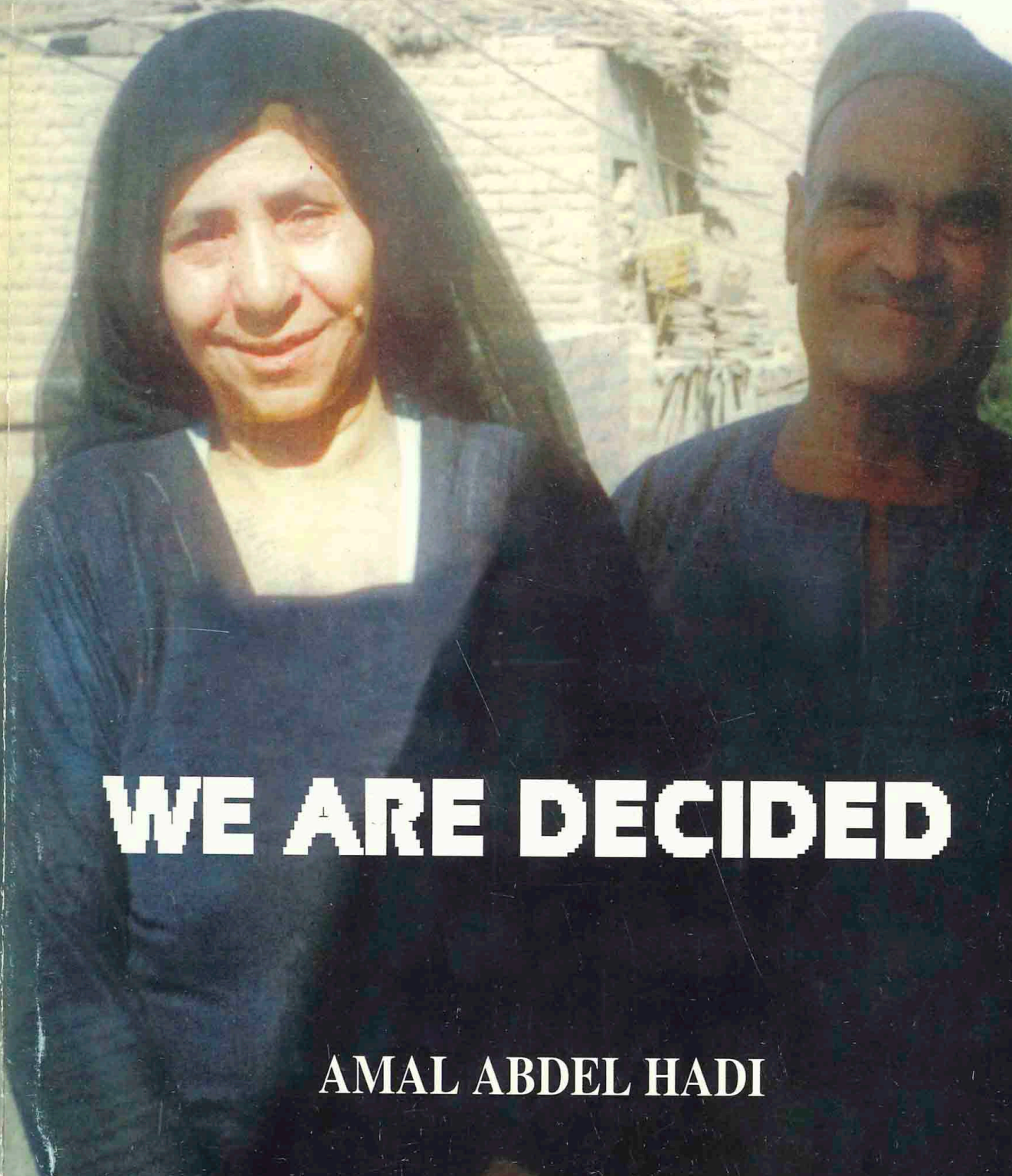




CAIRO INSTITUTE FOR HUMAN RIGHTS STUDIES

WOMEN INITIATIVES -2-

## The Struggle of an Egyptian Village to Eradicate Female Circumcision



**WE ARE DECIDED**

**AMAL ABDEL HADI**

CAIRO INSTITUTE FOR HUMAN RIGHTS STUDIES  
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TO ERADICATE FEMALE CIRCUMCISION**

**CAIRO INSTITUTE FOR HUMAN RIGHTS STUDIES**  
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# **We Are Decided**

**THE STRUGGLE OF AN EGYPTIAN VILLAGE TO ERADICATE  
FEMALE CIRCUMCISION**

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## DEDICATION

I dedicate this book to inhabitants of Deir Al Barsha village.  
To Oum Michel, Oum Hani, Oum Youssef, Saida, Father Daniel,  
Mr. John, the Women's Committee and the Village Committee

To those who simply refuted all allegations that female  
circumcision is ineradicable and to those who do not have enough trust  
that Egyptian fathers and mothers would refrain from practicing  
female circumcision, while Egyptian intellectuals play their role in  
transmitting knowledge and developing their local communities

To the spirit of priest Samuel Habib who believed that  
development is the sole means to the progress of human beings and  
society and whose life has been a manifestation of this thorough belief

*Amal Abdel Hadi*

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First, I would like to extend my gratitude to the people of Deir El Barsha village who gave us so much care and attention that it was quite difficult for us to leave after the research was completed. Everybody in Deir El Barsha gave us the best they had.

More importantly, they trusted us with their secrets, discussed with us quite candidly, and expressed friendly and constructive criticism to the content of our research work. Shortly, they treated us as equal family members and not as strangers.

friends- of the Coptic Evangelical Organization for Social Services. Firstly, they introduced us to this pioneer village, and secondly, they made every effort to help and serve us when we needed them. I would particularly like to mention here Samira Louka, Margret Saroufim, Medhat Ayad, and Ibrahim Makram.

I would also like to thank my fellow research assistants: Amal Mahmoud, Hassan Barakat, Thanaa Taqawi, Khalil Boules, Ragaa Hussein, Manal Ghanem, Nevine Ebeid and Amira Abdel Fattah who were able, thanks to their perseverance and devotion, to gain the trust of Deir El Barsha people and make the difficult task of field survey in remote Upper Egypt a fruitful and even pleasurable task. I should also address a special acknowledgment to my colleague Hassan Barakat, for his distinguished role in leading field work, my colleague Nevine Ebeid for inserting data into the computer, and also my dear colleague Amira Abdel Fattah, who participated in all stages of the research, including even the last touches, with great love and dedication.

We also thank all friends and colleagues who commented on the draft questionnaires, particularly Naglaa El Nahal and Carla Makhlouf, and also to Ghada Abdel Tawab, Medhat Ayad and Nadia Abdel Wehab who devoted part of their invaluable time to review the final draft of the research. Our deepest gratitude goes also to Dr. Moushira El Shafei, Deputy Minister of Health, Eng. Moustafa Gaaffar from the Central Agency for Public Mobilization and Statistics (CAPMAS) for helping us to obtain the necessary approvals for the research, and also to Aliaa Awad from the Demographic and Health Research Team, who designed the data base and undertook the analyses on the Statistical Program for Social Studies (SPSS).

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**Amal Abdel Hadi**  
Cairo, July 1998

## SUMMARY OF THE RESEARCH

The importance of this research lies in the fact that it deals with a totally new field that has not been broached in previous literature on female circumcision in Egypt. Namely, this research studies the factors that led to the behavioral shift of an entire village toward the rejection of this deep-rooted and widespread practice. Also, this study is strongly related to the debate that took place in the nineties, where some contenders attempted to conspire in favor of violating women's rights by supporting female circumcision, a practice that falls in the sphere of domestic violence. The anti-female circumcision advocacy was portrayed as an assault to the cultural specificity of the communities practicing it.

The name of Deir El Barsha village was recurrently mentioned in one of the meetings of the Task Force Against FGM in the beginning of 1995. This village was also mentioned in the report of the Coptic Evangelical Organization for Social Service on efforts to eradicate FGM. Through this report we became familiar for the first time with a small Egyptian village that stopped practicing female circumcision since 1991. We also came across the fact that communal leaders in the village signed a written agreement with midwives and hygienic barbers that they would not practice female circumcision ever again.

Results of the most recent study in Egypt, the 1995 Demographic and Health Survey, indicated that 97% of Egyptian females between 15-49 years of age have been circumcised. The same results also revealed that 82% of those females still support the perpetuation of this practice and intend to circumcise their daughters in future. Hence, the experience of Deir El Barsha gains yet another important dimension, not only because this village is situated in rural Upper Egypt, where the rate of female circumcision reaches 99.6%, but more important to our study is the method this village used to combat the practice. Deir El Barsha inhabitants signed a local document that denounces female circumcision, which is considered a pioneering and unprecedented step.



## RESEARCH HYPOTHESIS

The hypothesis of this research asserts that the experience of Deir El Barsha is a “new” and “exceptional” (unconventional) model at variance with mainstream anti-female circumcision efforts. The prohibition of female circumcision in this village is strongly associated with developmental efforts involving the Coptic Evangelical Organization for Social Services and communal leaders in the village. In order to evaluate the impact of developmental efforts on the attitude of Deir El Barsha vis-à-vis female circumcision, it was agreed to compare it with another control village that resembles Deir El Barsha in the general conditions but lacks local developmental projects. Deir El Barsha inhabitants are all Christians while the neighboring village, El Barsha, encompasses both Muslim and Christian inhabitants.

Exploratory visits to the village added a new dimension to the research hypothesis, namely that the migration of males to work abroad reinforced the tendency toward the renunciation of female circumcision.

Field survey included a representative sample from Deir El Barsha villagers (five hundred families) and a limited sample from the control village, El Barsha (one hundred families). The survey used a semi-codified questionnaire, including a number of questions to assess the scope of the tangible shift in the inhabitants' attitudes toward female circumcision. The questionnaire also aimed at unmasking the sustainability of anti-female circumcision efforts in Deir El Barsha village, the impact of local developmental efforts, and male labor migration on the tendency toward eradicating female circumcision. The questions included in the questionnaire form can be divided into four groups:

- General questions such as age, marital status, the number of children and siblings, professional and educational background of respondents and other members of their families (children, parents, and female siblings)
- Questions on the circumcision of female respondents, wives of male respondents, their daughters and sisters

- Questions concerning the research hypothesis, namely, respondents and their family members' participation in developmental projects established within the village, and the migration of respondents and /or members of their families
- Questions concerning respondents' assessment of the possible perpetuation of anti-female circumcision efforts in the village, whether this practice can be reinstated, and their perceptions of the religious attitude toward female circumcision

The same questionnaire form was used in both villages, while the last group of questions was cancelled from the control village (El Barsha Village). Furthermore, a number of in-depth interviews with some spontaneous communal and religious leaders have been undertaken, in addition to a number of other actors such as midwives, non-circumcised females and fathers and mothers who were on the vanguard of those who refused to circumcise their daughters.

### **GENERAL FEATURES OF DEIR EL BARSHA VILLAGE**

Deir El Barsha is a small village in Upper Egypt. It is situated on the East bank of the Nile at the southernmost boundaries of Menia Governorate. On its northern borders lies the village of Deir Abou Hanas (a Christian village), which is four kilometers away, and to the south the village of Nazlat Al Barsha (A Muslim village), which is three kilometers away. The mountain surrounds Deir El Barsha from the east and the Nile from the west, with scattered agricultural fields separating them.

The village of Deir El Barsha is distinguished from the control village (El Barsha) by developmental projects within the former village. While El Barsha village engaged in only a few efforts to eradicate illiteracy, in Deir El Barsha there have been a wide spectrum of developmental projects undertaken mainly by the Coptic Evangelical Organization. Those projects have been operative for about fifteen years. Not only the size of the projects, and their prolonged duration, but the core of the matter here is the prevailing trend of developmental action within Deir El Barsha. More precisely, the village is characterized by the developmental trend fostered by the Coptic Evangelical Organization for Social Services.

## **THE MAJOR FEATURES OF THIS TREND**

- 1- Development of local community capabilities, by promoting and bolstering the role of local community leaders and focusing from the onset on consolidating the local community and enabling it to create and evolve its own tools, mechanisms and special expertise. This is considered a preliminary condition for the continuity and growth of developmental action based on local resources of the community.
- 2- A comprehensive all-embracing perception that covers all aspects of life within the local community and involves various sectors of the population. This perception merges between several mechanisms of action, such as providing services for the community, raising awareness, developing technical and administrative skills, etc.
- 3- The gender-based dimension, i.e., the deliberate focus on promoting the role of women in developmental action, particularly in the rural community, where women are still incarcerated in the domestic and reproductive role, and are captives of predominant traditions and customs.

## **THE ANTI-FEMALE CIRCUMCISION DOCUMENT**

In 1991 after nearly a decade of anti-female circumcision awareness raising and socialization efforts, a document was drafted where hygienic barbers and midwives pledged not to practice female circumcision on any of the girls in Deir El Barsha village. This document was signed in a large gathering that members of the women's and village committees attended, as well as a number of clergy members. This document represents a turning point in the attitude of villagers. It is the product of local communal evolution, particularly due to the women's committee. Those leaders were able to ensure their credibility among large sectors of Deir El Barsha inhabitants. A large number of those communal leaders refrained from circumcising their daughters and succeeded in persuading several families inside the village not only to abstain from the practice, but more importantly to announce their decision against performing female circumcision. The document contributed a great deal in casting a negative light on female circumcision. "Whoever

performs this practice from today on," the document states, "will be questioned before God, the village community, and the state law."

Even though the document has no obligatory power compared to law for instance, its strength stems from the fact that it was not imposed by an external agent (the state), but was rather the outcome of an "internal" decision made by the village leadership. Hence, the inhabitants' attitude toward the document, even those who opposed it or at least were not persuaded by its content, was qualitatively different from what their attitude would have been should this procedure have been imposed from outside the community.

## **RESULTS OF THE RESEARCH**

Results of the field survey in the two villages reveal the following:

1- There is a "real" shift in the attitude of Deir El Barsha inhabitants toward female circumcision compared to that of El Barsha village and the results of previous studies on female circumcision in rural Upper Egypt.

- The rate of female circumcision among female respondents in Deir El Barsha was lower than the control village (El Barsha) (95.8% & 98.2% respectively). The gap grows even further when we compare between their non-circumcised daughters in both villages (50% & 16%). However, the gap narrows down among circumcised female siblings (6.7% & 9.7%).

It should also be noted that a large section of respondents from both sexes in Deir El Barsha (70.6%) think that this change of attitude will continue in future.

- The ratio of non-circumcised girls in Deir El Barsha village reaches 50%. In the control village, El Barsha, the ratio of non-circumcised girls is 16% only. According to the 1995 Demographic and Health Survey, the ratio of non-circumcised girls in Deir El Barsha far exceeds that of non-circumcised females in any other geographic region in Egypt, including urban areas. In other words we are witnessing a phenomenon that reflects a change in the attitude of Deir El Barsha inhabitants toward female circumcision.

- 70.6% of respondents from both sexes in Deir El Barsha think that the prohibition of female circumcision will continue. The largest section of them tends to believe that efforts of the Coptic Evangelical Organization within the village play a crucial role in promoting this tendency.

A very limited percentage (17.4%) of inhabitants believes that the current situation is transient. They refer this to the entrenchment of the practice and the fact that female circumcision is still practiced in concealment.

- The greatest section of respondents in Deir El Barsha (68.2% of females and 63.3% of males) tends to believe that female circumcision is not required by religion. Those figures are closest to percentages of those who argued that the prohibition of female circumcision would continue in the village. Not more than 10.5% of the population thinks that female circumcision is a religiously induced practice.
- The shift of attitude is illustrated by the fact that nearly one third of male and female respondents (32.8%) maintained that they promoted abstention from female circumcision among their sisters, relatives, and sometimes even their neighbors.

2- This attitude is strongly linked to the pattern of developmental efforts within Deir El Barsha, the role of community leaders, particularly clergy members, and the migration of males to work abroad.

According to our own estimation, a number of factors concurred to finally produce this attitude, namely:

- (a) Development efforts within the village, particularly during the last two decades
- (b) The impact of temporary male migration to work abroad
- (c) The role of the clerical order in enlightening and socializing people against female circumcision

However, those factors vary in their relative effect on the profoundness of this shift. On the other hand, when those factors

interacted, the final outcome surpassed the simple cumulative effect of each of them separately.

## **THE IMPACT OF THE MIGRATION OF MALE LABORERS**

Results of the field survey on both villages indicated that there is a difference between them in the rate of male migration to work abroad. Deir El Barsha is a special model in terms of male labor migration for work in Arab countries. All of the households in the village had at least one male absent who had gone to work outside the country. However, male exodus was temporary or transient. The aim of migration was to obtain a sum of money in order to improve the economic situation of the family. A small minority of males remained abroad for many years.

Results of in-depth interviews revealed that working abroad had an important influence on the status of women within the Deir El Barsha village. Many families within the village were headed by females during a particular period of time. Hence, a great number of women bore a dual responsibility: running the household and raising the children, and the responsibility for the household economy. Furthermore, some of those females also engaged in agricultural work, including plowing, sowing, harvesting, and selling crops.

This state of affairs modified the attitude of Deir El Barsha community toward women and strengthened its disposition to trust their capability to act in difficult situations in general. This would inevitably lead to building the long-term trust in women's capability to preserve the family's honor, even if they were not circumcised. Moreover, male migration gave room for older women to make decisions in other domains such as the education and even the marriage of children. Consequently, they had greater freedom in making the decision not to circumcise their girls.

## **THE IMPACT OF THE RELIGIOUS FACTOR**

Religious affiliation in and of itself does not have a distinguishable impact on the practice of female circumcision. This is clearly manifested in the proliferation of this tradition almost by the same ratios among Muslims and Christians in Egypt. The comparison between the two

villages, namely Deir El Barsha and El Barsha (control village) emphasizes the same results. Even though there were not any non-circumcised girls among the daughters of the Muslim respondents, there was a huge gap between the ratio of non-circumcised Christian girls in Deir El Barsha (37%) and their counterparts in El Barsha (16%). This leads us to neutralize the impact of the religious factor, at least relatively. However, religious leaders can play either a positive or negative role in the perpetuation of the practice of female circumcision within a particular community. This is exactly what happened in Deir El Barsha, where religious leaders played a pivotal role in promoting the rejection of female circumcision inside the village. Qualitative analysis of questionnaires and in-depth interviews revealed that a large number of respondents from both sexes received information from churches, which explained to people that female circumcision was not a part of Christianity. This in itself was crucial and helped to divest female circumcision of its religious sanctity and hence partially encourage whoever wanted to relinquish the practice.

On the other hand, the commitment by some clergy members to not circumcise their daughters and their proclamation of that pledge created an ideal example for the other members of the community. Religious scholars, particularly in rural areas, have a strong moral influence. Also, the fact that religious leaders signed the village document prohibiting female circumcision, and the religious reference within the document that “whoever practices this practice from this day on would be questioned before God, the municipal committee and the state law” bestows a special sanctity on the agreement and enhances it with positive cultural substance. Furthermore, the ethical weight of clergymen also reinforced the commitment of midwives and hygienic barbers to refrain from practicing female circumcision.

Finally, when one of the prominent religious leaders announced that he did not circumcise his daughters, he encouraged others, whether community leaders or as members of the village, to proclaim their abstention from circumcising their daughters.

## **THE EFFECT OF DEVELOPMENTAL EFFORTS**

Results of the survey revealed a number of important facts:

- There is an expansion of developmental activities in Deir El Barsha village, especially when compared to the control village (El Barsha)

village). There are massive efforts in the sphere of eradication of illiteracy among inhabitants of Deir El Barsha, particularly among females. The largest part of the development projects focuses on eradication of illiteracy, where the rate of female participation is higher than that of males, except among fathers and mothers (participation is greater among males). This reflects a growing concern with women's education.

- The rate of women's participation of women in development projects among all sectors (respondents, husbands and sons) is greater than that of men except fathers and mothers. The difference between the two sexes increases in the case of children, which suggests a growing contribution of women in developmental action within the village. This also exemplifies the evolution of the status of women, which is a major part of the Coptic Evangelical Organization's program to empower women.
- There is a tendency toward an increased participation in developmental efforts over the generations. While the average rate of participation among the generation of fathers and mothers is nearly 6%, the rate of contribution among the following generation, including respondents from both sexes goes up to 20.7%. In the third generation, this rate reaches 20.4%. The rate of contribution is expected to grow when more offspring join sustained development efforts within the village.
- The comparison between the generation of fathers and mothers and the following generations including young respondents from both sexes shows that a larger number of them play leading roles in development ventures. This is important and can be attributed to the activities of the Coptic Evangelical Organization. This organization strives to create leadership cadres from within the villages where they work and minimizes the dependence on church representatives in the village.
- The rate of non-circumcision among daughters of respondents from both sexes who participated in development projects (60%&48.5%) is greater than those who did not participate in developmental action (28.3%&28.5%). The same observation is true in the case of the



circumcision of the respondents' sisters: there is a positive correlation between the participation of fathers and mothers of respondents from both sexes and the non-circumcision of female siblings. The ratio of non-circumcised girls among sisters of respondents from both sexes whose fathers and mothers participated in developmental activities (9%&15.4%) is greater than those whose parents did not take part in developmental efforts (7.8%&7%).

In other words, **there is a positive correlation between participation in developmental projects and the tendency to discontinue female circumcision.** This correlation is higher among the younger generations. This correlation is statistically significant (the likelihood ratio is lower than 0.05).

## **FINALLY...**

### **WILL THE EXPERIENCE OF DEIR EL BARSHA PERSIST?**

The sum total of previous results suggests that Deir El Barsha village has adopted an uncompromising attitude that rejects female circumcision. This attitude is reflected in the tangible behavior of the inhabitants of the village. For example:

- 1- There was an expansion of the ratio of non-circumcised girls in the village compared to the general rate of female circumcision in the neighboring (control) village or in the Egyptian countryside in general.
- 2- There was growing support of the prohibition of female circumcision and a stronger belief that this prohibitive trend will persist.
- 3- A growing number of villagers announced they would not circumcise their daughters, particularly highly esteemed and respected communal and religious leaders; this endows the anti-female circumcision movement with a "positive" character.
- 4- Female circumcision was highly denounced through signing the village document. Those who still insist on practicing female circumcision are compelled to do it in concealment.

In light of sustained development activities, which were strongly highlighted one year later by the field survey team and the marriage of non-circumcised girls, and thanks to the devotion, perseverance and coherence of community leaders, especially the clergy in Deir El Barsha, it is highly probable that this pioneering experience will persist. Actually, the myth that a daughter would not marry unless she was circumcised was totally shattered. Moreover, the impact of this successful experience will hopefully echo in other neighboring villages, if not in all Egyptian villages. We hope that this research will be a modest contribution along the path toward generalizing the Deir El Barsha experience.



## **CHAPTER ONE:**

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### **INTRODUCTION TO THE PRACTICE OF FEMALE CIRCUMCISION**

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In the nineties, the issue of female circumcision in Egypt was unleashed from the cocoon of taboo surrounding it. In fact, a general trend was growing in society that sanctioned a more open discussion of issues related to sex and sexuality. This change was reinforced by a number of factors. First, the United Nations organized a series of conferences in the nineties, where the issue of women's rights, particularly reproductive and sexual rights, occupied a prominent position. Second, civil society institutions in Egypt witnessed a great leap during the last couple of decades. Quantitative and qualitative growth of non-governmental organizations, and the cooperation and coordination between those organizations on the eve of the 1994 International Conference on Population and Development (ICPD) are manifestations of this evolution. Cooperation took place mainly between traditional developmental organizations that have had a close historical relationship with local communities and the various women's and human rights organizations.

As for the issue of female circumcision in particular, the establishment of the Task Force Against FGM concerned with the resistance of female circumcision in 1994, was a qualitative shift in NGO action geared toward the elimination of this practice.<sup>1</sup> This Task Force adopted a particular attitude and method of operation, which raised for the first time the gender-based and human rights dimensions of this issue. This growing trend dealing with the issue of female circumcision from the women's rights perspective sharply polarized active forces within Egyptian society. This polarization involved some of the politicized Islamic groups on the one hand, and the human rights and feminist organizations on the other. Hence, the issue of female circumcision, which became a public opinion case discussed at all levels, particularly in readable and visual mass media, gained unparalleled symbolic and political dimensions.

During recent years some people have tried to cast doubts over the causes of the vehement debate on female circumcision that has been going on for a long period of time, and they have suggested that concern over the issue was exaggerated and feigned. Those people alleged that this issue was new and superimposed on the Egyptian society, and that it had arisen only because of Western propaganda and pressures brought to bear by "Western" women's organizations.

Those allegations are unfounded. Since the mid-twentieth century, the issue of female circumcision has been recurrently discussed in public or in unspecialized medical periodicals, and even in academic research.<sup>ii</sup> Those discussions involved different parties, including feminist and religious leaders, physicians and social scientists.

Unfortunately, those waves of interest did not persist except for limited periods of time. Interest in female circumcision would then recede only to rise again, and the topic would be stirred up anew. What is also distressing is that the debate in most cases was restricted to the health problems ensuing from female circumcision, or the religious (Islamic) dimension of the topic. Hence, every discussion seemed like a contest between different points of views, without any room for compromise or meeting points. Discussions would begin and end without reaching any tangible progress, then debate would resume again like the previous round: the same allegations, defenses, and the same one-sided discussion.

### **WHAT IS FEMALE CIRCUMCISION?**

Female circumcision, or more precisely female genital mutilation (FGM), is one of the rituals practiced in several countries of the world, albeit in a more concentrated pattern in African countries. More than two million girls a year fall victim to this practice in Africa.<sup>iii</sup> In Egypt female circumcision is called "purification," which implies an ethical connotation. The circumcised girl is pure because circumcision, as it is falsely asserted, suppresses sexual desires, and consequently society can ensure that she will not lapse into sexual sinful practice. Female circumcision preserves the girl's pre-marital virginity and guarantees she will not engage in extra-marital sexual activities. In this sense it is a "certificate of warranty" for future marriage. In Islamic literature the expression "lowering" is used to differentiate between male and female circumcision, because in the latter practice, the protrusion of the clitoris is removed.

In this research we use the expression "female circumcision" even though it is not very accurate, because it is the most common in literature on the topic and is most often used in debates within the Egyptian society. It has gradually replaced the expression "purification," which in itself is a form of progress, because the unification of the expression--while redefining its content according to gender-based and human rights perspectives--promotes the extinction of positive undertones associated

with the term “purification.” Meanwhile, it negates the religious implications that some proponents of the practice bestow on female circumcision, by using such expressions as “Sunnite circumcision.”

## TYPES OF FEMALE CIRCUMCISION

The types of female circumcision vary considerably among different cultures. In the last couple of decades, with the World Health Organization’s (WHO) heightened concern over the issue of female genital mutilation (FGM), several discussions revolved around its different classifications. For the purposes of this research, we have adopted the WHO classifications, which categorizes various practices incorporated under FGM into four main types:

- Type I: Total or partial removal of the clitoris
- Type II: Total or partial removal of the clitoris and the labiae minora
- Type III: Total or partial removal of the clitoris, the labiae minora and parts of the labiae majora
- Type IV: The fourth type incorporates all forms of female genital mutilation. This type is found in a very limited number of communities.

Usually, the first two types do not require stitching. However, in the third type, the two sides of the vulva are stitched together, leaving a very small orifice to permit the flow of urine and menstrual discharge. This type of female circumcision is called infibulation or suturing. It is wrongly known as “Pharaonic (Ancient Egyptian) circumcision.”<sup>1</sup> In recent years different writings on female circumcision in Arab and Islamic countries used the expression “Sunna circumcision”<sup>iv</sup> to describe Type I female circumcision. However, this is erroneous because it implies that female circumcision has underpinnings in Islamic religious teachings.

The use of the term “circumcision” or “purification” to describe both male and female circumcision insinuates that the two practices are

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<sup>1</sup> Prof. Dr. Aziz Khattab, *Human Sexuality*.



identical. However, there are vast differences between them, both from the pathological and social perspectives. While male circumcision is restricted to the removal of the thin foreskin covering the penis, female circumcision includes--even in its slightest degree--the removal of parts of the genitalia that vary according to the different types of circumcision. Male circumcision, according to prevailing notions of sexuality, connotes a reassertion of male virility and sexual potency. Female circumcision, on the other hand, aims to thwart and suppress female sexual desires and capabilities. Male circumcision is usually practiced very early in the child's life, often during the first days of his birth, while female circumcision takes place before puberty, at a time when girls can be socialized and enlightened about their anticipated social role as women.<sup>v</sup>

### **FEMALE CIRCUMCISION AND THE RITES OF PASSAGE**

Rites and rituals are characterized by "specific protective or purifying targets. They are practiced to fulfill some social needs. Most societies know different types of rituals practiced for various reasons... some of them related to decisive stages of the individual's life such as puberty, pregnancy, delivery, marriage, and death."<sup>vi</sup> Female circumcision is one of those rituals known as a rite of passage. In most cases it is related to the passage of girls from childhood to adolescence and is practiced usually before the girl reaches puberty, usually between the ages of 7 and 12 (even though age might vary from one country to another).

On the other hand, female circumcision is one of the various practices geared towards controlling women's sexuality and women's bodies, so that they would conform to the perception in patriarchal communities of their reproductive and sexual rights. Most cultures of the world integrate such social rituals. Sociologists and anthropologists highlight the repressive dimension of such rituals, which aim to re-shape the individual's (woman's) body to submit to prevailing societal values and exigencies. The body is considered to be a symbol of social beliefs, and therefore, practices related to women's bodies become part of cultural identity.

Gerry Mackie indicates that "rituals such as foot binding in Chinese communities, or infibulation (female genital mutilation) are inimical to women. They are part of patriarchal society sadist practices that aim to

achieve 'purity.' Tradition endows those rituals with a particular sanctity, and they have a power of propagation, because they respond to all patriarchal perceptions of male predominance."<sup>vii</sup> Rituals often stem from fear of the sexual capabilities of women, and hence women's bodies are controlled, subjugated, and often reshaped to conform to rituals and values of patriarchal communities. Those practices vary from one community to another, and range from fattening girls in Africa to foot binding in China to placing metal rings around girls' necks in Thailand and also include different patterns of female circumcision.

In most communities that practice female circumcision, people justify the practice along several lines, including tradition: "This is the custom in our country," cleanliness, virtue, etc. An analysis of those reasons can be summarized in the following:

- 1- Female circumcision serves to protect girls after puberty from the unleashing of sexual capabilities inhibited since childhood. Hence, the family's honor can be safeguarded before the girl gets married, as well as the husband's honor later on.
- 2- Marriage opportunities are directly proportionate to female circumcision, since it is one of the expected features of future wives, as it indicates that this wife-to-be conforms to standard social characteristics. These desirable social characteristics are mainly centered in the concept of virtue before and after marriage, which is the major guarantee for the protection of the family, and to make certain the offspring are the genuine descendants of the husband. Those are highly important and cherished values in Egyptian society in general, and in the countryside in particular.
- 3- Women, particularly those who are younger, desire to belong to and identify with the community in which they live. This in itself is a major source for fulfilling their material and moral needs. The family, according to the prevalent Arab culture, is still the fundamental source of fulfillment of individual needs, especially those of women who suffer from an inferior status and almost full economic dependency on males within the household. Hence, marriage and reproduction for such women are major tools for ensuring their future economic status. Herein lies the importance of female circumcision and other practices that assert the girl's chastity, because they are guarantees for marriage.<sup>viii</sup>

Arab culture has not known female circumcision, since it does not exist in most Arab countries, except Egypt, Sudan and some population clusters in Palestine or Yemen. Nevertheless, the status of women in Arab societies in general is inferior to that of men. Arab women still suffer from traditions and laws that usurp their equal rights of citizenship with men, and from deteriorating economic conditions that bolster women's subordination and firmly establish the stereotypical image of women's weakness and disability, including their failure to protect themselves and preserve the family's "honor." Therefore, the community, and more particularly males, bears the responsibility of protecting women. They are entitled to re-shape their bodies and mold their emotions in compliance with the conservative values that have been flourishing again lately.

Such conservative perceptions have been on the rise during the last couple of decades due to the crisis of identity within several Arab societies. Two contending desires pulled those societies apart: the earnest desire to benefit from Western civilization, and the need to assert the independent self against the preeminent West, not only on the technical level, but also politically and militarily. One of the manifest features of this crisis was the withdrawal to extreme parochialism (nationalism) that venerated traditional culture and inherited social or political institutions. Other features included the revival and adoption of archaic and fossilized values and concepts to assert the autonomous identity and ensure distinctiveness from the "West."<sup>x</sup> This state of affairs provided a suitable environment not only for the perpetuation of suppressive traditions and rituals related to women and girls, such as female circumcision, but it sometimes encouraged their promotion in contexts that have eliminated them previously in history. For instance, a recent study unveiled the fact that a growing number of physicians have been supporting female circumcision in Egypt lately.<sup>x</sup>

Temporary migration of Egyptian labor to Arab countries in search of employment opened up new channels for Egyptians coming from the city or the countryside to contact with products of Western culture, which they take back to their home cities and villages. Furthermore, material revenues from working abroad also provide them with greater opportunities to educate their sons and daughters. However, while bringing home all those products, migrant laborers also carry with them values of conservative Arab societies where they work, particularly the fundamentalist and Salafi conservative perceptions that reinforce

restrictions placed upon women. Those migrants come back to live in their home villages according to adopted patterns of social relations, especially the relationship between males and females. Consequently, the reactionary value structures concerning women did not catch up with the modernization of culture upon settlement. This is particularly true of all those who migrated to Arab Gulf states.

## **FEMALE CIRCUMCISION AND RELIGION**

None of the holy books (the Old Testament, the New Testament and the Qur'an) include texts that encourage female circumcision.

However, the fact of the matter is that female circumcision is widespread among Muslims and Christians alike in most communities that still perform this practice. As for Jews the only sect known for practicing female circumcision is the Ethiopian Falasha, most of whom are living in Israel at present.

Religious doctrine, considered a major element in diverse cultures, interacts with other cultural components to produce different perceptions of religion in various nations and even among different sects and social groups within the same nation at a particular historical moment. For instance, most Islamic societies, either in the Arab World or Asia, do not practice female circumcision. They even condemn the practice and denounce it as being un-Islamic. Most of the Christian communities as well deny that this practice could have anything to do with Christianity. One can argue that interpretations during a particular politico-historical moment that predated the emergence and spread of religions in many communities and social entities, bestowed a certain sanctity on female circumcision. Official religious institutions and individual religious figures play a crucial role in either supporting or denouncing female circumcision due to their moral status among the populace. Those attitudes are not only associated with religious tenets, but they sometimes have a political scope that transcends religious doctrine. For instance, some African churches encouraged the revival of female circumcision as a counter-attack against Western missionaries who criticized African culture. Female circumcision has been deemed an important tradition that links Africans to their ancient glory and eminence. Not only this, but the Ethiopian Orthodox Church even considers any woman as profane until she is circumcised. Some priests also deny uncircumcised women access to their churches.

Dr. Nahed Toubia indicates that the two major churches in Africa throughout history, the Roman Catholic Church, and the Protestant Evangelical Church, have had two contradicting attitudes.<sup>xi</sup> The Protestant Church condemned female circumcision as being a harmful practice. Even though the Roman Catholic Church also officially rejected female circumcision, priests sometimes sanctioned the practice as a means of preserving the sexual chastity of women. On the other hand, the Orthodox or Coptic churches, different communities of which exist in Egypt, Ethiopia and Sudan, have basically remained silent on the issue of female genital mutilation.<sup>xii</sup>

In Egypt some Christian communities have explicit attitudes toward female circumcision, such as the Evangelical community led by Priest Samuel Habib. This community resisted female circumcision at an early stage (since the sixties). Moreover, the Orthodox Church Service Episcopate published a book on the Christian standpoint toward female circumcision.<sup>xiii</sup> Many priests encouraged efforts geared toward the prohibition of female circumcision such as the case of Deir El Barsha, the topic of this study. Moreover, a number of Christian developmental societies working in Egypt integrated awareness raising programs about the hazards and harmful effects of female circumcision (Upper Egypt Society, the Coptic Evangelical Organization for Social Services, CARITAS Egypt).

Explicit attitudes of various sections of the Islamic religious establishment in Egypt toward female circumcision were rather contradictory and inconsistent. As we indicated earlier, political polarization during the 1994 ICPD exacerbated disagreements among Islamic leaders concerning the Islamic attitude concerning female circumcision. While the Mufti (official expounder of Islamic law) then, Sheikh Tantawi, proclaimed that female circumcision is not an Islamic duty and referred to the fact that Hadiths (Prophet Mohammed's sayings) referred to in this instance are weak, the Grand Sheikh of Al Azhar at the time, Sheikh Gad El Haq, advocated the practice of female circumcision as being an Islamic ritual. Those attitudes have been pronounced in the context of asserting the Islamic standpoint toward the 1994 ICPD document. However, Sheikh Shaltout of Al Azhar in the fifties proclaimed that female circumcision was not part of Islam.<sup>xiv</sup>

## **THE PREDOMINANCE OF FEMALE CIRCUMCISION IN EGYPT**

Female circumcision is one of the ancient traditional practices that have become considerably widespread in Egypt. No one knows when female circumcision was first introduced to Egypt, but it certainly predates Christianity and Islam. Some writings point out that female circumcision is a Pharaonic ritual. However, this has not been proven decisively, especially considering that ancient Egyptian drawings illustrate the practice of male rather than female circumcision. Female circumcision in Egypt is a custom and tradition rather than a religious obligation, as Muslims and Copts practice it. Some research indicates that in local communities where Christians represent all or most inhabitants, such as the garbage collectors community in Muqatam, where the rate of female circumcision is 100%.<sup>xv</sup>

The most recent study, the 1995 Demographic and Health Survey, indicates that 97% of Egyptian women between 15-49 years of age have been circumcised. Results of the same study reveal that 82% of those women support the continuation of this practice, and intend to circumcise their daughters in future.

Even though circumcision in Egypt is not related to any other rituals that prepare young women for married life, as is the case in some African countries, it is usually associated with puberty, and takes place between eight and twelve years of age. Therefore, many people associate this practice with the physical maturation of girls, and it is considered a linked with physiological changes that girls experience during adolescence. The prevailing pattern of female circumcision in Egypt, either among Christians or Muslims, is the second type mentioned to above, namely the partial removal of the clitoris and the labiae minora. Infibulation is very limited and is confined to the southernmost areas of the Nile Valley (Aswan and Nubia). Nevertheless, the widespread belief correlates between female circumcision and women's chastity.

The results of the 1995 Demographic and Health Survey were shocking to many, because they unmasked the immense diffusion of female circumcision in Egypt. They also unraveled so many inaccuracies about official estimates of female circumcision in Egypt during the eighties and early nineties. Those estimates indicated that this practice was on the descending curve, and that it declined by 50%.<sup>xvi</sup> The truth of

the matter is that it is difficult to find research material (either published or unpublished) to support those estimates. It is highly probable that they have been built upon the prevailing perception that the Egyptian State has forbidden the practice of female circumcision since the late fifties. We will return to this point later.

If we take the results of the research undertaken in the sixties and seventies as basic indicators of the scope of dissemination of this practice, results of the 1995 Demographic and Health Survey reveal that efforts geared toward the elimination of this practice have failed. To put it more optimistically, those efforts have not been fruitful, especially if we take into consideration the development of education and urbanization in Egypt during this period. Naturally, early pioneering studies have been undertaken on a quite small scale, either in day clinics of university hospitals, or among limited population clusters. The 1995 Demographic and Health Survey was the first national study that used a representative sample of nearly fifteen thousand Egyptian women between the ages of 14-49 years from all of the Egyptian governorates.

## **FEMALE CIRCUMCISION AND HUMAN RIGHTS**

Human rights organizations have been pioneering in raising the issue of female circumcision at the international level. The United Nations Human Rights Committee raised the issue of "traditional practices harming women's health" for the first time in 1952, two decades earlier than the World Health Organization (WHO) exhibited concern over the topic. International agencies and organizations abstained from explicitly condemning female circumcision under the aegis of "cultural specificity." However, the last decade has witnessed a decisive change in this regard. In the nineties several firm positions followed in succession to reject the slogan of "cultural specificity," which condoned the violation of the rights of women and the female child. This has been manifested in the standpoint of WHO, UNICEF, the International Human Rights Conference held in Vienna in 1993, the 1994 Cairo International Conference on Population and Development (ICPD), and the Fourth International Conference on Women held in Beijing in 1995.

The most crucial development regarding the issue of female circumcision in Egypt lately, following ICPD, has been the integration of women's associations alongside human rights organizations in anti-female circumcision campaigns. Those campaigns would have been

restricted to developmental NGOs, especially those working in the field of public health promotion. Women's associations and human rights organizations have together raised the concept of women's rights, particularly reproductive rights, as part of human rights and associated female circumcision with the inferior status of women inside families and society, especially with the rise of conservatism. Consequently, female circumcision has been dealt with from a broader perspective than merely focusing on its hazards and health problems. Primarily, this practice was projected as being a gross violation of the rights of women and female children to bodily integrity and safety, their rights to physical and psychological health (in its comprehensive sense), their right to make decisions concerning reproductive and sexual health, and their right to live a life free of physical and moral violence.

This human rights perspective is more important now with the widespread "medicalization" of female circumcision. This trend is advocated by some proponents of the practice to avoid its jeopardy to young girls' health. Female circumcision is a violation of the right of women and girls even if it does not entail any medical complications, or is practiced in hospitals by professional physicians, or at home by midwives or hygienic barbers. Female circumcision is a violent crime against women and girls; its repercussions are not mitigated if done under anesthesia, and its hideousness is not alleviated when it is practiced in a sterilized environment.

The debate has been very complicated. It has experienced sharp polarization, even within anti-female circumcision movements. Some of them advocated a progressive shift, first by practicing female circumcision by physicians inside hospitals to overcome post-surgery problems, such as hemorrhage, infections, inflammation, etc. Such trends have actually perpetuated the medicalization of female circumcision, as indicated by the results of the 1995 DHS Survey. The tug-of-war finally ended with the victory of the human rights perspective. All forms of female circumcision have been rejected and those involved in the practice, either inside or outside of the medical profession have been denounced. This firm and uncompromising attitude of non-governmental organizations, under the leadership of the Task Force against FGM, led to a change of heart on the part of a number of forces and institutions, including the state itself.



## THE STATE AND FEMALE CIRCUMCISION

None of the state institutions in Egypt, primarily the health establishment, took a firm position toward female circumcision. However, recently, the current Minister of Health, Dr. Ismail Sallam, issued a decree in June 1996 forbidding physicians from practicing female circumcision either in public hospitals or private clinics. Contrary to the prevailing belief whether in Egypt or at the international level, the Egyptian government did not actually promulgate any law or ministerial decree that prohibited female circumcision in the fifties. A ministerial decree was passed in 1959 prohibiting the practice of female circumcision by non-physicians and forbade physicians from practicing it in the Ministry of Health hospitals and units only. In other words this decree did not prohibit doctors from practicing female circumcision in private clinics. The natural outcome, as demonstrated by the results of the Demographic and Health Survey, was the widespread doctoring of female circumcision, its practice by physicians at increasing rates among the younger generation of females.

State public policy plays a crucial role in shaping health trends and behavior of populations. The influence of such policy can be either direct, through promulgated policy, or indirectly through the impact of its policies on the attitude of different social forces toward health-related issues, such as academics, the mass media, religious and civil society institutions, including NGOs. For instance, when the Egyptian State adopted the concept and policies of family planning, more contraceptives have been used and fertility and birth rates have gone down tremendously.

It is useful in the context of this research to compare between the state attitude toward both family planning and female circumcision. In the former case, the state sided with family planning. This was manifested either at the level of government spending, whereas motherhood and child care services appropriated a considerable share of government allocations, or at the institutional level, with the establishment of the Population Council, which later developed into an independent ministry. The mass media also played a great role in boosting and promoting this policy. On the other hand, female circumcision did not enjoy the same prerogatives, except lately. The reason behind the fluctuating attitudes is probably that, even though both issues are related to reproductive health, birth control is an economic priority of the state and does not involve any confrontation with or

challenge to the prevailing values, traditions and culture. By contrast, female circumcision does not have any economic payoffs, and collides with predominant traditions, rituals and values, especially with the proliferation of a conservative trend regarding the rights of women.

Several factors thwarted anti-female circumcision efforts in Egypt. One of these factors is the medical approach used to deal with it, particularly the post-operation complications that might occur when it is not practiced by physicians. Moreover, the gender and human rights perspectives are dimmed when the issue of female circumcision comes to the fore, in addition to the fact that it is not associated with the overall status of women in society. Anti-female circumcision efforts have not yet been integrated with development programs in local communities, and are confined in the majority of cases to health instructive activities.

Nevertheless, the major reason, in my opinion, is state public policy that has also been adopted to a great extent by sectors of the medical profession and was reflected in NGO anti-female circumcision activities and programs. This policy stemmed from the idea that any promotion of a "milder" pattern of female circumcision (minimize or reduce the parts removed from the genitalia) to be practiced by physicians under "healthy" conditions, using anesthesia and sterilization, would ultimately and spontaneously lead to the extinction of the practice.

However, this policy proved to be a failure, not only in Egypt but also in several other states including Sudan, Djibouti and Kenya, where more extreme patterns of female circumcision, such as infibulation, are widespread.<sup>xvii</sup> Unfortunately, in spite of the failure of the "milder removal" policy, the Egyptian Ministry of Health as well as a limited section of the medical profession, either institutions or individuals (the Doctors' Syndicate, Professors of Gynecology and Obstetrics in some universities) have strongly promoted similar approaches after the ICPD.<sup>xviii</sup>

Those attitudes might have influenced the action of non-governmental organizations, had it not been for the firm standpoint adopted by the Task Force against FGM. The Task Force proclaimed that all forms of female circumcision are a violation of women's rights, whether practiced by physicians or others.

In this instance the experience of Deir El Barsha village is quite indicative. This village was not only able to opt out of this official policy, but its experience is also an example of the success of a traditional Egyptian rural community to withstand this abominable practice. This was done without the assistance of policy-makers, politicians and members of the medical profession (or probably because they did not interfere). Hence, the experience of Deir El Barsha points to other prospects for dealing with female circumcision beyond the problems created by the state attitude toward the issue, and the interference of profiteering doctors.

## CHAPTER TWO

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### WHY DID WE CHOOSE DEIR EL BARSHA?



The name "Deir El Barsha" was mentioned for the first time in early 1995 during one of the anti-female circumcision task force meetings.<sup>xix</sup> NGO representatives and members of this task force were presenting routine summary reports about the actions of their respective institutions in the anti-female circumcision struggle. Representative of the Coptic Evangelical Organization for Social Services, Samira Louka said, "We are working within an Egyptian village, which stopped practicing female circumcision several years ago." The audience hailed those words, and reactions fluctuated between astonishment, skepticism and joy. She added, "Communal leaders of the village made a written agreement in 1991 with midwives and hygienic barbers, where the latter pledged not to practice female circumcision again. It's been three years now that the village is free from the practice of female circumcision!"

This period, the mid-nineties, witnessed the high tide of militancy of political Islamic groups in Upper Egypt. Long months had been wasted before it was possible to visit Deir El Barsha. The visit was arranged with colleagues from the Coptic Evangelical Organization for Social Services in Menia (Deir El Barsha lies in its southernmost region). After the exploratory visit and meeting with some members of the local leadership and with fellow staff members of the Coptic Evangelical Organization, it became clear that we were dealing with a unique and remarkable experience worthy of thorough study.

Hence, the Cairo Institute for Human Rights Studies (CIHRS) decided to undertake field research on Deir El Barsha village to survey the scope and intensity of the phenomenon, and study the factors that prompted inhabitants and leaders of this village to discontinue the practice of female circumcision. Lessons drawn from this experience were expected to benefit the national campaign led by NGOs against female circumcision in Egypt.

Our visit to Deir El Barsha made us more enthusiastic to study this experience and more predisposed to face all problems we might encounter during the course of the research. Actually, during this new phase of the struggle for the abolition of female circumcision that was launched in the nineties, it was necessary to study and assess previous experiences and draw useful lessons, which would be the cornerstone for the development of the anti-female circumcision movement. By doing this the movement would be able to maximize its capacity to pull new forces into the active

domain of eliminating female circumcision and also gain tangible and effective achievements.

Finally, the dissemination of this experience on a broad scale would be an important argument to challenge those who accuse NGOs, especially women's and human rights associations, that they follow the "West" blindly and focus on issues that do not express the needs and priorities of the Egyptian society. Here, we are dealing with a remote village in Upper Egypt that decides, and even succeeds to withstand some deep-rooted social practices and traditions deemed as hindering the progress of this small community. No one, no matter how vehement their argument is, could accuse this village of dependency on or imitation of the West.

Exploratory visits gave us a strong impression that what is going on in Deir El Barsha is a unique and important experience. Not only is this village situated in the Upper Egyptian countryside (where the rate of female circumcision reaches 99.6%), but more importantly, this village has formed a strategy (signing a local document to prohibit female circumcision) that is uncommon not only in Egypt but, to our knowledge, in any other country.<sup>xx</sup> What happened in Deir El Barsha transcends the scope of traditional anti-female circumcision efforts. It is firmly associated with developmental activities and the change of women's status in the village. To evaluate the impact of developmental efforts on the attitude of Deir El Barsha toward female circumcision, it was agreed upon to compare it with another (control) village that has similar general conditions but lacks developmental efforts.

The exploratory visit revealed that Deir El Barsha is a totally Christian village. This prompted prolonged discussions among members of the research team, since the religious dimension could influence the verification of the major research hypothesis, namely, the impact of developmental efforts on the rejection of female circumcision and the possibility of repeating the experience in other predominantly Muslim Egyptian villages. However, it was finally agreed to go on with the research. The prevailing opinion was that religious affiliation would not have a great influence on the attitude of the village members towards female circumcision. On the other hand, the effect of the religious dimension, it was settled, would be surveyed by selecting a non-Christian control village, either a totally Muslim or mixed village.

This estimation was built on the basis of a number of factors drawn from previous studies on Egypt:

- 1- Female circumcision is as widespread among Muslims as it is among Christians in mixed, totally Muslim or Christian communities. We are dealing here with a practice that transcends religious affiliation.
- 2- The major reason for practicing female circumcision, as examined by different studies lies primarily in entrenched traditions inherited by the successive generations. Religious reasons have always ranked third or fourth.

After having consulted the communal leaders in Deir El Barsha and fellow workers at the Coptic Evangelical Organization, it was agreed to undertake the control survey on the neighboring village of El Barsha. This village is inhabited by both Muslims and Christians and has not experienced developmental efforts on the same scale as Deir El Barsha. This factor could give us an opportunity to evaluate the impact of the developmental factor and partially neutralize the role of the religious factor. Furthermore, El Barsha village is close to Deir El Barsha, and they are strongly interconnected, and their general conditions and structure are so analogous that inhabitants of the two villages used to say, "El Barsha is the twin sister of Deir El Barsha."

## **IN THE HEART OF THE COUNTRYSIDE**

Deir El Barsha is an Upper Egyptian village, situated on the Eastern Bank of the Nile on the remote southern borders of Menia governorate. On the village's northwest lies Abou Hanas (a Christian village), which is four kilometers away, and on the southeast Nazlet El Barsha (Muslim village), which is three kilometers away. The mountains surround Deir El Barsha from the east and the Nile from the west. Only scattered fields separate them.

After a three and a half hour journey on the Upper Egypt train, and having reached the city of Mallawi, the trip to Deir El Barsha begins. Outside the train station, a queue of timeworn uncovered cars awaits. These cars are used by inhabitants of East Nile villages for transportation between the station and the ferry. The journey to the ferry does not take more than ten minutes, but you will have to wait a long time until the



vehicle is full, which depends on the driver's estimation and his financial state. The journey to the ferry should cover the cost of fuel at least.

The ferry is an old, even archaic kerosene-operated boat that works from early in the morning until sunset. After five ferries do not operate, and the villages of the "East" are nearly isolated. Any transportation between the East and West banks is a real problem and costs ten times more than transportation in midday. On the East Coast of the Nile, another queue of cars stands. Drivers cry repeatedly, "El Barsha? El Deir? Abou Hanas?" A few minutes later, you find yourself on the outskirts of Deir El Barsha. The driver asks you inquisitively, "Whom will you visit in Deir El Barsha?" and you soon find yourself in front of your destination.

In the countryside, particularly in the East where villages are small and isolated, everybody knows everybody else quite well even if they do not talk to each other. Strangers are easily depicted. During the first visit, you find yourself surrounded by a torrent of questions, asked rather timidly. But on the second visit, you are so startled that so much information has been gathered about you, and all the missing parts of the story are put together with some guesses and conclusions, which are very often correct. The second time, drivers come forward to you and say, "Going to El Deir, right?"

### **THE THREE VILLAGES OF EL BARSHA**

El Barsha is a common name for three neighbor villages on the East Bank of the Nile, in the city of Mallawi, south of Menia municipal governorate.<sup>xxi</sup> The first village, Deir El Barsha, is in the north, and the second lies to the south and is called Nazlat El Barsha. Between the two lies the third village, El Barsha. The three villages are treated as one unit in terms of distribution of services. They share any allocations from the city council budget earmarked for services including water, electricity, roads, schools, health care units, etc. While the three villages share a common geographic location and services, they are distinguished along several lines. The most important difference is the development efforts that the Coptic Evangelical Organization has been undertaking in Deir El Barsha since the fifties. The second difference is the religious affiliation of the inhabitants of the three villages. All Deir El Barsha inhabitants without exception are Copts, while Nazlat El Barsha is inhabited by

Muslims, and El Barsha inhabitants are both Muslims and Christians, the ratio being 40% and 60% respectively.

El Barsha village is the largest, and its inhabitants reach 20,100, 40% of them are Muslims and 60% are Copts. On the other hand, inhabitants of Deir El Barsha, who are all Christians, reach 10,500, according to 1996 estimates of the Central Agency for Public Mobilization and Statistics.<sup>xxii</sup>

Like most villages of the East Bank of the Nile, both villages suffer from poor health and educational services. The latter service is of special significance. Firstly, the locations made available for the establishment of primary and preparatory schools are very limited. Secondly, secondary school students, both public and technical, have to make the journey to Mallawi every day, which means additional costs that most inhabitants cannot afford.

The economic activities in both villages revolve primarily around agriculture, in addition to traditional food-related manufacturing, such as the production of cheese and butter. Other handicrafts are also practiced, especially whose raw materials are available in the village, such as the manufacturing of plates from palm leaves, in addition to growing some vegetables and fishing from the River Nile.

## **DEIR EL BARSHA**

The village of Deir El Barsha was called so because Reverend Bishoy's ancient convent is there, in addition to a number of important ancient Egyptian vestiges.<sup>2</sup> Even though all its inhabitants are Copts, interaction and cooperation between Deir El Barsha and neighboring Muslim and mixed villages (El Barsha and Nazlat El Barsha) is stronger than its relationship with their northern all-Christian neighbor, Abou Hanas village. Joint services among the three villages, particularly the health care unit and primary and preparatory schools bolster this trend of cooperation.

Deir El Barsha is a poor village in terms of services. It has only one primary school with nine classes and 1,100 pupils. The village also

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<sup>2</sup> Appendix No 4

has a weak electricity network, a water station that serves four neighboring villages and includes a high concentration of salts, and a health care unit, which provides first aid only. Most of the services and infrastructure are concentrated in Nazlat El Barsha village.

There are five churches in Deir El Barsha, in addition to Reverend Bishoy's convent. Those churches belong to the Orthodox, Evangelists and Belamis Brothers. Actually, the five churches coexist in the village and a strong spirit of tolerance among the different Christian sects prevails.

## **THE ROLE OF THE COPTIC EVANGELICAL ORGANIZATION**

Ever since it launched its activities in the sixties, the Coptic Evangelical Organization for Social Services focused its efforts on Menia in particular. This allowed it to build strong relationships with the villages that it cooperated with. Nevertheless, the relationship between the Coptic Evangelical Organization and Deir El Barsha village was more distinguished than its relationships with other villages in Menia. Deir El Barsha was among the first Upper Egyptian villages that Provost Samuel Habib had worked with in the fifties, long before the establishment of the Coptic Evangelical Organization.

Many of the elderly inhabitants of Deir El Barsha received lessons of eradication of illiteracy within the framework of the campaign that Provost Samuel had led for this purpose. When the Coptic Evangelical Organization was proclaimed in the early sixties, the campaign for the eradication of illiteracy was initiated. Several health services were also integrated with the Organization's activities. In the eighties the Organization strove to launch another campaign within Deir El Barsha to resist harmful social practices and traditions, including early marriage, the indigenous (local) wedding night, the "tala" or visiting cemeteries, and "adid" or eulogizing and mourning the deceased.<sup>xxiii</sup> Provost Samuel Habib, founder of the Organization, published a book in 1992 called *Ideas about Practices and Traditions*, where he spoke about the aforementioned practices.

The Organization cooperates with local communities upon their request, through an integrated program of action and an agenda specifying the schedule of activities through different stages. The first stage is **participation**, where the Organization deals with the local community

directly through a team composed of the Organization staff. This team lives permanently inside the community and plays the leading role in different programs to serve beneficiaries. Meanwhile, this team strives to support systems of communal participation through action committees that shoulder responsibility for development programs. The second stage is **follow-up**, where the actual leadership of projects is shifted to community leaders. Staff of the Organization reduce the duration of their dwelling inside the village to a minimum. Activities and programs are supervised by leadership cadres, and committees are formed within the village. The final stage is **self-reliance**. The leadership cadres and local committees are empowered to supervise activities and developmental programs on their own and establish their autonomous frameworks (usually in the form of a local community development association). These associations play the role of mediators between the Organization and the local community.

In its long endeavor, the Coptic Evangelical Organization shifted from the "philanthropic" concepts of the sixties to an "integrated approach", i.e. multiparty action, in such a way that the different domains of action would reinforce and support each other. The Organization also adopted the concept of community action based on encouraging local initiatives and helping in the establishment of local mechanisms to lead action. In our case those mechanisms were represented by the village and women's committees (the follow-up stage) and the introduction to the stage of self-reliance.

After a limited break off during the seventies, the Organization resumed its activities in Deir El Barsha in 1982. Apart from the eradication of illiteracy and struggling against harmful traditions, activities included programs of environmental restoration. The Organization helped in extending a potable water network to the village and establishing hygienic sewage systems in a large number of houses. It also trained the youth in some professions and handicrafts and helped them establish small-scale professional enterprises. The Organization also offered loans to inhabitants to set up small enterprises (sewing machines, raising chickens), establish agricultural resources, improve cattle breeds, etc. In the domain of women's activities, the Organization offered a number of health services, particularly in reproductive health, including the provision of birth control methods, a weekly clinic for obstetric and gynecological examinations, the organization of

socialization seminars, household economy classes, and lately, girls' enlightenment classes on reproductive health issues.

The Coptic Evangelical Organization played a crucial role in challenging female circumcision in Deir El Barsha. Alongside sustained educational programs through meetings and seminars, home visits undertaken by the Women's Committee, and girls' classes, the Organization supported the anti-female circumcision document. In this instrument, hygienic barbers and midwives in Deir El Barsha pledged to refrain from practicing female circumcision (see Appendix 2).

## **THE WOMEN'S COMMITTEE**

In most Egyptian villages there are village committees which vary in structure and effectiveness according to the size of the village and the available services. Usually, those committees are composed of traditional leaders in the village, particularly representatives of prominent families, in addition to religious leaders and those charged with major services (the school, health or social unit, etc.). Seldom do those committees include women, let alone that a committee charged with solely women's activities exists in Egyptian villages.

The Coptic Evangelical Organization helped establish the women's committee in the village in 1982.<sup>xxiv</sup> It was composed of 12 women from the village inhabitants, known for their activeness, boldness and spirit of initiative, and the enjoyment of the trust of the people in the village. Those women represented all churches in the village. The Organization was also keen to include married women as members of the women's committee so that they would have more freedom of movement and could go inside all of the houses in the village. The Organization provided members of the Women's Committee with several opportunities to develop their skills and add to their knowledge and experiences through seminars and workshops that the Coptic Evangelical Organization organized on the scale of the entire Menia Governorate.

Activities of the Women's Committee are classified into two sections:

1- Supervision of different projects undertaken by the Organization within the village, such as family planning, classes for the eradication of illiteracy, and household economy classes

## 2- Raising people's consciousness against harmful social practices and erroneous concepts

At the beginning of the eighties, the committee focused on early marriage, local defloration (wedding night), wrong beliefs about barren women, visiting cemeteries and mourning the dead. It was able, in cooperation with the Organization and various churches, to make considerable progress in such a way that those traditions and practices stopped being practiced in the village a long time ago. In the nineties focus shifted to the elimination of female circumcision. In this context the already alluded to document was signed in 1991.

Members of the women's committee distribute themselves in different zones in the village according to the region where they live: Each of them records names of the women in their respective zones and follows up with them in monthly home visits. They also intensify their activities in particular seasons, such as the season of visiting cemeteries and seasons when female circumcision is at its peak. Concerning female circumcision in particular, members of the women's committee visit families of girls having reached the age of circumcision quite intensively to convince them not to circumcise their daughters. The intensive follow-up continues until girls pass the age of circumcision. If members of the committee feel that the mother insists on circumcision, they resort to other village leaders to dissuade her. In recent years fathers have also been the focus of campaigns to persuade them not to circumcise their daughters. Here, members of the village committee and the clergy play quite an active role.



## CHAPTER THREE

### THE RESEARCH DESIGN





The significance of this research lies in the fact that it is a unique attempt to study the factors that prompted an entire village to change its attitude toward a delicate issue concerning women's reproductive health, female circumcision. This topic is directly related to the earnest debate in human rights circles over the universality of human rights versus cultural specificity. Under the banner of cultural specificity, some advocates attempt to condone several violations of the rights of women, more particularly domestic violence, female circumcision being one of its manifestations. On the other hand, anti-female circumcision activists are accused of adopting Western (alien) perceptions, since this practice is considered part of the cultural specificity of our society, and even part of its religious rituals.

Results of this research indicate that there is a tangible shift in the attitude of Deir El Barsha inhabitants toward the circumcision of their young girls. This attitude has been carved as a result of the community's determination and persistence to change for the better. It is also strongly associated with the pattern of developmental action within Deir El Barsha and the role of communal leaders therein. No individual, no matter how bold, can claim that the inhabitants of an entire Egyptian village were blindly following Western priorities when they decided to protect their daughters and discontinue the practice of female circumcision.

A study of the shift in health-related attitudes and behaviors, particularly when the matter concerns a deeply entrenched social practice, is not an easy task by any means. First, it should survey the socio-economic circumstances of the concerned location, since the phenomenon is not divorced from other factors, but is rather firmly associated with and influenced by them. Concerning female circumcision, previous studies have demonstrated that the tendency to reject female circumcision grows with a higher level of education, urbanization and women's salaried employment.<sup>xxv</sup> On the other hand, it is obvious that the attitude of some state agencies, more particularly the Ministry of Health<sup>xxvi</sup> and the mass media, especially the broadcast and TV services toward female circumcision could play an important role in modifying the attitudes and behavior of different sectors toward this practice. Those factors are highly significant in the case of high illiteracy rates.

## OBJECTIVES OF THE STUDY

1. To explore the magnitude of substantive shift in the attitude of Deir El Barsha inhabitants toward female circumcision, and the degree of sustainability of this phenomenon within the village
2. To identify the factors that helped inhabitants and leaders to adopt this attitude. Concerning the influential factors, the major research hypothesis is that sustainable development efforts in Deir El Barsha and male labor migration abroad helped in modifying the behavior and attitude of inhabitants toward female circumcision.

## RESEARCH METHODS

After prolonged discussions either in the Cairo Institute for Human Rights Studies or within the research committee of the Task Force against FGM, it was agreed to undertake field research in Deir El Barsha village. This village was to be compared with one of the neighboring villages that shares some of its general conditions, such as the geographic location, economic circumstances, educational and health services, etc. However, the control village did not have any established developmental activities, and its inhabitants had diverse religious affiliations. For these reasons the second village, El Barsha, was selected as a control group.<sup>xxvii</sup>

The first research objective, the assessment of the substantial change in attitudes toward the practice of female circumcision, required a wide scale survey through a codified questionnaire. Inhabitants were supposed to fill in questionnaire forms through home visits in both villages. Due to the limited resources available, it was agreed to select a representative sample from Deir El Barsha (500 from nearly 2,500 families) and a limited sample from the control village (one hundred families). The same questionnaire form was to be administered to inhabitants of both villages, after several adjustments to exclude questions pertaining to the special status of Deir El Barsha.

However, it was difficult to grasp the reasons of the shift in the attitude of inhabitants through questionnaires alone, because this research tool does not allow a strong interaction between researchers and respondents. Therefore, it was agreed to undertake a number of thorough interviews with a diverse group of Deir El Barsha inhabitants. Interviews included a sample of community leaders, clergy, in addition to other

agents such as midwives, uncircumcised women/girls, and fathers and mothers who were among the pioneering parents who refused to circumcise their daughters.

## STEPS OF THE RESEARCH

The preparation for the research took a long time (over a year) for several reasons. First, several official permits had to be obtained from the Ministry of Health, the Central Agency for Public Mobilization and Statistics (CAPMAS) and the Menia Security Service.<sup>xxviii</sup> Second, the security conditions within Menia during the implementation of the research led to the postponement of field visits more than once. Finally, direct telephone communication with the village was extremely difficult.

Throughout the long preparation period, several meetings took place with the staff of the Coptic Evangelical Organization for Social Services, more particularly those who were involved in development projects in Deir El Barsha, either in Cairo or Menia. Those meetings aimed to identify the method of field action of the Coptic Evangelical Organization in general, its historical relationship with Deir El Barsha, and the distinctive features of developmental projects established in the village. Several meetings also took place with some community leaders in the village who identified more closely the general outlines of their experience, and were in turn briefed with the general outline of the research. All those steps took place during several visits, and a number of preliminary goals were achieved:

- 1- Researchers were introduced to major community leaders and key figures in the village, including religious leaders, and members of the village and women's committees. The research team explained to them the objectives and nature of the research.
- 2- Affectionate ties were established with the community under study and opportunities were found for direct contact with inhabitants in order to identify different aspects of traditions and customs and to understand the rules governing the relationships between different forces and leaders within the village.
- 3- The role of the Coptic Evangelical Organization for Social Services in the village was identified throughout history, and also the nature of

development projects in the village, whether sponsored by the Organization or by any other institutions.

- 4- The final draft of the research questionnaire was prepared, discussed with communal leaders and tested for its content and form. The questionnaire was actually modified and adjusted after having been tested on a number of communal leaders in the village, mainly members of the women's committee. Upon their suggestions, several questions were eliminated because, in their estimation, they were not suitable. Moreover, some questions were reformulated to be completely intelligible to all respondents. For this reason the questionnaire was written in the colloquial language used in the village to facilitate communication, especially since most of the village members did not receive a satisfactory level of education.
- 5- The necessary background information concerning the prevailing socio-economic aspects of Deir El Barsha was collected. Moreover, the research team had to draw a map of the village. Then, the village was divided into four regions. This procedure helped later in selecting the representative sample.
- 6- An agreement was made with some communal leaders to assist the research team during the field survey. Those leaders were to provide a place for the settlement and dwelling of researchers in the village, due to the difficulty of daily movement between Deir El Barsha and Menia, as planned in the original research proposal.

## **RESEARCH TEAM**

The field research team was composed of four researchers in addition to the main researchers and a research assistant. Participant researchers were trained through several meetings. Those meetings dealt with the following topics:

- (1) Discussion of the research topic, hypotheses and objectives, the necessary information on female circumcision, on Deir El Barsha village, its particular experience, the nature of its developmental projects, the role of communal leaders, the major influential figures in the village, and some statistical data on Deir El Barsha and its neighboring villages

- (2) Detailed discussion of the questionnaire and training on how to address questions and record observations drawn from testing the questionnaire on the village (for instance, how neighbors would gather and attempt to intrude to attend the session with the respondents)

Furthermore, several researchers participated with the main researcher in exploratory visits either to Deir El Barsha or El Barsha to identify more closely the area of the research and the communal leaderships.

A file was distributed to each researcher including a questionnaire form, a map of the village, and a list of developmental projects within the village. Shortly after the researchers arrived in the village, a meeting with some members of the village and women's committees was arranged in order to agree on the methods of action.

## **FIELD SURVEY**

### **1-DEIR EL BARSHA:**

Deir El Barsha is composed of nearly 2,500 households distributed on four geographic regions: the western, northeastern, southwestern and eastern regions. As the sample of the study encompassed 500 families, it was agreed to distribute the questionnaire forms among the four regions according to their respective population density in order to have the best representation of the entire village. Each of the four areas has been dealt with as an independent region. Households were randomly selected; any female or male respondent we discovered was one of the offspring or siblings of respondents already included in the survey were excluded from the sample, since the questionnaires dealt with siblings and offspring in detail.

The field survey continued for a whole week without interruption. Research work was split into two shifts a day to fit the circumstances of the village (women's housework starts early in the morning and ends shortly before their husbands return from the fields in the evening). The fieldwork supervisor was responsible for the division of labor among researchers and for reviewing questionnaires as he received them. Then,

the main researcher would review those questionnaires again. At the end of each day, researchers met to exchange information and general comments and observations about their respective regions, inhabitants' responses, and to discuss the obstacles, difficulties, and problems encountered throughout the day in order to avoid them on the following days.

## **2- EL BARSHA:**

Field survey covered only one hundred families in the control village. They were divided into two major groups so as to include both Muslim and Christian families according to the relative number of Muslims and Christians in the village. Due to the difficulty (if not impossibility) of dwelling in the village for various reasons, field survey took the form of several home visits. This was reflected in the structure of the sample where male representation was quite abridged. We tried to make up for this in the analysis through information on husbands drawn from female respondents.

The research team responsible for El Barsha was composed of three female researchers. Two of those researchers took part in the survey on Deir El Barsha, which facilitated work on the basis of previous experience. The village is composed of a significant minority of Muslims and a Christian majority.

## **IN-DEPTH INTERVIEWS**

Fifteen in-depth interviews were administered. They covered four members of the village committee (one of them a female member of the women's committee and another religious leader), three members of the women's committee, one key personnel of developmental projects (not a member of either committee), two female beneficiaries of the developmental projects. They also covered four village inhabitants who have nothing to do with development projects, two men and two women, and finally, the first girl who announced abstention from the practice of female circumcision (who is married and has three children).

## ETHICAL ASPECTS OF THE RESEARCH

- Throughout the long preparation period, all steps and procedures have taken place in cooperation with communal leaders in the village. At first, the research team met several times with representatives of the village committee to elucidate the nature and objectives of the research in detail.
- The questionnaire was adjusted to clarify the aim and importance of different questions in light of the comments and observations that members of the women's committee of the village had raised. All comments were taken into consideration, and accordingly the questionnaire was modified. In this sense members of the women's committee were reassured that the research would not negatively affect their activities in future. Before the survey was actually undertaken, questions had been discussed in a broader meeting with members of the women's committee within the village.
- No interviews took place before asking permission from respondents (females and males). The nature of the research, the researchers' affiliation,<sup>3</sup> and the researchers' identification cards were presented to the respondents. Then, the latter had the freedom either to cooperate with the researchers or simply withdraw. Only in one incident did a female respondent refuse to take part in the questionnaire.
- Concerning the nature of the research, there was an objective contradiction between proclaiming the objectives of the research and identifying the genuine attitude of inhabitants toward female circumcision. If the researcher explained extensively the objectives of the research, this might influence the attitude of respondents, even indirectly. Therefore, it was agreed that the researchers would claim that CIHRS is undertaking a research on female circumcision in the village, without alluding to the objectives of the research (assessing the scope of change in the village attitude toward this practice).
- Field research training stressed the confidentiality of information and the necessity of obtaining the respondents' consent before filling in



the questionnaire form. Interviewees were asked to respond to questions individually and in private (without any interference). However, this last part was difficult to achieve in many cases because some female respondents insisted that other members of her family should attend the interview session with her. On the other hand, researchers firmly requested that members of the women's committee should not attend interviews to ensure the maximum degree of freedom of expression to respondents (many of whom were directly associated with the committee). This last point was discussed at length with female members of the village committee before the onset of fieldwork. Hence, they withdrew themselves after introducing us to respondents.

### **DIFFICULTIES ENCOUNTERED DURING THE COURSE OF THE RESEARCH**

Apart from the hassle of obtaining different official approvals and licenses, the researchers experienced a number of difficulties. We summarize below the major difficulties and problems:

- The first problem is encountered by most studies undertaken in rural areas by “alien” researchers (coming from another city or region), namely, understanding the nature of power relations within the location of the study and how those relations influence all aspects of life in the village. However, this issue had a special significance in this study because the village was entirely Christian, with different Christian sects coexisting within it (Orthodox, Protestant, Evangelical, and Belamis Brothers), while most members of the research team were Muslims. However, the long preparation period helped in overcoming this problem. The fact that the Belamis brothers (they are one of the strictest Christian sects) agreed to host the research team in their special compound was a testimony of trust that greatly facilitated the task of the researchers and encouraged inhabitants from different Christian sects to cooperate with them.
- The second problem was our penetration in the village through the Coptic Evangelical Organization for Social Services. This path was necessary, first to benefit from the expertise of the Organization's personnel and their understanding of the nature of the village and balance-of-powers therein, and their familiarity with the village's

problems as well as the difficulties we expected to encounter. Secondly, we needed to make use of the relationship between the Organization and community leaders so that we could take advantage of the period of first acquaintance as much as possible. Finally, we had to coordinate our actions with the Organization in such a way that research activity would not incidentally cause any problems to the Organization within the village.

- Thirdly, our penetration into the village through the Organization had some influence on the study. Bearing in mind the long history of the Coptic Evangelical Organization in developmental activities within the village, and inhabitants' trust in its staff, the research team soon gained this trust especially when members of the women's committee began to go out with the researchers on a daily basis. However, this sometimes confused inhabitants of the village, who treated the research team as representatives of the Coptic Evangelical Organization. Even though all the researchers introduced their meetings with families by explaining to them that they were affiliated with the Cairo Institute for Human Rights Studies and that this Institute was totally independent from the Coptic Evangelical Organization, the local people were not always convinced that the researchers did not work with the Organization. This belief often affected the attitude of respondents, especially in the early stages of the research. This prompted us to return again to some respondents to double check answers that seemed to be contradictory as soon as the survey of other regions was completed.



## CHAPTER FOUR

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# **CHARACTERISTICS OF DEIR EL BARSHA RESIDENTS**

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## I- Deir El Barsha Village

The Deir El Barsha sample encompassed 497 respondents from both sexes, including 399 females (80.3%) and 98 males (19.7%). The vast majority of respondents were native residents of the village, but there was a limited percentage of women (8.8%) whose families belonged to other villages. This conforms to traditions prevailing in the Egyptian countryside, where the woman moves to her husband's house after marriage. The majority of women (77.4%) belong to the 20-49 year old age group. The predominant age group among males was 30-49 years, and represented 60% of total male respondents (see Table 1).

**TABLE (1): AGE DISTRIBUTION OF RESPONDENTS**

|            | Females |       | Males |       | Total |
|------------|---------|-------|-------|-------|-------|
|            | #       | %     | #     | %     | #     |
| > 20 years | 27      | 6.8%  | 2     | 2%    | 29    |
| 20-29      | 106     | 26.6% | 10    | 10.2% | 116   |
| 30-39      | 118     | 29.6% | 30    | 30.6% | 148   |
| 40-49      | 85      | 21.3% | 29    | 29.6% | 114   |
| 50-59      | 28      | 7%    | 12    | 12.2% | 40    |
| 60+        | 35      | 8.8%  | 15    | 15.3% | 50    |
| Total      | 399     | 100%  | 98    | 100%  | 497   |

Tables (2) & (3) indicate that:

1. The great majority of female respondents (86.2%) and males (86.7%) were married. The group of respondents who were single included 5.5% of the females and 12.2% of the males. There were more widows among females (8.3%) than among males (1%). The sample included no divorcees.
2. The average age of marriage varies between women and men. While the majority of women marry before they are twenty (96.3%), the largest percentage of males (70.9%) marry between 20-29 years of age. This is perfectly compatible with Egyptian traditions, where young girls marry to protect themselves while men marry at a later age when they get settled in a particular job and have performed military service.

**TABLE (2): SOCIAL STATUS**

|         | Females |       | Males |       | Total |
|---------|---------|-------|-------|-------|-------|
|         | #       | %     | #     | %     | #     |
| Single  | 22      | 5.5%  | 12    | 12.6% | 34    |
| Married | 344     | 86.2% | 85    | 86.3% | 429   |
| Widowed | 33      | 8%    | 1     | 1.1%  | 34    |
| Total   | 399     | 100%  | 98    | 100%  | 497   |

**TABLE (3): AGE UPON MARRIAGE**

| Age   | Females |       | Males |       | Total |
|-------|---------|-------|-------|-------|-------|
|       | #       | %     | #     | %     | #     |
| > 20  | 363     | 96.3% | 24    | 27.9% | 387   |
| 20-29 | 14      | 3.7%  | 61    | 70.9% | 75    |
| 30-39 | --      | --    | 1     | 1.2%  | 1     |
| Total | 377     | 100%  | 86    | 100%  | 463   |

- EDUCATION**

74.9% of women are illiterate compared to 49% of males (see Table 4). Those rates are higher than those of the 1997 World Bank reports (61% and 36% respectively).<sup>xxix</sup> 23% of total respondents can read and write.<sup>4</sup> Only 10.5% of male and 4.5% of female respondents obtained intermediate education certificates.<sup>5</sup> This is understandable in light of the fact that no secondary schools have been established in the village. Therefore, secondary level students are compelled to travel daily, or settle down in Malawi city, which is actually a great financial burden to most of the families on the one hand, in addition to the problem of girls living alone in the city on the other. Only four men among the total number of respondents managed to obtain a university education.

**TABLE (4): EDUCATIONAL BACKGROUND**

|                     | Females |       | Males |       | Total |
|---------------------|---------|-------|-------|-------|-------|
|                     | #       | %     | #     | %     | #     |
| University Graduate | --      | --    | 4     | 3%    | 4     |
| Intermediate        | 18      | 4.5%  | 12    | 12.3% | 30    |
| Reads & writes      | 82      | 20.4% | 35    | 35.7% | 117   |
| Illiterate          | 299     | 74.9% | 48    | 49 %  | 347   |
| Total               | 399     | 100%  | 99    | 100%  | 498   |

- LABOR**

Table (5) illustrates that a large section of female respondents (66.4%) do not work for a salary. Nevertheless, 33.6% of them mentioned that they do perform paid work, which is a higher percentage than that mentioned in the World Bank Report on female paid labor in Egypt (28%).

In fact, the questionnaire included an item on the kinds of professions Deir El Barsha inhabitants were engaged in. Most of the jobs mentioned are not usually listed in official statistics on labor force, such as the production of food items for sale, or the manufacture of baskets and scuttles, or other professions such as sewing. On the other hand, labor did not include activities such as "plowing," except when female respondents were answering by 'yes' to the question of whether they worked or not.



**TABLE (5): DISTRIBUTION OF RESPONDENTS ACCORDING TO PAID LABOR**

|                             | Females          |       | Males |       |
|-----------------------------|------------------|-------|-------|-------|
|                             | #                | %     | #     | %     |
| Do not perform paid work    | 268 <sup>6</sup> | 67.1% | 8     | 8.1%  |
| Do perform paid work        | 131              | 32.9% | 90    | 91.9% |
| Gross total                 | 399              | 100%  | 98    | 100%  |
| Type of work                |                  |       |       |       |
| Farmers                     | 27               | 20.6% | 41    | 45.6% |
| Erratic subsistence-seekers | 0                | 0     | 4     | 4.4%  |
| Production for sale         | 61               | 46.5% | 0     |       |
| Others                      | 43               | 32.8% | 45    | 50%   |
| Total of those who work     | 131              | 100%  | 90    | 100%  |

• **TRAVELLING ABROAD**

A review of Table (6) shows that the greatest section of female respondents (62.9%) did not leave Deir El Barsha except to visit families or married sons and daughters who have settled outside the village, or to visit doctors for treatment. Only one woman accompanied her husband who traveled outside Egypt. This is quite plausible, since the majority of men migrate temporarily to improve the economic situation of their households, and there is no room for their wives to accompany them.

The majority of men (77.5%) migrated for employment either inside or outside Egypt. The largest percentage (58.1%) migrated abroad in

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<sup>6</sup> The category of females who do not work includes those who reported (housewives, pension-recipients, or those who produce material for household consumption). They are a very limited group (six females). As for males, other professions include employees in government establishments such as the social or health care units, teaching, as well as fishing, carpentry, weaving and public shops (pharmacy, coffee shop, or bakery).

search of employment for at least one term.<sup>7</sup> Those terms ranged most often between two and four years. Very few remained abroad for long periods of time. This matches the results of previous studies on migration of Egyptian labor abroad.<sup>xxx</sup> For those who migrated inside Egypt (40.8%), the search for employment opportunities represented 50% of the reasons for travel.

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<sup>7</sup> The destination was mainly Arab countries. The number of those who migrated to Europe is very limited. Migrants were concentrated in Iraq, Jordan, and to a lesser extent Kuwait and Libya.

**TABLE (6): TRAVEL OF RESPONDENTS**

|         | Travel Inside Egypt |          |           |      | Travel Outside Egypt |          |           |      | Total # of those who traveled | Total # of those who did not travel |
|---------|---------------------|----------|-----------|------|----------------------|----------|-----------|------|-------------------------------|-------------------------------------|
|         | Visit               | Training | Education | Work | Visit                | Training | Education | Work |                               |                                     |
| Females | 141                 | 3        | 3         | 0    | 1                    | 0        | 00        | 00   | 148                           | 251                                 |
| Males   | 14                  | 3        | 3         | 20   | 0                    | 1        | 00        | 56   | 97                            | 16                                  |
| Total   |                     |          |           |      |                      |          |           |      | 245                           | 267                                 |

• **DEVELOPMENTAL PROJECTS**<sup>8</sup>

Due to the importance of this section to the research hypothesis, and due to the large scale developmental activity in Deir El Barsha, it has been discussed in detail with all members of the family (offspring, parents, wives, husbands) and not just respondents from both sexes. Our aim was to determine the size and evolution of participation in local development activities through the generations.

Table (7) reveals that:

- 1- A great percentage of respondents from both sexes participate in different development projects in the village. This participation is higher among females (21.5%) than males (17.3%). 15.7% of respondents play leading roles in those projects. Moreover, 12.5% of spouses (husbands and wives) also take part in developmental projects, and 8% of them play leading roles as well.

<sup>8</sup> A detailed presentation of the nature of developmental projects is found in the introduction p.23.

- 2- The rate of wives' contribution is higher than that of husbands (16.2% and 13.7% respectively).<sup>9</sup> Here also we find that the ratio of wives playing a leading role in development projects is higher than that of husbands.
- 3- Fathers and mothers also contribute to developmental projects (5% & 7%), but only a limited percentage of them (males only) play key roles in those projects.
- 4- As for the offspring, we find that 101 sons and daughters participate in those projects (75 females and 26 males). Those are the offspring of only 69 of the respondents, 13% of total respondents. In any case if we excluded unmarried respondents (34), and those who have not yet had children (60), or those whose children are still too young to participate in those projects (65), this ratio goes up to 20.4%. It is closer to the ratio of participants in development projects among respondents themselves. Here we also find that the number of daughters taking part in the projects exceeds the number of sons.

This difference is concentrated in projects geared toward the eradication of illiteracy and girls' socialization classes. This might be justified by the fact that the opportunities of male offspring to join systematic education in schools are greater than girls, due to the aforementioned reasons.

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<sup>9</sup> The ratio of husbands and wives who participated in developmental projects to total respondents from both sexes has been calculated after eliminating bachelors from both sexes.

**TABLE (7): PARTICIPATION IN DEVELOPMENTAL PROJECTS**

|                    | Participants in developmental projects |       |         |            |                      |       | % of total category |
|--------------------|--|-------|---------|------------|----------------------|-------|---------------------|
|                    | Eradication of illiteracy              | Loans | Classes | Leadership | Others <sup>10</sup> | Total |                     |
| Female respondents | 58                                     | 11    | 9       | 15         | 8                    | 86    | 21.5%               |
| Male respondents   | 10                                     | 1     | 0       | 5          | 6                    | 17    | 17.3%               |
| Wives              | 9                                      | 1     | 2       | 4          | 2                    | 14    | 16.4%               |
| Husbands           | 35                                     | 16    | 0       | 1          | 2                    | 53    | 13.7%               |
| Mothers            | 20                                     | 4     | 0       | 0          | 3                    | 27    | 5%                  |
| Fathers            | 29                                     | 5     | 0       | 3          | 3                    | 37    | 7%                  |
| Sons               | 22                                     | 1     | 0       | 0          | 3                    | 26    | 5%                  |
| Daughters          | 65                                     | 1     | 8       | 0          | 1                    | 75    | 15%                 |

We can conclude from the above:

- 1- The size of developmental activities in Deir El Barsha is quite impressive, especially when compared to the control village (El Barsha). Great efforts are being made in the sphere of eradication of illiteracy among inhabitants, particularly females of the village. The greatest section of developmental projects is focused on activities related to eradication of illiteracy. In this section the ratio of female participants is higher than their male counterparts in all categories, except fathers and mothers, where male participation is greater. This manifests a growing concern with education of women.
- 2- The rate of women's contribution in development projects among all categories (respondents, spouses, and offspring) is higher than male contribution, except among fathers and mothers. The difference between

<sup>10</sup> Includes projects such as grants to refurbish or paint houses, building toilets, providing cows to improve cattle breeds, or training on some handicrafts or professional works... etc.

the two sexes increases in the case of offspring, which suggests a growing contribution by women in developmental efforts within the village. This reflects the evolution of the status of women impelled by the Coptic Evangelical Organization's concern with the empowerment of women throughout the past few years.

- 3- There is a growing tendency toward participation in developmental action through the generations. While the average rate of participation among the generation of fathers and mothers is nearly 6%, this same rate among the following generation, including respondents from both sexes, goes up to 20.7%. In the third generation, the offspring, it reaches 20.4%. This rate is expected to go up with the constantly growing numbers of sons and daughters joining developmental activities in the village.<sup>11</sup>
- 4- In comparison to the generation of fathers and mothers, the number of those who play key roles in development projects is proliferating. This is strongly associated with the action of the Coptic Evangelical Organization in the village. The Organization strives, as explained in the introduction to this book, to create leadership cadres from inhabitants of the village where it works, and to minimize the presence of its representatives in the village after the formation of those cadres.

## **II- El Barsha Village**

The group of respondents from El Barsha village included 122 males and females, 113 females (92.6%) and 9 males (7.4%).<sup>12</sup> Most of them were born in the village, except a limited percentage of females whose parents belong to other villages similar to Deir El Barsha. Furthermore, the largest group of males (70%) and females (75.1%) belong to the 20-49 year olds (see Table 8). Table (9) indicates that, like Deir El Barsha, the sweeping majority of respondents from both sexes are married. The sample includes one widow only. Men tend to marry at a later age than women. A small

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<sup>11</sup> For instance, less than a year after the field survey had been undertaken, the number of girls' classes went up from five (during the research) to fourteen, in addition to the inauguration of two male classes in parallel to the girls.'

<sup>12</sup> Male representation was not very elaborate due to the circumstances of the research, since researchers could not permanently dwell in the village like they did in Deir El Barsha.

percentage of women (13.7%) marry between 20-29 years of age, while most women (86.3%) marry before they reach twenty.

**TABLE (8): AGE DISTRIBUTION OF RESPONDENTS IN EL BARSHA**

| Age category | Females |       | Males  |       | Total  |       |
|--------------|---------|-------|--------|-------|--------|-------|
|              | Number  | %     | Number | %     | Number | %     |
| > 20 years   | 11      | 9.7%  | 1      | 11.1% | 12     | 9.8%  |
| 20-29        | 35      | 31%   | 3      | 33.3% | 38     | 31.1% |
| 30-39        | 29      | 25.7% | 3      | 33.3% | 32     | 26.2% |
| 40-49        | 20      | 17.7% | 1      | 11.1% | 21     | 17.2% |
| 50-59        | 11      | 9.7%  | 0      | --    | 11     | 9%    |
| 60-...       | 7       | 6.2%  | 1      | 11.1% | 8      | 6.6%  |
| Total        | 113     | 100%  | 9      | 100%  | 122    | 100%  |

**TABLE (9): SOCIAL STATUS**

|         | Females |       | Males |       | Total |       |
|---------|---------|-------|-------|-------|-------|-------|
|         | #       | %     | #     | %     | #     | %     |
| Single  | 18      | 15.8% | 2     | 22.3% | 20    | 16.3% |
| Married | 94      | 83.1% | 7     | 77.7% | 101   | 82.6% |
| Widowed | 1       | 0.07% | 00    | 00    | 1     | 0.08% |
| Total   | 113     | 100%  | 9     | 100%  | 122   | 100%  |

**TABLE (10): AGE UPON MARRIAGE**

| Age   | Females |       | Males |       | Total |       |
|-------|---------|-------|-------|-------|-------|-------|
|       | #       | %     | #     | %     | #     | %     |
| > 20  | 82      | 86.3% | 2     | 28.6% | 84    | 82.4% |
| 20-29 | 13      | 13.7% | 5     | 71.4% | 18    | 17.6% |
| Total | 95      | 100%  | 7     | 100%  | 102   | 100%  |

## • EDUCATIONAL BACKGROUND

Table (11) indicates that 75.2% of women are illiterate, compared to 55.6% of males. Those figures are close to those of Deir El Barsha, even though they are slightly higher here among men.

The ratio of those who read and write among respondents from both sexes in El Barsha village are lower than those of Deir El Barsha. Since both villages are similar in terms of educational service, the difference can be explained by the massive efforts undertaken in the latter village to eradicate illiteracy. Among all respondents, only one male and one female have reached higher (university) education.

**TABLE (11): EDUCATIONAL BACKGROUND**

| Age                 | Females |       | Males |       | Total |       |
|---------------------|---------|-------|-------|-------|-------|-------|
|                     | #       | %     | #     | %     | #     | %     |
| University graduate | 1       | 0.9%  | 1     | 11.1% | 2     | 1.6%  |
| Intermediate        | 8       | 7.1%  | 0     | --    | 8     | 6.6%  |
| Reads & writes      | 19      | 16.8% | 3     | 33.3% | 22    | 18%   |
| Illiterate          | 85      | 75.2% | 5     | 55.6% | 90    | 73.8% |
| Total               | 113     | 100%  | 9     | 100%  | 122   | 100%  |

• **LABOR**

Table (12) shows that 72.6% of female respondents do not perform paid labor while 27.4% of them do. Those ratios are almost identical to those of the World Bank report alluded to earlier. Hence, women's paid labor in Deir El Barsha village is greater than El Barsha. The types of professions practiced by women in El Barsha are similar to their counterparts in Deir El Barsha. The largest group of women (54.8%) produce material for sale, and 32.3% practice other professions. The same is true for men, who practice agriculture and other professions.



**TABLE (12): DISTRIBUTION OF RESPONDENTS ACCORDING TO LABOR**

|                          | Females |       | Males |       |
|--------------------------|---------|-------|-------|-------|
|                          | #       | %     | #     | %     |
| Do not perform paid work | 82      | 72.6% | 1     | 11.2% |
| Do perform paid work     | 31      | 27.4% | 8     | 88.8% |
| Gross total              | 113     | 100%  | 9     | 100%  |
| Type of work             |         |       |       |       |
| Peasant                  | 4       | 12.9% | 4     | 50%   |
| Production for sale      | 17      | 54.8% | 0     | 0     |
| Others                   | 10      | 32.3% | 4     | 50%   |
| Total of those who work  | 31      | 100%  | 8     | 100%  |

• **EXODUS**

Like Deir El Barsha, most women (56.6%) never left their village. Those who did (44.4%) had several reasons and mainly traveled inside Egypt. The main reasons were either to visit family and relatives or to seek medical treatment. 50% of male respondents migrated abroad for labor. Since the ratio of men is quite limited in this sample, the reasons for travel among husbands (42.1%) have been explored through wives (Table 13). In that case we find that the ratio of males who migrated abroad for labor was considerably lower than their counterparts in Deir El Barsha.

**TABLE (13): RESPONDENTS EXODUS**

|          | Travel inside Egypt |         |     |        | Travel outside Egypt |          |           |       | Total # of travelers | Total # of non- |
|----------|---------------------|---------|-----|--------|----------------------|----------|-----------|-------|----------------------|-----------------|
|          | Visit               | Trainin | ion | Educat | Visit                | Training | Education | Labor |                      |                 |
| Females  | 43                  | 2       | 4   | 0      | 1                    | 0        | 0         | 0     | 50                   | 62              |
| Males    | 0                   | 1       | 1   | 2      | 0                    | 0        | 0         | 5     | 9                    |                 |
| Husbands | 5                   | 3       | 6   | 13     | 0                    | 0        | 0         | 42    | 68                   | 26              |

• **DEVELOPMENTAL PROJECTS**

Table (14) shows that a limited percentage of female respondents (4.4%) and their husbands (3.2%) participated in developmental projects. All of them are Christians. None of the male respondents and their wives (all Muslims) took part in any developmental project. In this respect, Deir El Barsha diverges from the control village, El Barsha.

It is important to indicate here that calling such activities “developmental efforts” is not very accurate in the case of El Barsha. Most of those activities are literacy classes that the Church had established. This is qualitatively different from the nature of developmental projects in Deir El Barsha, both in terms of diversity and the role of local leaders in the management of those projects.

**TABLE (14): PARTICIPATION IN DEVELOPMENTAL PROJECTS**

|          | Non-participant | Participation in Developmental Projects |        |       | Total Number |
|----------|-----------------|---|--------|-------|--------------|
|          |                 | Literacy                                | Others | Total |              |
| Females  | 108             | 4                                       | 1      | 5     | 113          |
| Males    | 9               | 0                                       | 0      | 0     | 9            |
| Husbands | 92              | 2                                       | 1      | 3     | 95           |
| Wives    | 7               | 0                                       | 0      | 0     | 7            |



CHAPTER FIVE

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**ATTITUDES TOWARD  
FEMALE CIRCUMCISION**

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## **I- DEIR EL BARSHA**

### **1- CIRCUMCISION OF FEMALE RESPONDENTS AND WIVES OF MALE RESPONDENTS**

Table (15) indicates that the sweeping majority of female respondents and wives of male respondents have been circumcised, the rate being more than 95%. Those figures are not very different from those of the 1995 Demographic and Health Survey, even though they are lower than the figures on female circumcision in rural Upper Egypt (99.6%).

**TABLE (15): CIRCUMCISION OF FEMALE RESPONDENTS AND WIVES OF MALE RESPONDENTS**

|                 | Female respondents |       | Wives of male respondents |       |
|-----------------|--------------------|-------|---------------------------|-------|
|                 | #                  | %     | #                         | %     |
| Circumcised     | 382                | 95.8% | 83                        | 95.4% |
| Non-circumcised | 17                 | 4.3%  | 3                         | 4.3%  |
| Do not know     | 00                 | 00    | 1                         | 1.1%  |
| Total           | 399                | 100%  | 87                        | 100%  |

### **2-CIRCUMCISION OF DAUGHTERS AND SISTERS OF MALE AND FEMALE RESPONDENTS**

First, it should be noted that when we reviewed questionnaire forms, we found that the typical circumcision age among females ranged between 7-12 years of age. Therefore, daughters of respondents have been classified into three categories:

- 1- Those who passed the age of circumcision, i.e., starting 13 years, those who are either circumcised or not
- 2- Those who have reached the circumcision age, i.e., between 7 and 12 years
- 3- Those who are under the age of circumcision, i.e., less than 7 years

Accordingly, male and female respondents who did not have daughters, or those whose daughters were less than 13 years of age were eliminated from the survey. The remaining group has been classified into two major sections:

- a) Male and female respondents having non-circumcised daughters, and also those who have one or more uncircumcised girls even if they had older circumcised daughters. This section also encompasses girls at circumcision age or under this age, on the basis that the presence of even one circumcised daughter reflects a shift in the parents' behavior since they refused to circumcise their other daughters.
- b) Male and female respondents who have circumcised daughters. This section also encompassed one or more circumcised girls, even if they had daughter(s) at circumcision age or under. Even though they might assert they would not circumcise their daughters, this has not been proven by substantial behavior. Undoubtedly, this classification is inaccurate, because many who support the abandonment of female circumcision belong to younger age groups, whose daughters are still under circumcision age. However, from another point of view, this classification provides nearly certified information about the situation of circumcision in the village, which could be the baseline for comparison with any other new studies in the future.

**TABLE (16a): CIRCUMCISION OF DAUGHTERS AND SISTERS OF MALE AND FEMALE RESPONDENTS**

|           | Circumcised |      | Non-circumcised |      | At Circumcision age |     | Under circumcision age |      | Do not have daughters or sisters |      | Total |     |
|-----------|-------------|------|-----------------|------|---------------------|-----|------------------------|------|----------------------------------|------|-------|-----|
|           | #           | %    | #               | %    | #                   | %   | #                      | %    | #                                | %    | #     | %   |
| Daughters | 162         | 32.5 | 95              | 19.1 | 75                  | 15  | 60                     | 12   | 106                              | 21.3 | 497   | 100 |
| Sisters   | 364         | 73.2 | 39              | 7.8  | 14                  | 2.8 | 2                      | 0.04 | 78                               | 15.6 | 497   | 100 |

## GIRLS

Table (16a) indicates that 32.5% of total respondents had circumcised daughters, and 19.1% of respondents did not circumcise their girls. This is a high ratio compared to circumcised female respondents and mothers (95%). However, if we exclude unmarried respondents, and those who have not yet had any children or have sons only, in addition to those who have daughters under the circumcision age or have just reached the normal circumcision age (7-13), the ratio becomes **37% non-circumcised and 63% circumcised** (Table 16b). There is a considerable gap between those figures and the rate of circumcision among female respondents and wives of male respondents. They also depart from the percentages mentioned in the 1995 Demographic and Health Survey about female circumcision in Upper Egypt: 96.7% (52.8% had at least one circumcised daughter, and 43.9% intended to circumcise their daughters in future).

It should be noted that a large percentage of those who have daughters at circumcision age or under claimed they would not to circumcise their girls. On the other hand, a group of non-circumcised female respondents do not have daughters at circumcision age, and another group of respondents have non-circumcised sisters.

Those are all indicators suggesting that they would not circumcise their daughters in the future, which means that if they were counted, the trend toward abstention from female circumcision would shoot up beyond 50% of total respondents. According to our estimation, it is important to repeat this survey in Deir El Barsha in a few years to follow up the coherence of the inhabitants' attitude toward female circumcision.

**TABLE (16b): CIRCUMCISION OF RESPONDENTS' DAUGHTERS AND SISTERS**

|                 | Respondents' Daughters |             | Respondents' Sisters |             |
|-----------------|------------------------|-------------|----------------------|-------------|
|                 | #                      | %           | #                    | %           |
| Circumcised     | 162                    | 63%         | 364                  | 90.3%       |
| Non-circumcised | 95                     | 37%         | 39                   | 9.7%        |
| <b>Total</b>    | <b>257</b>             | <b>100%</b> | <b>403</b>           | <b>100%</b> |



## SISTERS

The same goes for male and female respondents' sisters. If we exclude those respondents who do not have any sisters, those who have sisters at circumcision age or under, the ratio of non-circumcised sisters reaches 9.7% compared to 90.3% circumcised. This figure is still lower than circumcision among female respondents.

Hence, we can safely argue that the ratio of non-circumcised girls in Deir El Barsha reaches 50%. This figure far exceeds the ratio of non-circumcised girls in any other geographic area in Egypt, including urban regions, according to the 1995 Demographic and Health Survey. In other words we are witnessing a phenomenon that reflects a shift in the attitude of Deir El Barsha inhabitants toward female circumcision. This attitude is particularly important compared to other factors that might influence parents' attitudes toward circumcising their daughters, mainly, the level of education, settlement in urban areas, and salaried labor. Deir El Barsha is a rural area that is deprived of many services, particularly education, due to its location on the East Bank of the Nile. Moreover, the educational background at the level of the nuclear family (wife and husband) or the extended family reveals that a large percentage of inhabitants concurs with, if not exceeds, the general rates of education in rural areas within the Egyptian society at large, according to the 1996 Population Survey.

## II - EL BARSHA VILLAGE

### 1- CIRCUMCISION OF FEMALE RESPONDENTS AND WIVES OF MALE RESPONDENTS

Table (17) reveals that the majority of female respondents (98.2%) and all wives of male respondents are circumcised. Those figures come closer to the results of the 1995 Demographic and Health Survey (99.6%) than those of Deir El Barsha village.

**TABLE (17): CIRCUMCISION OF FEMALE RESPONDENTS AND WIVES OF MALE RESPONDENTS**

|                 | Female respondents |       | Wives of male respondents |      |
|-----------------|--------------------|-------|---------------------------|------|
|                 | #                  | %     | #                         | %    |
| Circumcised     | 111                | 98.2% | 7                         | 100% |
| Non-circumcised | 2                  | 1.8%  | 0                         | 0    |
| <b>Total</b>    | 113                | 100%  | 7                         | 100% |

## 2- CIRCUMCISION OF DAUGHTERS/SISTERS OF MALE AND FEMALE RESPONDENTS

If we excluded respondents who have no daughters, or who have daughters at or below circumcision age, we find that the ratio of non-circumcised girls reaches 16% against 84% circumcised girls. The ratio of the non-circumcised among the group of girls (daughters and sisters) indicates a slight recession in the practice over the generations, since they differ from figures of circumcision among the generation of mothers. Nevertheless, those figures from El Barsha are much lower than those of non-circumcised girls in Deir El Barsha, which emphasizes that other factors are behind the shrinking rate of female circumcision in the latter.

**TABLE (18a): CIRCUMCISION OF DAUGHTERS AND SISTERS OF RESPONDENTS**

|           | Circumcised |      | Non-circumcised |     | At circumcision age |      | Below circumcision age |     | Do not have daughters or sisters |      | Total |     |
|-----------|-------------|------|-----------------|-----|---------------------|------|------------------------|-----|----------------------------------|------|-------|-----|
|           | #           | %    | #               | %   | #                   | %    | #                      | %   | #                                | %    | #     | %   |
| Daughters | 47          | 38.5 | 9               | 7.4 | 13                  | 10.7 | 13                     | 7.4 | 40                               | 32.8 | 122   | 100 |
| Sisters   | 99          | 73.8 | 7               | 5.7 | 2                   | 1.6  | 00                     | 00  | 14                               | 11.5 | 122   | 100 |

Table (18b) reveals that the rate of circumcision among sisters of respondents is higher than that among daughters. The ratio of circumcised to non-circumcised sisters is 93.3% to 6.7% respectively. In all cases it should be noted that all non-circumcised daughters and sisters are Christians. Some of them indicated that priests advocate the abstention from female circumcision in churches.

**TABLE (18b): CIRCUMCISION OF RESPONDENTS' DAUGHTERS AND SISTERS**

|                 | Respondents' daughters |      | Respondents' sisters |       |
|-----------------|------------------------|------|----------------------|-------|
|                 | #                      | %    | #                    | %     |
| Circumcised     | 47                     | 84%  | 99                   | 93.3% |
| Non-circumcised | 9                      | 16%  | 7                    | 6.7%  |
| Total           | 56                     | 100% | 106                  | 100%  |



## CHAPTER SIX

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### **WILL THE SUCCESS OF DEIR EL BARSHA PERSEVERE?**

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The previous chapter illustrated that there was a tangible shift in the attitude of a large sector of male and female respondents in Deir El Barsha toward female circumcision. This shift was clearly manifested in their actual behavior (they refrained from circumcising their girls). We reiterate here that the assessment of this behavior relied mainly on substantive attitudes. Even though a number of respondents asserted that they would not circumcise their girls, the calculation of the ratio of non-circumcised girls was based on those who did not actually circumcise their girls and not on those who insisted they would do so in future.

The shift of attitude toward female circumcision was assessed through the answer to the question: would female circumcision continue to be prohibited in the village? The majority of respondents from both sexes answered "yes" to this question. As indicated in Table (19), 70.4% of respondents tended to believe that the prohibition of female circumcision would be perpetuated in Deir El Barsha, while only 17.4% thought that the situation would not continue and that female circumcision would re-emerge.

**TABLE (19): DO YOU BELIEVE THE PROHIBITION OF FEMALE CIRCUMCISION WILL PERSIST?**

| Attitude   | Females |       | Males |       | Total |       |
|------------|---------|-------|-------|-------|-------|-------|
|            | #       | %     | #     | %     | #     | %     |
| Yes        | 279     | 69.9% | 72    | 73.5% | 351   | 70.6% |
| No         | 75      | 18.8% | 14    | 14.3% | 89    | 17.9% |
| Don't know | 45      | 11.3% | 12    | 11.4% | 56    | 11.3% |
| Total      | 399     | 100%  | 98    | 100%  | 497   | 100%  |

Between the two groups, 12.2% of respondents claimed they could not foretell the future. Members of the "don't know" group are potential candidates for either of the two groups. However, they are more likely to join the "yes" or first group, especially since they have been reassured that young uncircumcised girls get married exactly like their circumcised counterparts. Other reinforcing factors include sustained coherence of leadership and the perpetuation of follow-up and enlightenment activities.

### **THOSE WHO FAVORED CONTINUITY**

21.9% of respondents believed that the situation would persist thanks to the efforts of the Coptic Evangelical Organization within the

village and supervision by the Women's Committee of families who have girls at circumcision age.

The following group (20.5%) claimed that the heightened consciousness and socialization would prevent people from resuming female circumcision. In fact, those two groups can be merged, since a large number of respondents from the second group indicated that efforts of the Coptic Evangelical Organization were behind this growing consciousness. The attitudes of women and men were almost identical in both groups. However, standpoints diverged on a number of other causes and factors for the persistence of anti-female circumcision efforts. While 13.3% of respondents mentioned consciousness with the post-circumcision health problems, 12.2% of respondents believed a provisional law should be enacted that prohibits female circumcision. Moreover, 11.5% of respondents mentioned greater education opportunities. These are the major reasons and factors that respondents believed would perpetuate abstention from female circumcision (those reasons directly follow the impact of the Coptic Evangelical Organization mentioned by women respondents). Males, on the other hand, suggested a different list, on the top of which came education (18.1%) then the influence of the church (12.5%).

**TABLE (20): WHY WILL THE PROHIBITION OF FEMALE CIRCUMCISION PERSIST?**<sup>13</sup>

| Reasons                           | Females    |             | Males     |             | Total      |             |
|-----------------------------------|------------|-------------|-----------|-------------|------------|-------------|
|                                   | #          | %           | #         | %           | #          | %           |
| Influence of the Organization     | 60         | 21.5%       | 17        | 23.6%       | 77         | 21.9%       |
| People's persuasion               | 60         | 21.5%       | 12        | 18.6%       | 72         | 20.5%       |
| Post-circumcision health problems | 37         | 13.3%       | 7         | 9.7%        | 44         | 12.5%       |
| A law prohibiting circumcision    | 34         | 12.2%       | 5         | 6.9%        | 39         | 11.1%       |
| Education                         | 23         | 11.5%       | 13        | 18.1%       | 45         | 12.8%       |
| The influence of the church       | 17         | 6.1%        | 9         | 12.5%       | 26         | 7.4%        |
| People imitating each other       | 10         | 3.6%        | 6         | 8.3%        | 16         | 4.6%        |
| No specific reason                | 3          | 1.1%        | --        | --          | 3          | 0.9%        |
| The impact of the mass media      | --         | --          | 1         | 1.4%        | 1          | 0.3%        |
| Other reasons                     | 26         | 9.3%        | 2         | 2.8%        | 28         | 8%          |
| <b>Total</b>                      | <b>279</b> | <b>100%</b> | <b>72</b> | <b>100%</b> | <b>351</b> | <b>100%</b> |

<sup>13</sup> Those who responded "yes" in table (19).

## THOSE WHO ARGUED THAT THE EXPERIENCE WOULD NOT PERSIST

Table (19) reveals that 17.9% of respondents from both sexes believed that the current situation would not last, and that female circumcision could be resumed in the village. They referred this to the power and importance of the practice and its being practiced underground (42.7% and 22.5% respectively). We should indicate here that some of the respondents expressed in different words that "female circumcision is useful and necessary to women" to answer the last question on the questionnaire form: "Do you have any other comments?"

Not more than 20% of respondents believed that female circumcision could possibly be resumed again because of the lack of consciousness or the lack of prohibitive law. While none of the male respondents referred to the absence of law as a reason for resuming female circumcision in the village, the ratio of males who suggested the lack of consciousness and socialization as the reason for resuming female circumcision was higher than that of females who referred to the same reason.

**TABLE (21): WHY WOULD THE PROHIBITION OF FEMALE CIRCUMCISION NOT PERSIST? <sup>14</sup>**

| Reasons                              | Females   |             | Males     |             | Total     |             |
|--------------------------------------|-----------|-------------|-----------|-------------|-----------|-------------|
|                                      | #         | %           | #         | %           | #         | %           |
| A deep-rooted and important practice | 32        | 42.7%       | 6         | 42.9%       | 38        | 42.7%       |
| Lack of consciousness                | 9         | 12%         | 3         | 21.4%       | 12        | 13.5%       |
| Absence of prohibitive law           | 3         | 4%          | --        | --          | 3         | 3.3%        |
| The practice continues underground   | 18        | 24%         | 2         | 14.3%       | 20        | 22.5%       |
| Others                               | 13        | 17.3%       | 3         | 21.4%       | 16        | 18%         |
| <b>Total</b>                         | <b>75</b> | <b>100%</b> | <b>14</b> | <b>100%</b> | <b>89</b> | <b>100%</b> |

<sup>14</sup> Those who responded "no" in table (19)



**TABLE (22): IS FEMALE CIRCUMCISION PART OF RELIGION?**

|            | Females |       | Males |       | Total |       |
|------------|---------|-------|-------|-------|-------|-------|
|            | #       | %     | #     | %     | #     | %     |
| Yes        | 42      | 10.5% | 15    | 15.3% | 57    | 11.5% |
| No         | 272     | 68.2% | 62    | 63.3% | 334   | 67.2% |
| Don't know | 85      | 21.4% | 21    | 21.4% | 106   | 21.3% |
| Total      | 399     | 100%  | 98    | 100%  | 497   | 100%  |

Most of the respondents in Deir El Barsha (68.2% of females and 63.3% of males) believed that female circumcision was not part of religion. Those figures are close to those of respondents who asserted that the prohibition of female circumcision would persist. The second group, those who don't know the religious standpoint, account for 21.4% of total respondents. Only 10.5% of respondents perceive female circumcision as a religious ritual.

Finally, we indicate that nearly one third of respondents from both sexes (32.8%) reported that they helped in preventing others from being circumcised, whether sisters or relatives, and less often neighbors. However, the majority said they did not help anybody. Among the first group, some answers were quite indicative in terms of what we referred to in the introduction, namely the association between female circumcision and marriage. Some female respondents said nearly in the same words, "Each one should control his household. Suppose I advised a mother not to circumcise her daughter, and the girl did not get married. What would be my situation??" On the other hand, those arguments revealed how pervasive this practice was. This is testified by the story that many women repeated to researchers, namely that of a girl whose husband returned to her parents after marriage because she was not circumcised.

**TABLE (23): DID YOU HELP PREVENT ANY GIRL FROM BEING CIRCUMCISED?**

|                                 | Females |       | Males |       | Total |       |
|---------------------------------|---------|-------|-------|-------|-------|-------|
|                                 | #       | %     | #     | %     | #     | %     |
| No                              | 269     | 67.5% | 71    | 73.2% | 340   | 67.3% |
| Yes                             |         |       |       |       |       |       |
| Sisters                         | 29      | 7.3%  | 3     | 3.1%  | 32    | 6.5%  |
| Friends                         | 78      | 19.5% | 20    | 20.6% | 98    | 19.8% |
| Neighbors                       | 23      | 5.8%  | 3     | 3.1%  | 26    | 5.2%  |
| Total of those who answered yes | 130     | 32.6% | 25    | 25.8% | 156   | 31.3% |
| <b>Total respondents</b>        | 399     | 100%  | 97    | 100%  | 496   | 100%  |

## CHAPTER SEVEN

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### **THE IMPACT OF DIFFERENT FACTORS ON FEMALE CIRCUMCISION**

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This chapter will deal with the factors that the research hypothesis presupposed to have effectively influenced Deir El Barsha inhabitants to reject female circumcision. Those factors are developmental efforts and male labor migration to Arab countries. Other factors such as education and labor have been dealt with in previous studies, mainly the 1995 Demographic and Health Survey.

## I- THE IMPACT OF DEVELOPMENTAL EFFORTS

Chapter Four elucidated that a significant portion of respondents from both sexes participated in expanded and growing developmental activities in Deir El Barsha. Tables (24) & (25) indicate that there is a positive correlation between respondents' participation in development projects and their tendency not to circumcise their girls. We find that the rate of non-circumcised girls among daughters of respondents from both sexes who participated in development projects (41.5% & 60%) is higher than those who did not take part in any developmental action (28.5% & 28.3%).

**TABLE (24): THE IMPACT OF FEMALE RESPONDENTS' PARTICIPATION IN DEVELOPMENT PROJECTS ON THE CIRCUMCISION OF THEIR DAUGHTERS**

|                                      | Circumcised | Non-Circumcised | Total | %     |
|--------------------------------------|-------------|-----------------|-------|-------|
| Participating in development project | 24          | 17              | 41    | 41.5% |
| Not participating                    | 125         | 49              | 174   | 28.2% |
| Total                                | 149         | 66              | 215   |       |

**TABLE (25): THE CORRELATION BETWEEN MALE RESPONDENTS' PARTICIPATION IN PROJECTS AND CIRCUMCISION OF THEIR DAUGHTERS**

|  | Circumcised | Non-circumcised | Total | %     |
|--|-------------|-----------------|-------|-------|
| Participating in developmental project | 2           | 3               | 5     | 60%   |
| Not participating                      | 27          | 11              | 38    | 28.3% |
| Total                                  | 29          | 14              | 43    |       |

The same is true for circumcision of sisters. There is a positive correlation between the participation of fathers and mothers of respondents

in development efforts and their abstention from circumcising respondents' sisters. From Tables (26) & (27) we can infer that the ratio of non-circumcised among sisters of respondents from both sexes whose parents engaged in developmental projects (15.4% & 9%) was higher than those whose parents had nothing to do with development efforts (7% & 7.8%).

**In other words, there is a positive correlation between participation in developmental projects and the tendency toward relinquishing female circumcision.** This correlation is higher among the younger generations. This correlation has a high statistical significance (less than 0.05 according to the Likelihood Ratio).

**TABLE (26): THE IMPACT OF PARTICIPATION OF RESPONDENTS' FATHERS IN DEVELOPMENTAL PROJECTS ON CIRCUMCISION OF THEIR SISTERS**

|  | Circumcised | Non-circumcised | Total      | %     |
|--|-------------|-----------------|------------|-------|
| Participating in developmental Project | 22          | 4               | 26         | 15.4% |
| Not participating                      | 330         | 26              | 356        | 7%    |
| <b>Total</b>                           | <b>352</b>  | <b>30</b>       | <b>382</b> |       |

**TABLE (27): THE IMPACT OF PARTICIPATION OF RESPONDENTS' MOTHERS IN DEVELOPMENTAL PROJECTS ON CIRCUMCISION OF THEIR SISTERS**

|   | Circumcised | Non-circumcised | Total      | %    |
|---|-------------|-----------------|------------|------|
| Participating in developmental projects | 20          | 2               | 22         | 9%   |
| Not participating                       | 332         | 28              | 360        | 7.8% |
| <b>Total</b>                            | <b>352</b>  | <b>30</b>       | <b>382</b> |      |

## **II- THE IMPACT OF RESPONDENTS' MIGRATION ON THEIR ATTITUDE TOWARD CIRCUMCISION OF THEIR DAUGHTERS**

Table (28) reveals that 48% of daughters of respondents who migrated to work outside Egypt were not circumcised, while 15.8% of daughters of respondents who did not travel at all were uncircumcised. This percentage is statistically significant. The same is true among sisters of respondents from both sexes, as indicated by Table (29). The ratio of non-circumcised girls among sisters of respondents whose fathers migrated abroad was higher than that among sisters whose fathers did not

travel at all. This figure is also statistically significant. **Put differently, there is a positive correlation between fathers' migration for work abroad and their tendency not to circumcise their daughters.**

**TABLE (28): CORRELATION BETWEEN RESPONDENTS' MIGRATION AND DAUGHTERS' CIRCUMCISION**

|                   | Circumcised | Non-circumcised | Total | %     |
|-------------------|-------------|-----------------|-------|-------|
| Migrated for work | 13          | 12              | 25    | 48%   |
| Did not migrate   | 16          | 3               | 19    | 15.8% |
| <b>Total</b>      | 29          | 15              | 44    |       |

**TABLE (29): THE CORRELATION BETWEEN MIGRATION OF RESPONDENTS' FATHERS AND CIRCUMCISION OF THEIR SISTERS**

|                   | Circumcised | Non-circumcised | Total | %     |
|-------------------|-------------|-----------------|-------|-------|
| Migrated for work | 61          | 7               | 68    | 10.4% |
| Did not migrate   | 295         | 23              | 318   | 7.2%  |
| <b>Total</b>      | 356         | 30              | 386   |       |



## CHAPTER EIGHT

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### **CONCLUSIONS AND RECOMMENDATIONS**

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A number of studies undertaken during the past few years,<sup>i</sup> the most comprehensive of which being the Egyptian Demographic and Health Survey,<sup>ii</sup> revealed that relinquishing female circumcision is often associated with a number of general factors such as urbanization. The circumcision of girls in urban governorates is relatively less pervasive than in other rural governorates. Moreover, the rate of female circumcision in urban areas of the Delta (Lower Egypt) and in Upper Egypt is lower than in rural areas of the same governorates. Female circumcision also tends to decrease with women's education, their salaried employment and the increasing educational levels of their fathers.

Both El Barsha and Deir El Barsha lack some of those general factors, namely, urbanization and education. Both villages are located on the East Bank of the Nile amidst the poorest regions in Upper Egypt in terms of services such as education and health (we have already indicated the general conditions of both villages).

A review of the field survey results in both villages reveals a substantive shift in the attitude of Deir El Barsha inhabitants toward female circumcision compared to El Barsha and to results of previous studies on female circumcision in rural Upper Egypt. The rate of circumcision among female respondents in Deir El Barsha was lower than the control village (El Barsha) (98.2% & 95.8%). This gap becomes even greater when we compare between non-circumcised daughters of respondents from both villages (37% & 16%), but is less wide among sisters (9.7% & 6.7%). On the other hand, 70.6% of respondents from both sexes in Deir El Barsha thought that this change of attitude would persist in the future.

**What are the prerogatives of Deir El Barsha that El Barsha lacks that helped it overcome the shortage of general health and education conditions and propelled its inhabitants to abstain from the practice of female circumcision?**

Previous chapters explained that a number of factors combined to produce this attitude. Those factors are:

- (a) Developmental efforts undertaken in Deir El Barsha throughout history, more particularly those that have taken place in the past two decades;

- (b) The impact of temporary male migration for work abroad;
- (c) Finally, the religious factor, more precisely, the influence of religious leaders in enlightening inhabitants against female circumcision.

However, it is clear that those factors vary in their relative influence on the thoroughness of this change. On the other hand, when those factors interacted, the final outcome outweighed the simple cumulative impact of each of them separately.

### **THE RELIGIOUS FACTOR**

Our estimation in the research hypothesis was that the shift in the attitude of Deir El Barsha inhabitants toward female circumcision was strongly associated with distinguishable developmental action that took place in the village. After several exploratory visits and a preliminary test of the questionnaire, we concluded that the magnitude of influence of male temporary migration was ample. This led us to modify the questionnaire and integrate questions on migration of males to work outside Egypt. The impact of the religious factor was not tangible until after the field survey. Therefore, we attempted to explore its magnitude through in-depth interviews.

As indicated in the introduction, religious affiliation in itself did not have a prominent impact on female circumcision. This is illustrated by the fact that female circumcision was as pervasive among Christians as it was among Muslims, and almost in the same ratio. Secondly, the religious factor was not mentioned as a major reason for the perpetuation of female circumcision.

A comparison between Deir El Barsha and the control village (El Barsha) asserted the same results. Even though there were no uncircumcised girls among daughters of male and female Muslim respondents, there was a huge gap between the rate of non-circumcised Christian girls in Deir El Barsha (37%) and their counterparts in El Barsha (16%). This led us to dismiss the impact of religious affiliation, at least relatively.

However, this should not lead us to overlook the paramount role that the clergy played in Deir El Barsha to reach the current situation. Now, the

practice of female circumcision inside the village is simply unacceptable. Qualitative analysis of questionnaires and in-depth interviews indicated that a large number of respondents from both sexes received their information through churches, and that all churches asserted that female circumcision was not a Christian ritual. This in itself is important because it divests the practice of any religious sanctity, and hence would partially encourage inhabitants to relinquish it because in that case they would be in a positive situation. In other words, abstention from female circumcision would conform to the religious attitude even though it would mean diversion from communal consensus.

On the other hand, commitment by some religious leaders not to circumcise their daughters and their proclamation of this abstention created an example that the ordinary people venerated, since religious leaders--particularly in rural areas--have a potent moral influence. The fact that the clergy signed the village anti-female circumcision document, and the religious formula that "whoever practices this practice from today onwards would be questioned before God, the village committee and state law" endowed this agreement with religious sanctity and loaded it with positive cultural implications.

Furthermore, the moral weight of religious men also emphasized the commitment of midwives and hygienic barbers not to practice circumcision and not to yield to pressures by inhabitants who wished to circumcise their daughters. As a former midwife put it, "Every time someone in the village asks me to circumcise his daughter I say if Father Daniel accepts, I am ready to do it. I know quite well Father would not accept."

Actually, some people attempted to obtain Father Daniel's consent. He used to tell them, "If you find out that I circumcised my daughters, then do the same thing with yours." The situation here goes beyond the role of the ordinary clergy. It offers a "human" model and example for the rest of the village to follow. The fact that Father Daniel proclaimed his abstention from circumcising his daughters was a positive dimension that encouraged others, either within the communal leadership or among the village inhabitants to proclaim their abstention from circumcision.

## **MIGRATION TO ARAB COUNTRIES**

Results of the survey in both villages revealed a difference in the rate of male labor migration between the two villages. Deir El Barsha is a

special model in this instance. Almost all of the households in the village had at least one male absent who had migrated to work abroad. Migration was mainly temporary and aimed to provide some money to improve the family's economic situation, except for a very limited minority of migrants who stayed abroad for many years. Financial remuneration was mainly utilized to establish an independent house from that of the extended family, or to borrow inhabitants' words, so that the family could "move away." In the course of the past two decades, the agricultural region west of the canal, forty-five feddans, where only a few a few poorly constructed mud brick-houses were scattered, was transformed into a densely populated housing area. This area became so crowded that a few years ago it became an independent farm affiliated with the village. Houses in this region are now built with red bricks, electricity and potable water are also available.

In-depth interviews with a number of women and men from the village indicated that migration abroad had a great influence on the status of women in general, as illustrated by the following observations:

- 1- Females ran many of Deir El Barsha households during a certain period of time. This was particularly true of older women (in their thirties and forties). Those usually lived in their independent houses away from the husband's family. Hence, they were responsible for the money their husbands sent from abroad. In the case of younger wives who usually lived with their in-laws, the husband sent the money to the head of the extended family, usually the father and sometimes the elder brother.

Often, husbands sent their wives some money of their own to fulfill their personal needs and buy things they would not dare ask their in-laws for (underwear for instance).

Some respondents from both sexes indicated during in-depth interviews that a number of young wives sometimes pretended, or exploited problems and disagreements with their in-laws to go and live with their families. In this way they obtained financial remittances from their husbands or asserted their independent decision-making power to utilize this money as they pleased.

- 2- A large portion of women shouldered double responsibility: the normal duties of the household and upbringing of children and responsibility for the household economy. Unless the woman had sons who could work in

the field, they also assumed the responsibilities for agricultural work (plowing, seeding, harvesting and sale of crops).

3- Women living independently from the extended family (in-laws) managed the money their husbands sent them very wisely. One of the men maintained in an interview, "Undoubtedly, some women proved to be better than men. Had their husbands had the same amounts of money, they couldn't have handled them as wittily as their wives did. Many men came back to find they owned red-brick houses and plots of land." This aspect is quite important because it indicates a change of perception of women in Deir El Barsha. Consequently, men were ready to trust their capability to act and handle difficult situations in general. This will hopefully manifest itself in the long run in trust vested in women's capability to preserve the family's honor even if they are not circumcised.

Moreover, men's absence gave an opportunity to older wives to make decisions in other domains such as educating children and even marrying them. Naturally, the father is consulted over the decisions, but in the final analysis this consultation is formal (only to preserve the moral status of the father as head of the family). An interviewee said, "The wife would send her husband to say so-and-so asked for your daughter's hand, and you know he comes from a good family. He promised to give her so-and-so as dowry, and to furnish the house, etc. Usually, the husband agrees... Does he have any other choice? He entrusted his wife with his money and his honor in his absence, wouldn't he trust her with the future of his children, especially if he was satisfied with the way she handled the money he sent her?"

Also, during interviews some respondents indicated that the father's absence gave young girls a greater margin to develop their personalities and to make independent decisions concerning their life, particularly the decision of marriage. They were encouraged to discuss things with their mothers, unlike the case with their fathers. Even though this situation might recede with the father's homecoming, the girl's personality changes qualitatively. "Now we hear about girls turning down some suitors. This was not the case in the old days."

Concerning the impact of fathers' absence on the decision to circumcise their daughters, results of the questionnaire indicated that many men and women tended to assert that the decision whether or not to

circumcise the daughters was totally up to the mother and that the father did not interfere. Consequently, absent or not, he did not directly influence this decision. Some of the men favoring circumcision indicated that women in the countries where they migrated (Libya and Iraq) were sexually loose, and they referred this to their not being circumcised. Therefore, they were more persistent and enthusiastic to circumcise their daughters in future. Others maintained that openness to some other Arab countries that do not practice female circumcision bolstered migrants' personal persuasion that female circumcision was unnecessary. In our estimation, absence of males required females to face several difficult situations and to divert from the customary role that the community stereotyped them in. This would likely encourage them to opt out of the prevailing customs concerning the circumcision of their daughters as well.

### **DEVELOPMENTAL EFFORTS**

Deir El Barsha is distinguished from the control village (El Barsha) by its diversified developmental projects. While in El Barsha village we were able to depict very limited efforts toward the eradication of illiteracy, Deir El Barsha possesses a wide array of local developmental projects sponsored by the Coptic Evangelical Organization mainly over a span of more than fifteen years. The issue is not only the size of developmental efforts and their long duration, but mainly the trend of developmental action, or more precisely the trend that the Coptic Evangelical Organization for Social Services espouses.

### **THE MAJOR FEATURES OF THIS TREND**

- 1) Developing the capabilities of local communities, through bolstering and promoting the role of local community leaders. The Organization's major conviction is that local development is an action with and not for the community. From the outset the Organization focused on empowering the local community by creating and developing its own tools, mechanisms and experience. Those are preliminary conditions for the continuity and growth of self-g geared local developmental action.
- 2) A comprehensive perception that encompasses all aspects of life in the local community with different inhabitants. On the other hand, this perception merged between several mechanisms and activities such as provision of services, including socialization, promotion of technical and administrative skills.

- 3) Taking into consideration the gender-related aspects, such as deliberately focusing on developing the role of women in developmental activities, particularly within the rural community, where women are still captives to their role as housewives and reproductive elements, and to the hegemony of customs and traditions.

The Coptic Evangelical Organization takes all those features into consideration upon the initiation of action within any local community in general. This is manifested in the three stages that link between the Organization and the local community: participation, supervision (follow-up) and self-reliance.<sup>15</sup> This strategy was actually implemented quite successfully in Deir El Barsha over the past years. The village is now on the threshold of self-reliance and possesses three distinguished local committees: the women's committee, the youth committee and the village committee, which encompasses two members from the women's committee.

## **THE WOMEN'S COMMITTEE**

Ever since it began its action in Deir El Barsha, the Coptic Evangelical Organization was keen to set up the women's committee and strove to equip female members of the committee with multilateral expertise. This helped them throughout the past years to cement genuine credibility based on their competence. The women's committee played and is still playing a crucial role within the village, particularly the role that responsible leaders within the committee are currently playing in girls' classes.

In-depth interviews with some leaders of the women's committee indicated that this was not easy at all. They faced great difficulties at all levels including with their husbands: "Formerly, our men refused to let us go out for visits. They were convinced after a long time, thanks to the people of the Organization."

"My husband used to cause me a problem every time I had a meeting with the committee. He often tried to prevent me (from attending) but could not find a pretext. Everything was perfect in the house."

Inhabitants of the village made the task of the women's committee even harder: "Children used to walk behind us in a procession as they did with you"

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<sup>15</sup>See Appendix 4



“Sometimes they (local residents) drove us away, but afterwards they got used to us”.

Concerning female circumcision in particular, the women’s committee played a crucial role through regular house visits to families having daughters at circumcision age to persuade them not to circumcise their girls. “We visit the girl until she’s 13. We make two or three visits a month.”

The task was not that easy at the beginning, “So many times men refused to let me talk to their wives. Once a man told me ‘Shame on you to say such things! You are an old lady.’”

“The illiterate in particular gave us a very hard time.”

Difficulties encountered by the members of the women’s committee strengthened them and made them true leaders and models that other women could look towards. They imposed themselves on the men of the village, and they slowly changed the traditional and conventional image of women and the limits circumventing them outside the boundaries of the household. Hence, other women of the village were encouraged to join different development projects. As the results of this study have shown, the rate of women’s participation in development projects was higher than that of men. Consequently, this was manifested in their attitude toward circumcising their daughters. Women who engaged in development projects were more open-minded and reached out for new prospects, whether in terms of self assertion and substantive contribution to the household economy or discovering new facts that helped them assess their lives and take firm attitudes toward events and situations affecting themselves and their families.

## **GIRLS’ CLASSES**

The younger generations of girls have experienced a more thorough change in their personalities. Those of them who could not join the limited seats in the single available school in the village rushed into the illiteracy eradication and girls’ classes that provided them with answers to questions they dared not ask their parents.<sup>iii</sup> One of the unmarried girls Nadia said, “Yes, the class influenced us. It helped girls have a say and an independent opinion. Before going to class, we were like the blind, we knew nothing. Now we know a lot of things, we know what’s right and insist on doing it. I wanted to go again but it didn’t work... You know when my fiancé came to

ask me for engagement, he told me before going to my father, 'I know you are more knowledgeable than many of the educated.'

What Nadia said about "girls who has a say" was not only her feeling but an actual fact with a direct impact on the issue of female circumcision. "My sister Mona is not circumcised. She's married and very happy. On her wedding day, my mother was afraid that her husband would be angry with her because of the issue of circumcision. She was very very worried, and she had a fight with me because I was the one who told my sister not to be circumcised. I will do the same thing with my other sister. I also urged Mariam and some other friends to refuse circumcision, and their mothers had a fight with me."

One of the teachers at the girls' classes asserted, "Girls like the classes very much. Some parents prohibited their girls from attending the class; girls asked me to change the class schedule so that it would conform with the time they go to church, and hence they would be able to attend it. Some girls wanted to attend the class again."

The girls' classes were not a smooth task either. Several parents and religious leaders in the village fought them, especially when they knew that they dealt with "delicate issues." Once again, communal leadership and the Coptic Evangelical Organization's staff played a pivotal role in persuading the clergy members of the importance of those classes and their role in socializing girls and equipping them with knowledge. Finally, parents agreed to let their daughters resume the lessons.

## THE DOCUMENT

One of the major landmarks of the attitude of Deir El Barsha toward female circumcision is the document where hygienic barbers and midwives pledged in 1991 not to practice circumcision.<sup>16</sup> The document was signed in a large meeting that members of the women's and village committees as well as a number of religious leaders attended. The document portrayed female circumcision quite negatively and stated that "whoever practiced this practice from this day on would be questioned before God, the village committee and state law." Even though the document had no obligatory power compared to laws for instance, its strength stemmed from the fact that

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<sup>16</sup>Appendix 2

it was not superimposed (by the state) but was locally induced. It was formulated in reaction to a decision made by the leadership of the village. Therefore, the attitude even of those who opposed the document, or at least were not convinced of its utility, was qualitatively different from their attitude would have been had this document been imposed from outside the village.

## IMPORTANT OBSERVATIONS

1- This document is the culmination of nearly a decade of diversified efforts focusing on female circumcision, including general socialization of groups of inhabitants and private direct (person-to-person) contacts. Seminars were organized where specialized physicians spoke to the people, and priests from different churches explained that female circumcision was not a Christian ritual, in addition to efforts of the women's committee with women of the village during home visits. This was a manifestation of a more comprehensive attitude against other harmful social practices such as early marriage, local defloration, and death-related rituals such as visiting cemeteries, and mourning the dead. In other words they crowned relentless and unyielding efforts through a whole decade. Therefore, even though the idea of the anti-female circumcision agreement came upon the initiative of the Coptic Evangelical Organization, the document belonged to the village and was approved by all parties that strove to help the people of Deir El Barsha see the light. Therefore, those parties succeeded in achieving the necessary commitment to its content.

2- This agreement was born after the evolution of local communal leadership cadres, particularly the women's committee, and the assertion of their credibility with large sectors of Deir El Barsha inhabitants. A large number of communal leaders stopped circumcising their daughters, and succeeded in persuading several families within the village not only to refrain from practicing this practice, but more importantly to announce publicly that they did.

**Such a proclamation had a decisive importance in changing attitudes of many inhabitants, especially considering that female circumcision was a deep-rooted social practice. Without the proclamation of this abstention, people would still believe this practice was important and necessary. Even though this declaration may**

embarrass the uncircumcised girl and her parents, it progressively asserts the belief that female circumcision is not necessary and consequently larger sectors would be encouraged to stop practicing it. As a member of the women's committee, one of the pioneers who declared she did not circumcise her daughters in the village told us, "When my daughter delivered, women in the neighborhood rushed behind the midwife asking her what the girl looked like? How did she do during delivery?" One of the young uncircumcised girls said, "When we were young, we used to have a bath together. Then I knew that one of my relatives had asked her daughter to have a close look at me and tell her how I looked like?"

Results of the questionnaire revealed that many respondents from both sexes who did not circumcise their daughters did not announce it to avoid social embarrassment, and for fear that this might minimize their daughters' prospects of marriage. Sometimes, it was difficult to proclaim an attitude that strongly collided with one of the most entrenched traditions, despite personal conviction of its harmful effects. Moreover, many of the uncircumcised women, especially younger ones, feel embarrassed to admit it since pressure brought to bear on girls by others of the same peer group is too much for them. Perhaps they are made fun of, and their behavior is interpreted differently (or attributed to the fact that they were not circumcised). A teacher in one of the girls' classes said, "I had a non-circumcised girl in my class. When she told her friends she was in love (with a boy) they told her because you are not circumcised. They are all in love but do not show it."

Despite all this pressure, the number of those who dared announce they did not circumcise their daughters was steadily growing. It is clear that the boldness of communal leaders and their announcement that they did not circumcise their daughters, particularly some members of the women's committee, played a crucial role in this achievement. Those standpoints were bolstered by the fact that a number of non-circumcised girls were married, became pregnant and had children. Consequently, one of the cornerstones of the practice of circumcision, namely, to ensure marriage opportunities for girls, was shattered.

Finally, it should be stated that, with the signature of the document, the anti-female circumcision efforts Deir El Barsha experienced were a qualitative and unprecedented step forward. The substantive change that this document unleashed can be sensed from the fact that now those who practice female circumcision have to conceal it or do it "underground," to

use the villagers' expression. In other words female circumcision is now negatively perceived, which is important to change the attitude of other sections of the village in the long run. Despite the fact that the rejection of circumcision has not yet been formed into a completely clear-cut positive attitude, since most of those who do not circumcise their daughters cannot announce it, it is highly likely that they will do so in the near future.

## **RECOMMENDATIONS**

- 1- The major recommendation of this study is to generalize the experience of Deir El Barsha and disseminate it on the widest scale possible.
  - 2- Extend sustained support and care to Deir El Barsha village and its communal leadership to reinforce the experience and protect it from any possible setbacks
  - 3- Supervise and study development of the situation within Deir El Barsha in future, possible utilizing this research as a baseline for future studies
  - 4- Attempt to repeat the Deir El Barsha experience in other villages that have had similar development efforts. It is suggested to undertake such an endeavor in some other villages where the Coptic Evangelical Organization for Social Affairs operates, and where actual efforts to resist female circumcision have already been launched. The Coptic Evangelical Organization has cooperated with UNICEF to undertake similar studies.
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**APPENDICES**









28- Has your father been to school? Until which stage?

\*Illiterate

\*Reads/writes

\*Intermediate education

\*Higher education

29- What is your father's profession?

\*Does not work

\*Works (in what?)

30- Is your father taking part in any project?

\*No

\*Yes

\*If yes, specify

31- Has your father ever traveled outside Deir El Barsha? Where to?

\*No

\*Yes

\*Outside the village

\*Abroad

32- Why did he travel?

\*Visits

\*Training

\*Education

\*Work

● Offspring:

33- Tell me about your children in order (those who were born first, then those who followed)

34- Sex of the child:

35- Age of the child:

36- Who among the girls was circumcised?

37- How old was she?

38- Have any of them been educated? Until which stage?

39- Are any of them working?

40- In what?

41- Have any one of them traveled abroad?

42- Why?

43- Are any of them taking part in the village projects?

44- Have any of them accomplished the project?

● Sisters

45- Tell me about your sisters and brothers in order (who was born first, the next...)

46- Sex:

47- Age:

48- Who among your sisters was circumcised?

49- How old was she?

50- Are any of them educated? Which stage has she reached?

51- Are any of them working?

52- Where?

53- Have any of them traveled abroad?

54- Why?

55- Did any of them participate in one of the village projects?

56- Have any of them accomplished the project?

● Projects:

57- Are you taking part in any of the projects?

\*No

\*Yes

58- Who is running the household financially?

\*The father

\*The mother

\*Offspring

\*Others

59- Are you helping with the household expenses (does your wife help you financially)?



\*Midwife  
\*Physician

\*Traditional nurse (*hakima*)  
\*Others

\*Hygienic barber

● In case of abstinence from circumcision: tell me how this happened (questions 69-70):

69- Who said no? Why in your opinion?

\*Father

\*Mother

\*Grandmother

\*Others

70- Who thought you should be circumcised?

\*Father

\*Mother

\*Grandmother

\*Others

71- Did you help prevent other girls from being circumcised?

\*Sisters

\*Relatives

\*Friends

72- Have you ever attended meetings or lectures on female circumcision?

\*Yes

\*No

73- In which project?

\*Projects

\*Unit x

\*School

\*Churches

\*Mass media

74- Why in your opinion do people circumcise their daughters?

\*Custom of the village

\*Cleanliness

\*Chastity

\*Marriage

\*Aesthetic purposes

\*Others

● Non-circumcised females/ non-circumcised wives:

75- Are you deeply concerned about not being circumcised?

\*No

\*Yes

\*If yes, why?

**76- Is anyone making comments about the subject that affect you personally?**

\*Yes

\*No

**77- If yes, who?**

\*In-laws

\*Relatives

\*Neighbors

\*Friends

\*Others

**78- Have you ever thought that circumcision was a religious ritual?**

\*Yes

\*No

**79- Do you think this situation will persist, or circumcision will be resumed anew?**

\*Will persist

Why?

\*Can be resumed

Why?

**80- Are there any practices and traditions people should not practice?**

\*Yes

\*No

**81- Like what?**

\**Nashhra*

\*Mourning the dead

\*Local defloration

\*Early marriage

\*Others

**82- Why?**

**83- If it were for you to establish a project for enlightenment about female circumcision, what would you suggest?**

**84- Do you have any other comments on the subject?**

## APPENDIX 2

### DEIR EL BARSHA HISTORICALLY

#### “Deir El Barsha”

“El Barsha” is a Greek word meaning the place of the president,<sup>1</sup> in reference to the presence of Provost Bishop’s convent in the region.

Deir El Barsha village is part of the Ansana region that dates back to the early Coptic epochs, more particularly the first century of Coptic history, the history of martyrs, which is equivalent to the fourth century CE.<sup>2</sup> It was first known as Antonios city, then the name changed to Deir (convent) of Provost Athanasios Al Ansawi, who was bishop of Ansana, a contemporary of Provost Bishop in the fifth century CE who helped him build the convent named after him. Then, the village name changed to Deir El Barsha in the ninth century CE.<sup>3</sup> It was also known as

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<sup>1</sup>*The Good Pastor Magazine*, published by Beit El Shamama, Misr El Qadima under the series “Do you Know?” written by Samuel Amin, who is currently Brother Zakaria El Baramous, 1980.

<sup>2</sup>Ansana Mountain.

This region encompasses at present a number of villages on the East Bank of the Nile. It stretched from Deir El Barsha in the South to Sheikh Ebada village north of Deir El Barsha, with Deir Abou Hanas between them. In Greek it is “Anitnoi” or “Animopolis.” It was established by Emperor Hedrian in 180 CE. It was called Anitnoi after Anitnos’ friend who threw himself in the Nile in sacrifice for the Emperor. This region is rich in tourist sites and includes vestiges of the temples of Isis, Sirabis and Ramses II in Sheikh Ebada village.

<sup>3</sup>In the book *Provost Bishop’s Convent between the Past and Present* prepared by one of the priests, it was said that the body of Saint Bishop was taken from Deir El Barsha and brought back to Bariat Shabhit in Pope Youssap I’s pontific (823-849), in the ninth century CE. Fathers

Deir El Nakhla because there were two ancient palm trees (“*nakhla*” in Arabic means palm tree) in the region until recently, when one of the priests cut them down in the 1940s.

Deir El Barsha encompasses several Ancient Egyptian and Coptic sites. There are several cemeteries engraved in the rocky mountain, particularly those of the 12<sup>th</sup> Dynasty, including the cemetery of Prince Gahoti Hoteb, governor of Ishmoun, and “Sen or Sert III” temple, and “Ahen Akhet” temple.<sup>4</sup>

In 1972 two intact cemeteries were found in the village center, namely those of Prince “Gahoti Hoteb, governor of Ashmounis” and leader “Sebi.” The wealth and jewels found were transferred to the Egyptian Museum in Cairo.<sup>5</sup> However, the sites of the vestiges lapsed into oblivion afterwards and became a source of pollution because garbage was thrown into them.

Moreover, in the northeast of the village lies the ancient Provost Bishoy’s church, which dates back earlier than the eighth century CE.<sup>6</sup> The central and oldest part of the church was built by Provost Bishoy and Athnasiso, archbishop of Anbasna in the fifth century CE. The rest of the church surrounds this central part from the north, south and west, but the upper church in the eastern corner was established in 1852, as written down on the ornament.

## **GEOGRAPHICALLY:**

assigned to bring Saint Bishoy’s body reached the city of Ansana (currently Sheikh Ebada village) then went to Deir El Barsha (known then as the Monastery of Provost Athnasiso Ansanawi).

<sup>4</sup> Book: *Facts on the Occasion of the Establishment of Mallawi Bishopric*, and the guide book to Mallawi museum.

<sup>5</sup> *Guide Book of the Egyptian Museum*, Cairo, 1983.

<sup>6</sup> *The Egyptian Encyclopedia*, Dr. Ahmed Fakhri, *Old Churches and Ancient Monasteries in Egypt*, by Brother Samuel Al Seriani; Anba Bishoy’s book: *Between the Past and the Present*, prepared by one of the priests.



Deir El Barsha lies in the Menia municipal governorate, Mallawi center, east of the Nile, in southern Menia and east of Mallawi. Its borders are:

- 1- The northwestern border: Deir Abou Hanas village, which is 4km away;
- 2- The southeastern border: Nazlat El Barsha village, which is 3km away; midway lies a compound unit belonging to Deir El Barsha, including a health care and social services unit, a preparatory and secondary school, a central telephone office, a local unit, a local council, a veterinary unit, and a water station.
- 3- The eastern border: a desert area and a large rocky mountain.
- 4- The western border: the Nile riverbed.

### APPENDIX 3 DEIR EL BARSHA DOCUMENT

On Thursday, June 12, 1991, the sub-committee of the Deir El Barsha local committee met in the Coptic Evangelical Church guesthouse and the following members were present:

Mr. Rahbarn Ma'zouz Malak

Mr. Abdou Qalta Herzallah

Mrs. Louisa Labib

Mrs. Neema Matta

Sister Saïda Abdel Sayed

Having elucidated the harmful and pernicious effects of female circumcision, all the undersigned decided to refrain from performing this practice, and to strive to enlighten people (of the village) to follow suit. All individuals present here asserted that whoever engages in this practice from this day onwards would be questioned before God, the village committee and state law.

This is an attestation to this effect.

The Committee  
Priest Safwat Ghabriel

Co-signed By:

Saïda Abdel Sayed

Louisa Labib.

Saïda Abdel Sayed

Enaam Heita

Oum Nabîl Gohar

Oum Moussa Aziz

Oum Mona Talaat

Mariam Boušîra Farag

Halima

Nema Matta Mousa

Rahbarn Maazouz Malak

Abdou Qalta Herzallah.

## APPENDIX 4

### THE COPTIC EVANGELICAL ORGANIZATION FOR SOCIAL SERVICES

The Coptic Evangelical Organization is an Egyptian non-governmental organization established by Priest Samuel Habib in the late fifties. It has been proclaimed in the Ministry of Social Affairs, Cairo, since September 1960. The Coptic Evangelical Organization works in the service of the human order and the development of the local community, including both Muslims and Christians.

The Coptic Evangelical Organization launched its philanthropic social service activities during the fifties, which was the prevailing trend at that time. At first the Organization was active in the domain of eradication of illiteracy. In the sixties it expanded its activities to include health, agriculture and education. In subsequent years activities stretched to other broader domains. In the last two decades, the Coptic Evangelical Organization was geared toward local development. It strove to create a partnership with the local communities where it operated. The scope of its activities expanded to accommodate the environment and women's issues. The Organization operates in several governorates, including Cairo, Menia, Giza, Beni Sweif and Assiut.

The Organization deals with local communities upon their own request, through an integrated plan and agenda and throughout a number of different stages. The first stage is **participation**. In this stage the Organization deals with the local community directly through a team of the Organization's staff. This team settles down permanently within the community and plays the leading role in different programs to serve members of this community. Meanwhile, this team strives to bolster systems of communal participation in action committees that shoulder responsibility for communal development. The second stage is **follow-up**, whereby the actual leadership of developmental projects is handed down to community leaders. The Organization staff begins to take the rear seats and minimize their presence in the village. They restrict their activities to supervision and follow up of activities and

programs implemented through the leadership cadres and the committees set up within the community. The third and last stage is **self-reliance**. At this stage the local leadership can supervise and operate developmental activities and programs and establish their own independent agencies, which usually take the form of local community development associations that operate as mediators between the Organization and the local community.

### **THE ROLE OF THE COPTIC EVANGELICAL ORGANIZATION IN DEIR EL BARSHA**

Deir El Barsha was among the first Upper Egyptian villages where Priest Samuel Habib operated in the fifties, even before the establishment of the Coptic Evangelical Organization. Many of Deir El Barsha's elderly inhabitants received lessons of eradication of illiteracy through the campaign that Priest Samuel himself had led in the village. Usually, inhabitants refer to it as the American campaign, as it included some American volunteers. Apart from the eradication of illiteracy, the Organization strove to launch other campaigns against harmful social practices and traditions in Deir El Barsha, such as early marriage, local defloration or wedding night, visiting cemeteries and mourning the deceased. Priest Samuel Habib, founder of the Organization, published a book in 1992 on *Ideas on Practices and Traditions* where he discusses those practices.

The Coptic Evangelical Organization's intensive activity in the village began in 1982. In addition to the eradication of illiteracy and prohibition of harmful practices, activities included family planning, women's reproductive health, female circumcision and early marriage. The Organization adopted an integrated approach for local development, working in more than one domain that complement and integrate each other. Moreover, the Organization's concept of action stresses local initiatives, the establishment of local mechanisms to lead action, represented by the village and women's committees (follow-up and supervision stage) and paving the way for the self-reliance stage.

The Organization helped in extending a potable water network to the village and established hygienic toilets in a large number of houses. The Organization also trains the youth in some professions and helps them establish small-scale enterprises. It offers loans to inhabitants to set up small projects (purchase sewing machines, raising chicks and cattle). In the sphere of women's activities, the Organization offers a number of services in the sphere of reproductive health, including the provision of contraceptives, weekly gynecology and obstetric clinic, socialization seminars, household economics classes, and lately girls' classes to enlighten them about reproductive health issues.

The Coptic Evangelical Organization played an integral role in struggling to end female circumcision in Deir El Barsha. In addition to relentless socialization and enlightenment through seminars, home visits by members of the women's committee, and girls' classes, the Organization suggested a document where hygienic barbers and midwives in Deir El Barsha pledged to refrain from practicing female circumcision (Appendix2).

**COPTIC EVANGELICAL ORGANIZATION PROJECTS IN DEIR EL BARSHA**

|                         |                                |                                 |                        |
|-------------------------|--------------------------------|---------------------------------|------------------------|
| Income raising projects | <b>Health projects</b>         | Agriculture and the Environment | Educational projects   |
| Loans                   | <b>Enlightenment on Health</b> | Raising cattle                  | Illiteracy eradication |
| Developmental Projects  | <b>Protective Projects</b>     | Poultry                         | Women                  |
| Training for Employment | <b>Nutrition</b>               | Crops                           | Household Economy      |
| Professional training   | <b>Family Planning</b>         | Tree-planting                   | The child              |
| Administrative          | <b>Girls' classes</b>          | Household hygiene               | The Youth              |

**APPENDIX 5  
CENTRAL AGENCY FOR PUBLIC MOBILIZATION  
AND STATISTICS APPROVAL**

Egyptian Official papers- No.112, 24 May 1997

**CENTRAL AGENCY FOR PUBLIC MOBILIZATION AND STATISTICS**

**Resolution No.182 of 1997 (by proxy)**

Concerning the Field Survey Undertaken by the Cairo Institute for Human Rights Studies in Deir El Barsha- Menia  
Governorate

**Director of Financial, Administrative and Follow-up Department :**

Having reviewed Presidential Decree No.2915 of 1964 concerning the establishment and organization of the Agency;  
And Decree of the President of the Agency No. 231 of 1968 concerning statistics, population censuses, referenda and surveys;

And approval of the President of the Agency on 21/4/1997 concerning the delegation of the Director of Financial, Administrative and Follow-up Department to approve decisions and resolutions concerning security of information;  
And approval of the Minister of Health and Population/ Population and Family Planning Department dated 26/1/1997;

And the Cairo Institute for Human Rights' two documents dated 10/1 and 11/4/1997;  
Has decided:

Article (1) : The Cairo Institute for Human Rights Studies shall undertake the field survey mentioned above.

Article (2) : This field survey will be undertaken on a sample of 500 (five hundred) families in Deir El Barsha village, Menia Governorate, on condition of obtaining the consent of units of the sample and taking into consideration that

individual data are confidential according to the law. Data collected (in this survey) should not be used in purposes other than those of the field survey.

Article (3): Data necessary for this field survey will be collected through the questionnaire form, composed of five pages prepared for this purpose and authorized by the Central Agency for Public Mobilization and Statistics during a two-months period starting from the date of issuance of this Resolution.

Article (4): Procedures for the implementation of this field survey should not be launched except after this resolution is issued.

Article (5): No results of the study should be published except after referring to the competent authorities (Ministry of Health and Population and the Central Agency for Public Mobilization and Statistics).

Article (6): The Central Agency for Public Mobilization and Statistics will receive (3) copies of the preliminary results of this field survey, then (3) copies of the final results of the field survey immediately after their preparation.

Article (7): Only Egyptian women having received training on the administration of such questionnaires will collect the necessary data for this field survey. No foreigners are allowed to participate in this survey.

Article (8): The Cairo Institute for Human Rights Studies will be committed to notify the Director of the Security Division of the Ministry of Interior in Menia with a copy of this resolution prior to undertaking this field survey, enclosed with a list of names of those administering it and the actual date of launching and termination of the survey.

Article (9): This resolution will be published in the official papers.

Hosni Mahmoud Soliman

## APPENDIX 6

In the Name of God the Most Merciful the Most Compassionate

### **SUPREME ADMINISTRATIVE COURT OF STATE COUNCIL ENDORSES THE DECISION TO PROHIBIT FEMALE CIRCUMCISION**

The Supreme Administrative Court, under the chairmanship of Counselor Ali Fouad El Khadem, President of State Council, passed its final verdict in appeals concerning The Minister of Health resolution to prohibit female circumcision.

The Court endorsed this decision and turned down the request to revoke it, on the basis that female circumcision is not a personal right established according to Islamic Shari'a precepts. No stipulation in the Qur'an and no absolute ruling in Sunna mentioned this issue. Consequently, the practice of female circumcision is subject to the Penal Code, which prohibits any violation of the human body except for a medical necessity. Hence, the Minister of Health decision did not go beyond these rules; on the contrary it was quite committed to them. Thus, there is no need to decree a law stipulating these already established general rules.

According to this verdict, it is forbidden to undertake any female circumcision operation, even if the female or her guardians approve it, unless there is an absolute medical necessity upon a former decision of the head of the gynecology department of a specific hospital. Otherwise, all breaches of this verdict will be subject to penal, punitive and administrative retribution.

The court hereby decided :

- 1) To reject the appeal No.6091, Judicial year 1943, and the contestant is obliged to pay all the expenses.
- 2) Approve appeals No 5204, judicial year 1943, and No5257, judicial year 1943, of the Supreme Administrative Court, and accept the interference of the president of the Doctors' Syndicate in his capacity as joint member to the administrative authority in appeal No. 5204, judicial year 1994, and turn down the interference of both the Family Planning Association and the Association for the Prohibition of all Harmful Practices against Women.
- 3) Cancel the appealed decision, reject the case and oblige the contestant to pay all the expenses.



## APPENDIX 7

### MINISTRY OF HEALTH COMMITTEE STATEMENT

#### MINISTRY OF HEALTH

#### MINISTER'S OFFICE

His Excellency/ Director General of Health Affairs, Giza Governorate

We would like to notify you that the committee set up within the Ministry of Health to discuss the issue of female circumcision, composed of renowned professors of medicine, religious scholars, jurists, legal experts, mass media officials, and sociologists issued a declaration (enclosed herewith is a copy of this declaration) at the conclusion of its meeting on Sunday, October 9<sup>th</sup>, 1994. This declaration emphasized that this practice has no religious reference, but it is merely an abhorrent custom having serious health, psychological and social risks for women, family and society. The committee also stressed that religious socialization, mass media and enlightenment on health issues play a major role in resisting this practice.

Hence, this matter requires the following procedures:

- 1- Prohibiting the operation of circumcision by non-physicians and in places unequipped for this purpose in public and central hospitals, the application of the law for practicing the medical profession, and that legal procedures against violators of this law be enacted promptly and firmly.
- 2- Each hospital affiliated with a medical school, public or central hospital and should specify two days a week to undertake female circumcision and another day for receiving families wishing to circumcise females.
- 3- On the day specified to receive families wishing to undertake female circumcision operations, each hospital should set up a committee to receive parents who wish to meet a gynecologist, an anesthesiologist, a social

officer, an operation nurse and a religious person . This committee would explain the health and psychological damage resulting from this operation and the religious standpoint toward it. It should also reconsider the matter with the family more than once before proceeding with the operation, and should not respond to their wish before going through all the possible channels to dissuade them. This will gradually limit the proliferation of this practice, as a prelude to totally eliminating it.

With best regards,  
Minister of Health

Prof. Dr. Ali Abdel Fattah.

## **LIST OF CIHRS PUBLICATIONS**

### **I. Human Rights Debates:-**

- 1- Human Rights Guarantees Under Palestinian Self-Rule Authority. English & Arabic
- 2- Palestinian Democracy and Human Rights-The Palestinian Cultural Considerations.
- 3- Human Rights Under Totalitarian Religious Regimes: The Case of Sudan 1989.
- 4- Human Rights Guarantees of the Palestinian Refugees Under the Current Peace-Process.
- 5- Stumbling of the Political Liberalization in Egypt and Tunisia.

### **II. Intellectual Initiatives Booklets:**

- 2- Sectarianism and Human Rights, Violette Daguere (Lebanon).
- 3- The Victim and the Executioner, Haytham Manna (Syria)
- 4- Arab Constitutional guarantees of Civil & Political Rights, Fateh Azzam (Palestine). 1995 In Arabic & English.
- 5- Human Rights in the Arab Islamic Culture, Haytham Manna (Syria). 1995- In Arabic & English.
- 6- Human Rights- The Right to Participate, Ahmad Abdallah (Egypt)
- 7- Human Rights – The New Vision, Moncef Al Marzouki (Tunisia).
- 8- Challenges facing the Arab Human Rights Movement, Bahey El Din Hassan, Editor. 1997 In Arabic & English
- 9- 8-A Plea for a New Egyptian Constitution, Ahmad Abdel Hafeez
- 10- 9-Children and War. Yemen's Case. Alaa Kaoud, Abdel Rahan Abdel Khalek, Nadra Abdel Kedous
- 11- 10-Citizenship in the Arab Islamic History, Haytham Manna (Syria). In Arabic & English.
- 12- 1-The Palestinian Refugees and the Peace Process. A statement against Apartheid. Mohamed Hafez Yaqoub.
- 13- 12-Atonement between Religion and Politics. Mohamed Younis

### **III. Ibn Rushd Booklets :-**

- 1- Freedom of the Press: A Human Rights Perspective, Mohamed El Sayed Said & Bahey El Din Hassan, Editor.
- 2- Revitalization of Political Thought through Democracy and Human Rights: Islamism, Marxism and Pan Arabism, Essam Mohammed Hassan, Editor. In Arabic & English.
- 3- The peace process: implications for Democracy and Human Rights, Gamal Abdel Gawad, editor. In Arabic & English.

#### **IV. Human Rights Education**

- 1- How Do University Students Think of Human Rights, a Monograph written By the Students of the 1st and 2<sup>nd</sup> Training Course of CIHRS Volume 1 &2.
- 3- An Introduction to Understanding Human Rights System, Mohammed El Sayed Said, (Egypt).

#### **V. Dissertations for Human Rights**

- 1- Constitutional Controls on Laws-Comparative Studies between Egypt and the United States. Hesham Mohamed Fawzy.

#### **VI. Women Initiatives:-**

1. The Stand-View of the Physicians Concerning Female Genital Mutilation, Amal Abdel Hadi- Seham Abdel Salam
2. "We are Decided" Struggle of an Egyptian Village for the Eradication of Female Genital Mutilation, Amal Abdel Hadi

#### **VII. Human Rights Studies**

- 1- Human Rights in Lybia- Limits of Change. Ahmed El Meselmani
- 2- The Human Cost for the Arab- Arab Conflicts. Ahmed El Tohami

#### **VIII. Human Rights in Arts and Literature**

Oppression in the Arabic Narrative Discourse. Abdel Rahmen Ben Aouf

#### **Periodicals:-**

- 1- "Sawasih", Bimonthly Bulletin, Arabic & English
- 3- "Rowaq Arabi" Periodical Journal, Arabic & English.
- 2- "Alternative Visions" selections from (MERIP) magazine.
- 4- " Reproductive Health Matters" selections from (Reproductive Health Matters) magazine.

#### **Joint Publications with other NGO's:-**

##### **a. With the National Committee of the Egyptian NGO's:**

- 1- Female Genital Mutilation, Amal Abdel Hadi.
- 2- Female Genital Mutilation: Facts & Illusions, Seham Abdel Salam.

##### **b. With Mawatn (The Palestinian Association for the Study of Democracy):**

Problematic of the Democratic Transformation in the Arab World.

##### **c. With Group for Democratic Development and the Egyptian Organization for Human Rights:**

Setting Civil Society Free (A Draft Law on Civil Associations and Institutions).

**CAESAR CENTER**  
**2505920**

قرار وقرار

أنتهى يوم الجمعة الموافق ١٩٩١/١٤/٦ اجتمعت اللجنة المنبثقة من لجنة الدولة برئاسة  
في استراحة اللجنة الانجليزية وتم مناقشة كل مس ١ -

السيد / رمضان صفرز ملك

السيد / عبد قلنت مرز الله

السيد / لوزة لبيب

السيد / نعمة ممت

السيد / سعيدة عبد السيد

ولقد توصلت الاجتماعات والنتائج لصفة- التاجمة عن نتائج البات أتر  
الجميع باسم الضياء بنو العلى ، والعمل على توجيه البات بنو الأمر  
واقرا جميع أنه من يقوم بنو العلى بعد اليوم يكون عرضا لتسوال أتم  
الله وحسنه الدولة وقانونه الدولة -

وهذا لقراراً بذلك

المقررر عاصمت

السيد / محمد

لدائرة لبيب



السيد /

السيد /

السيد /

السيد /

اللجنة

التي صندت بذلك

السيد /

السيد /

السيد /

السيد /

د انعام حيا

ام نيل جودر

ام مدى عذر

ام صدى طلقت

رسم شرف