Sakít o Salà?: The (Post)Colonial Medicalization of the Filipino Homosexual (1916-1976)

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To be submitted to
Central European University
Department of Gender Studies, Department of History

In partial fulfillment of the requirements for the degree of Master of Arts in Gender Studies with Specialization in Women’s and Gender History

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Budapest, Hungary
2017
Abstract

This thesis deals with the history of how native gender variance and same-sexual relations became discursively constructed as Western medicalized homosexuality in the Philippines. Roman Catholicism and Western medicine, two lasting legacies of Spanish and American colonial regimes, worked together in the regulation and reformation of native sexual bodies in the Philippines. While previous scholarship has surmised that the medicalization of homosexuality occurred during U.S. imperial rule, no archival research has been done to explore how and when “homosexuality” became constructed as a disease in the Philippines. This thesis analyzes two of the earliest scientific and medical studies on homosexuality in the Philippines in the 1960s. Using the three intersecting historiographical fields of Filipino (post)colonial medicine, gender and sexuality in Europe and in the colonies, and Filipino LGBTQ+ studies, this thesis, firstly, claims that the process of translating indigenous terms for gender-crossing to Western/Anglo-American constructs like “homosexuality,” “lesbianism,” and “transvestism,” has led to the medicalization of Filipino concepts of gender variance and same-sexual relations. Secondly, this thesis suggests that homosexuality became constructed as a pathological condition, not during the U.S. imperial rule per se, but during the post-1946/post-Independence era. Homosexuality, as an illness, was seen as manifesting itself on the body and in the mind.
Declaration of Original Research and Word Count

I hereby declare that this thesis is the result of original research; it contains no materials accepted for any other degree in any other institution and no materials previously written and/or published by another person, except where appropriate acknowledgment is made in the form of bibliographical reference.

I further declare that the following word count for this thesis are accurate:

Body of thesis (all chapters excluding notes, references, appendices, etc.): 33,321 words
Entire manuscript: 36,509 words

Signed by: Kiel Ramos Suarez
Acknowledgements

I thank Professors Tom Laqueur and Emese Lafferton, for their guidance when I was doing an earlier version of this work in the spring of 2016 in Budapest. I also thank Professors Warwick Anderson, Julius Bautista, Mina Roces, Mr. Telly Paradela, and Ms. Diana Padilla, who all patiently responded to my consultation requests through email. I thank Professors Merce Planta, Eric Manalastas, Neil Garcia and Martin Manalansan IV, for giving me an opportunity to consult with them when I was in Manila in July 2016. I also thank Professors Thomas Fröschl and Felix Bergmeister, for my consultations with them at the University of Vienna. I express my gratitude to the staff members and archivists of the American Historical Collection at the Ateneo de Manila University; the National Center for Mental Health Library; the National Library of the Philippines; the University of the Philippines-Diliman Main Library; the Dr. F.B. Herrera Jr., Medical Library at the University of the Philippines-Manila College of Medicine; and the University of Santo Tomas Miguel de Benavides Library.

I express my deep gratitude to my supervisor, Professor Francisca de Haan, for her patience in reading my research journal entries; for our conversations in Skype in whichever part of the world we were; and for her invaluable pieces of advice that guided me throughout this thesis-writing journey. I thank (Professor) Christine Klapeer, my secondary supervisor, for her guidance, insights, and intellectually stimulating questions. Ultimately, I thank my family and friends for their love and support since day one.
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1. Introduction

In the early 1990s, when the initial cases of the Acquired Immune Deficiency Syndrome (AIDS) were being diagnosed in the Philippines, Filipino medical anthropologist Michael Tan published an article entitled “Sickness and Sin: Medical and Religious Stigmatization of Homosexuality in the Philippines” (1994). In this article, Tan attempts to determine when male and female “homosexuality” became constructed as a pathological condition in Philippine history. He claimed, “[t]here is practically no research available for the Philippine situation, but one could assume that the labeling of homosexuality as a disease was introduced to the Philippines during the U.S. occupation, since the Spaniards had barely started extending medical education to the natives.”¹ In 1996, Filipino scholar J. Neil Garcia published his work, The Philippine Gay Culture: The Last Thirty Years, Binabae to Bakla, Silahis to MSM, in which he surmises that it was during the U.S. imperial rule that the medicalization of homosexuality occurred, as it was in this period that Western psychology permeated Philippine education.²

More than twenty years have passed since the publication of these two works, but to the best of my knowledge, there is still no comprehensive historical research that addresses this particular question: how and when did male and female homosexuality become a “disease” in the Philippines? This research, then, by and large, is an attempt to find answers to this historical question, through the use of relevant approaches, methodologies and theories in the fields of History, Colonial and Post-Colonial Studies, and Gender and Sexuality Studies.

Tan and Garcia’s assumption of “homosexuality” being labeled as a disease during U.S. imperial rule in the Philippines seems plausible. In fact, historians of medicine argue that it was during U.S. imperial rule that the “colonial medicalization” of the Philippines took place. The U.S. imperial government instituted the public health system in the “Philippine Islands” beginning in the early 1900s. This institutionalization of the public health system was a result of, and a response to, conditions that were apparent at the turn of the 19th and 20th centuries - an era of transition from the three-hundred year rule of Spain, to the nearly half a century of American rule. During this transition period, the Philippines faced threats of “tropical” illnesses, epidemics, shortage of food and water, and the deaths of thousands. U.S. imperial officials framed this “epidemiological state” of the country at the time as a phenomenon that warranted imperial intervention. Following the precepts of the so-called “civilizing mission,” U.S. imperial officials used medicine and public health as strategies of military and colonial governance. As Filipino historian Reynaldo Ileto argues, “[t]he image of the conquering [American] soldier, transformed into that of the crusading sanitary inspector.” Here, reforming both the Filipino nation and body, in medical and hygienic terms, became an important step in the attainment of Filipino “self-government.”

A critical question then follows: if the U.S. imperial government launched the public health system as a primary colonial project during this time, was “sexuality” a part of the process

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3 There exists an extensive body of literature on the history of “colonial medicalization” of the Philippines under U.S. imperial rule, as exemplified by the works of Filipino scholars like Julius Bautista, Mercedes Planta, Ronaldo Mactal and the Australian scholar Warwick Anderson. I discuss this in Chapter 3.

4 This was the name the U.S. imperial officials used for the Philippines in various colonial archival documents in the early 1900s.


6 Scholar Warwick Anderson, in his work, Colonial Pathologies: American Tropical Medicine, Race, and Hygiene in the Philippines, discusses how the U.S. imperial government framed “cultural” and “corporeal” transformations as crucial in granting “independence” and sovereignty to Filipinos in the early twentieth century. See Warwick Anderson. Colonial Pathologies: American Tropical Medicine, Race, and Hygiene in the Philippines. (USA: Duke University Press, 2006), 3.
of what historians call, “colonial medicalization”? In other words, did medical discourses during the U.S. imperial rule include the issue of “homosexuality”, as Tan and Garcia assumed in the 1990s? In 1992, Peter Conrad, an American medical sociologist, defined *medicalization* as “a process by which nonmedical problems become defined and treated as medical problems, usually in terms of illnesses or disorders.” If such a process occurs in a given society, what, then, happens when a supposedly “non-medical problem,” such as “homosexuality,” enters the discourse of medicine in a (post)colonial setting? In 1999, UC Irvine Professor Jennifer Terry published her work, *An American Obsession: Science, Medicine and Homosexuality in Modern Society*, wherein she discusses the “obsessive” historical medicalization of homosexuality in the United States. If “homosexuality” has been articulated, defined, and treated as a medical disease in the United States during the nineteenth and twentieth centuries, how does this relate to the case of the American-colonial Philippines?

Colonial legacies of both Spain and the United States, such as Roman Catholicism and Western medicine, overlap in many areas in contemporary Filipino society. For instance, the Catholic Church in the Philippines, has, in recent years, used medical vocabulary in formulating discourses around “homosexuality.” I argue that looking into this very process of (post)colonial medicalization is crucial in the writing of Filipino LGBTQ+ history.

In my visits to six (post)colonial archives in Manila in July 2016, I found that the two earliest recorded scientific and medical studies on homosexuality in the Philippines were published in the post-Independence era, and not during the period of U.S. imperial rule, as Tan

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(1992) and Garcia (1996) assumed. The primary aim of this thesis is to analyze these two texts by Filipino doctor Rosario Aquino (1965), and American anthropologist Donn V. Hart (1968). In this thesis, I seek to claim four key points. Firstly, based on these two texts, homosexuality in the Philippines became constructed as a disease not during the American colonial era, but during the post-Independence era, specifically in the 1960s. Secondly, native Filipino terms for gender variance and same-sexual relations became discursively associated with Western medicalized homosexuality. Lastly, homosexuality, as a disease, supposedly manifests itself on the body and in the mind. Such view on homosexuality as a somatic and mental disorder reflects dominant sexological thought that originated in Western Europe.

1.1. Methodology and Sources

The method that I use in analyzing Aquino’s and Hart’s texts is “historical close reading.” In their work, North American literary critics Frank Letricchia and Andrew DuBois define such a method as reading primary texts with “special attention, depth, precision, [and] acuity” and also by placing them in their proper historical time and space.11

During the course of this research, I visited six libraries/archival centers in Manila, the Philippines, namely, the American Historical Collection at the Ateneo de Manila University; the National Center for Mental Health Library; the National Library of the Philippines; the University of the Philippines-Diliman Main Library; the Dr. F.B. Herrera Jr., Medical Library at the University of the Philippines-Manila College of Medicine; and the University of Santo Tomas Miguel de Benavides Library.

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In my visit to the University of Santo Tomas Heritage Library, I came across a book published by the Manila Bureau of Printing in 1916. This book contains information on the laws promulgated by the U.S. imperial government in the Philippines. In Article XII, Section 850 in the “Administrative Code of the Philippine Islands,” a particular law states that a national government hospital for the “insane” must be established in the Philippines. The imperial law lists down the qualities of a person inflicted with a “mental illness.” Here, the term “perversion” presents itself as one determining characteristic of an “insane person.” In 1925, the U.S. imperial government founded the Insular Psychopathic Hospital, the first national hospital for mental health. Presently, the “Insular Psychopathic Hospital” is known as the National Center for Mental Health (NCMH). In July 2016, I visited the NCMH to inquire about their archival center. Dr. Joeffrey Cruzada, the head librarian, informed me that when they renovated the library recently, they threw away the psychiatric journals and psychiatry textbooks which were produced during the early part of the 20th century, as well as the old records about the history of the NCMH. All that was left were recent journals, and the earliest copies are from the 1960s. “Alam mo naman ang mga Pinoy, walang (paki)alam sa history nila.” (You know how Filipinos are. They don’t care about/know their own history.), Dr. Cruzada told me, as he explained that the sources had to be thrown away, as “there was not enough space to keep them.”

In my search for scientific and medical literature on homosexuality in the Philippines in other archival centers, I surveyed a number of medical journals published during the American colonial era and in the post-Independence period, from the 1900s until the 1970s, namely, The Journal of the Philippine Islands Medical Association and the Journal of Philippine Private

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13 Joeffrey Cruzada, interview by Kiel Ramos Suarez, 12 July 2016, National Center for Mental Health, Mandaluyong City, the Philippines.
Medical Practitioners. These journal articles were mostly written in English. These two medical publications mainly discuss diseases, such as leprosy, malaria and cholera that plagued the colonial Philippines during that time. I have found five scientific and medical studies that contain discourses on homosexuality in the Philippines, but all from 1965 and later. I highlight them below.

Among those five publications, only two of them provide comprehensive and detailed descriptions of homosexuality being a pathological condition. These are the works of Aquino (1965) and Hart (1968), which I will analyze in Chapters 4 and 5.

In 1969, two clinical psychologists published a comparative analysis of homosexuality in the Philippines and in the United States. Lee Sechrest, an American psychologist from Northwestern University, Illinois, and Luis Flores, a Filipino psychologist from the University of the Philippines, conducted a collaborative study about the so-called male “homosexual inscriptions” on the walls of public toilets in the metropolitan areas of Chicago and Manila. The study entitled, “Homosexuality in the Philippines and the United States: The Handwriting on the Wall,” contains 10 pages, and it is also written in English. In their study supported by the U.S. National Institute of Mental Health, Sechrest and Flores claim that the incidence of “conflict concerning homosexuality” manifests itself in graffiti found on toilet walls. In their work, they claim that the main indicators in identifying inscriptions as reflective of homosexual messages are “handwriting, thematic consistency, and proximity, color, and size of the inscription.” It is unclear in the document, however, how the authors used such indicators to explain their findings.

14 English was first introduced in the Philippines during the early 1900s, when the language became a medium of instruction in Philippine educational institutions. It was declared as an official language, alongside Spanish, in the 1930s. English operates as an official language in the Philippines today, together with Filipino. See Teodoro Agoncillo. History of the Filipino People, 8th ed. Quezon City: Garotech Publishing, 1990), 372.
16 Ibid, 5.
No information is available about the age, sex, gender, class, educational background of the subjects who allegedly produced the “homosexual” inscriptions. Sechrest and Flores also fail to provide evidence of any valid statistical data.\textsuperscript{17} While the authors acknowledge that their data, as well as the methods they used are “weak,” they proceed to provide the following seemingly conclusive assumptions. Firstly, based on their analysis of the said toilet wall inscriptions, Sechrest and Flores assume that “conflict concerning homosexuality is considerably less frequent in the Philippines than in the United States,”\textsuperscript{18} without however explaining how they came up with such a declarative assumption, given their insufficient data and questionable methods. Moreover, the authors do not indicate their reasons for comparing the the Philippines with the United States. They do not mention the history of U.S. imperialism in the Philippines, which I argue to be a crucial in undertaking a comparative analysis between the two countries. Secondly, the authors claim that in the Philippines, “reports of homosexual activity among patients [afflicted with mental illness] are rare.”\textsuperscript{19} According to the authors, “reports of overt homosexuality are not inordinately frequent.”\textsuperscript{20} Based on these statements, the authors conclude that homosexuality is “more prevalent” in the United States than in the Philippines, and that conflict concerning homosexual behavior is higher in the U.S. sample. Lastly, Sechrest and Flores’ study focuses mainly on male homosexuality, and neglects to include an analysis of female homosexual toilet wall inscriptions. The authors explain that this was because “collecting data for female conveniences is wearing and frustrating.”\textsuperscript{21}

\textsuperscript{17} In their study, Sechrest and Flores went to 73 locations in the Chicago sample and analyzed 662 inscriptions. In Manila, they went to 74 locations and analyzed 1,327 inscriptions. See Sechrest and Flores, “Homosexuality in the Philippines and the United States,” 6.
\textsuperscript{18} \textit{Ibid}, 8.
\textsuperscript{19} \textit{Ibid}, 9.
\textsuperscript{20} \textit{Ibid}.
\textsuperscript{21} \textit{Ibid}, 11.
While I claim that Sechrest and Flores’ results are inconclusive and their methods are highly questionable, their study reveals two critical issues for this thesis. Firstly, the study of homosexuality in the Philippines clearly became a scientific and psychological issue, given that the two scholars were trained clinical psychologists who were producers of medicalized discourse. Secondly, the authors used the local terms *bakla* to mean homosexual men, and *mag-darling* to refer to “a girl who has a crush on another girl.”

Here, the meanings of the native terms for gender-crossing and same-sexual relations become intricately associated with the Western medicalized concept of homosexuality. I do not include Sechrest and Flores’ study in my analysis, since the authors do not provide substantial information on how homosexuality became constructed as a pathological condition in the Philippines. Moreover, they offer no scientific explanations for the origins of homosexuality.

In 1973, a Filipino psychiatrist named Lourdes V. Lapuz (1925-2017), published a 312-page book entitled, *A Study of Psychopathology.* Lapuz, an alumna of the University of the Philippines (U.P.) College of Medicine, underwent training in State University of New York and taught at the University of Hawai’i East-West Center in the 1950s. At the time of the publication of her work, Lapuz was the head of the Department of Psychiatry at the U.P. College of Medicine. Lapuz’ study, which was done from 1961 to 1967, presents clinical cases of Filipinos who were interviewed and diagnosed with certain “psychological illnesses” by Lapuz herself in her psychiatric office located in Manila. Lapuz claims that it was only in the 1960s that “the emotionally or mentally disturbed person has been given the status of ‘a patient’ needing

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22 The term *mag-darling* which means “like darlings,” is usually attributed to female same-sexual relations in the Tagalog language. Tagalog is one of the most common languages spoken in Luzon, in the Northern Philippines. *Ibid,* 9.


psychiatric investigation and help.”25 Lapuz states that “the techniques employed toward this end are largely borrowed from the West,” and that she uses the first edition of the *Diagnostic and Statistical Manual* (DSM-I) of the American Psychiatric Association as the “principal reference” of her study.26 Following the DSM-I, Lapuz lists “homosexuality” under the category “sociopathic disorder.”27 Under such heading, Lapuz notes that she gave psychiatric treatment to four men and one woman who allegedly sought cure for their homosexuality.28 While Lapuz’ work is critical in the history of (post)colonial psychiatry in the Philippines, it only touches upon the issue of homosexuality very briefly. Lapuz fails to provide any definition of homosexuality, as well as scientific and medical explanations for homosexual behavior.29 What I intend to draw from Lapuz’ work for this research, nevertheless, is three crucial issues. Firstly, it is evident in Lapuz’ study that Lapuz borrowed from Western models of psychiatric thought in her attempt to give psychiatric treatment to Filipino patients. It is crucial to note that the year when Lapuz published her study, 1973, is the same year when the American Psychiatric Association removed “homosexuality” as a mental disorder from the DSM.30 Therefore, it is plausible to assume that by the time homosexuality was de-listed as a form of psychological illness in the United States based on the grounds of the usage of the DSM-II, the discourse of homosexuality as a sociopathic disorder was only beginning to proliferate in the Philippines.31 Secondly, Lapuz’ work shows that Filipino doctors during the 1960s to the 1970s gave psychiatric treatment to Filipino “homosexual” men and women. Lapuz, in her book, explains in detail how she used

25 I include a discussion on the history of (post)colonial psychiatry in the Philippines in Chapter 2. See Lapuz, A Study of Psychopathology, 13.
27 Ibid, 16.
28 Ibid.
29 Ibid, 229.
30 I discuss the context of the (de)pathologization of homosexuality in the United States and in the Philippines in my historical background chapter.
31 Further studies are needed to substantiate this claim. Nevertheless, based on my own research and interpretation, I assume that this may be a possibility.
“psychoanalytic psychotherapy” in treating patients afflicted with mental illnesses. Therefore, as shown in Lapuz study, Filipino doctors at the time employed Western models of psychiatry and psychoanalysis in giving medical and psychiatric treatment to Filipino patients.\textsuperscript{32} Thirdly, in one of the case histories that Lapuz presents in her study, Lapuz used “homosexual” as a direct translation of \textit{bakla}.\textsuperscript{33} Therefore, I argue that Lapuz’ usage of the terms \textit{bakla} and homosexual as equivalents fits Garcia’s later proposed \textit{bakla}/homosexual model.

In my visit to the (post)colonial medical archives located at the U.P. College of Medicine Library in July 2016, I found a study published in 1976 in \textit{The Philippine Journal of Mental Health} entitled, “Philippine Culture Patterns and Psychopathology” which was written by Irish philosopher-priest Gerard J. Pierse.\textsuperscript{34} This article contains six pages. It is written mainly in English. At the time of the publication of his work, Pierse was a member of the Board of Directors of the Philippine Mental Health Association in Butuan City, a city in Mindanao. He was ordained as a priest in Cebu in 1964, and served 9 years doing pastoral work in the regions of Visayas and Mindanao. In his work, Fr. Pierse highlights “culture” as a “mental construct.”\textsuperscript{35} Fr. Pierse does not include any comprehensive discussion on medicalized homosexuality in the

\textsuperscript{32} \textit{Lapuz, A Study of Psychopathology}, 170-219.

\textsuperscript{33} In one psychiatric case history, Lapuz narrates the story of a certain patient with a pseudonym of P.W., an 18-year old male university student who went to an all-men’s school run by priests. P.W., according to Lapuz, experienced “sudden dizziness” and “blacking out” while in school. P.W. sought for psychiatric help from Lapuz. Lapuz narrates that when P.W. was in high school, he was “very much attracted to a slightly older boy who was more active and outgoing than he was.” Lapuz quotes P.W. when he said, “It was almost as if I had a crush on him and I got frightened, thinking I might be a \textit{bakla} (homosexual).” See \textit{Lapuz, A Study of Psychopathology}, 267.

\textsuperscript{34} \textit{The Philippine Journal of Mental Health} is the official publication of The Philippine Mental Health Association. See Gerard Pierse, “Philippine Culture Patterns and Psychopathology,” \textit{Philippine Journal of Mental Health} 7, no. 1 (1976) : 41-46.

\textsuperscript{35} \textit{Ibid}, 41.
Philippines. He merely juxtaposes the native words *bacla* and *agi* which refer to male gender-crossers in the Philippines, with “sexual deviation.”

1.2. Terminology

In this subchapter, I strive to explain the meanings of the terms that I use frequently in this study. The full title of this research is, “*Sakít o Salá?: The (Post)Colonial Medicalization of the Filipino Homosexual (1916-1978)*.”

I use the Filipino (Tagalog) word “*sakít*”, which roughly translates in English as “illness” or “disease.” This term, however, presents a myriad of meanings when used colloquially. *Sakít* could also mean “pain”, whether physiologically or emotionally. Depending on how you pronounce *sakit*, meanings may also differ, although not entirely. The same word, *sâkit*, but with the stress placed on the first syllable, means “suffering.” For this study, I use the word *sakít* loosely to refer to “illness,” “disease,” “pain,” “suffering,” “sacrifice,” “burden,” or “heartbreak.” To give an example, it is not uncommon to hear Filipino parents saying that it is “*masakít*” (painful) to learn that their child is a “homosexual.” Here, the word *sakít* may function as an “illness” on the part of the “homosexual,” while the same word can also mean “heartbreak” for Filipino family members who are informed about their loved one’s “homosexuality.”

Next, I use the Filipino word “*salá*.” *Salá* is roughly translated in English as “sin.” *Salá* often has religious connotations, but it can also refer to secular matters. *Salá* may also refer to

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36 *Agí* is another local term (Hiligaynon or Ilonggo) for male gender-crossers who engage in same-sexual relations. Hiligaynon and Ilonggo are two common languages spoken in the Central Philippines.

37 Pierse argues that, “I do not speak here of sexual deviation which is very rare in the Philippines but of the preoccupation with masculinity. Before I came to the Philippines, I never heard masculinity discussed, but here we come across it infrequently. ‘Why do you have such effeminate curtains in your office?’ ‘You carry your books like a girl.’ We so often hear of the bacla and agi. Because of the need to prove masculinity, marital infidelity, which exists in all culture[s], is almost a status symbol in the Philippines.” I do not provide textual analysis of Pierse’s work in this thesis, but I propose that further studies must be done on this matter. Ibid, 46.

38 e.g. *Ang sakít ng ulo ko.* “My head hurts.” ; *Ang sakít naman sa puso.* “It breaks my heart.”

39 e.g. *Nagkasala ako sa Diyos.* “I sinned against God.” ; *May kasalanan ako sayo.* “I did something against you.”
ideas of “perversion”, “defect”, and “falsehood”, among others. This may be an example of what American historian John Leddy Phelan suggests, that the boundaries of the ideologically constructed categories of the *sacred* and the *profane* are obscured in Filipino culture.\(^{40}\) For this study, I use *salà*, quite loosely, to refer to “sin” or an “act of transgression.”

I then place these two words, *sakít* and *salà*, to form a question: *Sakít o Salà?* (Is it an “illness” or a “sin”?\(^{41}\)). Although I derived this formulation mainly from Michael Tan’s “Sickness and Sin” and Bautista and Planta’s “The Sacred and the Sanitary,” I use the Filipino words to exemplify the range of meanings embedded in the Filipino language that are left out in the usage of their English counterparts. By using the words *sakít* and *salà*, I aim to show the blurring of boundaries between “medicine and religion”, the “religious” and the “secular”, as well as the “sacred” and the “profane.” I phrase it as a question in the attempt to undermine the very act of placing the medicalization issue of “homosexuality” into the medicine/religion, the religious/secular and the sacred/profane binaries. Instead of merely juxtaposing *salà* and *sakít*, I place a question mark (?), in order to show that these words, like medicine and religion, have permeable boundaries. In this thesis, however, I focus my analysis on the issue of medicalization. I do not endeavor to investigate on both the religious and medical discourses on homosexuality. In using *sakít* and *salà* for this thesis, I highlight the claim that in the history of homosexuality in the Philippines, religion and medicine intertwine.

With regard to the time period as represented in my title, I enclose the word “post” in parentheses to show that there exist both continuities and discontinuities between the colonial period and the post-Independence era. The time period of this study stretches from the U.S. imperial rule, which succeeded the three hundred-year Spanish colonial regime, towards the

period after the 1946 Independence. Certainly, such periods of transition from a colonial, to a
postcolonial society are not devoid of ruptures. I seek to represent such convergences and
divergences by the mere act of placing parenthetical marks on the term “post.” Moreover, in an
attempt to minimize confusion, I use “post-Independence” to refer specifically to the time period
after 1946, and I use “postcolonial” as an adjective to refer to legacies of colonial rule.

Next, I refer to American medical sociologist Peter Conrad’s definition of
“medicalization.” As mentioned earlier in the introduction, Conrad defines medicalization as “a
process by which nonmedical problems become defined and treated as medical problems, usually
in terms of illnesses or disorders.” I also draw from what Foucault has argued about the
discursive shift from “sin and salvation” to “bodies and life processes – the discourse of science”
in late 19th-century Europe. Finally, in juxtaposing “(post)colonial” and “medicalization”, I use
scholars Julius Bautista and Merce Planta’s definition of “colonial medicalization,” wherein
medicine functions as an arm of colonialism. I explain this in detail in Chapter 3. While
“medicalization” and “pathologization” are synonymous terms, I use “pathologization,” quite
loosely, to emphasize the negative effects of constructing a certain condition as an illness,
disease, or disorder.

Finally, I use the term “homosexual.” In The History of Sexuality: An Introduction,
Michel Foucault describes “homosexuality” as “one of the forms of sexuality [that] was
transposed from the practice of sodomy onto a kind of interior androgyny, a hermaphrodisim of
the soul. The sodomite had been a temporary aberration; the homosexual was now a species.”
A number of historians of sexuality have problematized this Foucauldian assumption of the

42 Foucault, The History of Sexuality, 64.
44 Foucault, The History of Sexuality, 43.
emergence of the “homosexual” as a “species” in nineteenth-century European societies. American scholar David Halpern, in his work, “How to Do the History of Male Homosexuality,” argues that the present-day meaning of “homosexuality” is “an effect of [a] cumulative process of historical overlay and accretion.” The usage of English words such as “homosexuality”, “sodomy”, “perversion” and “inversion”, “gay”, “lesbian”, “LGBTQ+”, among others, in discourses in the Philippines, in itself, deserves an entire historical account of its own. In the attempt to avoid misconceptions in using the “homosexuality” to refer to indigenous concepts of non-normative gendered identities and sexualities, I use “gender variance,” “gender-crossing” and “same-sexual relations/practices.” I discuss how I conceptualize the intricacies of Western homosexuality and native Filipino terms for gender variance and same-sexual activities in Chapter 3.

1.3. Scope and Limitations of the Study

In this study, I face two key limitations. Firstly, while I am dealing with the post-Independence era, I recognize that I am unable to account for the legacies of Japanese imperialism in the Philippines during the Second World War (1942-1945). Homosexual discourses during the era of the Japanese Occupation, I believe, deserve separate historical research. Secondly, I recognize that I am unable to include the issue of Islam in the history of homosexuality in the Philippines. As I have noted in Chapter 2, historically, Spanish colonial rule and Catholic religious conquest did not gain strong foothold in Mindanao, the southern part of the Philippines, where Islam is the dominant religion. Further study is needed in order to

account for the influence of science and medicine in the discourse of Filipino gender variance and same-sexual relations in dominantly Muslim territories in the Philippines.

Moreover, in speaking about “the Philippines” for this study, I do not wish to place each and every Filipino, ethno-linguistic group, indigenous community, socio-cultural, political, regional and religious group, under one single, homogenous, un-hybridized and simplified classification. The term “Filipino” itself possesses a long history, which goes far back in time during the Spanish colonial regime.46 What I aim in this study, therefore, is to acknowledge the immense difficulty of dealing with such a complex and heterogeneous culture as Filipino culture. Historically, colonialism and imperialism, during both the Spanish and U.S. colonial era, were never absolute, since both colonial administrations only managed to subjugate portions of the archipelago. Some parts of the country were under both colonial regimes, especially Manila, the nation’s capital city; however, some areas were subjected to only one colonial administration. The issue of Filipino indigenous peoples (IPs) complicates this further.

In studying Philippine history, one is confronted with an incredibly diverse nation, whose territory comprises more than 7,500 islands; whose inhabitants speak more than one hundred languages, and whose population is loosely classified both culturally and politically into more than a hundred ethnic and ethno-linguistic groups. Furthermore, another important category of analysis in the study of Philippine history is class. Differences in socio-economic status are apparent in Filipino society historically. Therefore, for this study, I seek to avoid the mistake of overlooking such “irreducible hybridity” of Filipinos in every possible aspect in society, may it be political, social, cultural, religious, economic, geographical, linguistic, racial, gendered or

46 The term “Filipino” used to refer to the population of insulares, the Spanish people who were born in the Philippine islands during the Spanish colonial era. At the time, native inhabitants of the islands were referred to as indios. Filipino historians, like Teodoro Agoncillo, have argued that the shift from “indio” to “Filipino” reflects the claiming of a “unified form of nationhood”, or the “consolidation of the people’s nationalist consciousness.” See Agoncillo, “From Indio to ‘Filipino’”, History of the Filipino People, 102-126.
sexual. In writing the history of gender and sexuality in the Philippines, one must bear in mind that conceptions of gender, gender relations and sexuality vary from Batanes (the northernmost point of the archipelago) to Tawi-Tawi (the southernmost point).

1.4. Structure of the Thesis

Excluding the introduction and the conclusion, this thesis has four chapters. In Chapter 2, I begin my discussion of the historical context of this study. In Chapter 3, I discuss how I aim to use the intersecting theoretical and historiographical fields of Filipino (post)colonial medicine, gender and sexuality in Europe and in the colonies, and Filipino LGBTQ+ studies in my analysis of the two earliest known scientific and medical studies on homosexuality in the Philippines. In Chapter 4, I focus on my analysis of Aquino’s and Hart’s texts, exploring their scientific and medical descriptions of pathological male and female homosexual bodies in the Philippines. I show how these texts narrate the scientific causes of homosexuality. In Chapter 5, I focus on Aquino’s text specifically. I discuss how in her work, Aquino constructs homosexuality as a disease of the mind. I do not provide an analysis of Hart’s text for this chapter, since Hart’s study does not provide an extensive description of homosexuality as a mental illness. Chapter 6 covers the conclusions and recommendations. In this concluding chapter, I attempt to draw these threads together and sum up my findings about how homosexuality became constructed as both a bodily disorder and disease of the mind in the post-Independence Philippines.
2. Historical Background: Medicine, Gender, Sexuality, and Empire in the Colonial and Post-Independence Philippines (900 C.E. - 2016)

2.1. Introduction

For this chapter, my aim is to provide the historical background upon which I build my own study. In Chapter 2.2, I narrate a general outline of important turning points in Philippine history, starting from ancient Filipino society, to the establishment of Spanish and American colonial regimes, and ending with the post-Independence era – the period of the so-called Third Republic. In Chapter 2.3, I begin my discussion of the history of the Babaylan/Katalonan, a leader in ancient Filipino society who performed medical and spiritual functions. I narrate the male Babaylan/Katalonan as an important historical figure in Filipino LGBTQ+ history, since the male Babaylan/Katalonan is believed to have performed “gender-crossing” practices in order to fulfill their leadership roles in ancient Filipino society. Moreover, I situate the history of the Babaylan/Katalonan in the history of medicine in the Philippines, given that the Babaylan/Katalonan performed medical duties in ancient Filipino rites. In Chapter 2.4, I narrate the history of Roman Catholicism in the Spanish-colonial Philippines through my focus on the “confesionarios,” a series of manuals produced by Spanish clerics in the Philippines that imposed certain normative religious and “moral” codes of conduct through the practice of Catholic confession. I discuss the impact of the confesionarios on the discursive reformation of native Filipino sexual bodies. In Chapter 2.5, I narrate the establishment of U.S. imperialism in the Philippines with a strong focus on the colonial public health system and its consequences in the medicalization of discourses on sexuality. I also discuss the emergence of psychiatric institutions in the Philippines during the American colonial regime. In Chapter 2.6, I briefly discuss the history of science, medicine, and homosexuality in the post-Independence
Philippines. As this thesis seeks to show, during this time, Filipino same-sexual relations and behavior became equated to the Westernized notion of medicalized homosexuality. I narrate the context of the production of studies on homosexuality during the 1960s to the 1970s in the Philippines. I discuss briefly the rising prominence of the fields of psychology and psychiatry during this period, which I assume to be a major influence in the production of discourses on homosexuality. I set the history of (de)pathologizing homosexuality in the Philippines against the background of historical events in the United States. I place my focus on the de-listing of homosexuality as a mental disorder in the DSM-II by the American Psychiatric Association in 1973. Chapter 2.7 covers the conclusion.

2.2. General Outline of Philippine History (900 C.E. - 2016)

The Philippines, an archipelago consisting of approximately 7,500 islands to date, has undergone a long history of colonialism, imperialism, revolutionary struggle, resistance and nation-building. The Philippines is divided into three main islands according to location. The group of islands in the Northern Philippines is called Luzon. The region located in the Central Philippines is called Visayas, while the islands in the southern part of the archipelago belong to the region of Mindanao. The Philippines’ capital city is Manila, where thirteen million people currently reside in.47 The Philippines, at present, has over one hundred million inhabitants all over the archipelago.

Geographically located in the Southeast Asian region, the Philippines traces its history as far back as 900 C.E. The year 900 C.E. marks the estimated year of the earliest archaeological

evidence found in the archipelago.\textsuperscript{48} The year 1380 marks the introduction of Islam in the Southern Philippines, through the initiative of Muslim ruler Raja Baginda.\textsuperscript{49} Religious conversion to Islam spread throughout the archipelago. The year 1521 marks the arrival of the first Spanish fleet, under the leadership of Portuguese naval officer Ferdinand Magellan. The Spanish colonial regime began in 1565, upon the establishment of the first Spanish settlement in the island of Cebu, in the Central Philippines. The arrival of Spanish colonialists in the 16\textsuperscript{th} century led Muslim leaders to practice Islam mainly in Mindanao (in the Southern Philippines), where Spanish colonial rule did not gain strong foothold. Spanish colonization in the Northern and Central Philippines lasted for 333 years, and ended with the success of the Philippine Revolution of 1896. The Revolution lasted until 1898, and in the same year, the Treaty of Paris was signed. The Treaty of Paris formally authorized the cession of former Spanish colonies to the then-rising imperial power, the United States. A war broke out between the newly independent Philippine Republic and the United States in 1899. The Philippine-American War lasted for three years (1899-1902). The Filipinos lost the war, and the year 1902, then, marks the beginning of U.S. imperial rule in the Philippines. The American colonization of the Philippines lasted for 44 years (1902-1946). During World War II, Japan occupied the Philippine archipelago, along with some countries in East and Southeast Asia, from 1942 until 1945. The Philippines gained its liberation from Japan in 1945, and a year later, the country gained its independence from the United States of America. From 1946 onwards, a series of presidencies conventionally known as the “Third Republic” administered the continuing task of “decolonization,” economic-rebuilding, and the establishment of a “truly” Filipino


\textsuperscript{49} \textit{Ibid.}
government. The era following the 1946 Independence has led to political and socio-economic difficulties in the country. According to Filipino historian Teodoro Agoncillo, the late 1960s to the beginning of the 1970s “saw the development of what has been termed student power…[which] was basically anti-government…” These violent student protests, as Agoncillo writes, “led to bloodshed and destruction of life and property.” At that time, apart from dealing with massive student demonstrations, the Philippine government encountered clashes with the Communist Party of the Philippines led by Filipino activist and writer Jose Ma. Sison. The President during this time, Ferdinand E. Marcos, claimed that such conditions prompted his decision of placing the whole Philippines under martial law in September 1972. The dominant slogan at the time of Marcos’ administration was “Bagong Lipunan,” a Filipino phrase which implies the “[creation of a] New Society.” Following the principles of the “New Society” and the “new” social order, the Martial Law regime subjected the Filipino population under direct military surveillance. As Filipino lawyer and scholar Harvey Dychiao notes:

[ Marcos] ordered the arrest of all potential opponents to his Martial law designs – Senators, Congressmen, university professors, journalists, student and labor activists. He imposed an information blackout and issued a ban on all foreign travel, effectively sequestering the country from the rest of the world…He ordered suspension of classes on all levels, and closed schools. He imposed a ban on labor-related strikes and political rallies…he authorized the military, in the absence of formal charges, to take into custody anyone who they might suspect of involvement in activities hostile to the government.

The Martial Law declaration was officially in 1981. In 1983, Senator Benigno, one of the politicians who led the opposition against Marcos, was assassinated upon his return from the U.S., where he had been in exile. Aquino’s assassination prompted the outbreak of mass
demonstrations against Marcos’ dictatorial rule. In 1986, the Filipino people successfully launched what is now known as the “People Power Revolution,” where two million Filipinos took to the streets of Camp Crame and Camp Aguinaldo in Manila. Marcos’ dictatorial regime ended, and the wife of Aquino, Corazon, succeeded Marcos in 1986 and “restored democratic rule.” As Agoncillo writes, “President Aquino proceeded to establish a revolutionary government under the terms of a ‘Freedom Constitution’ which legally established the structure of government, pending the adoption of a democratically-drafted constitution for [Aquino’s] Bagong Demokrasya [‘New Democracy’].”\(^{55}\) A series of administrations followed Aquino’s presidency from 1992 until the second decade of the twenty-first century. Presently, the incumbent Philippine president is Rodrigo Duterte, a former mayor if the city of Davao who is known for his “draconian” policies on the elimination of illegal drug activities in the country.\(^{56}\)

2.3. The Babaylan/Katalonan: The Ancient Filipino Medico-Spiritual Leader

Prior to the advent of Spanish colonization and religious conquest of the Philippines during the sixteenth century, the Babaylan/Katalonan played a prominent role in Filipino society. The Babaylan or Katalonan were leaders of ancient Filipino society who primarily performed medical and spiritual duties.\(^{57}\) Spanish chroniclers documented the existence of the

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55 Agoncillo, History of the Filipino People, 585.
57 In her work, Shamanism, Catholicism and Gender Relations in the Colonial Philippines (1521-1685), Australian historian Carolyn Brewer notes the different linguistic nuances in referring to the Babaylan/Katalonan. Brewer remarks that, “[s]ignifiers from the Visayan area include variations of the double syllable bailan, including baylana, balyan, balian, baliana, or babaylana. From the Tagalog area and to the north of Manila, modifications of catalonan or catalona occur. A more general terminology that seems to be used throughout the archipelago is based on the signifier for the spirit anito. These include maganito and anitera. The men dressed as women who performed the
**Babaylan/Katalonan** in the early years of their colonial rule. For instance, in his work *Las Costumbres de los Tagalogs* (1589), Spanish Franciscan friar Juan de Plansencia writes, “the [Filipinos] had… priests and priestesses, whom the Tagalogs call **Catalonan**, and the Bisayans **Babailan**.”\(^{58}\) Similarly, in his work *Labor Evangelica* published in 1663, Spanish Jesuit priest Francisco Colin writes about the **Babaylan/Katalonan**. Colin claims that:

…they [Filipinos] did not lack priests or priestesses for the sacrifices, which each one offered for his own purpose or necessity. The Tagalogs called these cursed [sic] ministers **catalona**, and the Visayans **babaylan**. Some were priests by inheritance and relationship; others by the dexterity with which they caused themselves to be instructed and substituted in the office of famous priests by gaining their goodwill.\(^{59}\)

While most of what we know about the **Babaylan/Katalonan** comes from Spanish colonial narratives, a number of Filipino scholars have written about the history of the **Babaylan/Katalonan**. For instance, in his article published in 1995, “The Babaylan in Philippine History,” Filipino historian Zeus Salazar notes that the **Babaylan** was the “central personality in ancient Philippine society in the fields of culture, religion and medicine and all kinds of theoretical knowledge about the phenomenon of nature.”\(^{60}\) According to Salazar, when the datu (ancient Filipino chieftain) was not physically present in important socio-political affairs, the **Babaylan/Katalonan** became the political and economic leaders of ancient Filipino society. The **Babaylan/Katalonan**, then, were not only spiritual and medical leaders; they also performed political and economic functions in society.

Animist rituals are recorded as **asog**, **baygor bayoguin**. For their Spanish readership the missionaries occasionally grouped all the above under the labels ‘priestesses’ or ‘priest.’ While Brewer’s ethno-linguistic account of the **Babaylan/Katalonan** may be extensive, I argue that her use of universalizing categories of “shamanism” and “animism” may be problematic, as it homogenizes the Filipino practice of **babaylanism** as a merely a form of “primitive” and “pre-modern” belief in spirits and folk intermediaries. See Carolyn Brewer. *Shamanism, Catholicism and Gender Relations in [the] Colonial Philippines (1521-1685)*. (USA: Ashgate Publishing Company, 2004).

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Aside from being a central figure in the history of Filipino medicine and spirituality, the Babaylan/Katalonan is also a prominent figure in Filipino gender and sexuality history. The Babaylan/Katalonan, according to historical accounts, is a gendered leadership. Most of the Babaylan/Katalonan were women.\textsuperscript{61} However, there were also male Babaylans/Katalonans. In his work, Historia de las islas e indios de Bisayas (1668), Spanish Jesuit priest Francisco Ignacio Alcina describes the Babaylan as “mostly women, not men. And if there was some man who might have been one, he was called asog.”\textsuperscript{62} Alcina describes the asog as “effeminate” and “transvestic.” The male Babaylan/Katalonan, or the asog, performed gender-crossing\textsuperscript{63} in order to officiate spiritual and medical rituals. The asogs also practiced same-sexual relations, and some have been wedded to their fellow men. The leadership and social position of the Babaylan/Katalonan is feminine, and that the performance of gender-crossing in some Filipino cultures “partook of the divine and the spiritual in the people’s cosmology.”\textsuperscript{64} The asogs, like the Babaylan/Katalonan, were respected “as the privileged mediator between the community and the communal spirits and gods.”\textsuperscript{65} The introduction of Roman Catholicism in the Philippines through Spanish colonialism altered the status of the asog and the Babaylan/Katalonan. Early Spanish

\textsuperscript{61} It is unclear in previous and current scholarship why exactly this was the case. The premise is that ancient and early colonial Filipino society places women in a high social position, that is, women occupied social positions of power during this time. The common argument posed by historians is that the status of women changed upon the advent of Spanish colonialism. See the works of Encarnacion Alzona. The Filipino Woman: Her Social, Economic, and Political Status (1565-1937). (Manila: Benipayo Press, 1934) and Lilia Quindoza Santiago. Sexuality and the Filipina. (Quezon City: University of the Philippines Press, 2007).

\textsuperscript{62} Francisco Ignacio Alcina. Historia de las islas e indios de Bisayas (1668) as cited in Garcia, The Philippine Gay Culture, 135.

\textsuperscript{63} Garcia refers to “gender-crossing” as “the kind of cross-dressing traditional non-Western societies observe…gender-crossing is a cultural phenomenon that denotes an almost complete transition from one gender to another; cross-dressing, on the other hand, simply means the donning on of clothes that are supposed to be exclusively worn by members of the opposite sex. Gender-crossing therefore signifies not merely a theatrical but more importantly a kind of ‘ontological’ transformation: although characterized by transvestism, it is not reducible to it inasmuch as it also implies an almost complete ‘crossing-over’ of socially enforced gender roles. Likewise, gender-crossing must be distinguished from inversion because even though the gender-crosser, like the invert, may have professed ‘homosexual’ orientation, he/she did not necessarily become defined as a specific kind of person by virtue of this orientation alone.” Garcia, The Philippine Gay Culture, 126.

\textsuperscript{64} Ibid, 136.

\textsuperscript{65} Ibid, 143.
chronicles describe the practices of the *Babaylan/Katalonan* as works of “the Devil.” In his work, “A Glimpse Into the Asog Experience: A Historical Study on the Homosexual Experience in the Philippines,” Filipino historian Jay Jomar Quintos argues that Spanish colonialism significantly regulated and suppressed the practices of *asog* gender-crossing and same-sexual relations in the Philippines.

The right of men to wed their fellow men was suppressed, and the tradition of the *asog* wearing long skirts and feminine clothes vanished. More than these, men were banned from having sexual relations with fellow men for this ran contrary to the dominant religion anointed by the Spanish.\(^66\) Similarly, in his article, Salazar argues that Spanish colonization made an impact in the lives of the *Babaylan/Katalonan*. Some *Babaylan/Katalonan*, Salazar claims, became assimilated in Catholicism in the process of religious conversion of the natives.\(^67\) Some of the *Babaylan/Katalonan* actively resisted Spanish religious conversion and conquest. They became revolutionaries who founded “messianic” organizations during the Spanish colonial era. The belief and practice of *Babaylanism* persists to this day, typically within indigenous Filipino cultural communities.\(^68\)

### 2.4. Spanish Colonialism and the Reformation of Native Sexual Bodies (1565-1898)

One of the lasting legacies of Spanish colonial rule in the Philippines is the practice of Roman Catholicism. Spanish religious authorities introduced Roman Catholicism in the Philippines in the early years of their colonial rule. Spanish colonial administration went hand-in-hand with religious conquest, and this made an impact on native Filipino understandings of gender and sexuality. A number of Spanish chronicles reveal that in the early colonial era,

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\(^68\) *Ibid.*
Spanish religious authorities were appalled by certain “immoral” and “lewd” practices of the Filipino native population. For instance, Spanish colonial official Antonio de Morga wrote about the existence of “sagras,” or so-called penile implants.

[The sagra] was like a spur [spiked wheel] that was the size of a palm and which was secured to the penis with a metal tube, and inserted into the vagina sideways until it became implanted there during the entire length of the intercourse. A lot of blood was expended by both parties before it could be extricated.69

As Filipino writer Lilia Quindoza Santiago notes in her book, *Sexuality and the Filipina* (2007), “Spain acquired domain over the bodies of its subjects, and the women’s bodies in particular became, like acquired territories, domains to protect and manipulate.”70 In this sense, “the body and the colony were like one.”71 Prior to the Spanish colonization of the Philippines, there was no discourse on Christianized, normative, and moral sexuality.72 Spanish colonial authorities, clerics in particular, imposed regulations on native sexual bodies. In the case of Filipino women, Santiago argues that clothing was one of the means that Spanish colonizers used in the attempt to reform the native female sexual body. She writes:

For indeed, the Spaniards clothed the Filipina in order to muffle and subdue the free-spirited and spontaneous primordial woman who, in the observations of Loarca, Chirino, and Colin, and many other chroniclers, was sexually liberated and uninhibited in many ways.73

This discursive regulation of native sexuality can also be seen clearly in the *confesionario*. The *confesionario*, or confession manuals, are documents produced during the Spanish colonial era in the Philippines that pertain to a list of questions that a Spanish cleric authority may ask during the Catholic rite of confession. These questions typically invoke the confessor’s authority to pry into a Filipino native’s sexual activity by inquiring whether or not the “penitent” commits “unnatural” sexual acts. For instance, in one confession manual written by Tomas Pinpin entitled

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Librong Pagaaralan nang manga Tagalog nang Uicang Castila (1610), Pinpin articulates the discourse of “unnatural” sexual intercourse in the Spanish colonial Philippines.

Have you sinned in any way with another man like yourself, or another woman like yourself? So say in what manner of obscenity you sinned, whether you joined together or fondled one another, or one got on top of the other, whether this or only another? When you and your wife were together, did you use some method not the ordinary way, which could be offensive to our God? Did you change proper place with your wife, that is to say, for her to mount you?

Similarly, in another confesionario entitled Arte de la Lengua Tagala, y Manual Tagalog para Auxillo de los Religiosos (1865), Spanish friar Sebastian de Totanes refers to both male and female same-sexual intercourse, as well as premarital heterosexual intercourse. Totanes writes, “…naquipag biro ca naman sa ibang manga babaye? (cun napabiro ca caya sa ibang mga lalaqui?) Cun sa capwa mo lalaqui, cun babaye? (…did you play with your fellow women? [or did you play with other men?] Did you play with both men and women?)

The Catholic discourse of confession in the Spanish colonial Philippines, as seen in the colonial texts I have highlighted above, enabled the discursive regulation of Filipino native sexual bodies. The practice of Catholic confession became a discursive space in which colonized and Christianized Filipinos restrained, repressed, contained, and controlled their sexual bodies. This is an act that Australian historian Carolyn Brewer refers to as the “self-policing” of native bodies and sexual desires. The transgressive sexual acts of natives, according to Brewer, were placed by the power of the confessional “into a binary system: licit and illicit, permitted and forbidden.”
2.5. U.S. Imperial Rule and the Colonial Medicalization of Sexuality in the Philippines (1902-1946)

In the early 20th century, after 333 of Spanish colonial rule, the United States established its imperial power over the “Philippine Islands.” During this time, the early 20th century Philippines bore the burden of the aftermath of the Philippine Revolution of 1896 and the Philippine-American War of 1899. Historians argue that this period is characterized by massive food and water shortage. Fatal epidemics and tropical diseases swept colonial Manila. Contagious diseases like malaria, cholera, and leprosy plagued the archipelago. In the early 1900s, the newly established U.S. imperial government implemented standardized measures of public health, sanitation and hygiene in order to address the colony’s epidemiological condition. Medicine functioned as a crucial tool in the American colonial enterprise. Scholars refer to the period of American imperialism as the era of “colonial medicalization” in the Philippines.79 American colonialists placed native Filipino bodies under surveillance and scientific research. There was proliferation of the discourse of native bodies as diseased and dirty. Reformation, both corporeally and culturally, functions as one of the primary aims of U.S. imperialism in the Philippines. As Filipino historian Mercedes Planta argues, the Filipino body “[became] the site of the American colonial project.”80 For instance, in 1918, an American anthropologist, Louis R. Sullivan, published his work entitled “Racial Types in the Philippine Islands.”81 A quick scan at the table of contents shows that the discourse of anthropology has enabled the scientific examination of native Filipino bodies. As seen in Sullivan’s work, “the material” examined were

79 I discuss the concept of “colonial medicalization” more thoroughly in Chapter 3.
the different groups in the Philippine archipelago. Sullivan outlines an extensive account of the measurement of Filipinos’ hair, skin, eyes, stature, cephalic index, nasal index, body weight and index of arm reach. Similarly, Juan C. Nañagas, a Filipino anatomist from the University of the Philippines, published his study, “The Physical Potentiality of the Filipino Race from the Standpoint of Body Development” in 1930. In his work, Nañagas discusses the physical development of Filipinos in anatomical terms, wherein he includes medical data on the “influence of foreign blood admixtures” in the physiological composition of Filipino bodies during the American colonial period. If historians of medicine were correct in assuming that colonial medicalization occurred under U.S. imperial rule in the Philippines, then, what do we know about the medicalized discourses on sex and sexuality? As I will discuss in Chapter 3, there is no comprehensive historical research on the medicalization of sex and sexuality in the Philippines during U.S. imperial rule. My visits to the archives in Manila, however, have allowed me to get a glimpse of some colonial medical texts that bring up the issues of sex and sexuality. For instance, in 1933, Dr. Pedro T. Lantin, a former professor of medicine at the University of the Philippines in Manila, published an article about sexually transmitted diseases during the American colonial period. In his article, “Reopening the Red Light Districts in the Philippines,” which was published on The Journal of the Philippine Islands Medical Association, Lantin argues that, “[t]he problem of prostitution and its concomitant evil, venereal disease, is perhaps the most neglected among the more important medico-social problems in the [American colonial] Philippines.” In his conclusion, Lantin argues that there must be a strict

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82 Ibid.
83 Ibid.
implementation of laws against “vagrancy” and “prostitution.” Similarly, in 1933, former Assistant Director of the Philippine Health Service Dr. Regino G. Padua published his article entitled, “Should Sex Hygiene Be Taught in our Public Schools?” Padua’s discusses the discourse of sex education using medical vocabulary. These sources that I have found in the (post)colonial archives in Manila led me to assume that that the colonial medicalization of native Filipino bodies during the American colonial regime invariably involved the discursive medicalization of sex and sexuality as well. However, as I have discussed more extensively on Chapter 3, there is a possibility that the colonial medicalization of the Filipino body and sexuality happened even before the American colonial regime. One colonial archival center in Manila possesses a collection of medical journals published during the Spanish colonial era. It is plausible to assume, then, that Spanish colonialism discursively reformed Filipino sexual bodies through the institutions of Roman Catholicism, as well as Western science and medicine. Further research is needed in order to substantiate this claim.

The beginnings of the establishment of colonial mental hospitals happened as early as the 18th century, when the Hospicio de San Jose, a welfare institution established during the Spanish colonial era in 1782, opened its doors to caring for patients with mental illnesses. The Hospicio de San Jose’s decision to accommodate persons afflicted with mental illness was prompted by “the request of the Spanish naval authorities for confinement of its mentally ill sailors.” At the time of the Spanish colonial era, however, there were no designated mental health hospitals. It was only during the American colonial regime when psychiatric hospitals were founded. In

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86 In my email correspondence with University of Santo Tomas Heritage Library Head Archivist, Diana Padilla, she mentioned that the archival center currently holds a series of publications of La Correspondencia Medica de Filipinas – a journal which was in operation during the late Spanish colonial era. The said journal deals with medicine and surgery in the Spanish colonial Philippines. The archival center possesses several copies of the said journal from 1893 to 1896. Diana Padilla. Letter Kiel Ramos Suarez to. “Re: UST Heritage Library Consultation,” Email, May 2017.

1904, the San Lazaro Hospital in Manila, a hospital established in 1577 which is known for treating people suffering from leprosy, established an “Insane Department” under the authority of the Bureau of Health. The Insane Department of San Lazaro is considered as the first mental health department in the Philippines. In 1925, the American colonial government founded the first national hospital for mental health in the Philippines, which was known at the time as the Insular Psychopathic Hospital.\(^88\) In 1916, the American colonial government published a compilation of imperial laws to be implemented in the colonial Philippines. In Article XII of the book entitled “Administrative Code of the Philippine Islands,” a section states that government hospitals for the “insane” should be established in the Philippines by order of the Bureau of Health. The “government hospital for the insane,” according to the document, “includes any place for insane persons under Government control or any private institution or person receiving insane patients under contract with the Director of Health.”\(^89\) The responsibilities of the Director of Health involve the following:

The Director of Health shall have authority to inquire into the history and mental condition of all insane or alleged insane persons and require information relating to such persons; to make such regulations may be necessary for the sanitary erection, maintenance, and repair of buildings in which the insane are quartered, and to prescribe such rules and regulations as may be necessary for the public safety and for the general welfare and proper protection of all persons under treatment for insanity, whether such persons be under the care of public or private institutions or of their guardians or other persons in their homes.\(^90\)

According to the 1916 imperial document, an “insane person” is “a person afflicted with insanity, which in the intendment of this law, is a manifestation, in language, or conduct of disease or defect of the brain, or a more or less permanently diseased or disordered condition of

\(^{88}\) Presently, it is referred to as the National Center for Mental Health, a public mental health hospital located in Mandaluyong City, a city east of Manila.

\(^{89}\) It is notable that at the time of the publication of the document, the position of the Director of Health was held by Americans, since it was only in 1919 when Dr. Vicente de Jesus, the first Filipino to be appointed for the directorship, assumed office. Authority of Law. *Administrative Code of the Philippine Islands.* (Manila: Bureau of Printing, 1916), 345.

\(^{90}\) *Ibid.*
the mentality, functional or organic, and characterized by *perversion*, inhibition, or disordered function of the sensory or of the intellective faculties, or by impaired or disordered volition (emphasis mine).”91 I specifically highlight the term perversion in the document, since, in looking at the history of homosexuality in Europe and in the United States, “perversion” is one of the terms that were used interchangeably with same-sexual relations, along with “sodomy,” “inversion,” “hermaphroditism,” “transvestism,” etc. I do not, however, attempt to claim here that the appearance of the term “perversion” in one medical-legal text directly translates to homosexuality being a form of insanity in the case of the Philippines. What I am suggesting is that this may be historical evidence that the discourse of perversion, as seen in the document I have presented above, has entered the Philippine medico-legal system notably during the American colonial regime. This is in line with what American historian Margot Canaday has argued in 2009 that as seen in the history of the United States, the issue of homosexuality is a “legal category as much as a medical or psychiatric one.”92

In sum, the American colonial era proves to be a critical period in the medicalization of native bodies and sexuality, as evidenced by the institutionalization of colonial medicine and colonial psychiatry in the Philippines.

2.6. **Science, Medicine, and Homosexuality in the Post-Independence Philippines (1946-2013)**

The period of the post-Independence era, the 1960s in particular, is an era that is “witness to, as far as can be ascertained in the area of written textuality, some of the first organized

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91 Ibid.
inquiries into the subject of male homosexuality…”⁹³ As Garcia argues, this period marks the “appearance of the sexuality of the bakla/bayot within the hallways of positivist science.”⁹⁴ The fields of psychiatry and psychology similarly gained prominence in the country during this time. In the early 20th century, American colonial government launched the so-called pensionado system - a colonial project that aimed to improve the quality of education in the colonial Philippines. As Filipino historian Maria Luisa Camagay writes, an act was passed in 1903 that stipulates the provision of grants that enable Filipino intellectuals to study in various (prestigious) universities in the United States.⁹⁵ Similarly, in the post-Independence era, a number of Filipino scholars went to the U.S. to pursue higher education. The return to the Philippines of these Filipino scholars from the fields of psychology and psychiatry, as Filipino psychologist Patricia Licuanan notes, facilitated the establishment of Psychology and Psychiatry as prominent academic and medical institutions in the Philippines.⁹⁶ Several universities in the Philippines offered a broader range of courses on psychology and psychiatry. Graduate degrees in Psychology became available for Filipinos to pursue. Clinical institutions offered psychological services. Based on these historical grounds, I seek to claim that such developments in the fields of psychology and psychiatry in the post-Independence Philippines paved the way for psychological and psychiatric scholarship to flourish during this time; thus, enabling the issues of mental health, sex, sexuality, and homosexuality to become visible in medical textual discourses.

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⁹⁴ Ibid.
During this same time period in the United States, key historical events took place that influenced the discourses on science, medicine, and homosexuality in various transnational contexts. American gay and lesbian activism during this time influenced the discourse on (de)pathologizing homosexuality in the United States. As American psychiatrist and psychoanalyst Jack Drescher notes:

…some mid-20th century homophile (gay) activist groups accepted psychiatry’s illness model as an alternative to societal condemnation of homosexuality’s “immorality” and were willing to work with professionals who sought to “treat” and “cure” homosexuality. Other gay activists, however, forcefully rejected the pathological model as a major contributor to the stigma associated with homosexuality. It was this latter group that brought modern sex research theories to the attention of the APA. In the wake of the 1969 Stonewall riots in New York City, gay and lesbian activist, believing psychiatric theories to be a major contributor to anti-homosexual social stigma, disrupted the 1970 and 1971 annual meetings of the APA.97

In 1973, the American Psychiatric Association (APA) removed the diagnosis of male and female “homosexuality” as a mental disorder in its second edition of the *Diagnostic and Statistical Manual of Mental Disorders.*98 The APA decision of 1973, as Drescher observes, “was the beginning of the end of organized medicine’s official participation in the social stigmatization of homosexuality.”99 This discursive shift of de-stigmatizing homosexuality as a mental disorder increasingly occurred in other contexts. For instance, in 1990, the World Health Organization de-listed homosexuality from the International Classification of Diseases.100 Drescher notes that, “[a]s a consequence, debates about homosexuality gradually shifted away from medicine and psychiatry and into the moral and political realms as religious, governmental, military,

98 It is important to note that even though “homosexuality” was no longer a mental disorder during this time, other nomenclature replaced the diagnosis of homosexuality, such as “Sexual Orientation Disturbance (SOD) and “Ego Dystonic Homosexuality.” *Ibid*, 571.
100 *Ibid*. 

media, and educational institutions were deprived of medical or scientific rationalization for discrimination.\textsuperscript{101}

These debates on the (de)pathologization of homosexuality in the United States and in transnational contexts are crucial in the history of the (de)pathologization of homosexuality in the Philippines. It is notable that in the case of the Philippines, the boundaries between religious and medical stigmatization of homosexuality overlap. In an interview in July 2016 with Filipino psychologist Eric Julian Manalastas, he mentioned that there has been a small population of mental health professionals who used faith-based interventions in “curing” homosexuality, in the 1960s and even presently. In the Philippines, “conversion therapy” for homosexuality is not purely “clinical” – \textit{clinical} in the sense that there is no taint of religious or spiritual belief. In fact, in the Philippines, there is “Catholic Church-sponsored pathologization of homosexuality,” wherein faith-based organizations invite “pseudo-mental health professionals” who give lectures about conversion to heterosexuality.\textsuperscript{102} It is critical to note that such church-sponsored efforts to give medical treatment to homosexuality also occur in international contexts, most notably the United States.\textsuperscript{103} It is also crucial to point out that, when the APA de-listed homosexuality as a mental disorder in the DSM-II in 1973, a Filipino psychiatrist published a study on psychopathology in the Philippines. In her work, \textit{A Study of Psychopathology} (1973), U.S.-trained Dr. Lourdes V. Lapuz lists “homosexuality” as a form of mental disorder.\textsuperscript{104} Therefore, it is plausible to assume that by the time homosexuality was removed from the DSM-II in the U.S.,

\begin{itemize}
\item \textsuperscript{101} \textit{Ibid.}
\item \textsuperscript{102} Eric Julian Manalastas, interview by Kiel Ramos Suarez, 1 July 2016, University of the Philippines-Diliman, Quezon City, the Philippines.
\item \textsuperscript{103} In their work, American psychiatrists Stephen Levine \textit{et al.} note that conducting “reparative/conversion therapy” in the hopes of “curing” homosexuality offers no substantive and scientific evidence of its effectiveness. In fact, as the authors note, they have a “potential to damage patients by increasing their identity conflicts and self-hatred.” See Stephen B. Levine \textit{et al.}, eds., \textit{Handbook for Clinical Sexuality for Mental Health Professionals}, 3d ed. (New York and London: Routledge, 2016), 306.
\item \textsuperscript{104} Lapuz. \textit{A Study of Psychopathology}, 16.
\end{itemize}
the discourse of homosexuality as a sociopathic disorder was only beginning to proliferate
in the Philippines. Efforts to de-stigmatize homosexuality based on medical and psychological
grounds in the Philippines may have been initiated in the early 1990s. For instance, in the
Liberation Movement sa Pilipinas* (1992), Filipino literary critic Nicanor Tiongson claims that
Perez’ work challenges certain stereotypes about the *bakla*, and one of which is the notion that
*pagkabakla* (being a Filipino “gay” man) is “*not* a *sakit* (illness) that can be cured and should be
cured.” In 2011, the Psychological Association of the Philippines (PAP) released an official
statement concerning the de-stigmatization of homosexuality as a “*sakit sa pag-iisip,*” or as a
“disease of the mind.” In their policy statement, PAP states that:

>[The association] firmly believes in the efforts to begin de-stigmatizing the diversity of
sexual orientations and gender preferences as a mental disorder, and to forward the
concerns of the [Filipino] LGBT sector. Furthermore, the PAP Code of Ethics stands
firmly against discrimination. We are calling on Filipino psychologists to recognize the
value and dignity of all people, and to respect the diversity of every individual. This
means that Filipino psychologists must not discriminate against, or insult people based on
their sexual orientation and gender identity (translation mine).

Meanwhile, in an online article published by a mainstream Filipino newspaper company,
*Philippine Daily Inquirer*, retired Filipino Archbishop Oscar Cruz stated that homosexuality is a
form of “psychological disorder.” He argues that in dealing with homosexuality, “there is

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105 Further research is needed to substantiate this claim. Nevertheless, based on my own research and interpretation,
I assume that this may be a possibility.
106 “…ang pagkabakla ay hindi ‘sakit’ na maaaring gumaling at dapat pagalingin.” Nicanor Tiongson, foreword to
(Mandaluyong: Cacho Publishing House, 1992), xvii.
107 See Psychological Association of the Philippines (PAP). “Pahayag ng Psychological Association of the
Philippines Laban sa Diskriminasyon Batay sa Oryentasyong Sekswal, Identidad at Ekspresyon
http://www.pap.org.ph/?ctr=page&action=resources
108 Oscar Cruz, as cited in Philip C. Tubeza. “Catholic Church has no problem with marriage between gay man,
http://newsinfo.inquirer.net/428951/catholic-church-has-no-problem-with-marriage-between-gay-man-lesbian
some kind of mental impairment or emotional disturbance." Arguably, Archbishop Cruz’s statement proves two issues concerning the history of medicalized homosexuality in the Philippines. Firstly, there is indeed a conflation in religious and medical views concerning homosexuality in the Filipino context, and secondly, debates on (de)pathologizing homosexuality in international and global contexts, particularly in the United States, have influenced the (post)colonial history of medicalized homosexuality in the Philippines.

2.7. Conclusion

In this chapter, I have sought to write a succinct historical background on medicine, gender, sexuality and empire in the colonial and post-Independence Philippines. I began my discussion by presenting a brief history of the Babaylan/Katalonan, the Filipino medico-spiritual leader in ancient Filipino society whose leadership is gendered (feminine). I have narrated how the male Babaylan/Katalonan, known as asogs, during ancient times and in the early years of Spanish colonial rule, have performed gender-crossing in order to perform spiritual healing rituals. I narrated how Spanish religious conquest influenced the discourse on gender-crossing, sex, and sexuality in the colonial Philippines through the confessionarios. The Catholic practice of confession, as shown previously by scholars, was a discursive space in which Spanish colonial authority exercised power and control over native Filipino bodies. I have then proceeded to discuss the period of U.S. imperialism in the Philippines as defining moment in the history of Filipino colonial medicine, since, during that time, U.S. colonialists implemented standardized measures of health and sanitations that sought to reform Filipinos, culturally and corporeally. Science and medicine functioned as a means to exert colonial power and authority over Filipino natives. In my discussion, I have argued that such colonial medicalization of the native Filipino

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109 Ibid.
body invariably included the process of medicalizing discourses on sex and sexuality. I have also narrated the establishment of colonial psychiatry and its relevance in the production of discourses on perversion. Perversion, as included in the 1916 imperial law, does not mean homosexuality per se, but, given the history of the term, I propose that it is plausible to assume that perversion may have corresponded to same-sexual relations. I have shown in this chapter that the dominantly religious and moralizing discourse on native sexuality during the Spanish colonial era has been gradually replaced by the medicalizing discourse during the American colonial regime. Taking into consideration such history of Spanish religious conquest and American medical intervention, I then proceeded to provide the context of the post-Independence era – the period in the Philippines when the earliest scientific and medical studies on homosexuality were produced. Based on the sources I have found in my research in (post)colonial archives in Manila in July 2016, I assume that the decades of the 1960s and the 1970s in the Philippines prove to be critical in the production of discourses on mental health and homosexuality. It is important to note that it was during this time when former president Ferdinand Marcos established a dictatorial regime in the Philippines, and I propose that there is a strong link between Marcos’ Bagong Lipunan administration and the production of textual sources on medicalized homosexuality in the Philippines. I recognize that further research on mental health discourses in the post-Independence Philippines is needed to prove this historical assumption.

In this chapter, I have also narrated some of the key events that were happening in the United States that influenced the history of (de)pathologizing homosexuality in the Philippines. As this study seeks to show, both the eras of Spanish colonialism and U.S. imperial rule are crucial in the history of the medicalization of male and female homosexuality in the Philippines,
since the lasting legacies of colonial rule, such as Roman Catholicism and American medicine, continue to operate in the stigmatizing discourses on homosexuality in the contemporary Philippines. The broader argument that I strive to claim here is, prior to Spanish and American colonization, matters concerning sex, sexuality, gender variance, and same-sexual relations in the Philippines had not been an issue of pathology.
3. Historiography of Filipino Colonial Medicine, Gender, and Homosexuality

3.1. Introduction

In this chapter, I focus on the relevant scholarly literature on the medicalization of homosexuality in the Philippines. I divide this chapter into four parts. In Chapter 3.2, I introduce the growing body of scholarship on Filipino colonial medicine as the groundwork of my arguments on the colonial medicalization of sexuality and homosexuality in the Philippines. I highlight the context of U.S. imperial rule in the Philippines as the era when science and medicine functioned as a crucial tool in carrying out colonialist agenda. I point out the gaps in the literature concerning the medicalization of sexuality. I also explain the concept of “colonial medicalization,” and how I aim to utilize it for this study. In Chapter 3.3, “Science, Medicine, Homosexuality, and Empire,” I introduce the growing body of literature on the medicalization of homosexuality in Europe and its colonies. I focus on relevant studies that deal with the discursive construction of same-sexual behavior - from a dominantly moralizing and religious discourse of “sodomy,” to the “modern” notion of scientific and medicalized “homosexuality.” In Chapter 3.4, I introduce the relevant scholarly works on medicine, colonialism, and homosexuality in the Philippines. I particularly focus on Filipino medical anthropologist Michael Tan’s “Sickness and Sin: Medical and Religious Stigmatization of Homosexuality in the Philippines” published in 1994, and Filipino literary critic J. Neil Garcia’s *The Philippine Gay Culture: The Last Thirty Years, Binabae to Bakla, Silahis to MSM* in 1996. In these two works, Tan and Garcia both assumed that homosexuality became part of the medical discourse during the American colonial

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regime in the Philippines. I discuss my assumption that this may be a strong possibility. I also point out that there has been no extensive research done on the topic of medicalizing homosexuality in the Philippines. In this subchapter, I also include a discussion on two conceptual models on Filipino homosexuality that I seek to employ in this study, which are Garcia’s “bakla/homosexual dynamic” for male homosexuality, and Filipino psychologist Mira Alexis Ofreneo’s “tomboy/homosexual construct” for female homosexuality.

3.2. (Post)Colonial Medicine in the Philippines

Scholars on the history of medicine in the Philippines have argued that the period of U.S. imperial rule in the Philippine islands is an important era in Philippine medical history. At the time of the Philippine Revolution against Spain in 1896 to the beginning of U.S. imperial rule in the 1900s, there was widespread food and water shortage in the Philippines. Tropical diseases swept Manila, the nation’s capital. Fear gripped the population. Many Filipinos at the time believed that contagious diseases, such as leprosy, malaria, and cholera, along with the late 19th century socio-political events that were taking place, was “a sign of the approaching [Christian Biblical] Apocalypse.” Historians argue that when the U.S. imperial government claimed its colonial authority over the Philippines in 1902, American colonialists faced the task of implementing standardized measures of public health, sanitation and hygiene in order to address the colony’s epidemiological condition. Here, medicine functioned as an indispensable means in

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executing colonial subjugation. Historical literature on Filipino colonial medicine has been growing since the 2000s. For this study, I focus on two critical works that discuss the history of colonial medicine under U.S. imperial rule in the Philippines, which are Australian historian Warwick Anderson’s *Colonial Pathologies: American Tropical Medicine, Race, and Hygiene in the Philippines* (2006), and Filipino historians Julius Bautista and Mercedes Planta’s “The Sacred and the Sanitary: The Colonial Medicalization of the Filipino Body” (2009).

In his work, *Colonial Pathologies: American Tropical Medicine, Race, and Hygiene in the Philippines*, published in 2006, Anderson presents the roles that science and medicine played in the American colonial regime in the Philippines, from 1898 to the 1930s. Anderson argues that during this time, the Philippines became a “colonial laboratory of hygiene and modernity.”¹¹³ Anderson discusses the dominant rhetoric in U.S. imperial rule that Filipinos were “incapable” of self-government. “Self-government,” according to Anderson, pertains to both governing the colony, and the native Filipino body. One of the aims of American colonial rule, then, is to carry out “corporeal and cultural transformation” of the Filipino population, through the implementation of standardized measures of health and sanitation. In his chapter, “White Man’s Psychic Burden,” Anderson brings up the issue of sexuality in his discussion of the beginnings of colonial psychiatry in the Philippines. Anderson examines the concept of overcivilization – the debilitated state experienced by American colonialists in their attempt to carry out the “civilizing mission” in the Philippine archipelago. Overcivilization, a mental disorder also referred to as “tropical neurasthenia,” is supposedly a result of the “degenerating” effect of the hot, tropical climate in the Philippines on white, American bourgeois colonial officials. One of the symptoms of overcivilization, according to Anderson’s work, is “sexual

indulgence,” which includes homosexuality. As Anderson argues, American colonialists in the Philippines believed that the task of bringing civilization to Filipino natives took its toll on the mental and physiological state of the American bourgeois male. This is what Anderson refers to as the “White Man’s Psychic Burden.” There are two key things that I intend to draw from Anderson’s work. First, colonial psychiatry in the Philippines developed during the American colonial era, in large part due to the efforts of U.S. colonial officials. As I show in my historical chapter, this can be seen in the establishment of the first national psychiatric hospital in colonial Manila in 1925. Second, the discourse of homosexuality among U.S. colonial officials, as an effect of overcivilization/tropical neurasthenia, became a part of the psychiatric discourse. For instance, according to Anderson, American colonel and medical doctor Fielding H. Garrison experienced tropical neurasthenia, and being a (colonial) physician himself, he interrogated his own “psychological processes.” In a memorandum book Garrison wrote during his stay in the tropical Philippines, Garrison lists “homosexuality” as one of the symptoms of his disorder. While Anderson claims that there is a link between mental disorders and homosexuality during this time, he makes no mention of how homosexuality became a “disease” of its own, apart from it being a result of overcivilization. There was also no mention of medicalized homosexuality as experienced by Filipino natives. Moreover, Anderson only discusses male homosexuality - nothing is mentioned about female homosexuality. Third, while Anderson’s work examines to a large extent the importance of science and medicine in colonial surveillance during U.S. imperial rule in the Philippines, his study does not account for the discursive transformation of native sexual bodies through medicine. What were the ways in which science and medicine functioned to discursively reform and regulate native sexual behavior? Were there any attempts made by the

115 Ibid, 148.
116 Ibid.
U.S. colonial government to medicalize male and female homosexuality in the colonial, tropical Philippines? These are the questions that Anderson does not address in his study, which I strive to answer in this thesis.

Another critical work that is relevant to this study is Filipino historians Julius Bautista and Mercedes Planta’s “The Sacred and the Sanitary: The Colonial Medicalization of the Filipino Body.” In their work published in 2009, Bautista and Planta analyze the transitioning of discourses on the colonized Filipino body during the Spanish and American colonial regimes. Bautista and Planta argue that the religious and moralizing discourse on native Filipino bodies during the Spanish colonial period took on a slightly different, but more or less similar form of, discursive regulatory regime during the American imperial rule.

According to Bautista and Planta:

In the Philippines, we can see this movement [from a dominantly religious discourse to a more secularized and medicalized one] in the very transition between two colonial administrations: from an Iberian missionary concern with the regulation of the body’s religious well-being to an American concern with the regulation of the body as an essentially medical unit. In both regimes, written manuals were used to deploy ideals of ritual or sanitary purity and piety. As our title suggests, we seek to trace the discursive movement from a ‘sacred’ to a ‘sanitary’ milieu – terms which embody the moral and ethical agendas of the Spanish and American colonial regimes respectively, and which describe the very transition of the Philippines towards secularization and modernity.\(^{117}\)

As Bautista and Planta argue, in the Spanish colonial Philippines, the discourse on native “immoral” and “irreligious” bodies reflects strong religious ideals. Meanwhile, during the American colonial era, the discourse became more or less “secularized,” since the aim of American medical intervention was to cleanse and regulate “dirty” and “diseased” native bodies through science and medicine.

The medicalization of the body is a process in which religious notions of ascetic practice and piety were gradually supplanted or replaced by secular medical and physiological regimens. The

general trend of secularization in Western societies, according to this theory, can be described by a resemblance between the roles of clergy and medical practitioners.\textsuperscript{118}

Bautista and Planta refer to this transitioning process of medicalization in the Philippines as “colonial medicalization,” taking into account the country’s history of colonialisms. They argue that there is a nexus between the Spanish and American colonial regimes in terms of reforming the Filipino native body. They remark:

Both Spanish and American policies towards the regulation of Filipino bodies were generally framed in the rhetoric of promoting a regime of cleanliness, either through spiritual purification or disease prevention. The implication here is that Filipino bodies were inherently in need of a cleansing that only the purveyors of colonialism could provide.\textsuperscript{119}

It is critical to note that Bautista and Planta do not adhere to the binarizing view of the Spanish colonial regime as the “era of Christianity,” and U.S. imperial rule as the “era of science and medicine.” The authors acknowledge that “the transition between colonial notions of the Filipino body was not sudden and abrupt.”\textsuperscript{120} Moreover, in their work, the authors include the historical issue of American Protestant missionaries who came to the Philippines in the name of evangelization.\textsuperscript{121} In this sense, both authors assume that U.S. imperial rule is not merely characterized by the rhetoric of secularized science and medicine; religion was part of the discourse as well. While their work highlights the dominantly religious and moralizing notions of the Filipino body during the Spanish colonial era, they do not extensively examine the influence of Spanish colonial medicine on the Filipino body. Colonial medicalization in the Philippines, as I assume in this thesis, began even before U.S. imperialism, as the works of Filipino medical

\textsuperscript{118} Ibid.
\textsuperscript{119} Ibid.
\textsuperscript{120} Ibid, 156.
\textsuperscript{121} Bautista and Planta claim that the efforts of American Protestant missionaries were generally unsuccessful, since they only converted 1.3% of the population. They argue that the secularized discourse of science and medicine, as a colonial legacy of U.S. imperialism, is more salient, in comparison to American Protestantism. This was because American doctors and colonial health administrators “promoted sensibilities that did not, at least on the surface, conflict with the strictly ‘religious’ or doctrinal directives of the [Spanish] Catholic faith.” Ibid, 156-157.
historians Arnel E. Joven and Luciano P.R. Santiago suggest. Moreover, Bautista and Planta neglect to highlight the aspects of gender and sexuality. To the best of my knowledge, no extensive study has been done on the colonial medicalization of sexuality in the Philippines in both the Spanish and American colonial regimes. While recent historiography on colonial medicalization comprehensively discusses the medicalization of native Filipino bodies through colonialism, as exemplified by Anderson’s and Bautista and Planta’s works, no study addresses the process of gendering and sexualizing medicalized Filipino bodies.

In this thesis, I strive to show that, following what historians of medicine have previously assumed about the colonial medicalization of the Filipino body, the historical process of medicalizing the native body invariably meant medicalizing discourses on sex and sexuality as well. Here, I attempt to strike a connection between Filipino medical historiography and Philippine LGBTQ+ history. I argue that, similar to what Filipino LGBTQ+ scholars J. Neil Garcia and Michael Tan have assumed in the 1990s, the discourse of medicalized sexuality began during U.S. imperial rule in the Philippines. I do not attempt, however, to cover an extensive historical account of the colonial medicalization of sexuality in the U.S. imperial Philippines for this thesis. What I strive to accomplish in this study, instead, is to examine two of the earliest scientific and medical literature on Filipino homosexuality published during the post-Independence era that show how homosexuality became discursively constructed as a disease.

3.3. Science, Medicine, Homosexuality, and Empire

3.3.1 The Medicalization of Homosexuality in the West

It is with little doubt that 20th-century French philosopher Michel Foucault’s *The History of Sexuality* (1978) has influenced the production of historical studies on gender and sexuality, not only in the Western context, but also in the context of former colonial territories. In his work, Foucault presents his argument that beginning in 17th-century Europe, there has been an increased and intensified production of discourses on sex. Foucault argues that the practice of Catholic “confession” enabled such proliferation of discourses on sex and sexuality. According to Foucault, Western societies “have established the confession as one of the main rituals we rely on for the production of truth.” Sexual behavior became a subject of close investigation. Through the confession, Catholic clerical authorities attempted to pry into the minutiae of penitents’ private sexual lives. Sexual practices that did not conform to normative, religious, and moralizing standards of heterosexual marriage became acts of transgression and regarded as “sinful” behavior. With the so-called process of “secularization” came the discourses of science and medicine in the 19th century. The discourse of the immoral and sinful sexual behavior, then, took on a slightly different form, through the discourse of “sexual perversion.” In his chapter, “The Perverse Implantation,” Foucault argues that the increasingly medicalizing discourse of sex and sexuality has paved the way for the multiplication of “legal sanctions against minor perversions.” “Sexual irregularity” becomes annexed to “mental illness” and

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125 Foucault argues that the confession “has spread its effects far and wide. It plays a part in justice, medicine, education, family relationships, and love relations, in the most ordinary affairs of everyday life, and in the most solemn rites; one confesses one’s crimes, one’s sins, one’s thoughts and desires, one’s illnesses and troubles; one goes about telling, with the greatest precision, whatever is most difficult to tell…One confesses – or is forced to confess.” *Ibid.*
moralists and doctors organized “pedagogical controls” and medical treatment. The discourses of both the confession and medicalized perversion in the West, as proposed by Foucault, prove to be useful in this study for two reasons. First, during the Spanish colonial era in the Philippines, Spanish religious authorities introduced the Roman Catholic practice of confession. Historical evidence shows that during their 300-year rule, Spanish clerics published confession manuals that aimed to discursively regulate the sexual behavior of colonized natives. The Foucauldian confession, therefore, is useful in understanding the discursive regulation of native sexual bodies through religious conquest and colonialism in the Philippines. Second, the Foucauldian assumption of the “confession” being one of the “West’s most highly valued techniques for producing truth,” is crucial for this study since I aim to trace the transitioning of the discourse on non-normative sexualities - from a dominantly religious and moralizing discourse during the Spanish colonial era, to the more secularized, scientific and medicalized discourse of perversion during the American colonial regime which continued to the subsequent decades following Independence in 1946.

For this study, I also aim to utilize the Foucauldian theory of biopolitics. Foucault, in his work, claims that beginning in seventeenth-century Europe, the “power over life” took on two basic forms. One involved what Foucault refers to as the “anatomo-politics of the human body,” wherein the body becomes a machine to be disciplined, optimized, and extorted, and integrated

127 Ibid.
129 Foucault, The History of Sexuality, 59.
into “systems of efficient and economic controls.”\textsuperscript{130} Meanwhile, the second form, according to Foucault, centered on the “body species” – the “biopolitics of the population.”\textsuperscript{131} As Foucault argues, “[t]he disciplines of the body and the regulations of the population constituted the two poles around which the organization of power over life was deployed.”\textsuperscript{132} Foucault argues that biopolitics gave rise to “indeterminate medical or psychological examinations” that sought to regulate sex and the social body.\textsuperscript{133} While Foucault’s influential theory on biopolitics has been useful in the analyzing the history of sexuality in the West, Foucault neglects to extensively account for the implications of colonial expansion and imperial rule in the subjugation of native sexual bodies. For this study, I aim to use Foucauldian biopolitics in analyzing scientific and medical texts on homosexuality in the Philippines. I do this by placing considerable focus on the discourses on native Filipino homosexual bodies. The medical discourses on homosexuality in the Philippines, as my study shows, are invariably linked to the practice of controlling, subjugating, and regulating homosexual bodies through the practice of psychoanalysis and “conversion therapy.”

Another study that I seek to utilize for this thesis is American sociologist David F. Greenberg’s \textit{The Construction of Homosexuality} (1988). Greenberg’s work is an extensive historical sociology of “homosexuality” that covers the construction of a wide range of “homosexualities” in different socio-historical contexts. Using a sociological approach, Greenberg shows how “deviancy” of same-sexual behavior and relations is constructed across time and space. In his work, Greenberg writes a chapter on the medicalization of homosexuality in the West. Here, Greenberg argues that the socio-historical changes that were taking place in

\begin{footnotes}
\item[130] \textit{Ibid.}, 139.
\item[131] \textit{Ibid.}
\item[132] \textit{Ibid.}
\item[133] \textit{Ibid.}
\end{footnotes}
the West at the time, such as the Industrial Revolution and the rise of “reform capitalism,” led to major implications for “social responses to homosexuality”; the medicalization of homosexuality was one of such consequences. Greenberg notes some of the theories on homosexuality that permeate the scientific and medical literature in the West. Some of these theories include the late 19th-century notion of “homosexuality as innate,” the “degeneracy theory,” the “Darwinian theory,” the “interventionist state,” and “behaviorism.” A closer analysis of the two earliest scientific and medical studies on homosexuality in the Philippines would reveal that such Western theories on homosexuality also permeate the discourses on Filipino male and female homosexuality. While Greenberg’s work highlights the existence of same-sexual behavior and same-sexual practices in various contexts, Greenberg neglects to account for the influences of European and American colonialism and imperialism in the process of medicalizing indigenous gender-crossing practices and same-sexual relations. This is one of the key issues that my study aims to address.

3.3.2. The Medicalization of Homosexuality in the Colonies

In the 1990s, there emerged a scholarship that examines colonialism, empire, sexuality, and homosexuality. Perhaps the most relevant to this study is Belgian historian Rudi Bleys’s *The Geography of Perversion: Male-to-male Sexual Behaviour outside the West and the*
In his work, Bleys examines the historical discourses on “sodomy” and “homosexuality” in Europe at the time of the Age of Colonial Expansion and Imperialism. Drawing from European ethnographic accounts on same-sexual behavior and relations in the so-called “Orient,” Bleys argues that European conceptions of sex and sexuality are strongly associated with the production of knowledge on race and indigenous sexualities “outside the West.” Bleys claims that conceptions about gender, sex, sexuality, race, and science in European societies from the 18th to the early 20th century have been significantly influenced and altered by the imperial projects that they launched in their overseas colonial territories. According to Bleys, the encounter between European colonialists and indigenous peoples constructed “new” forms of ideas about gender, sexuality, homosexuality, race, and science that were unknown prior to the colonial enterprise. Such ideas about indigenous race, sex, and sexuality belong to what Bleys refers to as the “Western ethnographic imagination.” Bleys argues that:

The novelty of Enlightenment analogy was implied by the predominance of tests that presented racial difference in sexual terms. Racial otherness was read from physical and behavioural aspects, that could be ascribed to either the male or the female realm...The Enlightenment debate on other races’ natural status, however, was very clearly marked by an ascription of sexual qualities. This was shown perhaps most prominently in the ascription of ‘feminine’ characteristics to the people of America, Asia, and the Pacific, while Sub-saharan Africans and Arabs were most commonly accredited with a rather exaggerated and “uncivilized masculinity.”

This racial and sexual categorization of natives in the European ethnographic imagination proves to be relevant in this study. In my experience in the colonial archives in Manila, I came across a

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139 In his work, Bleys assumes that “[s]exology not only found itself in alliance with medical science, but was also prompted by the increasingly systematic study of physical and cultural anthropology.” In this sense, European colonial expansion and encounter with “people outside the West” influenced European sexological thought and discourses. I express my critique on Bleys’s usage of the phrase “outside the West,” since I claim that such a term reiterates the “West and the rest” binarization. Ibid, 147.
140 Ibid, 90.
book written by American anthropologist Louis Sullivan in 1918. The publication is entitled “Racial Types in the Philippine Islands.” In looking at the table of contents, one can see that American colonial ethnographers, at the time of U.S. imperial rule in the Philippines, have observed, studied, measured, and catalogued indigenous Filipinos bodies using an anthropological approach. In his work, Bleys discusses this process of scientific investigation of Oriental bodies done by European physical anthropologists. He claims that:

Physical anthropologists claimed that racial variance could be directly visualized by pointing out the characteristics of the body, and they went about measuring and classifying brain structure, facial expression, skin texture, proportions of various body parts, and, predictably, genitalia.

The scientific investigation of native bodies by Western anthropologists is crucial for this study since one of the scientific and medical texts on Filipino homosexuality that I analyze is done by American anthropologist Donn V. Hart. My analysis of Hart’s study is presented in Chapters 4 and 5.

Bleys’s work, as well as other extant scholarship that examine the intersecting historical issues of medicine, colonialism, and homosexuality, however, is mainly about sexuality and homosexuality in colonial territories of old European colonial powers such as Spain, the Netherlands, Portugal, Great Britain. None of these examine the issue of colonialism, homosexuality, and U.S. imperialism in the early 20th century. This study is an attempt to historically inquire into the medicalization of homosexuality in a former colony of the United States.

Another relevant study for this research is American historian Jennifer Terry’s *American Obsession: Science, Medicine, and Homosexuality in Modern Society*. Her work discusses the history of the medicalization of homosexuality in the United States. Terry argues that during the

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early 20th century, there has been an increasing obsession over the issue of homosexuality in medical records in American society. During this time, medical authority ascended, and this has led to “self-appointed promoters of public health [to] cast homosexuality as an anomalous, pathological condition and...a perplexing byproduct of modernity.”

Doctors believed that homosexuality manifests itself on the body. As Terry notes:

> Through clinical surveillance and diagnosis, homosexual bodies, as they were imagined by physicians, were objects to be measured, zones to be mapped, and texts to be interpreted. For, in the view of many experts from this period, both the surfaces of perverse bodies and their dark interiors contained the secrets of abnormal desire. The phatasmatic homosexual body, like savage bodies, became a text of telltale signs by which to measure moral character and the effects of civilization.

Terry argues that in the case of the U.S., American scientists and physicians “borrowed many of their notions from European authorities who themselves were motivated to investigate homosexuality because of the larger cultural preoccupations with sexual dissenters in their own national contexts.” She claims that, “[t]he originators of scientific discourse on sexual perversion suspected that the emergence of a distinct type of person – variously known as the invert, pervert, or homosexual – was a sign that modern life had deeply disrupted the natural order of things.”

While Terry includes an extensive discussion on the intersecting issues of race, medicine, and homosexuality, her study does not discuss the medicalization of homosexuality in early 20th century U.S. imperial territories, like the Philippines. I draw upon Terry’s work for this thesis, since I assume that one of the legacies of American colonialism is the historical process of medicalizing homosexuality in the Philippines.

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144 *Ibid*, 41.


146 *Ibid*, 27.
3.3. Science, Medicine, and Homosexuality in the Philippines

Clearly, the era of U.S. imperial rule is a crucial period in the history of science and medicine in the Philippines. While the scholarship I have highlighted above addresses the issue of colonial medicalization in the Philippines quite extensively, historical literature on Filipino colonial medicine neglects to account for gender and sexuality as crucial elements in empire-building. This had not been the case in Filipino LGBTQ+ historiography. Scholars of Filipino LGBTQ+ studies, such as Filipino medical anthropologist Michael L. Tan and Filipino literary critic J. Neil Garcia, have plausibly assumed that it was during the American colonial regime in the Philippines when homosexuality became a disease.

Since the 1990s, LGBTQ+ studies in the Philippines have been expanding. What is perhaps, most relevant to my own work is the article published by Tan in 1994. In his essay, “Sickness and Sin: Medical and Religious Stigmatization of Homosexuality in the Philippines,” Tan claims that “[t]here is practically no research available for the Philippine situation, but one could assume that the labeling of homosexuality as a disease was introduced to the Philippines during the U.S. occupation, since the Spaniards had barely started extending medical education to the natives.” Tan assumes that the medicalization of homosexuality occurred in the Philippines through colonialism. Tan assumes that this happened particularly during the American colonial regime for two reasons. First, during the Spanish colonial era, Spanish colonial texts refer to same-sexual acts with the Catholic concept of “sodomy” and not “homosexuality.” Second, Tan assumes that one of the colonial legacies of U.S. imperial rule

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148 Ibid., 204.
149 Ibid.
is the importation of the “Freudian Oedipus complex” in discourses on homosexuality. Tan remarks:

The American influence on our medical education, particularly on psychology, was extensive, and persists to this day. This included a propagation of Freudian Oedipus complex explanations of homosexuality: the dominant mother and the absent father…the idea of the Oedipus complex itself as being the cause of homosexuality has become deeply embedded in our consciousness, drawing from and reinforcing the stereotyped image of the male homosexual, specifically the bakla, as a male with a woman’s heart.¹⁵⁰

Tan, however, does not claim to provide any historical references, and he posits these assumptions as a mere possibility. In 1996, Filipino LGBTQ+ scholar J. Neil Garcia builds upon Tan’s assumptions. In his work, *The Philippine Gay Culture* (1996), Garcia argues that Western “sexological” and “psychosexual” discourses are embedded in Filipino “consciousness” primarily because of the colonial projects launched by the U.S. imperial government, such as the institution of the public health and sanitation system, public school education, media, etc. Garcia maintains that this “implantation” of Western models of medical, psychological, and sexological thinking has informed the discourses that construct “homosexuality” in the Philippines.¹⁵¹ Similarly, in his article published in 2004, “A Short History of Male Homosexuality in the Philippines,” Garcia notes:

The American period…saw the expansion of the newly empowered middle class, the standardization of public education, and the promulgation and regulation of sexuality by means of academic learning and the mass media. This discursive regulation inaugurated a specific sexological consciousness…a psychological style of reasoning hitherto unknown in the Philippines. We can reasonably surmise, following academic accounts of how Western psychology took root in the Philippines, that this ‘sexualization’ of local mentality, behavior and personality accompanied English-based education in America’s newly acquired colony at the beginning of the twentieth century…Filipinos have been socialized in Western modes of gender and sexual identity formation, courtesy of a sexualization that rode on different but complementary discourses of public hygiene, psychosexual development, etc.

¹⁵¹ Garcia assumes that there is a “gradual and insidious insertion of psychiatric logic (and its necessary bigotries) into the culture at large through the sustained modernization of educational, religious, medical, mass media and other similar institutions that have all come to be informed by Western mode of learning and Western ethnoscience.” Garcia, *The Philippine Gay Culture, 58.*
juvenile delinquency, health and physical education, family planning, feminist empowerment, gay and lesbian advocacy, and the corporally paranoid discourse of AIDS.\textsuperscript{152}

While Garcia theorizes on the complex issues of colonialism, U.S. imperialism, psychiatry, and male homosexuality in the Philippines, he admits that his work “[did] not undertake a genealogy of colonialist psychiatric science in the Philippines.”\textsuperscript{153} Garcia argues that such attempt to investigate the colonial medicalization of Filipino homosexuality may not be productive, since he claims that “there has been no apparent massive psychiatrization of the Philippines – a fact best illustrated by the typical conflation of religious and secular explanations for mental illness hereabout…”\textsuperscript{154} According to Garcia, “it may not prove all that fruitful to look for any one grand bestowal of psychiatric thought upon our native cultures and into the native ‘sensibility.’”\textsuperscript{155}

While I agree to some extent with Garcia’s claim on the overlap between religious and secular explanations for mental illness and homosexuality, I express my disagreement with his argument that historically inquiring into the colonial psychiatrization of homosexuality may not be a “fruitful” endeavor. I argue that such a study that foregrounds the colonial and post-colonial medicalization of Filipino homosexuality is critical in our understanding of the workings of Empire, colonial medicine, gender and sexuality in Philippine history.

Furthermore, I express my critique on what Tan and Garcia have assumed in their works concerning U.S. imperial rule as the era when homosexuality became constructed as a disease in the Philippines. I discuss two main points. Firstly, I seek to undermine Tan’s and Garcia’s binarizing view of the Spanish colonial regime in the Philippines being the “era of Christianized discourses,” and U.S. imperial rule as the “era of secularized science and medicine.” Both Tan

\textsuperscript{153} Ibid.
\textsuperscript{154} Ibid.
\textsuperscript{155} Ibid.
and Garcia neglect to account for the existence of scientific and medicalized discourses during the Spanish colonial regime. As shown by the study of Filipino historian Arnel Joven in 2012, “Colonial Adaptations in Tropical Asia: Spanish Medicine in the Philippines in the Seventeenth and Eighteenth Centuries,” Spanish colonial medicine began in the 17th century, through the efforts of Catholic clerics who ventured into “medical-pharmaceutical activities.” Joven argues that while there were a number of factors that constrained the practice of colonial medicine in the 17th and 18th-century Philippines, the Spanish colonial government somewhat fulfilled the task of governing the native Filipino body, both spiritually and medically, through the efforts of Spanish friars. Similarly, as the study of Filipino historian Luciano P.R. Santiago in 1994 has shown, the first Faculty of Medicine in the Philippines was founded during the Spanish colonial era, in 1871, at the University of Santo Tomas in Manila. His study also shows that during the late 18th century, there were Filipino students who attained their medical studies in Europe, mostly in Spain or in France. Therefore, it is highly possible that the colonial medicalization of the Filipino body began during the Spanish colonial era. However, to address the question of whether or not the process of medicalizing the Filipino body involved medicalizing the discourse of sex and sexuality as well, further archival research is needed.

While I assume that the usage of the term “homosexual” may not have existed in discourses during the Spanish colonial times (16th to late 19th century), given that the coinage of the term “homosexuality” only occurred in the late 19th century, I express my doubts that homosexuality per se became constructed as a disease during both the colonial regimes. Secondly, while U.S.

157 Ibid, 176.
158 Santiago, “The first Filipino doctors of medicine and surgery,” 103.
159 As I have mentioned in Chapter 2, the University of Santo Tomas Heritage Library possesses a collection of medical journals which were produced during the Spanish colonial era, and a closer investigation of these may open up the possibility of finding medicalized discourses on sex and sexuality in the late 19th-century Philippines.
imperialism in the Philippines left lasting legacies that include the medicalization of discourses on sex and sexuality, as what Tan and Garcia both assume, I do not claim that homosexuality became constructed as a disease during the American colonial period. In my experience in the archives in Manila, I was not able to find any scientific and medical studies on homosexuality per se that were published during the American colonial regime. As I have mentioned in Chapter 2, the only historical evidence I found is the 1916 colonial law that contains a brief note on the psychiatrization discourse of “perversion.”  

It is plausible to assume that such homosexual discourses might exist elsewhere around the Philippines, or in archival centers in the United States. However, for this thesis, my assumption is that the first scientific and medical study on homosexuality was published in the post-1946/post-Independence era.

What is clear in Tan’s and Garcia’s works is that the notions of Filipino same-sexual behavior and relations became juxtaposed to the Western medicalized notion of “homosexuality.” As previous scholarship has shown, the term “homosexual” may not be used un-problematically and uncritically when appropriated to different contexts. This can be clearly seen in the two conceptual models that I present below. The first one is Garcia’s “bakla/homosexual dynamic” for the male Filipino homosexual, and the second one is Filipino psychologist Mira Ofreneo’s “tomboy/homosexual construct” for Filipino female homosexuality.

3.3.1. The Bakla/Homosexual Dynamic

In his work in 1992, Tan acknowledges the complex relationship between the Western medicalized homosexual and the Filipino bakla or bayot. He claims:

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160 As I have mentioned in Chapter 2, I do not claim that the term “perversion,” as included in the 1916 law, pertains specifically to “homosexuality.”
…note that there are no local terms for heterosexuals or heterosexuality in the Philippines or for that matter, homosexuals or homosexuality. The term bakla, while used loosely now to refer to homosexuals, was most probably used to refer to gender, rather than sexual orientation, with an emphasis on effeminacy. Bakla is a linguistic contraction of babae or woman and lalaki or man. Bayot, a term used in the Visayas [central region in the Philippines], is a contraction of babae or woman and uten, or penis.¹⁶¹

Similarly, in his work in 1996, Garcia formulates a model that shows the relationship between homosexuality and Filipino male same-sexual behavior. Garcia argues that “indigenous” constructions of same-sexualities increasingly became “homosexualized.” He writes:

…Thus, the effeminate bakla is also the ‘homosexual’: a genitally male man whose identity is defined as a function of his sexual desire for other men. Nonetheless, it’s important to qualify that residual valuations of gender persist, and have simply served to modify the new sexual order. For instance, though the bakla has sex with the lalake (‘real man’), for many Filipinos it is only the former who is ‘homosexualized’ by the activity. This means that the process of sexualization, while increasing in alacrity and perniciousness, has not been consistent. In fact, the process has been skewed towards the further minoritization of what had already been an undesirable, effeminate, ‘native’ identity: the bakla. While the terms bakla and homosexual are far from congruent, many Filipinos use them interchangeably because they entail the same social effect: stigmatization.¹⁶²

Garcia refers to this conflation of the Filipino bakla/bayot with the Western homosexual as the “bakla/homosexual dynamic.”¹⁶³ In using Garcia’s bakla/homosexual dynamic for this study, I strive to show that the indigenous Filipino notions of male same-sexual behavior (bakla and bayot) becomes entangled with the Western concept of male homosexuality, in large part due to the legacies of Spanish and American colonialisms. Garcia does not propose a different model for the Visayan bayot. In this study, I use the bakla/homosexual dynamic in analyzing the medicalization of the Filipino male gender-crossover in general. Garcia mainly highlights male homosexuality in his work. For this

¹⁶³ Garcia highlights bakla as being distinctively a “gender term” rather than a form of “sexual orientation.” For a man to become a bakla means “more than evincing a sexual attraction to persons of the same sex, [it also means] becoming effeminate, transvestic, and perhaps funny.” In this sense, “all bakla are homosexual, but not all homosexual are bakla.” As Garcia claims, the “discourse of Western, binarized sexuality is already with us, and the bakla is now a homosexual. (This does not, however, mean that the boundaries of these two concepts have [all] of a sudden become perfectly contiguous).”¹⁶⁴ The history of how this “Western binarized sexuality discourse” worked out in the Philippine context is part and parcel of what this study seeks to map out. See Garcia, The Philippine Gay Culture, 52-53, 326.
reason, I propose to use Ofreneo’s conceptual model of the “tomboy/homosexual construct” to account for the medicalization of female homosexuality in the Philippines.

3.3.2. The Tomboy/Homosexual Construct

In her psychological study published in 2003, “Tomboys and Lesbians: The Filipino Female Homosexual and Her Identity Development Process,” Filipino psychologist Mira Alexis Ofreneo explain the concept of female homosexuality in the Philippines.164 Like Filipino scholars Tan and Garcia, Ofreneo argues that the Filipino concept of “homosexuality” as a medical condition results from the implantation of the American biomedical model beginning in U.S. imperial rule in the Philippines. Ofreneo discusses the Filipino appropriation of the English word, “tomboy,” which she refers to as the “most prevalent label denoting the female homosexual in Philippine culture.”165 Like Garcia’s discussion of the bakla/homosexual dynamic, Ofreneo’s study shows that there is a slippage between the Filipino construct of “tomboy” and “homosexual.” Ofreneo defines “tomboy” as a term that refers to the “stereotypically masculine female” who is also sexually attracted to women. The Filipino social category of the tomboy is, according to Ofreneo, “both masculine and homosexual.” The normatively feminine woman, who is in a relationship with the tomboy, is not a “homosexual.” The Filipino language describes such stereotypically feminine woman as “pumapatol sa tomboy, (a person who settles for a tomboy), reflecting the derogatory view of tomboys, the distinction between the masculine and the feminine roles, and the woman’s perceived heterosexuality.” Another linguistic nuance in using the Filipino tomboy/homosexual construct is that a female,

165 Ofreneo’s case informants were all located in the city of Manila; therefore, the major language used is Filipino, which is almost always interchanged with “Tagalog,” a common language spoken in the Northern Philippines.
according to Ofreneo, who is “merely masculine but not homosexual is labeled a tomboy.”¹⁶⁶ One scientific study, which was done by American anthropologist Donn V. Hart in 1968, cites the term “tomboy” as a Tagalog (the dominant language spoken in Manila and in the Northern Philippines) appropriation of its English referent. Hart, however, mostly uses the Cebuano term lakin-on to refer to typically masculine females who are sexually attracted to women, given that the setting of his research took place in the Visayan region of the Philippines.¹⁶⁷ Like Garcia, Ofreneo does not propose a Cebuano lakin-on/homosexual model. In this study, I use Ofreneo’s tomboy/homosexual model in my discussion of Filipino female same-sexual behavior and identity, in general.

In both the proposed models of the Filipino male and female homosexuality, it is notable that the distinction between the Filipino gender-crosser (bakla, bayot, tomboy and lakin-on) and the Western medicalized homosexual lies on the issue of same-sexual object choice. It is critical to note that only the ones who transgress the boundaries of gender are labeled as bakla, bayot, tomboy and lakin-on. If a typically masculine man or a normatively feminine woman engages in same-sexual relations with a bakla, bayot, tomboy or lakin-on, he or she does not automatically identify as “homosexual.”

3.4. Conclusion

In this chapter, I have presented the relevant historiographical scholarship on Filipino colonial medicine, gender, and homosexuality that I use in my analysis of the (post)colonial medicalization of Filipino homosexuality. I have highlighted the importance of Philippine medical historiography for this study, as well as the concept of “colonial medicalization,” since

¹⁶⁷ Cebuano is a common language spoken in Visayas, a group of islands in the Central Philippines.
previous scholarship has shown that the period of U.S. imperial rule in the Philippines is indeed a critical era in the medicalization of native Filipino bodies. I have argued that the process of medicalizing colonized bodies invariably meant medicalizing sexual bodies as well, and I strived to show this through my discussion on the relevant scholarship on the medicalization of homosexuality in the West and in the colonies. I also presented the theorizations made by Tan and Garcia about the possible medicalization of homosexuality during the American colonial regime in the Philippines. I argued that such postulations are crucial in my analysis of the two earliest scientific and medical texts on Filipino homosexuality that were published in the 1960s. I have presented two conceptual models of Filipino male and female homosexuality proposed by Garcia and Ofreneo respectively which I use in my analysis of the medicalization of homosexuality in the Philippines.

While both Garcia and Ofreneo have shown how Filipino notions of same-sexual behavior became historically conflated to the Western notion of homosexuality, there are a number of questions that were left un-addressed. If Garcia assumes that the legacies of Western colonization include the implantation of Western sexological discourses in the Philippines, what exactly do these medicalized discourses tell us about homosexuality? How did homosexuality become articulated as a pathological condition in the Philippines? If it were a disease, then what are its supposed causes? What are the symptoms? Is there a cure for it? These are the crucial points that are missing in the aforementioned literature, which I attempt to critically address in this research.

4.1. Introduction

For a long time in the history of Western Europe, Christian religious doctrine primarily dominated discursive conceptions about sexuality and same-sexual relations. In the 19th century, as Western European culture increasingly became “secularized,” the dominantly religious and moralizing discourse of non-normative sexualities as “unnatural sinful behaviors” gradually shifted to more “secularized” scientific notions of “pathology” and “perversion.”168 Medical professionals examined non-normative sexual bodies and subjected them to scientific and medical investigation. Beginning in the 1860s, doctors developed certain scientific and medical explanations for homosexuality.169 As I have noted in Chapter 3, such medicalization of homosexuality in 19th-century Western Europe also has repercussions in its former colonial territories, including the United States in the 20th century,170 and the Philippines in the post-Independence era.

The Spanish and American colonial regimes left lasting legacies in the history of religion and medicine in the Philippines. Roman Catholicism and Western medicine functioned as critical institutions that discursively regulated and reformed native Filipino male and female sexual bodies. In the post-Independence era, when the fields of (postcolonial) psychiatry and psychology became increasingly prominent in the Philippines, psychiatric discourses on

168 Foucault, The History of Sexuality, 64.
169 Terry, An American Obsession: Science, Medicine, and Homosexuality in Modern Society, 42.
sexuality proliferated. For this chapter, I focus my analysis on two of the earliest scientific and medical studies on homosexuality in the Philippines published in the 1960s.

In 1965, Filipino doctor Rosario Aquino published her article, “The Sociological Aspect of Homosexuality.”171 Three years later, American anthropologist Donn V. Hart published his study on Filipino Christian homosexuality entitled, “Homosexuality and Transvestism in the Philippines: The Cebuan Filipino Bayot and Lakin-on [sic].”172 For this chapter, I aim to address the question: how did Aquino and Hart use the discourse of science and medicine to produce the “truth about homosexuality” in the Philippines? The language of psychopathology and psychology, as postcolonial scholars Mary DelVecchio Good et al. have argued, “has the potential to reproduce medicalizing tendencies or to assert universal categories without warrant.”173 Such diagnostic language, then, informs medical intervention and clinical practice. In this chapter, I strive to: 1) provide the scientific and medical descriptions of pathological male and female homosexual bodies in the Philippines; and 2) determine what Aquino and Hart regarded as the scientific causes of homosexuality. What is “homosexuality”? Who is a “homosexual”? What are the “causes” of male and female homosexuality? These are the questions that this chapter seeks to answer.

This chapter will be subdivided as follows. In Chapter 4.2, I provide a discussion on the two aforementioned earliest scientific and medical studies on homosexuality in the Philippines by Aquino and Hart, published in 1965 and 1968 respectively. In Chapter 4.3, I discuss Aquino’s

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and Hart’s descriptions of male and female homosexual bodies as well as non-normative sexual bodies in the Philippines. I include a discussion of the different types of pathological same-sexual activities according to the two texts. I also examine how the issue of class intersects with the medicalization of homosexual bodies. In Chapter 4.4, I discuss Aquino’s and Hart’s postulations on the scientific explanations of Filipino male and female homosexuality. The two most common causes of homosexuality according to these texts are heredity and socio-cultural circumstances. Such explanations on the origins of homosexuality reflect dominant Westernized sexological views which began in late 19th-century Europe. Chapter 4.5 covers the conclusion.

My analysis will show that the discourses on homosexuality in the post-Independence Philippines indeed contain Westernized and medicalized models of thought in constructing the concept of “homosexuality,” in line with what Filipino scholars Michael Tan and J. Neil Garcia have written about this.174

4.2. The Scientific and Medical Studies on Homosexuality in the Philippines: The Works of Rosario Aquino and Donn V. Hart (1965-1968)

It is difficult to find information about the author of the article entitled, “The Sociological Aspect of Homosexuality.” Based on the journal article, I can only state that the author of the study, named Rosario Aquino, was a female Filipino doctor who wrote for the University of Santo Tomas Journal of Education in 1965.175 Aquino’s work is the earliest recorded scientific


175 The author is most likely female, since “Rosario” is a common female name in the Philippines. Meanwhile, the University of Santo Tomas (U.S.T.) is the oldest existing Catholic university in the Philippines, and in Asia. Located in Manila, the university was founded in 1611 during the Spanish colonial era. The University of Santo Tomas Journal of Education is the official organ of the U.S.T. College of Education. Its first publication was in December 1956. The said journal is still in operation today. See Pontifical and Royal University of Santo Tomas: The Catholic
study on homosexuality in the Philippines. It was published in the *University of Santo Tomas Journal of Education*, volume number 10, in 1965. The article is composed of 6 pages in total, and it is written in the English language. Aquino’s article is a sociological study that seeks to explain what homosexuality is; what constitutes homosexual behavior; and who is considered as a “homosexual.” In her work, Aquino notes that the pathological condition of homosexuality is strongly related to neurosis, psychosis, and suicidal tendencies. In her article, Aquino includes case histories of one woman and one man who sought clinical assistance in dealing with homosexuality. With regard to the significance of her study, Aquino remarks that:

> Full understanding of the nature of homosexuality would accomplish two things. First, the lot of the confirmed homosexuals would be less difficult, and second, it is likely that such knowledge would result in the diminution of supply of homosexuals in our society.

In 1968, Donn V. Hart (1918-1983) published an article entitled “Homosexuality and Transvestism in the Philippines: The Cebuan Filipino Bayot and Lakin-on [sic].” The author was an American anthropologist who did research in the Philippines beginning in the 1950s. He earned his bachelor’s degree from the University of California, Berkeley in 1941, and his master’s degree from Harvard University in 1942. In 1956 to 1957, Hart taught anthropology...
at the University of the Philippines in Diliman. At the time of his study’s publication, Hart was a Professor of Anthropology at Syracuse University, New York.

In his study, Hart cites Aquino’s work as one of his references. Hart claims that Aquino’s study is “[t]he only scholarly article on this topic [homosexuality] by a Filipino [that] discusses two cases involving male and female homosexuality, but the study is so brief and superficial as to be informative.” Hart’s text contains 38 pages in total, and it is written in English. Hart claims that his “exploratory article” attempts to achieve a “fuller understanding of Philippine society and culture in general and of homosexuality and transvestism in particular.” He aims to “[outline] in broad terms the contours of homosexuality and transvestism for the largest cultural-linguistic group in the Philippines [Cebuano].” Hart’s research was done in Negros Oriental, an island located in the Visayan region in the Central Philippines. Hart conducted his research in three specific areas, which are Siaton and Caticugan (two local villages), and Dumaguete (the capital city of Negros Oriental). It is crucial to note that Hart misattributed the term “Cebuano” to refer to the residents of Negros Oriental. The term “Cebuano” may refer to two similar, but nevertheless distinctively separate entities. Firstly, the term Cebuano typically refers to people residing in the island of Cebu, in the Visayan region. Secondly, Cebuano also refers to the most common language spoken in the island of Negros. The inhabitants of the island

180 The University of the Philippines (U.P.) is a public university established during the American colonial regime in 1908. The university was first built in Manila. Presently, the flagship campus is located in Diliman, an area in the city of Quezon in the island of Luzon.
182 While Hart remarks that Aquino’s work is “superficial” and “un-informative,” I claim that it is nevertheless crucial in analyzing pathologizing discourses on homosexuality in the post-Independence Philippines, given that her work is the earliest scientific study to be produced in the country. Ibid, 212.
183 Ibid.
184 Ibid.
185 The Philippine archipelago is typically divided into three main islands, Luzon, Visayas, and Mindanao. Located in Western Visayas, the island of Negros is partitioned into two provinces namely, Negros Oriental and Negros Occidental. Negros Oriental had an estimated population of 2,225,000 in 1964, during the time when Hart conducted his ethnographic research there.
of Negros, however, are not referred to as “Cebuanos.” They are known as “Negrenses.”

Therefore, I claim that Hart’s usage of “Cebuano” in referring to the male and female “homosexuals” and “transvestites” in his main research area, Negros Oriental, proves to be inaccurate. For this thesis, I use the term “Cebuano” quite loosely to refer to the language spoken in Negros Oriental. Meanwhile, in referring to the ethno-linguistic identity of Hart’s informants, I use the term “Negrense.” It is also critical to mention that Hart gathered informants from a dominantly Christianized area in Negros Oriental.

Hart’s ethnographic study of Filipino gender-crossing and same-sexual behavior in Negros Oriental, I argue, presents four key issues. Firstly, Hart uses the Western terms “homosexual,” “lesbian,” “transvestite,” and “hermaphrodites,” as English translations for the native Cebuano terms bayot and lakin-on. The bayot and lakin-on are local Cebuano referents for male and female gender-crossers who engage in same-sexual relations. Hart, however, expresses his critique that such Western, Anglicized terms do not entirely correspond to the local terms bayot and lakin-on. As Hart claims, the bayot and lakin-on “lack the condemnatory meaning of the English terms, homosexual, lesbian, or transvestite.” Despite Hart’s attempt to be cautious in using the English terms to refer to native non-normative sexualities, Hart’s usage of “homosexuality” and “transvestism” in his study contributed to what Garcia refers to as the “slippage” of meanings between the Western medicalized terms for homosexual behavior, and native Filipino words for gender-crossing and same-sexual practices. Secondly, Hart provides descriptions of Filipino male and female gender variance which he claims to manifest itself in

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187 In his description of his research area, he states that, “[d]ata for this examination of Christian Filipino homosexuality and transvestism were gathered during an extended period of residence in a rural Filipino municipality.” See Hart, “Homosexuality and Transvestism in the Philippines,” 213.


189 I explain this is much more detail in Chapter 3, “Historiography on Filipino Colonial Medicine, Gender and Homosexuality.”
the bodies of homosexuals. Like Aquino, Hart also outlines some of the types of Filipino same-sexual practices which he refers to in their original local terms. Thirdly, Hart provides a number of the alleged “causes” of homosexuality, based on the statements made by his Negrense informants. He concludes his study by stating that homosexuality is a product of either hereditary transmission and socio-cultural circumstances, or both.

4.3. Medicalizing Postcolonial Sexual Bodies in the Philippines

4.3.1. Filipino Male and Female Non-Normative Sexual Bodies

According to Aquino, “homosexuality” is a “situation wherein the sexual attitudes which are normally directed toward members of the [opposite] sex (heterosexuality) are turned toward persons of the same sex. For the homosexual male, another male rather than a female becomes his sex object; and the converse is true of the female.”190 The male homosexuals, for Aquino, are “men who dress themselves up as females, make up their faces with cosmetics, colour their nails with nail polish and so on.”191 Aquino places a distinction, which I claim to be an ambiguous one, between the “homosexual” with the “transvestite.” Aquino describes the transvestite as “a person who likes to wear the clothes of the opposite sex obtains sexual excitement from so doing.”192 For Aquino, the act of “cross-dressing” determines whether one is “homosexual” or not.

Similarly, in his study, Hart provides descriptions of the appearances and behavior of “homosexuals.” However, unlike Aquino who uses English terms, Hart uses the indigenous words bayot and the lakin-on. He claims that in the two areas where he conducted his research, Siaton and Dumaguete, Negrenses refer to the bayot and lakin-on as “men or women who only

191 Ibid, 23.
192 Ibid.
slightly exhibit *physical stigmata* or behavioral characteristics thought typical of the opposite sex, to transvestites, or to overt, aggressive homosexuals who do not cross dress." I highlight Hart’s usage of the term “physical stigmata” as it presents several layers of meanings that are critical for my analysis. The word “stigmata,” when used primarily in the context of Christianity, refers to the “marks that appear on a person’s body in the same places as those made on Jesus’ body when he was fastened to a cross with nails.” When used as a medical term, “stigmata” refers to “a visible sign or characteristic of a disease.” Moreover, in its singular form, “stigma” can also mean “a mark of disgrace associated with a particular circumstance, quality, or person.” Hart’s use of the term “stigmata” to refer to the telltale signs of native homosexuality in the Philippines therefore presents three crucial issues. Firstly, I argue that in using the term “stigmata,” Hart’s text shows how language functions as a discursive space where religion (Christianity) and medicine overlap in matters concerning homosexuality. As this thesis suggests, religious and medicalizing discourses on homosexuality in the Philippines have permeable boundaries. Secondly, Hart’s usage of “physical stigmata” constructs the Filipino homosexual body as an entity that is tainted with visible signs of pathology. Homosexuality, as a disease, manifests itself quite visibly on the body. Thirdly, in addition to its religious and medical connotations, the term “physical stigmata,” when used to refer to homosexual bodies, invariably associates homosexuality with a “mark of disgrace” in society.

Like Aquino, Hart claims that transgressing the boundaries of “gendered clothing” is an indicator of being a *bayot* or a *lakin-on*. The *bayots*, according to Hart, “wear dresses in the

196 *Ibid*. 

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privacy of their own homes or in friends’ dwellings.” Hart cites an informant who claims that, “[d]uring the day, he [the bayot] wears a duster…at night, a girl’s dress. During the day, when he goes to the market, he wears jeans, with step-ins [low-heeled women’s shoes], and lipstick.” Similarly, an informant claims that “…if they [bayot] cannot attract men, they go home. In attractive dresses with perfume and decorated step-ins, they wait for men.” Hart narrates a case study of a self-identified bayot named Amy who does “public cross-dressing,” whose appearance he describes as follows:

In public cross-dressing, bayot normally wear slacks or stretch-pants, blouses, and often “falsies [pads made of cloth used to visibly increase the size of breasts]”…He wrap[s] a towel around his hips to produce a more feminine figure. His long hair was marcelled, and sometimes “teased” in the latest mode. Eyebrows were shaved and penciled in; long fingernails brightly polished. Amy used lipstick and eyeshadow; once he said he had sparkles on the upper eyelids. He rarely used rouge or powder, two cosmetics that are not commonly used by most Filipinas.

Meanwhile, in the case of the lakin-on, Hart claims that “[t]he popular dress for these lakin-on are tight-fitting denim or corduroy trousers (locally called ‘cowboy pants’). Some wear the increasingly popular stretch-pants. As do many men, they may tie the front ends of their shirt in a knot at the waist.” Some lakin-on hairstyles include “crew or flat-top haircuts.” Most lakin-on, according to Hart, “wear their hair ‘more like the Beatles,’ i.e. shorter than the typical Filipina.”

198 Ibid.
199 Ibid.
201 Hart mentions the local terms in Dumaguete referring to lakin-ons who are sweethearts, which are kuragaán or kuragkuragang. In a different location, in the town of Siaton, these terms, according to Hart, refer to women (or bayot) who “exaggerate their femininity and flirt excessively, i.e. coquettes or hussies.” Ibid, 224.
202 It is interesting to note how Western popular culture in the 1960s gained popularity in the Philippines. The American “cowboy pants” and the English rock band “The Beatles” apparently influenced postcolonial discourses on Filipino cross-dressing in the 1960s. Ibid.
In Western Europe, beginning in the early 20th century, the term “transvestism” signified a form of transgression.\textsuperscript{203} Coined by German sexologist Magnus Hirschfeld in 1910, the term transvestism implies that certain “gendered rules” govern clothing and fashion, and if one dresses up in a manner that transgresses such rules, then, one allegedly exhibits gender variance and/or sexual deviance.\textsuperscript{204} European/American psychiatric discourses in the 19th and 20th centuries constructed and conceptualized transvestism as a form of pathological behavior.\textsuperscript{205} As I have highlighted above, the discourse of transvestism entered the Philippines in the 1960s. I raise three issues. Firstly, it is unclear in both Aquino’s and Hart’s texts how Filipino practices of cross-dressing directly relate to same-sexual relations. Both authors provide ambiguous definitions of how “transvestism” is different from “homosexuality.” It is therefore likely to assume that both authors regard transvestism as somehow inherently constitutive of homosexual behavior in the Philippines. Secondly, I aim to highlight Hart’s definition of “physical stigmata.” As I have emphasized above, Hart defines the bayot and lakin-on as Filipino men and women who behave in a way that is “typical of the opposite sex” and who are “transvestites.”\textsuperscript{206} Cross-dressing, then, according to Hart, may be a manifestation of physical stigmata that visibly marks the Filipino homosexual as a pathological gender variant. Third, based on the textual discourses I have noted above, it is possible that through the works of Aquino and Hart, the Western discourse of pathological cross-dressing (which is invariably associated with homosexuality) became implanted in the Philippines. This is in line with what Tan and Garcia postulated in the

\textsuperscript{203} In the words of English anthropologist Andrea Cornwall, “[t]ransvestites transgress, moving across the boundaries marking gendered difference.” See Andrea Cornwall. “Gendered identities and gender ambiguity among transvestis in Salvador, Brazil,” in Dislocating Masculinity: Comparative Ethnographies. (London and New York: Routledge, 1994), 112.

\textsuperscript{204} Ibid.


\textsuperscript{206} Hart, “Homosexuality and Transvestism in the Philippines,” 215.
1990s, that Western discourses on homosexuality, as well as transvestism, permeated the Philippines through (post)colonialism.\footnote{See Chapter 3.}

Apart from describing Filipino cross-dressing practices, Hart also notes corporeal characteristics of the bayot and the lakin-on. Hart claims that the traits of the bayot include “a high-pitched laugh, hands dangling from limp wrists, and a mincing walk. Bayot are expert dancers.”\footnote{Hart, “Homosexuality and Transvestism in the Philippines,” 217.} Moreover, Hart claims that according to his informants, an indisputable way to determine the sex of a “suspected male transvestite” is to “look at his Adam’s apple, which is ‘always larger and more prominent than the female’s.’”\footnote{Hart also compares and equates the characteristics of the bayot with the Native American berdache whom he defines as “a male (or female) who assumes the role and status of the opposite sex and is viewed by the community as being of one sex physiologically but as having assumed the role and status of the opposite sex.” Ibid, 217-218; 224.} Similarly, he claims that a certain bayot “had perfected the flirt’s posterior-wagging gait and the shrill laughter of the female.”\footnote{Ibid, 224.} Meanwhile, the lakin-on, according to Hart, refers to “a lesbian or a woman with some masculine physical features who often does tasks regarded primarily as a man’s work.”\footnote{Ibid, 215.} These “masculine physical characteristics,” Hart claims, include having “more muscles in their legs and arms than women”; a “stiff, tough body”; a “flat chest”; and a “brave look.” The lakin-on lacks the “softer, more gentle (ideal), facial features of women.”\footnote{Ibid, 223.} Hart then narrates a case study of a lakin-on, whose features, according to Hart, were “strikingly masculine; she walked like a man, e.g. taking longer steps than most women and with a vigorous gait.”\footnote{Ibid.} At this point, Hart mentions that the term “lesbian” may not always be synonymous to lakin-on, since he argues that many local lakin-on were “not regarded as lesbians, but as women whose mannish features and behavior set
them apart from the typical female.” Hart presents a story of a lakin-on whom he describes as a woman who had a “stockier figure than most females, and unusually muscular legs.” Hart explains that this lakin-on allegedly lived with another woman and performed “physically demanding tasks” like keeping livestock (cattle), and managing a small coconut grove – tasks that are “invariably associated with males.”

In addition to his discussion on Filipino homosexual bodies, Hart also briefly highlights some forms of non-normative Filipino sexual bodies. In his study, Hart mentions the medical term “gerontosexuality” in referring to a case of a thirteen-year-old bayot who “likes to play with the [penises] of old men.” One of Hart’s informants reported that the aforementioned bayot likes to “fondle the testes of old men.” Hart states that several of his informants believed that some bayot had a “vagina above the anus.” Hart cites an instance when a government physician in Siaton “personally reported examining a small boy in an interior barrio [town] who had an underdeveloped vagina with a normal penis.” Hart classifies the case of the child as an instance of “gynandromorphism,” rather than a case of “hermaphroditism.”

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214 Ibid.
215 Ibid.
216 Ibid.
218 Ibid.
219 Ibid, 220.
220 Ibid.
221 Hart similarly fails to provide a definition for “gynandromorphism.” A gynandromorph, according to *Oxford Dictionaries*, is “an abnormal individual, especially an insect, having some male and some female characteristics (emphasis mine).” It is not stated in the document how Hart came up with his own diagnosis of the small boy’s condition, and how he differentiates the meanings between gynandromorphism and hermaphroditism. It is also critical to note that the contemporary definition of gynandromorphism typically characterizes bodies of insects and not humans. See *Oxford Dictionaries*, s.v. “gynandromorph,” Accessed, May 25, 2017, https://en.oxforddictionaries.com/definition/gynandromorph
222 Ibid.
Such extensive description of Filipino non-normative sexual bodies led me to assume that there is a crucial link between anthropological discourses produced during the American colonial regime and Hart’s post-Independence ethnographic study on Filipino homosexuality. In the early 19th century, European anthropologists constructed discourses on racial variance through extensive investigations of native bodies from colonial territories. As Belgian historian Rudy Bleys has argued, these anthropologists measured and examined native body parts which predictably include the male and female genitalia. Similarly, in the early 20th-century Philippines, American anthropologists used the rhetoric of scientific research to examine Filipino bodies. During the post-Independence period, I suggest that such anthropological examination of Filipino bodies also occurred. As seen in Hart’s vivid description of the corporeal characteristics of the bayot and lakin-on as well as the genitalia of non-normative Filipino sexual bodies which he refers to as “physical stigmata,” Western (post)colonial anthropology and medicine worked hand-in-hand in discursively conceptualizing non-normative sexual bodies in the Philippines as deviant and pathological. It is important to note that unlike Hart, Aquino does not regard homosexuality as a bodily disorder. As I suggest in Chapter 5, Aquino constructs homosexuality primarily as a mental illness.

4.3.2. The Types of Pathological Homosexual Activity in the Philippines

In her article, Aquino claims that “homosexuals” fall into three types based on their roles in performing same-sexual activity. The first type involves the “active males” who “play the male role in intercourse; as do the active females,” while the second type includes the so-called

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224 Ibid, 130.
“mixed types” who “assume both sides,” that is, they may play both active and passive roles during sexual intercourse. Aquino argues that this second type of “homosexuals” who display flexibility and versatility in assuming sexual roles is the “most frequent” type. It is unclear in the text how Aquino came up with such alleged demographic “frequency” of the second type, since the author makes no citation of any source or any statistical record. The third type, according to Aquino, constitutes the “passive” males who “play female roles,” as well as the “passive” females who assume “passive” feminine roles in a sexual relationship.

Whereas Aquino identifies three homosexual roles in sexual intercourse, Hart claims that there are four most common sexual practices of the bayot. The first one involves what Hart calls as “fellation,” which he translates to Filipino as súpsop or sipsip – verbs that mean “to suck” or “to suckle.” The second most common sexual practice of the bayot, according to Hart, is “pederasty” or “homosexual anal intercourse,” which he translates as oros or the “Chinese kick.” Hart claims that the third most common sexual practice of the bayot is “interfemoral copulation,” locally known as ípit (“to squeeze or press between”), which involves inserting the penis (útin) “between lubricated inner thighs.” The fourth most common sexual activity of the bayot, in Hart’s words, is the “manual, and sometimes mutual masturbation,” which is locally known as laso.

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226 Ibid.
227 Ibid.
228 Hart, “Homosexuality and Transvestism in the Philippines,” 231.
229 Hart explains the etymology of the term “Chinese Kick.” He refers to the works of early Spanish authors who wrote about the Philippines (e.g. Antonio de Morga, Francisco Ignacio Alcina, and Benedictine Antonio San Roman Ribadeneyra). These Spanish chroniclers argued that “sodomy” was “introduced” to the Filipinos by the Chinese and the Japanese; sodomy, or anal intercourse, then, becomes phrased as “Chinese Kick” in Filipino local terminology. Similarly, in his work, Garcia provides a historical discussion of Chinese immigrants being blamed for sodomy during the Spanish colonial period. See Garcia, The Philippine Gay Culture, 139.
230 Ibid.
231 Ibid.
Based on this text, I assume, therefore, that Hart’s use of the English/Western “fellation,” “pederasty/homosexual anal intercourse,” “interfemoral copulation,” and “manual and mutual masturbation” to mean the Filipino practices of súpsop or sipsip, oros, ípit and laso, respectively, cements the link between indigenous same-sexual practices and Western medicalized terms for male homosexual intercourse.\textsuperscript{232} Given the history of these Western terms, the words fellation, pederasty, homosexual anal intercourse, interfemoral copulation, and masturbation are not “neutral words” that may be easily and non-problematically associated with indigenous Filipino labels for same-sexual activity.

4.3.3. Classed Filipino Homosexual Bodies

The study of Aquino suggests that the issue of class may be part of the medicalizing discourse on homosexuality in the post-Independence Philippines. It is unclear, however, how Aquino defines her usage of the term “class.” In one instance, Aquino claims that “[t]he homosexual nearly always believes that there are two classes of men and women, the homosexual and the heterosexual, and that he simply belongs to the homosexual class.”\textsuperscript{233} What we can assume from this is that Aquino uses the term “class” to pertain to the binarized division of Filipinos based on heterosexuality and homosexuality; class here means “group.”\textsuperscript{234} Elsewhere, however, Aquino uses class as a marker of socio-economic difference of homosexuals. According to Aquino, there are three “classes” of homosexuals. The first class includes the “respectable homosexuals,” who are the “men who live a quiet, decent life, and

\textsuperscript{232} It is notable that Hart does not include a discussion on female same-sexual activities practiced by the lakin-on.
\textsuperscript{234} In Chapter 3, I have argued that, following Garcia’s arguments in 1996, such fixed heterosexual/homosexual dichotomy is not applicable to Filipino conceptions of gender and sexuality. As Garcia notes, “sexuality as a discourse fixed around the homo/hetero definition does not have analogues in our native culture.” Garcia, \textit{The Philippine Gay Culture}, 52.
apart from their sexuality do not behave abnormally.”\textsuperscript{235} The second class, Aquino claims, is that of the “prostitute.” Aquino describes this class as “not only abnormal,” but argues that he “uses his abnormality as a source of profit to himself.”\textsuperscript{236} The third and final class of “homosexuals,” as Aquino claims, is that of the “hoodlum.” The “hoodlum,” according to Aquino, is the “bullying black-mailer who frequently works with the prostitute type to entice the respectable homosexual into his clutches.”\textsuperscript{237} It is important to note that Aquino does not provide any scientific study that supports her three-fold categorization of the homosexuals. Apart from these three “classes,” Aquino claims that there are some “trades” and “professions” that homosexuals are prominent in, such as “dress designing, interior decorating, acting, ballet dancing, and so on. Often he [the male homosexual] is successful and wealthy.”\textsuperscript{238} Moreover, Aquino argues that socio-economic class plays a role in determining the varying levels of “sex drive.” In her words, “[p]opular beliefs have stressed the fact that sex drive is weaker in girls of the higher socio-economic status than in girls of the lower.”\textsuperscript{239} It is notable that apart from citing one study done in 1929,\textsuperscript{240} Aquino does not provide any supporting scholarship, methodology, or any valid data throughout her article. Nevertheless, Aquino’s study on the triple division of homosexuals into the “respectable,” the “prostitute,” and the “hoodlum” suggests that the issue of class intersects with pathological homosexuality in the Philippines.

\textsuperscript{236} Ibid.
\textsuperscript{237} A “hoodlum” is a “violent criminal,” or a “young ruffian (brutal person).” Merriam Webster Online s.v. Available from: https://www.merriam-webster.com/dictionary/hoodlum; Accessed on 7 April 2017. It is notable that in all three types, Aquino only uses male nouns and pronouns (e.g. “his” and “men”). It is unclear in the document whether or not Aquino uses male pronouns to designate both “homosexual” men and women.
\textsuperscript{238} Ibid, 21.
\textsuperscript{239} Ibid.
Indeed, studies on Filipino male homosexuality have shown that class was a factor in the formation of gendered and sexual identities. In 1995, Tan published an article entitled, “From Bakla to Gay: Shifting Gender Identities and Sexual Behaviors in the Philippines.”241 Here, Tan presents categorizations of the male “homosexual” population in the Philippines whom he divides into the “call boys,” who are the male sex workers; the “parloristas,” or the “low-income” men working in beauty parlors; and the self-identified “gays,” the heterogeneous middle-income group.242 Similarly, in his study on Filipino gay immigrants to the United States (2003), Filipino anthropologist Martin Manalansan IV claims that socio-economic class intersects with the process of immigration.243 Moreover the anthropological study by Filipino scholar Bobby Benedicto about the local and global gay scenes (2014) highlights how the issue of class and poverty - as experienced in 21st-century postcolonial and “third-world” Manila – functions as a crucial aspect in conceptualizing homosexual identities in the Philippines.244 The question of whether or not “homosexual class” or “classed homosexuality” in the Philippines directly relates to the process of medicalization, however, is an issue left unanswered for this thesis, given that I am merely using one short article by Aquino. Hart, unlike Aquino, does not provide a detailed description of classed homosexual bodies in the Philippines. For now, I only assume that the understandings of homosexuality in the Philippines intertwine with the issue of class, and that the medicalization of classed homosexual bodies may be a possibility.

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4.4. The Scientific “Causes” of Homosexuality in the Post-Independence Philippines

As said, the late 19th century marks the beginning of the formulation of scientific explanations for homosexuality in Western Europe. While Western European sexologists proposed numerous theories on the causes of homosexual behavior, two points of view dominated – the belief that homosexuality is an innate and hereditary condition, and the belief that it is a result of social circumstances or psychogenic processes.\(^{245}\) As I strive to show below, such Westernized discourses of the scientific causes of homosexuality during the 1860s permeated the Philippines during the 1960s - notably, one century later. In their works, Aquino and Hart construct the causes of homosexuality within two binarizing views - hereditary transmission, and socio-cultural circumstances.

In her work, Aquino does not provide an extensive discussion of homosexuality being hereditarily transmitted. She merely mentions that:

He [the homosexual] considers himself that way “by nature,” and despite the fact that he suffers from social pressure, he believes that he has a right to his own sexuality and that he should fight for that right if necessary (emphasis mine).\(^ {246}\)

It is therefore possible to assume that she constructs homosexual behavior as a product of merely social circumstances and psychogenic processes. She cites one article in 1929 by Katharine Berment Davis, an American criminologist who conducted a study on female sexuality during the 1920s. Aquino claims that “homosexuality” was “nearly twice as often found among girls in

\(^{245}\) Terry writes, “...authors - including, most notably, Karl Heinrich Ulrichs and Magnus Hirschfeld – interpreted homosexuality in a naturalistic manner. The naturalists perceived homosexuality to be a benign but inborn anomaly, linked to an organic congenital predisposition or to other evolutionary factors. Homosexuality, to them, was a condition of inborn sexual inversion, which caused homosexuals to be neither truly male nor truly female but to have characteristics of the opposite sex...[Meanwhile,] Freud and his fellow psychogenists generally regarded homosexuality as a psychogenically caused outcome of early childhood experiences.” Terry, *An American Obsession*, 43.

\(^{246}\) *Ibid.*
women’s colleges as in co-educational institutions.” She claims that this was also the same case for male students. Moreover, Aquino mentions that there are more “homosexuals” among “sailors, army men in dormitories, and prisoners.” In addressing the question of whether or not homosexuality can be “cured,” Aquino argues that the influence of social circumstances in crucial “changing” homosexuals into heterosexuals. She states:

Can homosexuals be changed into heterosexuals? The question has not been answered yet, but it is likely that such changes can be accomplished, give the proper motivation on the part of the person involved and by exposing him or her to the appropriate experiences (education and environment). If a homosexual person is not satisfied with his attitudes toward sex and wished to become heterosexual, if he can alter the social situations so that they are favorable to the heterosexual attitude, and can be given the proper emotional experiences over a long period of time, experiences with members of the opposite sex which are pleasurable from both a social and physiological viewpoint, it is likely that gains can be made in the direction of heterosexuality."

As seen in late 19th century Western sexological discourses, such view of homosexual behavior manifesting itself due to certain non-normative conditions - in this case, homosocial environments - reflects German psychiatrist Richard von Krafft Ebing’s notion of “immoral perversity.” As Terry has noted, “immoral perversity” refers to the “practice of homosexuality itself when it occurred under unusual circumstances among individuals who were otherwise neither tainted nor sexually inverted in their identity or sex role.” Krafft Ebing’s “immoral perversity,” as Aquino’s text suggests, has permeated the discourse on homosexuality in the Philippines.

248 It is critical to note that one of the lasting legacies of Spanish colonial rule in the Philippines is the establishment of “single-sex” educational institutions. As shown in Filipino historian Encarnacion Alzona’s extensive study on the history of education in the Philippines, the Spanish colonial government granted royal decrees which mandated the founding of schools throughout the Philippines beginning in the 16th century. At the time, these schools strictly separated students based on sex/gender. Presently, quite a number of these educational institutions which separate male and female students are still in operation in the Philippines. See Encarnacion Alzona. A History of Education in the Philippines (1565-1930). (Manila: University of the Philippines, 1932), 17.
251 Terry, An American Obsession, 47.
In his research in the Philippines during the 1960s, Hart conducted interviews with locals in specific areas in Negros Oriental to inquire about their perceptions of what “causes” homosexuality. Most of the informants, according to Hart, believe that “the bayot and lakin-on traits, physical and behavioral, are hereditarily transmitted.” Hart mentions an “animated” discussion he had with some of his informants wherein they debated on whether the “genesis” of the bayot and the lakin-on was dominantly “biological” or “cultural.” Hart reports:

For example, a person might later develop into a bayot because of childhood training and/or the family situation, i.e. parents dressing and treating a son as a daughter or intense adolescent identification with the mother when the father was a stern, nonsuccoring figure. They firmly rejected these suggestions or any cultural basis of sexual inversion.

In justifying their views that “homosexuality” is mainly a biological rather than cultural issue, each informant listed their relatives and family members who were bayot. Hart argues that, “[o]ne claimed a bayot cousin, another said both his younger brother and a nephew were bayot, and the third, a classificatory uncle.” Based on these grounds, Hart concludes that for some of his Filipino informants, the “hereditary nature of their deviancy was indisputable.” In a case study, Hart cites an informant who spoke about the “cause” of bayotness:

I think the bayot inherits his qualities. I know a son of a good family who, as a bayot, became a problem to the parents. They tried to correct his ways, to prevent him from wearing a woman’s dress. His father is masculine, but the bayot’s mother’s father was a bayot.

Hart also narrates another case study of an informant who argued in favor of the “hereditary nature” of bayotness:

One municipal official cited the case of a cousin who dressed her last child (all her children were sons) as a girl, calling him Inday [Inday is a common Filipino name for females]. Before he

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253 Ibid.
254 It is unclear what Hart means by “classificatory uncle.”
255 Ibid.
256 Ibid, 240.
began school, a daughter was born to the parents, and the boy returned to male dress. That he never became a bayot in adult life was cited as evidence of its hereditary nature.\textsuperscript{257} Hart makes a distinction between his informants in relation to social divisions of class, stating that elite Filipinos who were “better-educated” and “more acculturated” claimed that the bayot and lakin-on were “product[s] of heredity.”\textsuperscript{258} Hart argues that according to these elite Filipinos, “latent genetic basis for inversion must exist, otherwise no amount of influence could make one bayot or lakin-on.”\textsuperscript{259}

Meanwhile, Hart claims that some informants argued that in determining the cause of homosexuality, socio-cultural aspects play a role. Hart narrates a case study of two brothers, who, according to an elderly woman from the barrio (town) who had known the two since birth, have been raised by their “domineering mother” to do household chores. Hart states that:

> When young, the two brothers washed and ironed the family laundry, and were taught to weave abaka cloth. Their father, a bayot-bayot [effeminate male], had been “under the sáya [skirt],” “henpecked,” or “tied to apron and strings.”\textsuperscript{260}

The case of the two brothers, according to Hart, presents an instance where the social environment contributed to their becoming a bayot. The effeminate figure of the father whom Hart describes as “under the sáya,” “henpecked,” and “tied to apron and strings,” - idiomatic expressions which pertain to a weakened paternal authoritative image - and the figure of the “domineering mother” are the underlying causes of bayotness. In a different group of informants, Hart claims that “homosexuality” results from a combination of the two - meaning, the inborn, biological, and hereditary condition of “sexual inversion” can be further developed through

\textsuperscript{257} \textit{Ibid.}

\textsuperscript{258} Hart uses the term “poblcaion elites” to refer to the people who live in the center of a town, municipality, or city. In a typical barrio (town) in the Philippines, it is common to associate living in the center with (upper) social class.\textsuperscript{259} \textit{Ibid.}

\textsuperscript{260} The Filipino expression, “magtago sa ilaim ng sáya,” literally translates to “going underneath the skirt.” The phrase, used in this context, refers to being placed under the authority or protection of someone else. This phrase closely relates to the term “henpecked,” and the idiomatic expression, “tied to apron and strings,” which loosely refer to someone, usually a man, who is dominated either by his mother, wife or lover. \textit{Ibid}, 239
social interaction and environment. Hart presents a case study of a *lakin-on* as narrated by an informant:

I have a niece who was really a tomboy when she was born, my sister used to buy her dolls but she did not like to play with them. She got her brother’s toys, like guns. But her tomboyishness was never developed when she was young because her friends were not tomboys in high school. But during her college days most of her friends were tomboys. They courted girls. She had three girl friends. At first we did not believe her. One vacation letters began to arrive from her girl friends. So we would believe her, she let us read the letters.  

In his narration of his last case study, Hart argues that this particular narrative is reflective of the supposed “genetic recessiveness” of the *bayot* that necessitates influence later in life “to [fully] develop into deviancy.” Hart’s informant remarks that:

There are those when young who have signs that they will become bayot. But if they are not influenced or encouraged by others, they will not be *bad* (emphasis mine). I know one boy who had feminine traits and was influenced by his friends. He was not a bayot in the past but he is today. In fact, once he became annoyed when children shouted at him [“Bayot”]. But now he sways his hips all the more when he is called *Inday* [a common bayot name]…His father wanted to change him but could not because all his friends were bayot. The bayot promised his father many times he would change but he could not. His father told him he would disinherit him. So his father would believe his desire to change he married a tomboy. The wife is a real tomboy. They were married in the church. The wife first treated him as a real girl and he treated her as a real man. But now the bayot goes out with handsome men and the tomboy-wife is said to be courting girls. They still live in one house but do not mind each other’s traits.

Furthermore, Hart remarks that the hereditary nature or biological proclivity of the *bayot* and *lakin-on* may be “activated” through “frequent contacts with seducing bayot or role inversion of the child by parents or close relatives.” As a conclusion, Hart argues that the “origin” of male and female homosexuality as articulated by his informants in Negros Oriental, is a result of various factors. Hart claims that the reasons are either “hereditary,” “cultural,” or both. In his analysis, Hart argues that the differences in arguments of his informants depended on their location. He states that, “[r]ural Filipinos appear to favor a hereditary origin; whereas urban

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261 Ibid.  
263 Hart also considers a third cause of becoming a *bayot* or *lakin-on* as mentioned by his informants, which is “fate,” or “the will of God (pagbúot sa Diyós).” Hart, however, does not discuss this third case in detail. Ibid.
informants are more inclined to explain the bayot and the lakin-on as the product of their cultural milieu.”

As both Aquino’s and Hart’s studies suggest, scientific explanations for homosexuality in the Philippines reflect Western sexological thought, which can be notably seen in the theorizations on factors influencing the development of homosexual behavior.

4.5. Conclusion

In Western Europe, the 19th century marks the beginning of the gradual shift from a dominantly religious discourse of “unnatural sinful sexual behavior” to the more secularized and scientific discourse of “pathological sexual perversions.” At the time, doctors started to subject homosexual bodies to scientific and medical examinations. Sexologists theorized on the causes of homosexuality. Two of such proposed possible causes of homosexuality are heredity and social circumstances. As I have attempted to show in this chapter, the medicalization of homosexuality in Europe and consequently, in the United States, shaped the discourses on non-normative sexualities in the post-Independence Philippines, in large part due to the legacies of Spanish and American colonialisms.

In the 1960s, the two earliest scientific and medical studies on homosexuality in the Philippines were published. Two primary objectives of this chapter were to examine how authors Aquino and Hart have scientifically and medically constructed Filipino homosexuality, and to determine how they have formulated scientific explanations for homosexual behavior. Aquino has regarded homosexuality as a form of inverted sexual attraction, wherein attractions typically shown towards the opposite sex become directed to the same sex. For Hart, homosexuality manifests itself in what he referred to as “physical stigmata.” Here, gender variance and

\[264 \text{Ibid}, 242.\]
homosexual behavior visibly mark the bodies of the bayot and the lakin-on. Both authors have regarded transvestism/cross-dressing as constitutive to homosexuality. Moreover, for Aquino, homosexuals fall into different “types” according to the roles they play in same-sexual intercourse (e.g. active, passive, or both). Unlike Aquino who used the active/passive binary, Hart merely discussed the common sexual practices of the bayot which he translated to the Western terms for same-sexual activities. Moreover, the two authors have discursively constructed the scientific causes of homosexuality. For Aquino, the social environment and psychogenic processes, rather than genetic transmission, most likely determines gender variance and homosexual behavior. For Hart and his informants, both biological factors and socio-cultural circumstances play a role in the “causation” of homosexuality. In this chapter, I have suggested that since Aquino has divided the homosexuals into three classes (the respectable, the prostitute, and the hoodlum), it is possible to assume that the issue of class may be a factor in the medicalization of homosexuality.

As I have attempted to show in this chapter, the Western medicalized discourse of homosexuality permeated the Philippines through the very act of translation. Hart’s discursive articulation of Filipino gender variance and same-sexual practices as instances of homosexuality and transvestism has contributed to what Garcia (1996) has referred to as the “slippage” of meanings between Filipino and Western terms for gender-crossing. I have also argued that Hart’s usage of “physical stigmata” in referring to Filipino male and female gender variance has constructed the Filipino homosexual body as visibly deviant and pathological. For Hart, homosexuality is mainly a bodily disorder. In this sense, Western (post)colonial medicine and anthropology worked together in stigmatizing the Filipino homosexual body.
As I have strived to highlight above, the discourse on pathological Filipino homosexual bodies, as well as the scientific explanations for the origins of homosexuality show that there is indeed an implantation of Westernized and medicalized notions on sexual pathology in the Philippines, in line with what scholars have previously assumed.
5. Homosexuality, Mental Disorder, and Pathological Social Behavior in the Philippines (1965-)

5.1. Introduction

The era of the 1960s in the Philippines, as I have noted in the previous chapters, is crucial in the history of the (post)colonial medicalization and pathologization of homosexuality in the Philippines. As I have attempted to show in Chapter 4, homosexual discourses in the Philippines contain Western sexological thought, especially in the discursive construction of homosexual bodies and in the formulation of scientific theories on the origins of homosexuality. In this chapter, I focus on the question: how did homosexuality become constructed as an illness, disease, or disorder of the mind in the Philippines? For this chapter, I use the term “disorder” quite loosely to refer to both the pathological and (post)colonial construction of homosexuality as a mental illness in the Philippines.

It is critical to note that out of all the texts that I found in the (post)colonial archives in Manila, it is only Aquino’s article that provides an extensive discussion of the direct link between homosexuality and mental disorders. While Hart briefly claims that Filipinos typically regard “mental disorder” as “inherited,” he does not at all construct it as directly associated with homosexuality. Therefore, based on one short article by Aquino, I can merely suggest that the construction of homosexuality as a mental disorder in the Philippines remains a possibility. What

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265 In their work published in 2008, scholars of postcolonial theory Mary Jo DelVecchio Good et al. used the word “disorder” in referring to a “disease” or an “illness,” as well as to some sort of “colonial disorganization,” or to a “lack of an established order” in (post)colonial territories. DelVecchio Good et al. maintain that, “[t]he strategic assemblage of ideas, institutions, and forms of domination that constituted colonialism…all functioned to establish and maintain a distinctive ‘order’…[t]he very origins of the modernist equation of disorder with the mad, the primitive, and the bestial – all characteristics of the ‘Other’ – are found in the efforts to enact and instantiate this particular colonial order.” See Mary Jo DelVecchio Good, et al. Postcolonial Disorders, 7.

266 I have included a discussion of these texts in Chapter 1.

267 In his section entitled, “The Bayot and Lakin-on: Nature or Nurture?” Hart writes, “Sechrest suggests that one cannot be sure that ‘when barrio Filipinos regard mental disorder as ‘inherited,’ they have in mind a scientific genetic notion…In his report, the second most frequently expressed hypothesis – by informants in Negros Oriental – for insanity was heredity, although often only ‘as a very tentative hypothesis’ and usually accompanied by ‘an alternative.’” Hart, “Homosexuality and Transvestism in the Philippines,” 238.
I attempt to show, nevertheless, is that the earliest recorded scientific study on homosexuality in the Philippines (Aquino’s text in 1965) contains Westernized discourses that link homosexuality to a form of mental illness. Further historical research is needed to substantiate this claim.

This chapter will be divided as follows. In Chapter 5.2, I attempt to address two questions. First, how does Aquino define homosexuality as a disease? Second, what are the illnesses associated with homosexuality? In Western sexological discourses, doctors claimed that homosexuality is linked to mental disorders like schizophrenia, alcoholism, manic depression, hallucinations and delusions. In this subchapter, I attempt to show that such association of homosexuality with various mental disorders in the West is also apparent in Aquino’s text. In Chapter 5.3, I strive to show how Aquino constructs pathological homosexual behavior in relation to social situations. Here, I attempt to answer the questions: how does Aquino describe the social behaviors of homosexuals? How does Aquino relate homosexuality to “social problems”? Chapter 5.4 covers the conclusion. My analysis will suggest that based on Aquino’s text, homosexuality became constructed as a pathological mental illness that causes problematic social behavior. The author’s formulation of homosexuality as a disease of the mind reflects the discursive shift from the late 19th-century Western “somatic theory” of homosexuality - a sexological view that placed focus on the “anomalies” of the homosexual body - towards the early 20th century “psychopathological theory” of sexual disorders, which regarded homosexuality as a disease of the human brain.

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269 Ibid, 146.
5.2. Homosexuality and Mental Disorders

As I have shown in Chapter 4, according to the study of Hart, Filipino homosexual bodies manifest certain characteristics that visibly mark them as deviant and pathological. In Aquino’s understanding, however, homosexuality as an illness does not necessarily manifest itself corporeally. She focuses more on the mental characteristics and social behavior of homosexuals. For instance, Aquino claims that, “[t]here is no denying that there are a number of homosexuals who contribute a great deal to the community. However, it cannot be stated too clearly that the homosexual is neither a fiend nor a genius, but merely a sick man whose illness produces peculiar problems.” In Aquino’s understanding, what are these so-called “peculiar problems” experienced by the pathological homosexual? Aquino associates homosexuality with alcoholism. She claims:

He [the homosexual] tries to drown his miseries in alcohol, although there are usually deeper reasons for his drinking. Alcoholic psychoses are usually dramatized by ideas of persecution and sometimes reveal the underlying homosexual wishes.271

It is notable that the discursive association of the medical condition of alcoholism with homosexuality prominent in the West beginning in the early 20th century. As the study of Canadian psychiatrists S. Israelstam and S. Lambert shows (1983), Western psychiatrists linked the causes of alcoholism with homosexuality. These scholars have argued that this is because similarities exist between the two “behaviors.” Based on Aquino’s text, it is possible to

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271 In several instances, Aquino uses the male pronoun “he” to refer to “homosexuals.” It is not clear in the document whether or not she pertains to both male and female homosexuals and not just the men. Ibid, 22.
273 Israelstam and Lambert remark that “[b]oth behaviors [homosexuality and alcoholism] have been subject to sanctions of the law. Both have been subdivided into numerous types. Both have social implications that have kept the conditions ‘hidden,’ or ‘closet.’ The definitions of both are still not fixed, the underlying causes not fully understood, with consequent confusion as to what homosexuality and alcoholism are and confusion therefore in how we view and deal with them.” Ibid, 1085.
assume that in the Philippines, there has been an implantation of the Western discourse of homosexuality and alcoholism being both pathological conditions.

Aquino claims that another medical problem that arises from homosexuality is the failure to respond to sexual stimuli in both men and women. She argues that a “great deal of unconscious, or partly conscious homosexuality” is one cause for “impotence” in men and “frigidity” in women. She states:

Many men find to their horror and misery that they cannot react normally with a woman, or, even if they do feel excitement, they cannot get a physical response. Such a condition is often the result of deep-seated unconscious homosexuality. Sometimes it responds to therapy, but treatment is often difficult and must be prolonged.

Aquino, moreover, claims that, “[h]omosexuals appear to have more neuroses, psychoses and suicides than normal people.” Aquino then establishes a link between homosexuality and “schizophrenia.”

It is usually accepted that all forms of schizophrenia appear more frequently in homosexuals than in normal people and, even if schizophrenia is merely due to strain and there is no definite relationship, the added stress of a homosexual life is enough to be causal to some extent.

Here, Aquino assumes three key issues. Firstly, Aquino claims that “homosexuality is common in schizophreni[c patients].” However, she cites no statistical data that schizophrenia is “more frequent” in “homosexuals” than “normal” people. Secondly, she does not mention what the symptoms of schizophrenia are. Thirdly, while she claims that “there is no definite relationship” between homosexuality and schizophrenia, Aquino assumes that the “stressful” homosexual life is a factor in causing schizophrenia.

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275 Ibid.
276 Ibid.
277 Ibid, 23.
278 Schizophrenia, according to the U.S. National Institute for Mental Health, is a “chronic and severe mental disorder that affects how a person thinks, feels, and behaves. People with schizophrenia may seem like they have lost touch with reality. Although schizophrenia is not as common as other mental disorders, the symptoms can be very disabling.” See “Schizophrenia,” National Institute of Mental Health. Accessed, June 6, 2017, https://www.nimh.nih.gov/health/topics/schizophrenia/index.shtml ; Ibid, 22.
As Hammack et al.’s study has shown in 2011, American psychologists in the early 20th century related homosexuality with schizophrenia.\textsuperscript{279} Therefore, it is possible to assume that based on Aquino’s text, the dominant view in early 20th century U.S. psychology that directly links homosexuality with schizophrenia becomes implanted in discourses in the Philippines.

“The greatest importance of homosexuality,” according to Aquino, “is that it causes so much unhappiness. If happiness is of any value, then homosexuality should be eliminated by every means in our power.”\textsuperscript{280} Aquino further claims that “[t]he conscious, overt homosexual is not a usually a happy man. Occasionally he can find permanent relationships, and happy relationships are exceptional.”\textsuperscript{281} While Aquino does not use the term “clinical depression” specifically, my speculative interpretation is that what she refers to as “unhappiness” may be a form of “depression” which American psychiatrist L. Dooley associated with homosexuality in his study in 1921.\textsuperscript{282}

Based on Aquino’s claims which I have highlighted above, I suggest that the Westernized discourse of homosexuality in the Philippines as a mental pathology became constructed in relation to other forms of illnesses such as alcoholism, male/female sexual impotence/frigidity, schizophrenia, and possibly, clinical depression. This is in line with what Tan (1992) and Garcia (1996) have assumed that Western (American) sexological thought became part of discourses on homosexuality in the Philippines. As mentioned in Chapter 3, Tan and Garcia merely made some speculations. As I attempt to show clearly in this study, Westernized discourses in the

\textsuperscript{280} Ibid, 22.
\textsuperscript{281} Ibid.
Philippines, based on Aquino’s text, include the discursive association of homosexuality with mental disorders.

5.3. Homosexuality and Pathological Social Behavior

The “homosexual,” according to Aquino, is a “socially disapproved person.” Aquino describes the homosexual as an asocial being who forms his or her own social group. She writes:

The homosexual forms a social problem which is peculiar to himself. Other perverts, such as the sadists, may by their behavior, cause social anxiety but not in the same manner as the homosexual. This is because the invert alone tends to bond with his fellow suffer[er]s and forms a community within the structure of society. No doubt this is partly because he is rejected by many of his fellowmen as a monstrosity unfit for the community, but it is partly because social life is based on sexuality and the homosexual develops his peculiar brotherhood by common attractions.

Here, Aquino’s claims present five key issues. First, she constructs homosexuals in relation to “other perverts” like “sadists” who “cause social anxiety.” Through this association, it is possible to assume that she constructs homosexuality as a form of perversion. She does not, however, define what “sadism” means. Second, Aquino claims that the “invert” forms a community with “his fellow sufferers.” Here, she assumes that homosexuals are in a state of suffering. Third, Aquino assumes that homosexuals are isolated from society. This was a common view in late 19th century Western Europe, when homosexuals were stigmatized as asocial beings. Fourth, the author claims that the homosexual “forms a community within the structure of society.” It is possible to assume that in Aquino’s understanding, despite being an asocial being and a socially disapproved person who is a “monstrosity unfit for the community,” the homosexual still lives within the structure, and therefore, is still part of the social system. Fifth, it is possible that to

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284 Ibid, 21.
286 Bleys, The Geography of Perversion, 151.
assume Aquino constructs the isolation of homosexuals as result of both stigmatization on the part of society, and asociality on the part of the homosexual.

Apart from asocial behavior, Aquino constructs homosexuality as a condition that has tendencies to exhibit aggressive social behavior. She claims that:

The homosexual, by the very nature of his psychological make-up, his unresolved complex and so on, has a great deal of aggression which is usually repressed but which, given suitable circumstances, will burst out into unexpected violence, such as murder and suicide.287

Here she uses the phrase “homosexual murder.”

Homosexual murder is common and is usually due to two causes. Firstly, [homosexual murder occurs] because the victim is being blackmailed, and secondly [the homosexual commits murder because of...] jealousy.288

It is for this reason that homosexual behavior, as a disease of the mind, became juxtaposed with criminal activity. Aquino writes:

Homosexuality is connected sometimes with crime, apart from the homosexuals’ sexual activities, but naturally it is difficult to obtain any statistics regarding it, since usually when a man comes before a court charged with, say, stealing, his sexual life is not revealed.289

It is critical to note that Aquino refers to homosexual same-sexual activity as a crime in itself. Aquino, fails to recognize that in the post-Independence Philippines, Philippine legislation does not condemn same-sexual activities as criminal acts.290 Aquino, moreover, relates “stealing” with the sexual life of the criminal.

Aquino’s discursive association of homosexuality with criminality may also be seen in the case of the Filipino biniboys of the post-Independence era. According to Garcia, biniboys were cross-dressing Filipino men who stole from foreigner visitors and tourists in the

288 Ibid, 23.
289 Ibid, 23.
Philippines. In 1960, Filipino writer Lina Espina-Moore published a magazine article entitled “Homosexuals are a Major Police Problem,” where she defines the term biniboy. She claims, “[h]omosexuals are called bakla in Tagalog. But since terms, like people, take on the mestizo quality, this has developed into biniboy, which is said to be a combination of the words binibini which means maiden in Tagalog, and boy which is, well – boy. Other terms are sioke and sister.” As both Aquino’s and Garcia’s study suggest, while there is no “anti-sodomy act” in Philippine legislation, there may have existed a discourse relating homosexuality and transvestism with criminal activity in the post-Independence Philippines.

In speaking about female homosexuality, Aquino notes that there is apparently a direct link between lesbianism and prostitution. Aquino writes:

On the other hand, the prevalence of lesbianism throughout the world has convinced me that prostitution[,] as a behavior deviation, attracts to a large extent women who have very strong homosexual component. Through prostitution those women eventually overcome their homosexual repression.

In this case too, Aquino does not provide any valid data for her claims. Aquino, nevertheless, claims that the majority of the “homosexuals” are not necessarily “vicious persons,” nor are they considered to be “dangerous.” The “homosexuals” may be “potential seducers of young people,” but they are “not necessarily maladjusted.”

5.4. Conclusion

In this chapter, I have highlighted how Aquino, the author of the earliest scientific study on homosexuality in the Philippines, has constructed homosexuality behavior in relation to mental illnesses and pathological social behavior. Unlike Hart, who claimed that homosexuality

292 Line Espina, “Homosexuals are a Major Police Problem,” in This Week Magazine (July 31, 1960):34, as cited in Garcia, The Philippine Gay Culture, 66.
294 It is rather unclear in the document what Aquino means by “maladjusted.” Ibid.
is mainly a bodily disorder, Aquino has discursively linked gender variance and same-sexual relations with mental illnesses. These psychological disorders include alcoholism, male/female sexual impotence/frigidity, schizophrenia, and possibly, clinical depression. Furthermore, Aquino, furthermore, has established a link between homosexuality and pathological social behavior. In her understanding, the homosexual is an asocial being who is a “monstrosity” unfit for the community. The homosexual became constructed as an aggressive person who has tendencies to commit crime like suicide and murder. Female homosexuality, moreover, became linked to prostitution.

Aquino’s text uses Westernized sexological theories in pathologizing Filipino gender variance and same-sexual relations. However, I express my doubts of whether the link between criminality and homosexuality is entirely a Westernized construct. As I have attempted to show in this chapter, there has been a discourse that associated crime with homosexuality/transvestism in the Philippines during the post-Independence era. In order to address this issue, perhaps further research on the concept of biniboy is needed. Nevertheless, Aquino’s construction of the homosexual as a sick, asocial, and aggressive invert shows that the Western pathologizing discourse indeed permeated the Philippines during the post-Independence era. Such Westernized pathologizing discourse, as I have mentioned in Chapter 1, has led to the medical practice of giving psychiatric treatment to Filipino “homosexual” men and women beginning in the 1960s.
6. Conclusions and Recommendations

For this thesis, my primary aim was to address the question: how and when did homosexuality become constructed as a disease in the Philippines? To answer this question, I visited six (post)colonial archives in Manila in July 2016. Filipino scholars Michael Tan (1992) and J. Neil Garcia (1996) have assumed that perhaps, the labeling of homosexuality as a disease happened during the early 20th-century American colonial era in the Philippines. My archival research showed, however, that the construction of homosexuality as a disorder in the Philippines most likely occurred in the post-1946/post-Independence period, upon the publication of the two earliest known studies on homosexuality in the Philippines in 1965 and 1968 respectively. The goal of my study was to analyze these two texts by Aquino and Hart to determine how the pathologizing Western sexological discourses on homosexuality permeated the Philippines.

The intersecting historical issues of medicine, gender-crossing, and same-sexual relations in the Philippines trace its roots as far back as ancient Filipino society. In Chapter 2, I have provided a concise narrative of the beginnings of the intertwining concepts of medicine, gender variance, and sexuality in the Philippines, as seen in the history of the Babaylan/Katalonan. Chapter 3 highlighted the three theoretical and historiographical fields that I drew from this study, which tie together the historical issues of medicine, gender, sexuality, and (post)colonialism. Chapters 4 and 5 focused on my analysis of the 1965 and 1968 articles by Aquino and Hart. In Hart’s understanding, as seen in his usage of the term “physical stigmata,” the native bayot and lakin-on were tainted homosexual bodies visibly marked by sexual deviancy. For Aquino, homosexuals were sick persons inclined to develop mental disorders like alcoholism, schizophrenia, sexual impotence for men and frigidity for women, and possibly,
clinical depression. Moreover, in Aquino’s understanding, homosexuals were socially disapproved asocial beings who had tendencies to commit violent actions and criminal activities such as suicide and murder. Aquino also linked lesbianism to prostitution.

Before going back to my findings, I need first to narrate that very recently, just before the submission of this study, I found out that most quotations in Aquino’s study were merely copied from a book by an American psychiatrist Clifford Allen entitled, *A Textbook of Psychosexual Disorders*, published in 1962. Aquino did not mention Allen’s study nor did she indicate that she had quoted from it, which led me to assume that her article was an original work, given that she published it in a Filipino journal, and that I found it in a (post)colonial archive in Manila. On the one hand, it was somewhat of a shock to discover this, but on the other hand, finding out that the earliest study on homosexuality in the Philippines actually contained exact quotations from a Western textbook confirms the basic point that this thesis seeks to establish, namely the fact that the Western constructions of homosexuality travelled to the Philippines. I attach on the Appendix page facsimiles of Aquino’s text, which I juxtapose to some quotations from Allen’s work.

My research trajectory, including the analysis of Aquino’s and Hart’s works, has led me to formulate a number of hypotheses about the history of homosexuality in the Philippines. Firstly, while there is a nexus between gender-crossing and medicine in ancient Filipino society as seen in the history of the Babaylan/Katalonan and asog, I suggest that gender-crossing and same-sexual relations were not an issue of “sexual pathology” prior to the Spanish and American colonial regimes. As I have claimed in Chapter 2, ancient Filipino practices of gender-crossing were associated with divine power, since the Babaylan/Katalonan and asog functioned as intermediaries of spirits and the Filipino people. Gender-crossing and ancient Filipino medicine worked hand-in-hand in healing the sick. My second hypothesis is that the divine gender-croosser,

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the asog in ancient Filipino times, who used to be a “healer” or “doctor,” became the medicalized, pathological homosexual after centuries of Western colonialism and imperialism. As I have narrated in Chapter 1, I have found a book by Dr. Lourdes V. Lapuz in 1973 suggesting that psychiatrists gave treatment to Filipino “homosexual” men and women in the post-Independence era. My assumption is that, such psychiatric case histories of Filipino gender-crossers may point out to a historical inversion of “doctor/patient” roles. Further research along these lines may be useful. Thirdly, I need to be explicit about the fact that I have not addressed the question of resistance and agency quite extensively in this research. In the beginning of 2017, I had the possibility of doing oral history interviews with Filipinos who had experiences with clinical psychologists who gave “treatment” for homosexuality. Because of certain circumstances and resources that constrained this research, I was not able to push through with the interviews. It is likely that using oral history methodology can take this research a step further and may lead to findings about Filipino LGBTQ+ resistance and agency in the medicalization of homosexuality. Fourthly, as I have narrated in Chapter 2, the discourses of religion and medicine on homosexuality overlap in many ways in the Philippines. However, since I focused my analysis on (post)colonial medicine specifically, I was unable to account for the religious and moralizing discourse of sodomy and homosexuality, which both Tan and Garcia have noted to be intricately tied to the medical stigmatization of the Filipino LGBTQ+ community. Perhaps, a study that can account for both the religious and medical aspects of the stigmatization homosexuality may prove to be useful in broadening our understanding of gender.

296 I had the possibility of speaking to the author of A Study of Psychopathology (1973), Dr. Lourdes V. Lapuz, through an online interview in November 2016. At the time, she was in the United States - the place where she immigrated to after her retirement. However, it is quite unfortunate that I have heard from the hospital in Manila where she worked that she passed away in January 2017, prior to the completion of this research.
sexuality, and Empire in the Philippines. Fifthly, in the attempt to conceptualize the meaning of “illness” and “disorder” using the Filipino language, I propose the use of the word *sakit* as a linguistic lens in analyzing the medicalization of homosexuality not only in the Philippines, but perhaps, in a broader context which is Southeast Asia. In the Filipino linguistic consciousness, the concept of homosexuality is not typically associated with the English terms “illness” or “disorder.” It is usually the pathologizing Filipino word *sakit* that is associated with the *bakla*, *bayot*, *lakin-on*, and *tomboy* etc. As I have mentioned in Chapter 1, the word *sakit*, as an illness, has a number of meanings that are not limited to the Anglo-American construct of “disease/disorder.” It may also pertain to a kind of suffering, heartbreak, burden, sacrifice, and pain. If you add the word *lipunan* to *sakit* and form the phrase *sakit ng lipunan*, it signifies “disorder of society.” In the Philippines, it is common to find discourses that construe homosexuality as *sakit ng lipunan*. It is also not uncommon to find discourses that regard the *bakla* and the *tomboy* as *salot ng lipunan* – Filipino phrase that pertains to a form of pestilence, contagion or epidemic that plagues society. Such linguistic evidence suggests that the notion of homosexuality being a pathological condition exists in the Filipino language. Perhaps, looking into these native linguistic notions would help us understand how homosexuality, as an issue of pathology, became embedded in the Filipino linguistic consciousness. Sixthly, *sakit*, moreover, has similar meanings in the Malaysian and Indonesian languages. Perhaps, a transnational/transcultural/trans-linguistic study of the concept of homosexuality as *sakit* may prove to be fruitful in our attempt to understand the workings of gender, sexuality, medicine, and colonialism in Southeast Asia. The word *sakit*, lastly, is crucial in the discursive efforts to depathologize homosexuality in the Philippines. As seen in the case of two texts which I highlighted in Chapter 2, which are Nicanor Tiongson’s foreword to Tony Perez’ *Cubao 1980* in
1992 and the Psychological Association of the Philippines’ official statement against discrimination based on gender identity and sexual orientation in 2011, such discursive use of *sakit* in the efforts to de-medicalize and de-pathologize gender variance and same-sexual relations may be useful in conceptually refuting the notion of homosexuality - not only as a form of illness and disease, but also as a kind of suffering, heartbreak, pain, and disorder of society.

Given that the issues of gender and sexuality are crucial historical aspects in colonial empire-building, *Sakít o Salà?: The (Post)Colonial Medicalization of the Filipino Homosexual (1916-1976)* may now be considered as a gendered contribution, not only to the growing literature on Filipino (post)colonial medical historiography and LGBTQ+ historiography, but also on gender and sexuality historiography in Europe and in the United States. Previously, Philippine historiography has largely focused on the effects of Spanish and American colonialisms on political, social, religious, and economic affairs in Filipino history, and this thesis was an attempt to highlight gender and sexuality as critical subjects of historical inquiry. Similarly, Western literature on gender and sexuality history has paid little attention to the effects of colonial rule in former U.S. imperial territories, especially the Philippines, and this thesis was an effort to show how U.S. imperialism left lasting legacies on Filipino gender, sexuality, and medicine, through the institutions of colonial and postcolonial psychiatry. Through an analysis of two earliest scientific and medical studies on homosexuality, this thesis was an effort to critically discuss the impact of colonial rule in the medicalization and pathologization of the Filipino male and female homosexual.

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Appendix


Figure 1.

“THE SOCIAL PROBLEM OF THE HOMOSEXUAL

The confirmed homosexual forms a social problem which is peculiar to himself. Other perverts, such as the sadists, may, by their behaviour, cause social anxiety but not in the same manner as the homosexual. This is because the invert alone tends to band with his fellow sufferers and form a community within the structure of society. No doubt this is partly because he is rejected by many of his fellow men as a monstrosity unfit for congress with the community, but it is partly because social life (as Zuckerman has shown in apes) is based on sexuality and the homosexual develops his peculiar brotherhood by common attraction. The invert forms a life of his own: he frequents certain restaurants and cafes, he dresses in a manner peculiar to himself, he even walks and talks individually.” 298

“There are some trades and professions which are the homosexual’s province — dress designing, interior decorating, acting, ballet dancing, and so on. Often he is successful and wealthy; unless he more or less challenges the established order (as, for example, Oscar Wilde did) he is left alone. This is not always the story as Henry and Gross show in their interesting study of one hundred under-privileged homosexuals. They divide them into three classes:

1. Respectable. These are men who live a quiet, decent life, and apart from their sexuality do not behave abnormally.
2. The Prostitute. This type is not only abnormal but uses his abnormality as a source of profit to himself.

3. ‘The Hoodlum* This is the bullying blackmailer who frequently
works with the prostitute type to entice the respectable homosexual into
his clutches.”

I attach facsimiles of some paragraphs found in Rosario Aquino’s “The Sociological Aspect of Homosexuality” (1965). As I have mentioned in my conclusion chapter, I assume that Aquino copied some parts of Allen’s text in the almost the exact same manner as he wrote it. (See Figure 1 and Figure 2) Notice, however, how Aquino changed the ending of the narrative in case study in Allen’s text. Aquino wrote that “[t]his she did and finally fell in love with a man, got married happily and successfully,” instead of what Allen wrote that “[t]his she did and finally fell in love with a man who was trying to get a divorce from his wife whom he was not happy…” (See Figure 3 and 4). I do not attempt to address this issue in this thesis. Further analysis of this is needed.

Figure 2.

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299 Ibid, 189.
301 Allen, A Textbook of Psychosexual Disorders, 201.
“Case No. 12

A Case of Homosexuality in a Woman

A girl aged 23 stated that she was not sexually attracted to men and was involved in a sexual relationship with another girl who was a cripple. She had applied to an endocrinologist for treatment but no glandular abnormality was discovered. It was remarkable that this young lady resisted men so easily since she was very pretty, and no doubt found plenty of men who wished to be her admirers.

She stated that her home was not a happy one because of her domineering and aggressive father. He was excessively strict and she admitted she was terrified of him. At school she had been a timid girl and on leaving worked in a factory. Her looks attracted men, but she was too frightened to go out with them. Some years before she saw me she had met the crippled girl (who was in no way attractive to men) and formed a sexual relationship with her. However, as time passed she felt that she was getting older and should do something regarding marriage.

Her difficulties were investigated and she was told that she was equating all men with her father. She was expecting men to behave in the domineering way he did. This was not so and most men would be happy to be tender to such a pretty girl as herself. She was encouraged to break off her friendship with the cripple (who was holding her back) and go out with men when asked. This she did and finally fell in love with a man who was trying to get a divorce from his wife with whom he was not happy. She admitted that she was strongly stirred sexually by his love-making and would have liked to have had intercourse with him but for her strig moral standards.”

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Case 1

A girl aged twenty-three sought the assistance of our office who stated that she was not sexually attracted to men and was involved in a sexual relationship with another girl who was a cripple. She had applied to an endocrinologist for treatment but no glandular abnormality was discovered. It was remarkable that this young lady resisted men so easily, since she was very pretty and no doubt found plenty of men who wished to be her admirers.

She stated that her home was not a happy one because of a domineering and aggressive father. He was excessively strict and she admitted she was terrified of him. At school she had been a timid girl, and on leaving, worked in a factory. Her looks attracted men, but she was too frightened to go out with them. Some years before she came to me she had met the crippled girl (who was in no way attractive to men) and formed a sexual relationship with her. However, as time passed she felt that she was getting older and should do something regarding marriage.

Her difficulties were investigated and revealed that she was equating all men with her father. She was expecting men to behave in the domineering way he did. I assured her this was not so, and that many men would be happy to be tender to such a pretty girl. She was encouraged to break off her relationship with the cripple (which was holding her back) and go out with men when asked. This she did and finally fell in love with a man, got married happily and successfully.

Case 2