelihood through hard work, risky but honest investments, and the use of the best available technologies. However, as in any migratory inflow, some elements came with the idea of making money quickly by exploiting native people and land. A few used prostitution as the means to accumulate wealth and wield power.

Argentina would soon become one of the most active centers of the so-called white slave traffic. In Buenos Aires, Rosario, Mendoza, and other cities of the country, powerful entrepreneurial organizations, affiliated with even more powerful European organizations, enslaved an unbelievable number of young women lured or forced to leave their European villages to become the merchandise of a very profitable trade in a wide variety of brothels.²⁸

Just one of the organizations, known as the Zwi Migdal, owned 2,000 brothels where 30,000 women were each producing monthly an average of 3,000 Argentine pesos for their pimps.²⁹ To put this amount in due perspective, I should remind the reader that at that time the peso had the same value as the dollar, and that a sales clerk in a department store would earn less than 100 pesos per month. This gave the exploiters a tremendous financial power, and they used it to buy cooperation and loyalty from police, city and immigration officers, judges, ministers, medical doctors, and congressmen.

Who sustained such a large demand? Although for different reasons, all social classes made their contributions. The rich were looking for the merriment and diversity of sexual practices that they would never dare to ask from their wives, the respectable matrons whose aim was only to bear and raise children, manage households, and organize social activities. The poor came to brothels because either they had to prove to themselves everyday by using many women that they were *machos*, or because they were feeling lonely. Loneliness was particularly harsh on the immigrants to the large cities, who initially were without family or social groups with which to relate. But the poor native *porteño machos*³⁰ also often felt lonely, frustrated, and sad. They put these feelings into music and created the tango. One of the tangos declares: "In my life I had many, many chicks, but never a loving woman."³¹

Bully *porteños* would mix in the brothels with long-shoremen, sailors, farmers seeking city fun, employees of government offices, banks, and large stores, small businessmen taking a break from their shops, and youths having their first experiences. Brothels varied in size and amenities according to the class they were catering to. Most were just a succession of small rooms that barely accommodated a double-size bed. In the remaining space, a chair would provide a place for the customer's clothes, and a washbowl would be the only available means for the customer's and prostitute's hygiene. A typical construction would be two rows of ten rooms, each with a latrine at the end of each row. In the more-expensive brothels, there would be a grand receiving hall with sofas, vases, and paintings on the walls. There, rooms were more spacious and some would have mirrors on walls and ceilings. They were the places for the rich who could afford to pay from 5 to 15 pesos.³²

The white-slave traffic to Argentina continued growing during the last two decades of the 19th century and the first three decades of the 20th century. Already in 1892, a German magazine, *Das Echo*, commented on a trial that took place in Lemberg, Austria, where 22 persons were condemned for sending young women to different parts of the world under the pretext that they would be employed as maids, cooks, and nursemaids. Because the defendants were Jews, the magazine, in addition to denouncing an abominable trade, used the case to encourage anti-Semitic undercurrents of German politics that would open up in the German political arena some decades later.³³

Between 1920 and 1930, Albert Londres, an officer of the French Sureté Générale investigating the ramifications of the international white-slave traffic, decided to mix himself in the life of the small Polish villages where many of the women were bought or seduced. He finally published a book, *Le Chemin de Buenos Aires (The Way to Buenos Aires)*, whose influence among Argentines who were fighting to stop the traffic proved to be decisive.³⁴

Meanwhile, homosexuals, outcasts of Argentine society until recently, were, on the one hand, persecuted by the police, and, on the other hand, using some prostitutes and their madams for their own purposes. In Buenos Aires, for instance, a group of wealthy and influential, but closeted homosexuals organized young prostitutes to lure handsome young men into luxurious orgies in specially arranged places. They would be unwittingly photographed, and the pictures would be used to blackmail them into providing sexual favors to the hosts of the orgies.³⁵

Finally the empire built by the traffickers, which was facilitated by the regulation of the exercise of prostitution, was destroyed when the government moved to the opposite behavior and made organized prostitution illegal. Never was the Argentine market really a free market for sexual services, meaning by this, a market where the suppliers chose the profession out of their own free will, exercised it on their own and for their own benefit, and could enter and exit the market freely. Only very recently is it possible to see a type of prostitution that can be assimilated to small businesses.

From Regulation to Prohibition

The Argentine empire of whoredom was born and grew up sheltered by the regulated status of the brothels under laws and decrees whose declared purpose was to protect both suppliers and consumers of sexual services. In fact, it protected neither and only served to replace risky capitalistic forms of exploitation of sexual services with a capitalism of political patronage that benefited bureaucrats and scoundrels.

Regulation of prostitution is always based on the premise that prostitution is an inevitable evil, hence, it should be regulated in order to minimize the damages to society from its practice. Some of the regulatory decrees dictated by city councils in Argentina were quite detailed in their requirements. One included the following rules:³⁶

- To establish a brothel, it was necessary to file an application with the municipality indicating the location. A tax was required.
- The buildings had to be placed in a given zone, and not display any particular sign that would identify it as a brothel. They also had to have a bedroom for each woman working in the brothel. Prostitutes could not reside anywhere other than at the brothel, which was her official domicile. The women could not show themselves at the balconies or through the windows of the building, nor could they solicit in the streets.

- To work in a given brothel, each woman had to be registered with the sanitary authorities, who during the registration process, had to establish when the woman arrived to the city, from where she came and how, who was with her during the trip, and how she decided to join the brothel. If, from the interrogatory, it was established that the woman was a victim of deceit or coercion, she had to be advised that she could sue the offender and be offered assistance to do so.
- Each prostitute was then given a “sanitary notebook” with her picture, personal data, registration number, and the main articles of the decree that concerned her rights as provider of a service, among which were the following:
 - Whatever commitments she might undertake, she was free to stay or quit the brothel in which she lived and worked.
 - The woman who managed the brothel could not compel them to buy given clothes or other objects.
 - Debts were no reason to compel them to stay in a given brothel.
 - Nobody could exert violence of any kind on them, or submit them to abuse and punishments.

Later on, at the request of the Argentine Association Against White Slave Traffic, a page was added to the “sanitary notebook,” stating in Spanish, German, French, Yiddish, English, and Italian:

This is a free country. Nobody can be compelled to work as a prostitute. Whoever wants to exit from the profession can contact [here the name and address of the organization was given] that will see to her defense and help her.

In this notebook, the City Sanitary Services recorded the results of the mandatory periodical medical examinations. If the woman was found to be infected with a disease, she was to be taken to a hospital and remain there until dismissal. The sanitary notebook had to be shown to any customer that would request it to attest to her health condition.

The madam managing a brothel could not leave the brothel for more than 24 hours without notifying the sanitary authorities, who had to authorize leaves in writing and never for more than 15 days. She also could not accept any prostitute in the brothel who had not first registered and passed a medical examination. She had to take her pupils personally to the periodical medical examination at a hospital or have them ready if the examination was done at the site, in which case the brothel had to have a special room equipped with all the furniture and instruments the sanitary authorities requested. The madam also had to report immediately to the sanitary authorities whenever a prostitute felt ill, whether it be from a sexually transmitted or any other type of disease. If the woman could not be taken to the sanitary authority, a doctor would examine her at the brothel and decide whether to send her to a hospital.

It is easy to imagine the gigantic corruption that this naive attempt to protect customers and suppliers generated. The big trade organizations mentioned above bought the protection of the police, who were in charge of enforcing the regulations, and bribed justices and politicians, who all ignored the transgressions in favor of concentrating on the humanitarian provisions aimed at avoiding deceit and violence, and at protecting, at least partially, the free exercise of the profession. In reality, this approach did little to protect the health of the women and their clients, as elementary mathematics show.

With an average of ten daily services per woman and two examinations per week, and accepting that the exami-

nations were thoroughly performed, which often was not the case, only the first client after the examination could be considered free from contracting a venereal disease. The women had no protection from customers already infected. Hence the chances of safe sex for the other 30 or 40 clients that would visit the same woman before she went to the next examination were constantly decreasing. We should remember that the customers were not subject to compulsory medical control, and that many might not have shown any symptom for some time, while others would suffer in silence and continue practicing sex with prostitutes, lovers, and wives.

Although there are no official statistics from that period, we know from studies made by some concerned physicians, and from the clamor in the press, that the number of cases of gonorrhea and syphilis kept increasing. From a study by the director of the sanitary services of Rosario, Dr. José M. Fernandez, we learn that the examinations practiced during one year—October 1, 1930, through September 30, 1931—revealed that 73% of the prostitutes had a positive serological reaction to syphilis and close to 100% of them were carriers of gonococcus.³⁷

Finally, a law was promulgated by the federal government on December 30, 1935, ordering the closure of all brothels throughout the nation. It even criminalized the provision of sexual services by a single person in her own home.

Anticipating this abrupt policy change, several measures were taken by public institutions and grassroots organizations to protect the women that the law would leave without job and home.

The Situation Today

The 1935 law ended the corrupting empire of large organizations involved in the white-slave traffic, but it could not end the exercise of individual prostitution. The application of the law to individual prostitution was even declared unconstitutional, because Article 19 of the Argentine Constitution says: “Private activities that do not affect public order and morality and do not harm other people are reserved to the judgment of God and off-limits to the authority of magistrates.”

Hence, an adult person who by spontaneous decision engages in sex with other consenting adults, for money or otherwise, cannot be penalized unless the practice takes place in such a way that it offends or harms third parties.

On the other hand, the change in mores that took place in the world after World War II was strongly felt in Argentina. Internally, the Perónist movement drastically elevated the status of the working class, including rural labor, and Eva Perón’s actions sped the recognition of women’s political, economic, and social rights. The large masses of single immigrants, to whom the brothel provided a recreational and physiological outlet, are pictures from a distant past. The *machos* of the suburbs of Buenos Aires and other big cities are drowned by a wave of proud blue-collar workers who may have consenting lovers in addition to their official spouses, but would never exploit one or the other. Contraceptives and information about them reach women and men of all social classes. For quite a while, penicillin brought control over venereal diseases. All this allowed women to consent to premarital and extramarital sexual relations.

However, prostitution has not disappeared. Teenagers, sometimes by their own initiative, but more often under the pressure of peers or their fathers, seek prostitutes for their sexual initiation. Then there are the handicapped and those who do not dare to share with lovers and spouses their need for special sexual practices. And as always, sailors and

other single travelers from the countryside and abroad. Single women and married men with hidden homosexual or bisexual tendencies are also asking for sexual services. Hence, male prostitutes have made their appearance in the market.

The modern Argentine male and female prostitutes advertise their services through newspapers. A typical announcement reads: FIRST NAME; Your place or mine from Monday to Sunday; Telephone number. Some include the price. In one single issue of a popular newspaper, I found eight advertisements with prices ranging from 15 pesos to 40 pesos, which equaled the same amount of dollars in 1993 exchange.

Another form of advertising is the use of taxi drivers and hotel bell captains as intermediaries. These agents receive part of the price in exchange for referring clients. In the large hotels, the bell captains may have an album with pictures of different prostitutes from which the guest may choose.

Sex titillation by phone is also making its inroads. It is being introduced by representatives of foreign organizations. Romance through the line, as one of the announcements reads, is offered by calling a number in the United States, Hong Kong, or Mexico.

The spread of AIDS has further reduced direct trade of services and has made room for these telephone and other electronic alternatives. They are used for those who do not find a way to create romance and introduce fantasy in their relationships. Most of the well-informed youth are now seeking to satisfy all their sexual needs through a committed relationship that may or may not end in marriage. Usually, they contract marriage when they decide to have children. Among homosexuals, who are now more accepted by society, there is also a trend toward less promiscuity and more-stable monogamous relations.

Prostitution is still a topic of discussion in the news media and for journalists. It is becoming clear that prostitution is a cultural as well as an economic problem. A morality that denies and represses bodily needs will never solve the problem. It can only increase the demand for commercial providers of sexual services. And a society where greed on one side creates poverty on the other will inevitably create greedy profiteers and needy prostitutes.

C. Sex in Argentine Mass Media: Erotica and Pornography

Literature

A review of the Argentine literature of the last few decades shows that Argentine writers often describe in detail heterosexual, gay, and lesbian sexual encounters in their novels. The practice of sprinkling some sexual spices to add flavor to the narration is not limited to romantic novels; it occurs also in historical novels, and indeed in psychological novels that delve deep into the feelings of their characters.

This literature has led middle-class urban readers to re-think their own attitude towards sexuality and sensuality. It helps in lifting the last traces of *machismo*, of seeing love and sex as two separate things that are practiced with different women, and of perceiving homosexuality as a perversity. In a historical novel set between 1851 and 1862, for instance, Martha Mercader, a famous novelist, defines in just one sentence the most common mindset among young military men in the first armies of the equally young Republic: "He [the protagonist of the novel, an adjutant in the recently organized National Guard] must always be on top; on top of Indians, of the blacks, of the *gauchos*, of the peasants, and of the females."³⁸

This same novelist dared to reveal her own sensual and sexual life in an autobiography in which she describes her

puberty within a family and a society hampered by a multitude of taboos, the fantasies of her adolescence fueled by the movies that Hollywood sent to Argentina in the 1940s, the difficulties women had to choose freely and assume responsibilities, her conflicts with the rigid mindset of an intellectual husband that was progressive in his ideology and conservative in his social and sexual behavior, and conflicts that ended in a sour divorce. Her personal history illustrates the limitations to which women were, and, to some extent, are still often subjected. For some, the limitations amounted to a veritable enslavement.³⁹

When we compare the historical novels published in the 1980s by this writer with the books of the same genre published in the 1970s by another famous Argentine writer, Beatriz Guido, we perceive the advances made in language openness and in acknowledging women's feelings, their desires, their erotic fantasies, and their voluptuous carnality.

For instance, in one of her books,⁴⁰ Beatriz Guido describes the initiation of two young men with prostitutes. It is a description almost devoid of emotions: The two adolescents do not even ask one another about how they performed. They leave the brothel in silence and walk through the streets talking economics. The scene reflects what was then acceptable in Argentine society.

By contrast, Martha Mercader, in another of her novels,⁴¹ talking through a heroine of the time of the war among provincial *caudillos*, recounts the sufferings of innumerable Argentine women of the past and reveals things that today's Argentine women are still longing for. The main character questions, already in the 1830s, the role of reproductive machines that the Church has assigned to women. She is a woman that is consumed by passion for life and years for opportunities to share with her husband both her sensual desires and her intellectual potential, her abilities to perceive the social, political, and even military situation in which they live. By insisting on doing so, she destroys her relationship that cannot survive a destabilization of the macho role of her husband. Through Juana Manuela, her character, Martha is calling for further changes in a society that still is repressive and castrating.

It is worth mentioning a rare book discovered while browsing in an old bookstore of a provincial city. Its title is *Textos Eróticos del Río de la Plata (Erotic Texts from the River Plate)* by Robert Lehmann Nitsche, a German anthropologist.⁴² It was published originally in Leipzig, Germany, in 1923, under the pen name of Victor Borde, and includes an exhaustive collection of popular songs, poems, proverbs, riddles, sentences, and remarks with a high sexual, sensual, and erotic content. In 1956, after Julian Caceres Freyre, an Argentine scholar, obtained a copy of the German original from a bibliophile friend, a group of entrepreneurial editors undertook the task of translating it into Spanish. The 1981 Spanish edition contains the full original text, plus an article anonymously published by Lehmann in the journal *Kryptadia* in 1901.⁴³

Lehmann arrived in Buenos Aires in 1897 to work at the Anthropological Museum of La Plata, the capital of the province of Buenos Aires, when he was only 25 years old, and resided there until 1930. Compelled by his curiosity and animated by a truly scientific passion for honest and forthright research, Lehmann did not hesitate to survey all sources, from ordinary rural folks to prostitutes and pimps. He questioned his students at the University of La Plata and gathered graffiti from public latrines, restrooms, and from prison walls. His work has rescued from oblivion popular customs and traditions that progress would consign to burial without a trace, because Argentine scholars considered them too vulgar and embarrassing to be scientifically studied.

Lehmann used the material he compiled to compare popular myths, prejudices, and stereotypes, some of which are still part of the collective Argentine subconscious. He dared to undertake this task at a point in the evolution of humankind when sexuality was still a bad word even in Europe, where he had to publish the result of his work either anonymously or under a false name.

After 1933, the Nazis tried to use Lehmann in their intelligence network about Argentina, given the deep knowledge the scientist had of the country, but he refused and was ostracized from the scientific community until his death in 1938.

To give the readers a flavor of this collector's work, I provide translations of one each of its riddles, sayings, and limericks. Riddles are usually innocent, but the solution is sexually charged (see Table 2).

Popular Magazines

It is through popular magazines that we can see more clearly the changes taking place in Argentine society. The numerous, so-called magazines for women are found everywhere: homes, hairdressers, doctor's offices, almost any place there is a waiting room. And in almost every issue, there are articles about sex and eroticism, some signed by respected local and foreign professionals. Articles cover a variety of subjects, such as contraception, the influence of a healthy sexual life on the physical and mental well-being of women, or how to improve marital relationships. Three other types of magazines deal with sexuality and eroticism:

- Magazines that deal with sexual issues avoiding pornographic images, shying away from even full frontal nudity. They are rather expensive, exhibit a good quality of printing, and aim at informing a public that accepts a scientific, although popular, rather than academic language. One such magazine claims the collaboration of professionals from the Masters and Johnson Institute and the American Association of Sex Educators, Counselors, and Therapists to produce illustrative videos that are distributed together with some of the issues. One such issue included the following subjects: best techniques to enjoy an intense sexuality; the skin: an ally of eroticism; how to make of your bedroom the most erotic place; your way of kissing reveals how you make love; techniques to renew sexual passion without changing partners; initiation to anal sex without traumas; the art of

undressing to seduce your partner; the importance of oral sex during pregnancy; safe sex: condoms, a way of taking care of yourself without handicapping your pleasure.

- Magazines of sexual humor with pornographic texts and cartoons, but no pictures.
- Clearly pornographic magazines, devoid of any artistic quality, some with scatological content.

Foreign magazines like *Playboy* and *Penthouse* can also be bought in some newsstands.

Television and the Video Industry

With the return of democracy in 1983, it became possible to openly discuss and present sexual issues on television. Well-known physicians, psychiatrists, psychologists, sexologists, and writers are invited by popular anchorpersons and questioned on all kind of sexual matters.

This situation contrasts with an experience I had in the early 1970s. As medical advisor to an Argentine enterprise, I was helping to design a strategy to introduce the first tampon manufactured in Argentina, a task of which I felt very proud, because it would allow Argentine professional and working-class women to feel more comfortable at their workplace. However, I soon discovered that the word "menstruation" could not be used in advertising the product on television or in newspapers and magazines.

Argentine television programs are now following on the line of pioneer shows in the United States and Europe that favor participation of the public and encourage them to share in a discussion of intimate problems. Argentines who know the languages can now receive these American programs, and also European programs, directly on their screens through satellite and cable.

The videotape industry is partially handicapped by the fact that Argentine television uses the so-called PAL system that cannot play either VHS or Betamax recorded cassettes. The market is composed mainly of foreign video pornography converted to the PAL system and subtitled in Spanish. It is a new market where a fast-growing demand is allowing businesses to make good profits. X-rated material is displayed in a separate room limited to adults who pay the store fees and deposit.

However, legislative revisions have not kept pace with changing public attitudes, and the old laws are used from time to time to crack down on the video-pornography business. In 1994, for instance, more than 300 titles were sequestered from one establishment and the store closed on the grounds that Article 128 of the Criminal Code considers obscene exhibitions as assaults against public morality. Some politicians and judges seem to still be under the grip of a repressive mentality, but many of them, and certainly the public in the large cities, are reacting and fighting for their freedom to see and read what pleases them. Despite obstructions from conservative forces, the public's preferences are being respected. The higher courts are also reversing conservative decisions from lower courts, although desperately slowly.

Table 2

Riddles Are Usually Innocent, But the Solution Is Sexually Charged

Type of Erotic Text	Original Text	English Free Translation	Comments
Riddle	En un campo monterano Hay un pájaro francés, Tiene huevos y no pone, Tiene un ojo y no ve.	In a hunting field There is a French bird, It has eggs, but doesn't lay It has an eye, but doesn't see.	The solution is the penis. Popularly, the testicles are called eggs.
Saying	A toro viejo le gusta el pasto tierno.	Old bulls like tender pastures.	
Limerick	¡Put a que soy desgraciada!, Dice la parda Loreta; ¡Todos me meten por el culo Y ninguno por la cajeta!	Shit! I am so depressed, says the mulatto Loreta; It is always my ass that is holed, never my cunt.	

Movies, Theater, and the Arts

Most of the erotic films shown in Argentina, films that would be rated R or X in the U.S.A., come from European countries, particularly France, Italy, Sweden, and lately Spain. Picaresque films, many based on classics of literature, such as Boccaccio's *Decameron* or Chaucer's *Canterbury Tales*, are shown without censoring their most realistic details, which may include frontal nudity. The United States is the source of all the violent pornography and thrillers imported.

After the return of democracy, the Argentine cinema industry has itself produced many risqué films. One describes a famous historical case of a young Argentine priest and a young lady of the Argentine aristocracy who fell desperately in love in the years just before the organization of the Republic. They leave family and Church to escape from Buenos Aires to the countryside. However, the combined powers of Church, money, and state persecute them implacably until they are detained and executed without trial. Because she is pregnant, the executioners gave her to drink a liter of holy water before facing the squad, so as to make sure that her child would die baptized. The film describes the tragedy in beautiful and poignant images, without sparing the torrid love scenes of the distressed lovers when they find themselves for the first time alone and far from their asphyxiating social environment.

There is also a mild censorship in the theater. A play called *La Lección de Anatomía (The Anatomy Lesson)*, in which the actors play their role in the nude, was playing for a long time in Buenos Aires, night after night, for nearly ten years.

In galleries of art, nudes are shown without hesitation or shyness. However, in the contradictory society that Argentina is, with regressive forces battling for survival and power, isolated episodes of censorship still happen, although a slowly operating judicial system repairs the damages in the end. For instance, in 1986, three photographic artists who were exhibiting their work at a cultural center found their pictures of nude people sequestered. The judge who issued the order resisted pressure from colleagues and public opinion, and the appeal of the lawyers of the defendants, for almost a year before returning the material to their owners.

Finally, the popular tango, whether danced in private salons or presented as part of a theatrical show, is often a display of eroticism at its purest macho style, the male proudly exhibiting his skills, his strength, and his power over women.

9. Contraception, Abortion, and Population Planning

A/B. Contraception and Population Planning

It is estimated that the population of what is today Latin America was around 50 million at the start of its conquest by Spain and Portugal.⁴⁴ Wars, brutal exploitation in mines and fields, and new diseases acquired from the conquerors because a lack of antibodies among the indigenous populations soon depopulated the continent. The conquerors then resorted to two policies: In some colonies, they started importing Africans as slave labor, and in all colonies, they promoted maximum use of women's fertility, whether they be Spanish, native, or African. Every child, whether from wedlock or not, was welcomed.

Pronatalist policies were maintained after independence. The new countries needed people, first to sustain the wars of independence, then feed the armies of local warring lords, and later to develop the empty lands. More recently, it was believed that a large population would keep salaries low, neglecting the fact that impoverished masses do not

make good consumer markets for the products and services that enterprises generate. Despite the influence of Catholicism, the concept of family has remained very lax. This explains why the number of illegitimate children has continued to run high. In some countries, it averages, even recently, 70% of all newborns.⁴⁵

Argentina has not been an exception to these pronatalist policies and the use of women as reproductive machines. However, its population did not grow as fast as in other Latin American countries. This is because of the formation of a well-informed large middle class that could not support families of the size that was usual among the upper class, and at the same time, did not share the loose idea about family ties expressed by the lower class. Middle-class couples quickly learned to use contraceptives acquired through private channels. In Argentina, contraceptives never were distributed or subsidized by the government, except for the army draftees who were given condoms for prophylactic reasons rather than population concerns.

During a relatively recent period, 1975-1983, during which the country was governed by repressive military juntas, there was an attempt to encourage larger families by giving monetary awards for each newborn, and by paralyzing the activity of the clinics privately supported by the Argentine Association for the Protection of the Family. Besides the fact that the amount of money was ridiculously small, the military ignored the real feelings of the women of the urban working class. They had a different program in mind than to have a lot of children. From my own work as a gynecologist at a union-supported hospital, I know their reasoning. They wanted to save from their salaries and buy a sewing machine or other equipment that would allow them to do some market work at home, postponing maternity until the couple's joint income would allow them to raise one or two children decently.

In the year 1972, the Argentine Association for the Protection of the Family managed 58 clinics around the country. That year, the number of new users of contraceptives was 23,000. Of these, 66% preferred the pill and 33% chose an IUD. The clinics were also offering services for the early detection of genital cancer and the treatment of infertility.

Nowadays, in the large cities, contraceptives of all kinds—pills, condoms, diaphragms, IUDs, and vaginal spermicides—are available. Condoms, pills, and vaginal spermicides can be freely bought in pharmacies. Women who can afford to pay, can use the services of private physicians to help them acquire the right diaphragm or to insert an IUD. Hospitals and clinics supported by the labor unions provide similar services to working women and spouses of workers.

The situation is more difficult for women who live in scarcely populated distant rural areas. There, both birthrates and infant mortality are still high when compared with urban figures or those in the more-developed rural areas close to the large cities. In the less-developed areas, the government is now trying to organize family planning services as part of its program of mother-child care.

[Update 2003: There are no programs related to reproductive health at the national level. At the provincial level, the situation varies from one province to the other, depending on two fundamental factors. One is the magnitude of resources assigned to public health in general, and to reproductive health in particular, in each provincial budget. The other factor hinges on the predominant political influence in the respective province. This last factor refers to the long-standing conflict in Argentina's policymaking between, on the one hand, liberal leaders with a modern consciousness and concerns for the needs of the population, and, on the other hand, conservative leaders associated with an obso-

lete Catholic Church that still adamantly represses the modern expressions of sexuality, love, and life.

[Until 1998, the federal government was assigning some 4% of the GDP to public health, and close to 90% of the population had access to sanitation (World Bank Development Report 1999). That year, it was decided to transfer to the provinces the responsibility to cover 87% of the cost of their respective health systems. The majority of the provinces have neither sufficient funds, nor the appropriate leadership to articulate those programs.

[The country is now calling for a very different approach: a comprehensive national health program that includes reproductive health and links to educational reforms that introduce those subjects in all curricula. It was expected that educational establishments at all levels would teach their students how to take care of their health and to enjoy the physical, emotional, and spiritual manifestations of their sexuality with responsibility towards themselves, their partners, and the economy of their households and the nation, avoiding unwanted pregnancies and sexually transmitted diseases. The undersecretariat for population that was created in 1993 at the federal level, which included a federal counsel on population, was dedicated mainly to demographic studies and regulation of migration. It did not assume any initiative to promote policies or educational programs for a responsible procreation.

[We will mention only a few examples of the diverse provincial efforts that attempt to organize programs of reproductive health overcoming precariousness of financial resources and ideological conflicts.

1. City of Buenos Aires

The city's constitution declares that the reproductive and sexual rights are part of the basic human rights, and proclaims nondiscrimination in the exercise of those rights for neither ethnic, racial, or gender reasons, nor for the sexual orientation of the citizens.

2. Mendoza, Rio Negro and Neuquén

These provinces have similar laws on reproductive health and sexuality. They aim at providing information and organizing counseling services.

3. Jujuy

In spite of the governor's opposition, who vetoed an initial project, the legislature unanimously insisted on approving a law creating a provincial program for maternity and the prevention of sexually transmitted diseases.

4. Santa Fe

The municipality of Rosario, the most important city of this province, enforced two decrees: one creating a program for the early detection of cervical cancer, and another organizing a comprehensive program on women's health.

5. Entre Ríos

The legislature voted a law whose objective was to provide information and advice for a healthy and responsible exercise of sexuality. The governor vetoed it.

6. San Luis

One of the most interesting experiments is taking place in this province. Working together with private organizations, the government has presented a project for a law of reproductive health that was accepted by the legislature, and is expected to soon be regulated and implemented. The activity of Gaia, a private group headed by Laura Lerner Emmer—who is joined in participation by local professionals and educators—deserves to be emphasized. They organized a Latin American encounter, "Being Born in 2002," to discuss themes centered on love, family relations, procreation, and birth. Among

the subjects explored at the encounter, we find: love and sexuality, methods for dealing with fertility and childlessness and the ethical problems raised by those methods, relations between parents and children, problems faced by single mothers and fathers, and new ways of looking after pregnant women and of delivering babies. The encounter is also a good example of efforts to transform the old unfortunate antinomies among ideologies, beliefs, and interests into constructive participatory polarities. "Being Born in 2002" was sponsored by UNICEF, the government of the province of San Luis, the municipality of the city of San Luis, the National University of San Luis, the Catholic University of Cuyo, and various foundations and private professional groups (Gaiasanluis).

7. Tucumán

In the past, this was a rich province, known as "the garden of the republic" for the fertility of its land and the beauty of its subtropical vegetation and breathtaking panoramas. Now, it offers a deplorable picture of misery and neglect. The chaotic state of the finances of the province has reached such extremes as not to be able to provide gauze and alcohol for surgery in the public hospitals. Children die of hunger or survive in a state of cachexia. "Problems that we used to see in photographs from Africa, now we are facing them here," said Dr. Teresa Acuña, a pediatrician in one of the hospitals (Rohter 2003). Indigent women in despair seek abortions, which, because of the way they are performed, often end in deaths, which are hidden in the statistics under other gynecological categories. There are no programs for reproductive healthcare. At the initiative of some doctors, and with the support of pharmaceutical companies, oral contraceptives are now be given free to poor women, who, in some cases, sell them to buy bread. There are no programs to give advice on contraceptive technologies and monitor their use. (*End of update by S. Kamenetzky*)

C. Abortion

Everybody who practices gynecology in Argentina knows that abortion is widely used by women of all social classes to end unwanted pregnancies. This happens despite the injunction against abortion in the Argentine Criminal Code that penalizes with prison women who have abortions and the professionals who perform this service, with the sole exception of a pregnant woman who is mentally deranged. Abortions are common despite the strong influence on personal lives and politics of the dominant Catholic Church.

Abortion is a practice that everybody knows of and practices when needed, but nobody talks about. Argentina is a society that, instead of fighting against the powerful forces that arrogate to themselves control over women's bodies, prefers to tolerate the officially condemned practice with a mischievous twinkle of tacit agreement among professionals and citizens. Criminal processes and denunciation of abortion practices are rare, and the police only intervene when a woman dies as a consequence of an abortion practiced by a non-professional.

Given these conditions, there are no figures for abortion in Argentina, but it is believed that its practice is widespread in all Latin America. In 1974, the International Planned Parenthood Federation estimated that some five million abortions were performed each year in the region. This corresponds to a rate of 65 abortions for each 1,000 women of reproductive age, and to 500 abortions for each 1,000 live births.⁴⁶

In the cities, women who typically seek medical help for abortions are either married, mature women who already have several children, or very young single women, high school and college students. That women resort to abortion mainly to put a stop to the increase of family size was confirmed by surveys organized by the Centro Latinoamericano de Demografía (CELADE).⁴⁷ In Buenos Aires, women with two children reported 39.6 abortions per 1,000 women in their lifetimes, while women with three children reported 93.5 per 1,000.

Studies on the relationship between abortion and socioeconomic position suggested that middle-class women resorted to abortion more frequently than upper- or lower-class women. More-recent studies, in Buenos Aires during the 1960s and 1970s, revealed that the highest rate of abortion was among women with college educations. These studies tell us two things: one, that women of the upper classes can afford to raise more children than they would really want, hence avoiding inner conflicts with their deep-seated religious programming, as well as outer conflicts with their social Catholic environment; second, that abortions among the lower classes leave no written or oral record, because they are not performed by professionals, and the women deny having them to avoid problems for themselves and for those who helped them in the procedure.

When abortion is performed by obstetricians in clinics or their offices following state-of-the-art procedures, with instruments duly sterilized, use of anesthesia, and post-operation care to avoid hemorrhages and infections, it seldom leads to complications. It is quite different when abortion is practiced by folk healers and unregistered midwives, with neither asepsis nor anesthesia and using primitive instruments. It is even worse when rural women in despair resort to pouring chemicals inside their vaginas, ingest toxic substances they have heard induce abortion, or use wires and the like to destroy the fetus. The end results are hemorrhages that lead to death if the woman cannot reach a hospital for a transfusion, or infections that may also lead to death if untreated. Other frequent ailments produced by these crude abortion procedures are the destruction of the vaginal walls, and the production of adhesions on the uterine endometrium.

In the end, many of these women who provoke an abortion by themselves or with inexperienced help end up in obstetric and gynecological wards of national and provincial hospitals, overloading an already tight supply of beds, blood, drugs, and medical time. Again, there are no statistics for Argentina, but it is estimated that one of every five beds in those wards are occupied with women suffering complications from self-induced or poorly performed abortions, and statistics for Latin America disclose that up to 41% of all blood used in hospitals is consumed by those cases.⁴⁸

This picture of individual suffering and high social costs indicates a need to change policies. Abortion rates and morbidity and mortality from their complications can only be reduced by:

- providing appropriate sexual education and stimulating the use of contraceptives;
- legalizing abortion to take the procedure out of inexperienced or desperate hands, making it, instead, easily available from well-trained professionals; and
- increasing accessibility to well-equipped medical centers in case of complications.

[Update 2003: Abortion continues to be illegal, with two exceptions: for the pregnant woman's life or health. These two exceptions are very seldom used, because, although the law does not require authorization from the judi-

cial system for such an abortion, health professions are reluctant to go ahead on their own, and equally reluctant to seek court approval. Inexperienced people, in sordid environments and with no asepsis, perform most abortions. This should cause alarm among the public health institutions. The total number of abortions is overwhelming. The Center for Reproductive Law and Policy (CRLP) estimates that the incidence of abortion in Argentina is somewhere between 350,000 and 400,000 abortions annually. Although it is estimated that one third of all maternal deaths are caused by abortion, the real number may be higher, because some may be hidden under other gynecological or obstetric areas (CRLP 2000).

[Rather than focusing on the costs to the economy and to the health of the Argentine family, the public discussion continues to center around ideological issues. Sexual education from an early age, and easy access to contraceptives when the age of reproduction is reached, could save money and lives, not only by avoiding abortions, but also by preventing the spread of sexually transmitted diseases. While under the present legislation, women are chastised and the medical profession is handcuffed, a wider understanding of human nature, with its need of a healthy sexuality, could make both women and men more free, and family life more happy. (End of update by S. Kamenetzky)]

10. Sexually Transmitted Diseases and HIV/AIDS

A. Sexually Transmitted Diseases

In Argentina, the most frequently reported sexually transmitted diseases (STDs) are trichomoniasis, genital chlamydia, gonorrhea, genital herpes, syphilis, genital papilloma virus, chancroid, and indeed AIDS. There is a worrisome increase in the number of cases of the traditional STDs, particularly syphilis, gonorrhea, and human papilloma virus. Risky as they are on their own, they also increase the susceptibility to acquire genital cancer and HIV infections.

In the field of STDs, Argentina is a prime example of a global trend that took the total number of cases in the world to 250 million in 1990, at a rate of 685,000 new cases each day.⁴⁹ From 1987 through 1991, the number of cases of gonorrhea decreased in 15 Latin American countries, but not those of primary or secondary syphilis. Twelve of these countries also saw an increase in congenital syphilis. Although most of these figures are only approximate, they tell us that there is an urgent need to mobilize all the available technologies to check the spread of these diseases,

The real numbers are difficult to obtain. Some diseases that present undramatic symptoms are initially ignored. A case in point is chlamydia, which is only detected in 70% of the cases when women come for other reasons for a gynecological examination. Once detected, the cases are only reported to the healthcare authorities if the examination took place in a public hospital; private medical offices are not required to report this disease.

The lack of an appropriate sexual education among all social classes, an attitude of indifference and/or shame in relation to prophylactic measures, and a medical system that is not well prepared for early detection and treatment, all combine to increase the rate at which STDs are growing. Exceptions are the detection and treatment of syphilis and gonorrhea. The pronatalist policies of Argentina since the organization of the country has meant that doctors were trained and medical services organized to take special care of the health of pregnant mothers and newborns.

This occurs in three different medical environments. The most advanced environment is provided by private

medical practices in doctors' offices and *sanatorios*.⁵⁰ In this privileged environment, only prejudice or ignorance can prevent doctors from providing timely prophylactic advice, early diagnosis, and appropriate treatment of STDs.

Another environment is made up of the *sanatorios* organized and supported by the labor unions. The number and size of medical institutions of this type increased steadily from 1946 through 1955 during the populist administration of Juan Domingo Perón and his activist wife, Evita. Some, like the one owned by the Association of Metal Workers in Buenos Aires, were well-equipped and responded to the needs of the working class, supplying information on STDs and providing early detection and advanced treatment services. In others, equipment and services had to adjust to lesser resources. Neither individual labor unions nor their confederation ever issued policies related to the kind of services to be provided in their *sanatorios* for STDs. It all depended on the caliber and convictions of the medical personnel who were hired as management and staff. However, the wards of dermatology, urology, gynecology, and obstetrics of these union-supported medical services have helped large numbers of workers and their families to become aware of the risks of STDs and have induced them to seek early detection and treatment.

The last environment is provided by the hospitals supported by the federal and provincial governments and the municipalities. They are entrusted with two missions: One is to provide medical services to the poorest sectors of the population, those who do not have access to either private nor union-supported medical services; the other is to serve as training grounds for the students of medicine from the public universities, which in Argentina are the most prestigious. Initially, services provided at hospitals were totally free, but the disastrous management of Argentina's economy for more than 50 years slowly eroded their physical and human assets. Recently, these facilities have been charging a small fee as a contribution to the huge recurrent and investment costs involved in their maintenance.

This small fee may further discourage the population from the shantytowns in the poverty belts around the large cities from seeking early diagnosis and treatment for STDs. Although public transportation is relatively cheap and efficient, they are already discouraged by having to make more than one trip to the hospital before being given their diagnosis, and by being unable to obtain the necessary medications once the diagnosis is made.

Prostitutes form another segment of the population of the large cities that requires special consideration. In Buenos Aires, children of both sexes from the shantytowns pour into the city and become prey of drug traffickers and pimps. Through shared needles and sexual intercourse, they are infected with all kinds of STDs, further contributing to their spread in their original milieus and the city at large.

The picture of three levels of medical services describes properly the situation in Buenos Aires, the other large cities, such as Rosario and Bahía Blanca, and most of the provincial capitals. In the rural areas, we may only find small infirmaries where doctors struggle to help the poor people without having at their disposal either laboratory services or appropriate equipment, such as colposcopes and stocks of drugs for early diagnosis and treatment of STDs. To make things even worse, poor rural people are more easily programmed than their urban counterparts to feel shame and guilt when affected with an STD. This prevents them from asking for medical help even from those elementary health-care facilities, even at the cost of suffering crucial pain and loss of income, and of spreading STDs to other members of their impoverished societies.

The conditions in which the very poor rural and urban people live may require a different medical approach when dealing with STDs than the now standard scientific approach of first investigating the etiology of the disease and then establishing the appropriate treatment. If the physician tells a poor sick person that he should come again to find out the results of clinical tests, and only then get the prescription and go to the nearest pharmacy for the medication, this person may never return. Meanwhile, the disease may be spread to others. Hence, a syndrome approach has been developed in which the physician examines the person and immediately gives the patient the appropriate medication during the first office visit and at no cost.

It may sound nonsensical to propose this approach, which is widely used in the poorest countries of the world, for use in a country like Argentina that has 2.99 doctors per 1,000 population compared with only 0.03 in Tanzania and 2.38 in the United States, 5 hospital beds per 1,000 population compared again with only 0.9 in Tanzania and 5.3 in United States, but we should realize that there are poverty spots where medical services are well below the average for the country, and that the inhabitants of these poverty spots contribute greatly to the incidence and fast-growing rate of STDs.⁵¹ In poverty-stricken areas, the dilemma for the physician is whether to act quickly on the basis of what he or she sees without waiting for accurate tests, or to wait and, in the process, turn the untreated STD carrier into an uncontrolled spreader.

I could not obtain precise information on the incidence of STDs at the different social levels of Argentine society, but my own experience, from the mid-1950s to the mid-1970s, and the experience of physicians I interviewed while preparing this report, show that a large number of women that come to a medical office or the outpatient services of a hospital for gynecological problems, pregnancy controls, or advice on family planning are infected with STDs.

Consider just one of these diseases, the genital human papilloma virus, which, with 30 million new cases worldwide in 1992, ranks third among STDs.⁵² The corresponding increase in the number of cases in Argentina has led to research work and the organization of seminars on the subject. Prominent among these is the work in three hospitals of Buenos Aires under the direction of Dr. Angélica Teyssie, who also acted as vice president of the Third Argentine Congress of Virology. In one of the hospitals, the work centers around the influence of hormones on the development of the disease in pregnant women with lesions in the uterine cervix. A team at another hospital works instead with young men with penile and urethral warts, while the third hospital concentrates on young women with vulvar lesions. The latter are followed to confirm the suspicion that the papilloma virus may be responsible for the onset of cervical cancer as late as five to 30 years after the primary infection.⁵³

STDs are having a very negative impact on the Argentine economy. This impact cannot be measured solely in terms of the number of deaths caused by STDs, because many nonfatal conditions are responsible for a great loss of healthy life and significant demands on the healthcare system. A better indicator is the one jointly developed by the World Bank and the World Health Organization, which is the number of disability-adjusted life years (DALYs) lost because of a particular disease or group of diseases in a given time period.

The DALY indicator is obtained through a rather complex statistical process. First, for each death, the number of years of life lost is calculated as the difference between the actual age of death and the expectation of life at that age in a low-mortality population. Then the disability losses are

calculated by multiplying the expected duration of a disease (to remission or to death) by a weight factor that measures the severity of the disability in comparison with loss of life—for example a weight factor of 0.22 was assigned to pelvic inflammatory disease, while dementia carries a weight factor of 0.6. Then the combined death and disability losses are further corrected by discounting them at a rate of 3%, so that future years of healthy life are valued at progressively lower levels, and by an age weight, so that years of life lost at different ages are given different relative values. By multiplying these indicators by the total number of deaths for each age and disease and summing up across all ages and conditions, it is possible to figure out the global burden of disease for a given demographic area in millions of DALYs lost in a given year. From these, two other indicators can be derived: the equivalent number of infant deaths that would produce the same effect, and the number of DALYs lost per 1,000 population.

The World Bank and the World Health Organization have estimated that in 1990, Latin America and the Caribbean area was burdened with a loss of 103 million DALYs, which is equivalent to the death of 3.2 million infants and represents an incidence of 233 DALYs per 1,000 population. STDs and HIV accounted for 6.6% of the total, ranking third, after perinatal causes (9.1%) and neuropsychiatric diseases (8%), among the different diseases included in the study. STDs and HIV contribute more to the burden of disease than cancer (5.2%), and cerebrovascular or ischemic heart disease (2.6% and 2.7%, respectively), but less than injuries, which amount to 15% of the total.⁵⁴

Unfortunately, I could not find specific statistics for Argentina, but what I have heard and observed leads me to estimate that the relative contributions of STDs and HIV to the burden of disease is not too different from that for the whole of Latin America. The high burden calls for active intervention by the governments, but a solution is hampered by a lack of information about STDs across all sectors of the population, and by a lack of resources for preventing and curing the disease among the poorest sectors. The latter problem could be solved if the government reallocated its expenditures to provide financial support for essential clinical services. However, government should limit its direct involvement in the provision of the services because it generates an expensive and inefficient bureaucracy; the government should instead promote the participation of grassroots nongovernmental organizations (NGOs) in the task.

Although government and NGOs should also work together in the delivery of information, the government's role in this should be more prominent than in the delivery of services, because the structure of the Argentine educational system makes it easy and cost effective for the government to include sexual education at all levels of the system. Most of the schools are under the authority of either the federal or the provincial governments. There are no local city or county educational boards to interfere with the decisions of what should be taught, and the largest part of Argentine households send their children to the state-supported public schools. Certainly, this is the case for the poorest sectors in both rural and urban areas.

Schools should find the language that is most appropriate for conveying information on STDs to each population group and each geographical area. It should be language able to overcome deep-rooted and long-established feelings of shame and guilt. Schools can be used to teach these subjects not only to children, but also to their parents and the public at large, including the elderly whose sexuality should not be discounted, and who, by becoming better informed, could play a more positive role in reinforcing appropriate behav-

ioral patterns among the younger members of the households to which they belong.

Information useful to counteract the spread of STDs should not be limited to the causes of the disease, its symptoms, and ways of preventing and curing them. Information provided at schools, by social workers, and by NGOs should go well beyond this to develop a positive attitude towards the body, a shame- and guilt-free recognition of instinctive drive, and an ability to establish tradeoffs between the instinctual urges and the constraints imposed to the satisfaction of these urges by the need to build healthy households and societies. Poor peasants and sophisticated urbanites can both understand a well-phrased and well-delivered message that these tradeoffs do not mean a repression of one's erotic life, but rather its enhancement by seeking to make it free of disease.

In the schools of medicine, which are all state-supported, doctors, nurses, and other paramedicals should be enabled to discuss STDs openly and clearly with their clients, avoiding scientific jargon and making them feel at ease when uncovering their bodies and their feelings. Young doctors, nurses, and paramedicals so trained could, in turn, facilitate in-service seminars for older physicians, nurses, and paramedicals who have not received any information on human sexuality.

The task of fighting STDs does not, however, stop with the schools, physician offices, clinics, hospitals, and rural first-aid rooms. It is a task that should involve all social organizations. Private businesses can also play an important role. The traditional Sunday soccer games that attract huge crowds could be used to distribute witty messages on the use of prophylactic measures and the high personal and social costs that result from neglecting them.

Argentina is a society that has to come to terms with the spread of STDs and the factors that contribute to this spread, such as the existence of poverty spots, male and female prostitution, and the consignment of persons with sexual preferences that do not conform with what is considered traditional behavior to a closeted sexual life that becomes much more healthy when it is integrated into all walks of a country's life. Argentina should learn that open discussion is more cost effective than denial when facing problems.

B. HIV/AIDS

In Latin America, Argentina ranks fourth, after Brazil, Mexico, and Colombia, in the number of people affected with HIV. In December 1993, the Argentine government approved a new plan to fight against the disease that had already afflicted 2,897 persons, while there was an estimated 100,000 other people infected with the virus but not yet showing signs of disease. In the first nine months of 1993, 411 cases were recorded by the Ministry of Public Health and Social Action. It was expected that the total number of cases for that year would reach the 1,000 mark.⁵⁵

Marcelo del Castillo, a physician at the Hospital de Clinicas of Buenos Aires, believes that 30 to 50% of the people infected with HIV or suffering from AIDS are not recorded in the official statistics.⁵⁶

A study by three pediatric hospitals of Buenos Aires—Garrahan, Pedro Elizalde, and Ricardo Gutierrez—found 400 children infected with HIV who were being treated. Of these, 63% lived in suburban areas, 30% within the city limits, and 7% came from other parts of the nation.⁵⁷

Eduardo Lopez, the chief of the department of infectious diseases at the Hospital Gutierrez, told a journalist that most of the treated children die before their third year, and that the earlier the symptoms appear, the worse is the prognosis. Lopez, who received a prize from the National Academy of Medicine for his studies on AIDS, pointed out that 90% of

the children are infected by their mothers during pregnancy and delivery.⁵⁸

According to Lopez's studies, 20% of the HIV-positive mothers are 15 to 19 years old, and those below 24 years of age amount to 70% of the total number. Most of them, 59.4%, are addicted to intravenous drugs, while the remaining 35.9% have partners who are HIV-positive and 90% are drug addicts.⁵⁹

These statistics show that the fight against AIDS should be integrated with the fight against the ravages of drug addiction, and that both fights require improved education and delivery of information to the youngest segments of the population. This has been recognized in the governmental plan that proposes to introduce information on these subjects in the high schools and universities starting with the school year 1994.⁶⁰ The plan will evaluate the possibility of extending its action to the primary level, and the Ministries of Education, Labor, and Interior will work together with the Youth Institute in forming community leaders who are prepared to deal with the subjects of AIDS and drugs. The plan is quite ambitious. In addition to the already mentioned educational and community work, it includes medical action aimed at providing medical care and medicines to those who do not have any coverage, a better knowledge of the situation through improved statistics on the epidemics, and increased controls on the blood banks.

While the government expects these to accomplish their objectives with an investment of only \$10 million for the year 1994, the private sector is experimenting with interesting initiatives. One such private-sector experiment was designed and undertaken by the Foundation for Quality and Participation, in the small town of Rojas in the Province of Buenos Aires, where children ages 10 to 13 attending a primary school are being led by a volunteer medical doctor with full support of the principal and teachers of the school.⁶¹ Students in this project focus on the following tasks:

- Search in the library and study material about AIDS to learn how the disease is contracted, its symptoms, the work of HIV in the human body, and social aspects of the AIDS epidemics.
- Discuss the subject among themselves, with their families, the teachers, and the principal.
- Visit the local hospital, get acquainted with people hospitalized with AIDS, and talk with the physicians in charge of them and with the hospital's director.
- Poll people in the street about their level of information on AIDS, the measures they were taking for their own protection, and their attitude towards people already suffering from the disease.

At the point I learned about this initiative, the children had drawn a declaration defining their own feelings and the results of their learning process. Their declaration exposed their understanding of the complexity of this problem, the difficulties doctors face in treating the disease, the high cost to individuals, families, and our community resulting from dealing with the disease and trying to prevent its dissemination, and the complications that educational authorities face in bringing appropriate information to the schools. Recognizing these key aspects of AIDS, the children then said they were willing to assume their role in the fight against the AIDS epidemic with responsibility, "engaging ourselves in contributing our grain of sand."

This experiment shows that every segment of the population can respond creatively to a well-organized stimulus to promote their participation in solving social problems. The success of the Foundation for Quality and Participa-

tion project in getting young children to assume their responsibility in dealing with AIDS raises a serious question about what is not being done in a similar way to engage the adults.

Many male heterosexual adults still believe that AIDS is a disease of homosexuals. Many married women think they will be spared until they get the disease from a bisexual or drug-addicted spouse. It is true that in Buenos Aires, three fourths of the all AIDS cases are either homosexuals or heterosexuals who got the disease through sharing needles, but the other one in four cases involves nonaddicted married women, some of whose partners are neither bisexuals nor drug addicts.

It is clear that any plan to decrease the social and economic impact of AIDS in Argentina, as in any society, requires an emotional engagement that facilitates an important paradigmatic change of beliefs and behavior. This paradigmatic change is essential to increasing the use of condoms, decreasing promiscuity, promoting the use of disposable needles among drug addicts, understanding and respecting those who suffer, and helping individuals everywhere to enjoy sex while minimizing the risks for oneself and society. In addition to emotional engagement, such changes in individual attitudes require the support of the social groups to which the individuals belong, namely, families, schools, private businesses, and churches.

[*Update 2002: UNAIDS Epidemiological Assessment:* As of December 31, 2001, 21,117 AIDS cases had been reported in Argentina. The incidence rate for 2000 was 48.9 per million population. The ratio of male/female is currently 3:1. The epidemic has been concentrated in the large urban areas where 87.5% of cases reported occurred, principally in the suburbs of the province of Buenos Aires. The most common mode of HIV transmission is sexual contact (37.9%), mainly heterosexual (25.3%); followed by intravenous drug users, which accounts for 37.9% of the reported cases; and, finally, perinatal transmission (6.8%).

[Information on HIV infection comes from sentinel sites, which have been systematically collecting data across the country since the beginning of 1998. All jurisdictions gather data on a semiannual basis. The National Registry of HIV-infected people was started on June 1, 2001. The number of reporting sentinel sites increased 400% between 1998 and the first semester of 2001. However, only data from pregnant women and blood donors are sent by all jurisdictions. In other selected populations, the number of reporting sites varies from one period to another. HIV prevalence among pregnant women tested has decreased from 0.75% in the first semester of 1998 to 0.46% in the first semester of 2001. Prevalence among blood donors has also diminished during the same period, from 0.23% to 0.13%. Data on the prevalence of HIV among sex workers from four jurisdictions of the country, including the city of Buenos Aires, show a reduction from 6% to 2.39% in the 1998-to-2001 period. On the other hand, HIV prevalence among inmates in penitentiary units has increased, rising from 17.91% to 23.10% during the same time period. Among STD patients, HIV prevalence has risen from 0% to 3.99% in the first semester of 2001, based on data reported from seven jurisdictions. Finally, data from two provinces (Buenos Aires and Cordoba) show that the prevalence among injecting drug users went from 18.31% to 19.44% in the semester of 2000.

[The estimated number of adults and children living with HIV/AIDS on January 1, 2002, were:

Adults ages 15-49:	130,000 (rate: 0.7%)
Women ages 15-49:	30,000
Children ages 0-15:	3,000

[An estimated 1,800 adults and children died of AIDS during 2001.

[At the end of 2001, an estimated 25,000 Argentine children under age 15 were living without one or both parents who had died of AIDS. (*End of update by the Editors*)]

11. Sexual Dysfunctions, Counseling, and Therapies

A. Concepts of Sexual Dysfunction and Treatment

Until the 1960s, physicians had no better knowledge of human sexuality than the average Argentine citizen. And even after some education was introduced into the medical training, the information they received was prejudiced, biased, and antiscientific. In an interview with a physician and psychoanalyst, I was told that in the year 1963, the chair of hygiene at the School of Medicine of the University of Buenos Aires was still telling the students that "Women experience sexual needs after reaching 25 years of age and only during their ovulatory period," and "During infancy, adolescence, and first years of youth, women have no sexual needs."

The chairs of gynecology, genitourinary diseases, and hygiene studied and taught the pathogenic aspects of the sexual organs and reproductive mechanisms, but refused to consider with the same objective scientific approach the sexual behavior of healthy females and males. In my interviews with medical doctors during 1993, I perceived they still do not feel comfortable in discussing these issues, especially in relation with the erotic minorities, the group that Erwin Haeberle calls "the sexually oppressed," which include the aging, the homosexuals, the handicapped and disabled, people with specialized sexual interests, and persons committed to mental hospitals or imprisoned.

Young and old physicians know that prestigious institutions, such as the American Psychiatric Association, have made clear that they do not consider homosexuality, whether masculine or feminine, a disease. However, they still feel that it is a perversion, a degeneration. I know of one male teenager who was subjected to electroshock treatment when his parents discovered his gay tendencies and put him under treatment with a psychologist. However, even in those cases in which counseling seeks to soothe the patient rather than to cure him or her, the prejudices of the therapists are perceived by their customers, making it difficult for them to assert their sexual preferences and seek a healthy insertion in a hostile society.

This is true not only for homosexuality, but also for many aspects in the sexual life of heterosexual people. When people come for advice on sexual problems—like frigidity, impotence, fast ejaculation or difficulties in ejaculating, painful sex, sex during pregnancy and after delivery, consequences on sexual life of drugs and surgical procedures, sex among the aging, etc.—gynecologists, obstetricians, urologists, and the general practitioner find that they all are confused. Although their scientific formation in the field of sexuality is incomplete, from the little they know, they perceive that science and common sense run against their ideologies and beliefs. The internal battles between these two opposing patterns of thinking and behaving only adds confusion and distress to ignorance.

Every time I talked with people suffering from sexual problems, they told me how much they would benefit from sound advice and support. They think that medical schools should not only give their students advanced training in human sexuality, but also should organize courses on human sexuality open to the population at large. My experience with

a seminar on sexuality that I facilitated for aging people confirms this need. The group of elder women and men unanimously expressed their gratitude for having been allowed, at least for a few hours, to open up their feelings and show that they still are sexual beings with their own particular needs and desires.

For the moment, this seems rather difficult to accomplish. When a program in a school of medicine goes beyond the biological subjects of sexual differentiation and human reproduction, it is to cover technological subjects like contraception and abortion, or mainstream approaches to sexuality in infancy and adolescence, masturbation, and sexual inadequacy. The move beyond conventional teaching never reaches the subject of the sexually oppressed. Argentina, however, is changing fast, and the day may be not too far away in which these subjects, and the broader implications of sexuality for our personal lives, our societies, and our economies, will be freely, honestly, and humanly discussed in all classrooms, and in all walks of Argentine life.

B. Impact of the Psychoanalytic School

Escaping from persecution and war, some professionals and scholars in the field of psychoanalysis left Europe and found refuge in Argentina. Here, they organized the first college-level studies on psychoanalysis in all Latin America. They planted these seeds in fertile ground. The terrain was already fertilized by brilliant psychiatrists, such as José María Ramos Mejía and José Ingenieros, and a self-taught psychologist, Anibal Ponce. They reflected the state-of-the-art of a science that was trying to apply to its domain the same positivistic, mechanistic approach that was yielding dramatic results in the hard sciences. Their problem was—and still is for many scientists who have not yet evolved from those stages of development of our rational mind—that instead of creating new theories around newly observed facts, they tried to bend facts into accommodating existing theories and classifications. Some of the statements of these forerunners in the field of sexuality now make us smile. Seeking a cause-effect relationship between biology and sexual behavior, they thought that all gay men were hairless, and all lesbians were bearded women.⁶²

However, they deserve recognition for having brought the subject to academic circles and college teachings from which they were previously excluded. They also deserve recognition for their open-mindedness; they never thought that their teachings were cast in stone or steel forever. With Renan, one of their French masters, they thought that "the greatest progress brought about by modern rationality was its replacing the condition of being with the condition of becoming, replacing the concept of the absolute with the concept of the relative, and immovability with movement."⁶³

The disciples of the pioneers became the first disciples of the European psychoanalysts, and the work of both found their ideas and their practice spreading quickly among the upper and middle classes of Argentina, who were suffering the stress of fast-changing social mores, an unstable economy, and cycles of stifling and fostering political freedom. The country has now one of the largest per-capita ratios of psychoanalysts and psychologists, and the highest number of people who have been psychoanalyzed.

The influence of Freudian psychology reaches even those who cannot afford to pay the high price of psychoanalytic treatment. Psychologists and psychiatrists are writing informative, easy-to-read, popular books and articles that propagate the main ideas and findings of modern psychology on sexuality and sexual behavior among a literate population. At all levels, they are helping Argentines to come to grips with their ambivalent heritage of an officially repressed sex-

uality, a society where the male is the active performer and the women the passive comptrroller, both hiding their deepest feelings, and an intrinsically hedonistic way of life.

To take this movement one step further, Argentina will need to promote formal and informal sexual education that:

goes beyond the narrow subject of reproduction to include a discussion of sexual feelings and fantasies, pleasures, beliefs, superstitions, and dysfunctions. It must further discuss sexual attitudes in different societies and historic periods, erotic art, sex legislation, and indeed "sexual politics." Finally it can't be restricted to children, but must address itself to the whole population.⁶⁴

12. Sex Research and Advanced Professional Education

Some limited research is being currently conducted on aspects of human sexuality in Argentina. These include:

- Contraception, focusing on investigations of the effectiveness of different contraceptive methods, their side effects, and the number of users, as well as surgical procedures for sterilization.
- Sexually transmitted diseases.
- Sexual behavior. Schools of psychology are currently supporting dissertation research on male, female, and child prostitution, sexual violence (rape, incest, and spousal abuse), and homosexuality. Because the results of these studies seldom reach large masses and have little impact on the population's attitudes toward diverse sexual behaviors, popular magazines and journals regularly support surveys of their own.
- Sexual dysfunctions, such as impotence, premature ejaculation, lack of orgasmic response, and aversion to sexual intercourse. Such studies usually follow the approach proposed by William Masters, Virginia Johnson, and Helen Singer Kaplan. Unfortunately, few urologists and gynecologists are informed or prepared to assist in these types of problems.

As mentioned in the section on education, very little is being done in Argentina at the university level to meet the needs of an increasingly sophisticated population with an advanced formation of professionals and technicians. Medical and paramedical personnel, along with judges, lawyers, and teachers, are increasingly aware of their need for advanced education on sexual issues and topics. They frequently feel at a loss when asked to render a judgment or verdict, or to provide guidance or information on sexual issues.

Professionals interested in advancing their own sexual knowledge, as well as contributing to sexological research, can now voice their interests and convey their suggestions to the public and to government officials and agencies through the Sociedad Argentina de Sexualidad Humana. Address: Dr. León Guimdim, Director, Darragueira 2247, P.B. "B," 1425 Buenos Aires, Argentina.

Epilogue

Argentina is a society in transition. The rigid and hypocritical sexual mores of her past have created a double standard for males and females in Argentine society, and a double standard for women themselves that separated the virgin vestals of the households from the pleasure providers. Slowly, women and youngsters are creating more equitable, honest, and open relationships between and within the two genres. They are also seeking a difficult balance between the need to give free expression to their sexual drive and keep it alive during the whole life span, and the need to

build responsible, stable, and healthy households. Men are slowly joining the efforts and starting to perceive the benefits that the changes are bringing to them too.

Will these changes end all traces of a repressive, unjust, and often violent past? Will they finally bring integration and harmony to the sexual field, and contribute to pacifying and developing the entire Argentine society? Only the future will tell.

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1. A reference to the constellation, the Southern Cross, that can be seen from under Southern hemisphere skies. The verses on a free translation and arrangement by the translator are from a long poem by an Argentine poet, Horacio G. Rava, *The son of America*, Tucuman (Argentina): Sociedad Sarmiento, 1961.
 2. Mariella Mazzotti, Graciela Pujol, and Carmen Terra, *Una realidad silenciada. Sexualidad y maternidad en mujeres catolicas*. Montevideo: Editorial Trilice, 1944.
 3. Data on immigrants taken from the article on Argentina in *Funk & Wagnalls's new encyclopedia*, vol. 2 (Funk & Wagnalls's, New York, 1979), p. 234. Data on population by 1850 is from David Rock, *Argentina 1516-1987: From Spanish colonization to Alfonsín*. Berkeley and Los Angeles: University of California Press, 1987, p. 132.
 4. World Bank. *World development report 1993*. New York: Oxford University Press, 1993, p. 289.
 5. Rock, *Argentina 1516-1987*. p. 172. Note between brackets by the author.
 6. *Ibid.*, p. 182.
 7. World Bank, *World development report 1993*, p. 239.
 8. Data is from the World Bank, *World development report 1993*, p. 295. Figures for primary education are expressed as the ratio of pupils to the population of school-age children. The gross enrollment ratio exceeds 100% because some pupils are younger or older than the country's standard primary school age. The data on secondary-school enrollment are calculated in the same manner. For Argentina, the secondary-school age is considered to be 12 to 17 years. The tertiary enrollment ratio is calculated by dividing the number of pupils enrolled in all postsecondary schools and universities by the population in the 20-to-24 age group.
 9. See Jorge Luis Borges. *El tamaño de Mi Esperanza*. Buenos Aires: Seix Barral, 1993.
 10. As quoted in Chiori Santiago, The tango is more than a dance—It is a moment of truth. *Smithsonian*. November 1993, p. 152.
 11. All the examples are taken from Jose Gobello and Jorge A. Bossio, eds. *Tangos, letras y letristas*. Buenos Aires: Plus Ultra, 1979.
 12. Museta, Mimi, Rodolfo, and Schaunard are characters in the novel, *Scènes la vie de Boheme*, written in 1851 by Henry Murger.
 13. Des Grieux and Manon are characters in the novel, *Manon Lescaut*, written in 1733 by Antoine François Prévost D'Exiles. This reference and the previous show the strong influence of French culture in Argentina, a culture that spilled over from the upper class to the middle classes and reached the suburbs through the tango.
 14. Carlos A. Floria and César A. Garcia Belsunce. *Historia de los Argentinos*, vol. 2. Buenos Aires: Editorial Larousse, 1992, p. 271.
 15. Rock, *Argentina 1516-1987*, p. xxi.
 16. *Ibid.*, p. 118.
 17. Floria and Garcia Belsunce, *Historia de los Argentinos*, p. 140.
 18. Anibal Ponce, *Ambición y Angustia de los adolescentes*. vol. II, p. 537, in Hector P. Agosti, ed., *Obras-completas de Anibal Ponce*. Buenos Aires: Editorial Cartago, 1974.
 19. Teenagers from Jewish families trust a little more their rabbis than teenagers of Catholic families trust their priests. The main reason they give is that priests are not married and have more trouble with their own sexuality than they do.
 20. It is even more surprising to see that the tradition of the *mate* is kept in this time of AIDS. *Mate* is a traditional beverage prepared with the herb *Yerba mate* (*Ibex paraguayensis*), which is native to the Southeast part of South America, a region that includes the northeast of Argentina, Paraguay, and the south of Brazil. The herb is stuffed in a dried and hollowed gourd, covered with water just at its boiling point, and sipped through a metallic straw. The *mate* circulates among people who are socializing, each taking a full gourd of the beverage by turns. Many diseases of the mouth and teeth have been blamed on this custom, which some fear could also transmit AIDS from a person who ignores his or her being a carrier of the virus. *Mate* can indeed be taken also as a tea, but the traditional way in Argentina, Paraguay, and Brazil is as described.
 21. Erwin J. Haerberle, *The sex atlas*. New York: Seabury Press, 1978, p. 452.
 22. *Ibid.*, p. 453.
 23. In trying cases in which the sexual rights of a minor have been violated, some legal districts have decided to hold actual court proceedings with oral testimony. Prior to this, all legal proceedings were transacted through written reports and depositions to the judge, a procedure that placed serious limits and a heavy burden on the judge and the judge's staff. Oral testimony in court allows for elaborations, explanations, and cross-examinations that are not possible with written depositions. Oral testimony can also provide a better understanding of the nature of the crime, its motivations, and its consequences in the life of the minor.
 24. From the tango *Arrabalero*, words by Eduardo Calvo and music by Osvaldo Fresedo, as quoted in Gobello and Bossio, *Tangos, letras y letristas*, p. 24.
 25. Martha Mercader, *Para ser una mujer*. Buenos Aires: Planeta, 1992, p. 286.
 26. A weapon consisting of two or more heavy balls secured to the end of one or more strong cords, hurled to entangle the legs of cattle and other animals.
 27. Hernandez has his *gaucho* hero Martin Fierro condoning the attitude of a woman who became prostitute. Knowing the desperate situation she went through when her partner was sent to the southern armies, he says about her commerce: "What else could the poor woman do to avoid starving to death!"
 28. There is no doubt that the women were considered slaves of the brothel owners, part of their chattel. I will cite just one of the innumerable stories recorded in the literature. This has been taken from Ramón Cortés Conde and E. H. Cortés Conde, *Historia negra de la prostitución*. Buenos Aires: Editorial Plus Ultra, 1978, pp. 135-136. A prostitute in a brothel of Tucumán is sold to another pimp by the pimp who was exploiting her since she was 13. During the transfer, she manages to circumvent the vigilance of her new owner and escapes hidden in a freight train to Buenos Aires where she finds work at a factory. Four years after her flight, the two old pimps find out where she is, wait for her one early morning when she is walking to the factory, beat her savagely, and permanently disfigure her face with a knife.
 29. Rafael Ielpi and Hector Zinni, *Prostitución y Rufianismo*. Buenos Aires: Editorial de la Bandera, 1986, p. 191.
 30. The inhabitants of Buenos Aires are also known as *porteños*, which means those who live at the port. *Machismo* is a Spanish expression for male chauvinism and *macho* means a male with exalted physical and cultural manhood attributes.
 31. Words from the tango, *El patotero sentimental* (*The sentimental brawler*), written by Manuel Romero (1891-1954) and taken from José Gobello & Jorge Bossio, *Tangos, letras y letristas*, p. 168). The words in Spanish are: *En mi vida tuve muchas, muchas minas, pero nunca una mujer*. The word *Nina*, which is a slang expression, could mean a lover or a prostitute; it is a woman with whom one dates or lives, who is part of one's possessions, and whom one may even exploit.
 32. The description of the brothels and the prices paid are taken from Ielpi and Zinni, *Prostitución y Rufianismo*.

33. The article is reproduced in *La Nación*, December 30, 1982, which still is one of Buenos Aires' largest newspapers. During all the decades of the infamous traffic, responsible Argentine newspapers kept denouncing the situation and the corruption of Argentine politicians and bureaucrats who were benefiting from it.
34. Ielpi and Zinni (*Prostitución y Rufianismo*, p. 18) reproduce a typical story included in Londres's book. It describes how traffickers sitting around the family table were discussing with the parents a contract that would guarantee their daughter a job (nature not disclosed) and the family a monthly stipend for three years. The young woman solemnly promises not to shame the family by breaking the contract!
35. Ramón Cortés Conde and E. H. Cortés Conde, *Historia negra de la prostitución*. Buenos Aires: Editorial Plus Ultra, 1978, pp. 145-46.
36. This is a summary of the rules that Ielpi and Zinni, (*Prostitución y Rufianismo*, pp. 29-32), quote from the ordinance Number 27 approved by the city council of Rosario on November 16, 1900.
37. From a report written in 1932 by Dr. Juan Carlos Alvarez for the City Council of Rosario that was considering a shift from regulatory policies that made of Rosario a hotbed of organized prostitution to a policy that would end by closing all the brothels.
38. Martha Mercader, *Belisario en son de guerra*. Buenos Aires: Editorial Planeta, 1984.
39. Martha Mercader, *Para ser una mujer*. Buenos Aires: Editorial Planeta, 1992.
40. Beatriz Guido, *Escandalos y soledades*. Buenos Aires: Editorial Losada, 1970, pp. 63-65.
41. Martha Mercader, *Juana Manuela, mucha mujer*. Buenos Aires: Editorial Planeta, 1983.
42. Robert Lehmann-Nitsche (Victor Borde), *Textos eróticos del Rio de la Plata*. Buenos Aires: Librería Clásica, 1981.
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44. Benjamin Viel and Sofia Kamenetzky, La crisis poblacional en América Latina. *Population Reports, Serie J. Numero 18*. Washington, DC: The George Washington University Medical Center, 1978, p. J-1.
45. *Ibid.*, p. J-4.
46. Population Information Program, Complications of abortion in developing countries. *Population Reports, Series F. Number 7*. Baltimore: The John Hopkins University, July 1980, p. F-144.
47. *Ibid.*, p. F-148.
48. *Ibid.*, p. F-118.
49. World Bank, *Investing in health, world development. Report 1993*. New York: Oxford University Press, p. 115.
50. In Argentina, an institution where sick people or injured persons are given medical or surgical treatment is called a hospital when it is organized and sustained by the state; it is called a *sanatorio* when it is a private undertaking.
51. The statistics have been taken from World Bank, *Investing in health*, pp. 208-209.
52. *Issues in world health, Population reports. Series L; Number 9*. Baltimore: John Hopkins School of Hygiene and Public Health, June 1993, p. 3.
53. *Ibid.*
54. For more details on calculations and statistics that use DALYs, see World Bank, *Investing in health*, pp. 26-27, 213-225.
55. Lucio A. Mansilla. Rige el nuevo plan de lucha contra el SIDA. *La Nación* [Buenos Aires], December 1, 1993, p. 1.
56. James Brooke, In deception and denial, an epidemic looms: AIDS in Latin America. *The New York Times*, January 24, 1993, p. A1.
57. Lucio A. Mansilla, Crece el numero de niños con SIDA. *La Nación* [Buenos Aires], November 25, 1993, p. 18.
58. *Ibid.*
59. *Ibid.*
60. In Argentina, the school year goes from March to November.
61. Fundación por la Calidad y la Participación. Buenos Aires, Argentina: Ciudad de la Paz 2944, 1429. Tel. 544-3535.
62. José Ingenieros, *La psicopatología en el arte*. Buenos Aires: Ramon J. Roggero y Cia, 1950, p. 152.
63. José Ingenieros, *Las fuerzas morales*. Buenos Aires: Or Editorial Futuro, 1947, p. 11.
64. Haeberle, E. *The sex atlas*, p. 478.

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