

## Implications of a System

The history of Egyptian women and their role as well as treatment in their own culture from past to present day is nothing short of turbulent. In 1933 women were making advances and strives in obtaining equal rights when the monarchy ended in 1953 women continued to gain in their fight for equality. In recent years however the treatment of women and girls has greatly suffered. When trying to understand this degradation of the societal treatment of women in the Egyptian culture I found it largely can be attributed to the supply and demand of oil and its roots in the Middle East. This is crucial to understand in order to begin a further comprehension into why Egypt is the leading country to practice female genital cutting.

Shortly after 1973 the price of oil shot up in the Middle East. Many Egyptians found themselves migrating to the new work opportunities in the powerful Gulf States. This is where the absorption of radical Wahhabi values were introduced to the Egyptian's and thus brought back home with them. Egypt has had a long tradition of moderate Islam. Historically women were encouraged to gain an education and work for themselves. According to Wahhabis, a women's job is to please her husband and provide offspring. (Aswany)

As Al Qaeda and the Muslim Brotherhood (supporters of Wahhabi) spread in Egypt the hijab or headscarf became more common but what happened along with this trend was women became to be understood as objects and the studies have since seen an increase in brutality and sexual crimes committed against women. A woman just as recent as 2012 was protesting these inequalities when Wahhbis swarmed to the scene stripped her of her clothes and drug her through the square while stomping on her. (A Woman's Place in the New Egypt – BBC News) Islamists have made it a mission to undo any advances women have made in Egypt. I believe if we were looking at purely the Egyptian culture we would find they are closer to the American situation with their treatment of women in society but we are seeing the influences of a new generation of Egyptian. (Farahat) When Cynthia Farahat a prominent Egyptian political activist among much more was asked, "what was it like growing up as a girl in Egypt?" her first words was "it was horrible!" She explains that her and her brother were brought up as equals but of course that did not go along with the countries dominate ideas of subservient women who could be married off as young as ten years old according to Islam.

Egypt is governed by a Sharia-based constitution. Under Sharia law it does not define rape as a crime. In 1997 rape was finally criminalized in Egypt. (Farahat) The future is unsure for these women. Engy Ghozlan explains that Egypt's social problems have not changed. A few years back she references on International Women's Day the violence that took place by men chasing after the women protesters with knives and yelling threats. However Fatma Adel a twenty two year old singer does say she sees small changes; she states that in a recent incident where she was being harassed men around her stepped in to protect her, something that is starting to become a more natural response.

Egypt holds the number one spot in the world for the practice of female genital mutilation recorded. Worldwide 2.2 million women are affected and a total of 135 million women now have underwent FGM. (Dalal K et al.) While it is still up for debate and probably will continue to be, some theorists argue that FMG now referred to currently as FGC (cutting) originated in Egypt. "Egypt has the highest incidence of female genital mutilation worldwide." (Dalal K et al) The

practice was outlawed in 1997 but recent studies have shown that 97% of Egyptian women have had this experience.

Egypt's population comes in at 79 million with its literacy rate being at just 58%, females take up 48% of that total. The results of a study conducted on the feelings of discontinuation of FGC, researchers found that out of the 97% of women who had been subjected to FGC, 82% of the women supported the continuation of FGC. The correlation found was that women's social standing in society can largely effect women's feelings towards FGC. "It seems that educationally empowered women, are more exposed to the controversy surrounding FGM" (Dalal K et al.) The study found that culturally based beliefs about FGC influence women to be in favor of this procedure. The mindset of these women is that in their traditions, FGM provides a better life for them. Once a women has this done they have better options for husbands, their religious and family life will be blessed. The information on health risks is not been widely available and serious medical risks such as infections, abscesses, small benign tumors, hemorrhages, and clitoral cysts. "Psychological consequences of FGM are anxiety, horror, post traumatic stress disorders (PTSD) and depression. Long term problems include difficulties of urination and menstruation, excessive pain with attempts at coital penetration..." (Dalal K et al.) Etc.

With a country that covers approximately one million square kilometers and only a mere 6% of the land being used, Egypt is a patriarchal society, meaning the power, authority and respect is given to males over females. In a patriarchal society family honor is valued. A women's largest contribution to that is her sexual reputation. Since a man is in charge of his family it is not only the women's job to protect her sexual virtue but also the man is looked at to be the protector; a family and it's reputation is a direct reflection of a mans ability to fulfill his natural role in nature. (Diop-Sidibe, 11-16) Another study done among Kurdish girls in Northern Iraq whom have previously been subjected was done dealing with the impacts to their mental health after FGC. The focus was to see if these girls that had been circumcised were more prone to psychiatric illnesses than non-circumcised girls. The results came back that these girls showed more signs of connection to PTSD (44.3%), depression disorder (33.6%), anxiety disorder (45.6%) and somatic disturbance (36.7%) than the uncircumcised girls. (Kizilhan).

These young girls will eventually go on to have children of their own but the problem in my mind that arises is intergenerational trauma; stressful events may have immediate effects on well-being and by influencing appraisal processes, coping methods, lifestyle, **parental behaviors** and neuronal reactivity may also have long lasting repercussions on the physical and psychological health of not only an individual women but on the population as a whole. I think FGC is important to understand on a cultural standpoint because we need to understand why it is being done and how to better address ways to effectively change the mindset. As I learned women are a large base of support of FGC in uneducated areas. From a public standpoint although I will need more research I believe you can look to a country and its success/health and find a correlation between that countries view and equality/treatment of women.

The theory that I best believe fits my focus of Egypt and FGC (female genital cutting) is the feminine theory. I began with that theory at the bottom of my list when exploring the different theories and how they may shine light on my topic. The feminine theory seemed like an

easy target. However, as I read I realized that my idea on the theory was skewed off of what I thought I knew already and what tune it would play.

I think the most important factor to note when speaking of feminist theory at all is that at its core, feminist theory argues for equal rights for both men and women, it argues that both men and women are however different both deserve equal chances in opportunity. (Bratton) A man may be genetically stronger and can physically do the work maybe a smaller women physically could not match, but who is to say she could not come up with a different way to accomplish the job? In Egypt the Muslim Brotherhood believes that women are to be possession of their husbands. They have little to no rights and along with this ideology FGC is a continued practice and embedded in the culture. FGC more times than not makes sexual experiences for women painful, which in turn I believe, brings a negative mindset towards sex for a women but a man gets all the pleasure. The feminist theory explains that in the late 1980's that women were viewed as having as "essences" and it was not suitable for women to be in the work place with men. Women were seen as delicate and should focus on their biological gift of nurturers. (Bratton) The theory at its beginnings explains that women at one point were considered powerful and had to adhere to rules with that power, then a shift in thinking went to women need to be protected because of their power. Somehow the respect between the two sexes faltered and was lost.

Laura S. Brown stated, "The conceptual process ceases to be a matter of matching a person to lists of criteria for a particular named disease or predicting the difficulties that are likely to arise during the course of therapy. It is, rather, a first step in witnessing to the client's struggles to achieve and maintain integrity." (Brown, pp. 156–157) She believes that feminist theory through incorporating the ideas through therapy would greatly benefit all patients and not just based off of a particular type of person.

"Though not all will agree that therapy—with its inherent power differentials, time and fee structures, and temporary and constructed relationships— is compatible with feminist ideals, Brown makes a convincing case not only that it is, but that therapy can actively be used to subvert patriarchy one person at a time. Brown sees the feminist therapist as necessarily committed to radical social change and provides examples of ways the therapist can help clients to subvert both internalized and external effects." (Gibson)

The problems Egypt is having is based off of their ideology of women and that they must be kept "pure" and they are unable to do that for themselves so a man who is physically strong must. This thinking has spiraled into what I believe is a males resentment at his own insecurities and shortcomings because that weakness is only for women. This anger is taken out on the female gender. I believe the feminist theory calling for **equal** rights is what must be understood. If men can stop having the pressures of "protectors" and these phrases hurled at them without thought such as "be a man" or "don't be such a girl" the resentment might begin to crack. FGC is only a small part of the mindset on women in Egypt. Women's bodies are to be covered only reinforcing that a women's body is not hers. While continuing to read the most important fact hit me that the focus so many times unfortunately is what women want to do because a man can do it as well. What is not focused on is what the natural ability of both sexes are given and how they

complete each other or value in the difference approaches too the same situation the genders can offer. Men have to stop being portrayed as all powerful, emotionless beings; the fact is they are human and their sex does not mean they are emotionless; the type of pressure I believe comes out in frustration. Women are expected to be emotional and delicate if this chances maybe the violence can begin to stop. (Joralemon)

Social determinants of health takes a look at for example, the fact that Sierra Leone's life expectancy rate is 34 years old verses Japan who's rate is at 81.9 years old and explores the possible social factors that cause this. Linking poverty with disease but going further and asking how that link is formed and broken. Even within countries like Australia who see a gap of 20 years life expectancy between their own sub cultures. (Marmot 2005) As Geoffrey Rose stated in our lecture material that what needs to be looked at is the "causes of the causes: the social conditions that give rise to high risk of non-communicable diseases whether acting through unhealthy behaviors or through the effects of impossibly stressful lives." (Marmot 2005)

Egypt is home to the highest percentage of female genital cutting in the world. (WHO) The practice itself is controversial and for many cultures in the west like the United States is not fully understood and seen as barbaric. Egypt is at the moment predominately Muslim. On going war in the Middle East in countries like Iraq and Pakistan have flooded the countries borders. The country is ran by the Muslim Brotherhood who's views on women are oppressive, believing women are to be owned by their husbands and have no place outside the home. This brotherhood is one of the most extreme practices of the Koran taking its words literally. Women live in the constant fear that they do not retain ownership of their own bodies. "Empowerment is a social factor in health as well as awareness and knowledge". (Rashad) The main issue in Egypt is the mindset of what a women should be in society. Many problems occur with the practice of FGC because it is commonly carried out in areas without easy access to the needed sterile medical tools and knowledge with carrying out and treating this procedure.

There are four main types of FGC and even the information of the effects of the cutting is not available or understood for these women and many fall to infection even becoming sterile. In Egypt many women cannot even receive medical care without the permission or husband present. Education cannot only be taught on one topic. Literacy in a persons' ability to take care of their overall health must be the focus. Women must be given the same opportunities of education and rights to their basic health in Egypt. This only happens however if the dominate mindset is changed; that being the males ideals towards women and also if not more important that women's mindsets however formed must also be understood and changed, if a women believes FGC will allow her to be taken care of in a society that demands she has a husband, simply outlawing the practice will only lead to more health problems as women will continue to perform FGC without proper knowledge in secret. The mindset that uncut women will make lesser wives has to be understood and then changed; even compromise is an option. If Egypt's men are educated in the health and affects of women and how it affects their own health and success of their culture the shift to pay closer attention should begin.

Works Cited:

Aswany, Alaa. "Egypt's Trouble With Women." The New York Times. December 9, 2013. Accessed July 15, 2015.

Bratton, Angela. 1998. Feminist Anthropology. Retrieved from <http://www.indiana.edu/~wanthro/fem.htm>. Armbruster, Heidi. 2000. Feminist Theories and Anthropology. Polylog. Retrieved from <http://lit.polylog.org/2/eah-en.htm>

Brown, Laura S. *Subversive Dialogues: Theory in Feminist Therapy*. New York, NY: Basic Books, 1994.

Dalal, Koustuv, Stephen Lawoko, and Bjarne Jasson. "Women's Attitudes towards Discontinuation of Female Genital Mutilation in Egypt." ProQuest. 2010. Accessed July 28, 2015.  
[http://media.proquest.com.proxy2.cl.msu.edu/media/pq/classic/doc/2185707301/fmt/pi/rep/NONE?hl=woman,women,s,health,in,egypt&cit:auth=Dalal, Koustuv;Lawoko, Stephen;Jansson, Bjarne&cit:title=Women's attitudes towards discontinuat](http://media.proquest.com.proxy2.cl.msu.edu/media/pq/classic/doc/2185707301/fmt/pi/rep/NONE?hl=woman,women,s,health,in,egypt&cit:auth=Dalal,Koustuv;Lawoko,Stephen;Jansson,Bjarne&cit:title=Women's+attitudes+towards+discontinuat).

Devi, Sharmila. 2013. "Women's Health Challenges in Post-Revolutionary Egypt." *The Lancet* 381 (9879): 1705-6. doi:[http://dx.doi.org/10.1016/S0140-6736\(13\)61060-0](http://dx.doi.org/10.1016/S0140-6736(13)61060-0).  
<http://ezproxy.msu.edu/login?url=http://search.proquest.com/docview/1352742639?accountid=12598>.

Diop-Sidibe, Nafissatou. "DOMESTIC VIOLENCE AGAINST WOMEN IN EGYPT - RISK FACTORS AND HEALTH OUTCOMES OF WIFE-BEATING." 2001. Accessed July 28, 2015.  
[http://media.proquest.com.proxy2.cl.msu.edu/media/pq/classic/doc/728475461/fmt/ai/rep/SPDF?hl=woman,women,s,health,in,egypt&cit:auth=Diop-Sidibe, Nafissatou&cit:title=Domestic violence against women in Egypt: Risk factors and health outc](http://media.proquest.com.proxy2.cl.msu.edu/media/pq/classic/doc/728475461/fmt/ai/rep/SPDF?hl=woman,women,s,health,in,egypt&cit:auth=Diop-Sidibe,Nafissatou&cit:title=Domestic+violence+against+women+in+Egypt:+Risk+factors+and+health+outc).

"FGM in Egypt." 1998. *Midwifery Today*, Jun 30, 60.  
<http://ezproxy.msu.edu/login?url=http://search.proquest.com/docview/201523038?accountid=12598>.

Gibson, Pamela Reed, and Kathryn K. Quina. "Toward a Theory for Feminist Therapy." *PsycCRITIQUES*. Accessed August 19, 2015.  
<http://search.proquest.com.proxy2.cl.msu.edu/docview/614210895/fulltext/EA7430FFF4634568PQ/3?accountid=12598>.

Grant, Judith. *Fundamental Feminism: Contesting the Core Concepts of Feminist Theory*. New York: Routledge, 1993.

Joralemon, Donald. "Recognizing Biological, Social, and Cultural Interconnections." In *Exploring Medical Anthropology*, 30-56. Boston: Allyn and Bacon, 1999.

Kizilhan, Jan. 2011. "Impact of Psychological Disorders After Female Genital Mutilation among Kurdish Girls in Northern Iraq." *European Journal of Psychiatry* 25 (2): 92-100.  
<http://ezproxy.msu.edu/login?url=http://search.proquest.com/docview/1314697983?accountid=12598>.

Rashad, Hoda. "How Does Egypt Address the Social Determinants of Health?" WHO. Accessed August 13, 2015. [http://www.who.int/social\\_determinants/thecommission/interview\\_rashad/en/](http://www.who.int/social_determinants/thecommission/interview_rashad/en/).

Yount, Kathryn M., and Jennifer S. Carrera. "Female Genital Cutting And Reproductive Experience In Minya, Egypt." *Medical Anthropology Quarterly*: 182-211.

"A Woman's Place in the New Egypt – BBC News." BBC News. Accessed July 16, 2015.

"Female Genital Mutilation and Other Harmful Practices." WHO. Accessed August 14, 2015.

"Interview with Cynthia Farahat on Growing Up in Egypt, Discovering Ayn Rand, and Fighting Islamists – The Objective Standard." The Objective Standard. February 10, 2012. Accessed July 15, 2015.