Bodily Integrity in the Family System in Egypt: Perspectives from young people

Building New Constituencies for Women's Sexual and Reproductive Health and Rights (SRHR): Interlinkages Between Religion and SRHR

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NATIONAL REPORT

Bodily Integrity in the Family System in Egypt: Perspectives from young people

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CONTENTS

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LIST OF ACRONYMS

AIDS	Acquired Immune Deficiency Syndrome
ARROW	Asian-Pacific Resource and Research Centre for Women
CAPMAS	Central Agency for Public Mobilization and Statistics
CEDAW	Convention on the Elimination of All Forms of Discrimination Against Woman
DHS	Demographic and Health Survey
ECESR	Egyptian Centre for Economic and Social Rights
EIPR	Egyptian Initiative for Personal Rights
FGD	Focus Group Discussion
FGM/C	Female Genital Mutilation and Cutting
FP	Family Planning
FWCW	Fourth World Conference on Women
GOE	Government of Egypt
HDI	Human Development Index
IDSC	Information and Decision Support Centre
ICPD	International Conference on Population and Development
MDGs	Millennium Development Goals
MENA	Middle East and North Africa
NCCM	The National Council for Childhood and Motherhood
NCW	National Council for Women
NGO	Non-Governmental Organization
Norad	Norwegian Agency for Development Cooperation
NPS	National Population Strategy
RF	Religious Fundamentalism
SRHR	Sexual and Reproductive Health and Rights
STIs	Sexually Transmitted Infections
SYPE	Survey of Young People in Egypt
UNAIDS	United Nations Programme for AIDS
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
UN Women	The United Nations Entity for Gender Equality and the Empowerment of Women
WHO	World Health Organization
VAW	Violence Against Women

EXECUTIVE SUMMARY

This research aims to explore the concept of "Bodily Integrity" for young Egyptian women and men (18–29 years) within the family system and the effect of religious fundamentalism and social conservatism discourse that seeks to limit the control of young women and men over their bodies and rarely holds parents accountable for harmful practices.

Traditional religious and family values in Egypt, introduced to protect young people, can restrict their understanding and practice of their Sexual and Reproductive Health and Rights (SRHR). It is usually assumed that young people, especially young women, do not need to know about such issues until they are married. This idea is rooted in inherited values and long-standing taboos surrounding sexuality and such values are guarded by the family; either the parents and/or the extended family.

For this reason, the family rests at the core of this discussion on SRHR. Advocacy of young people reclaiming ownership of their bodies should focus on changing the discourse that such acts will "harm the family and the whole society", which draws on religiously justified arguments.

This evidence-based research used different data collection tools to answer questions about two main dimensions of "Bodily Integrity", which are "Self-Ownership" and "Accountability", to open a discussion about the influence of the family system on the bodily integrity of its members, especially women. The research team conducted a focus group discussion with young women, ten interviews with young men and two verification sessions for the findings in addition to an online survey.

The main results of this fieldwork find a need to organize Comprehensive Sexuality Education (CSE) for young men and women, starting at the early stages of the education system, and for this education to adopt an SRHR approach.

The field research elicited important findings, most important of which are:

1. The family practices heavy control over the bodies of daughters and sons, including harmful practices such as virginity tests, early marriages and female genital mutilation and cutting (FGM/C) for daughters. Meanwhile, the family does not hold itself accountable for these harmful approaches, despite the negative effects on the physical and mental wellness of the daughters and sons. Families use what is considered religious arguments, either Islamic or Christian, to justify the control of the bodies of young men and women, thereby affecting young people's understanding of their sexuality.

2. In Arabic what is referred to as "inappropriate" has a different connotation than "haram" (forbidden.) The first is usually understood in the context of what is accepted by society and the prevailing culture while the other term is in relation to what is not accepted religiously. The young women and men interviewed failed to a large extent to distinguish between "haram", considered religiously unacceptable and what is "halaal", considered religiously acceptable, adding to their confusion when dealing with their bodies. Families do not provide space for discussion. It is usually one sided; parents giving orders or guidelines to the children on what to do or not to do when it comes to the body.

3. The information young men and women receive about the body and its changes and development does not come from the immediate or extended family. Such important information is usually hidden or rarely discussed by parents as a method of controlling the sexualities of their sons and daughters, leaving them to receive information and knowledge about their bodies from unverified sources. When participants were asked about the sources of information, most answered that it was from friends.

However, with the wide usage of the Internet, many indicated they obtained information from searching online.

4. The education system in Egypt rarely provides the space to discuss "What are rights? How do we claim them and how do we protect them?" Young men and women looking to learn about these issues instead seek workshops by organizations working in the field of human rights. Rights education challenges the prevailing misconception alongside the false explanation of religious texts and encourages participants to think about what they were told by family and by society in general.

5. When the participants were asked to give their opinions about how to reclaim their ownership of their bodies many emphasized the right of young men and women to privacy and that their lives should not be discussed openly and "fatwas" – religious rulings by a recognised authority – should not be asked from religious men by their families on how they should pursue their daily lives, as some families do.

6. Some participants believed that nothing would change through their discussions with their families on issues about sex, so they apply a strategy of "Do not tell" which means not sharing their thoughts or concerns with their parents. Many young men and women said they feel they should pursue their sexual lives without telling their parents or family members. Their parents believe that they "own" their bodies and they do not have the freedom to explore.

In conclusion, it is important to assert that young men and women in Egypt need "sex education" and such education should be provided in schools.

The research provides a set of recommendations that seeks to resist and alter the patriarchal structure of the current family system that might use religious interpretations and false justifications to control the lives of family members. The recommendations are set in light of the current critical situation in Egypt where society is facing challenging questions with regards to its value system.

1.   INTRODUCTION

Understanding bodily integrity, which entails exploring different forms of control over the sexual and reproductive lives of young men and women, is an especially important need within the family system in Egypt, which is embedded in patriarchy, and religious practices that restrict what young people can learn about sex, sexuality and the body. As we will see through the findings of the research, certain acts performed by the "family", such as the circumcision of young girls (also referred to as Female Genital Mutilation - FGM[1]), early/child marriage[2] , certain dress codes like veiling, and several other acts, violate the body and emphasise that young men and women do not "own" their bodies.

The research looks at how the family uses religious justifications to assert and maintain control over its members' sexuality and sociality. Age-old patriarchal motives are guarded to control sexuality, including those of women and particularly the young. Of course, such practices are not only present in Muslim communities or maintained solely with reference to Muslim religious and cultural norms. As the cases of violence against women throughout the world aptly demonstrate (Ertürk 2009), patriarchy has emerged everywhere and has invariably used cultures and religions to justify their detrimental effects on gender justice.

This research aims to introduce the concept of "Bodily Integrity" and formulate an advocacy agenda around it, emphasising the concepts of "Self-Ownership" and "Accountability" as a means to combat gender-based violence in the family system in Egypt.

This area of research is still underdeveloped in Egypt, both in Arabic and in English. A thorough review of the literature of studies and research over the last ten years in the field of sexuality did not find a specific study that focused on the issue linking bodily integrity to religious discourse. Hence, it can be said that the study initiates the process for future work around the subject.

The study looks into issues of "self-ownership" of the body, i.e. who owns the body and how religious discourses justify notions of ownership. We look also into the issue of "accountability", exploring who is held accountable when the body is abused and by what means.

In Egypt, family is considered the natural entity necessary for the survival of society because it provides the environment for reproduction and childrearing. It is defined to include a male, a female and children as a nuclear unit as well as to include extended family such as grandparents and siblings of parents and their families as an extended family unit. Barakat (1993) interprets the word for family in Arabic, "aila" or "usra", as a reflection of mutual commitment and interdependency between family members. Within the family, women are to carry out specified roles such as caring for the family members and performing domestic chores, while men are to provide an income suitable to the needs of the family. But the family in Egypt is patriarchal in nature. The father has the complete authority over and responsibility for his wife and children. The wife is associated with her husband rather than treated as an individual.

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1 Female genital mutilation (FGM) comprises all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons. (WHO: 2016) http://www.who.int/mediacentre/factsheets/fs241/en/
2 Defined as formal marriages or customary and statutory unions recognized as marriage before the age of 18 (at 18 a girl is still considered a child under the Convention on the Rights of the Child, except in countries where the age of majority is lower) (UNICEF) http://www.unicef.org/sowc06/profiles/marriage.php

The hierarchal structure of the family dictates the family roles: the father is the head of the family and he is the breadwinner and the mother is assigned the role of the caretaker. The children are socialized to be dependent, totally attached to their families and made to feel guilty whenever they fail their families' hopes or expectations (Barakat 1993, Aboul Ela 2012).

Generally, in Egyptian families, boys have full mobility and freedom to practice different activities outside the home while, in order to guarantee chastity and family honour, the family imposes greater restrictions on the mobility of adolescent girls. Girls must allocate much of their leisure time to helping with domestic chores, but schooling does give girls the chance to be out in the public sphere and it guarantees interaction between boys and girls (Mensch et al. 2000).

Mensch et al. (2000); Singerman (1997 and 2008); Hoodfar (1997) and Joseph (1999) confirm that family socialization is greatly responsible for reinforcing the traditional gender roles. The same body of scholarship gives evidence that the socialization of the social gender norms is mainly carried out through the family. Parents are deeply concerned about conveying these values, which play out in and are reflected by a gendered division of household tasks and by controlling the mobility and decisions that affect the wellbeing of their children, especially girls.

The role of the family in Egyptian society is pivotal. The "familial ethos" consists of the norms and traditions that guarantee family solidarity and survival (Bourdieu 1996). These are passed down over generations and provide guidance on how family members should function within the unit, their roles and responsibilities, positions in relation to other members in the unit, how they should interact, and positions of power and decision making within the unit. They also help families to provide the material and social needs of all their members, settle conflicts and disputes among individuals and maintain the ideas and norms of the community by existing within an acceptable framework and parameters that govern the collective whole. As such,

family is the medium not only of reproduction but also of economic production (Aboul Ela 2012).

This research took into consideration the political and social changes in Egypt following the revolution of 2011. Since then, Egypt witnessed a new constitution in 2012 and its amendment in 2014[3].

The Constitution of Egypt in article (10) states: "The family is the nucleus of society, and is founded on religion, morality, and patriotism. The State shall ensure its cohesion, stability and the establishment of its values." This statement puts the family at the centre of societal dynamics in Egypt and affirms that religion is an important component of its formulation.

Another dimension the research looks at is the social class dimension. The focus of the field work was on young women and men who belong to middle-class families who have access to higher education, work in places that give them access and exposure to different cultural arguments, while at the same time belonging to conservative families that seek to control their lives prior to marriage, as marriage is seen as the only way to explore sexuality.

Finally, the research looks at the tangling between the cultural and religious arguments used by the families. Religion, tradition and culture are interconnected and mutually reinforcing. For this reason, valued traditions and cultural beliefs are sometimes incorrectly assumed to be mandated by religious doctrine. For example, despite the fact that no religious scriptures require FGM/C, some communities consider the practice to be a religious requirement that makes a girl spiritually "pure". Religion is often cited, particularly by Christians and Muslims, as a reason for carrying out FGM/C, although the practice predates Christianity and Islam (UNICEF 2010).

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3 See https://www.constituteproject.org/constitution/Egypt_2014.pdf

Research Objectives

This research was conducted to explore the influences of the family system in Egypt on the bodily integrity of young men and women, analysing the different religious and cultural arguments used in Egyptian families. It seeks to analyse issues of "self-ownership" and "accountability" and how young men and women perceive them; meaning who claims "ownership" of the body and who should be held "accountable" if the body is violated. The recommendations provided will facilitate discussions between women's rights and youth groups on issues around SRHR and "bodily integrity" and create counter discourses that challenge arguments and interpretations based on conservatism and extreme interpretations of religion.

Research Questions

This research was guided by two central questions:
(1) How do families use religious arguments, either Islamic or Christian, to justify control over the bodies of young men and women and affect their understanding of their SRHR?
(2) How can young men and women within the family reclaim the ownership of their bodies and hold families accountable to any violations?

By using qualitative research methods, the researchers aimed at understanding the dynamics that affect the Sexual and Reproductive Health and Rights (SRHR) of young men and women in Egypt by considering:
- The effect of the religious fundamentalist, conservative discourse on bodily integrity
- How the body in the family is affected by patriarchal social codes
- The relationship between SRHR and class, precisely the effect of income, education and access

These questions and areas of study will further illuminate the broader questions of this research and will deepen the general social understanding of the common perceptions and beliefs around issues of SRHR in Egypt and will raise the awareness of the readers around issues of bodily integrity in Egypt.

Advocating for changes in how the family controls the bodies of its members is always linked to the argument that "this will harm the family and the whole society", which is underpinned by religious fundamentalist and conservative discourses that encourage controlling the body of the family member. This research addressed such issues and explored the harms/benefits on the bodily integrity of family members in the family system in Egypt.

Research Methodology

The research team used a qualitative methodology and data collection included focus group discussions (FDGs) with young men and women, in-depth interviews with young men (18–29 years), and an anonymous online survey. The qualitative data collection was followed by verification workshops with young people on selected findings.

Initially, the research team planned a data collection methodology employing focus group discussions; two for women and two for men. Following the first FGD with young women, it was found that the method was not very successful in extracting information precisely related to the effect of religious discourse on their bodily integrity within their families. The second FGD with young women and both FGDs with young men were replaced by in-depth interviews as all invited young men refrained from providing elaborated answers in the presence of others.

The team then turned to conducting in-depth interviews with young men and women in addition to circulating an online survey. Ten interviews were conducted with young women (20–29 years) who live in urban cities and had completed a university education (See Annex 1 for profile of interviewees).

Most interviewees were single, either never married and still living with their families or divorced and living again

with their families. Three out of the ten interviews were conducted with young women who live independently from their families. The characteristics of the young men interviewed were the same as that of the young women in terms of age, education level and place of living. In addition, the team interviewed two young men and two young women of the Christian faith.

The team also designed an online survey to collect answers to the research questions, which proved successful as respondents to the online survey, especially young women, managed to reply openly due to anonymity. The research team worked to control the sample by maintaining the circulation of the survey between respondents who had similar characteristics as the participants in the FGD and the in-depth interviews. The team received 28 responses for the online survey (6 April 2015 to 11 May 2015).

Answers were received from 15 female respondents, nine males, and three who preferred not to identify their sex. Of the 28 respondents, 23 live in Greater Cairo (Cairo and Giza governorates but not Qualubiya). Between the respondents, eight live independently, 19 with their families (parents), and one with his pet.

In order to elaborate on some of the findings of the research, the team held two follow-up discussion sessions with participants with the same characteristics in August and in October 2015.

The study focuses on young women and men aged 20–29 years, but as the research team proceeded with the interviews and FDGs it was necessary to question if the same restrictions and control faced by young women applied to young men, or if they were different. Accordingly, in-depth interviews were conducted with young men to understand the influence of religious discourse in Egypt on them.

In the focus groups, interviews and online questionnaire, the research team was aware that different factors would affect participant responses, including place of residence

(whether in Cairo or another governorate; and for those in Cairo, whether in an informal area, a middle class neighbourhood or a closed compound in new areas around the city), religious beliefs, and education. The intersecting nature of these factors that were introduced led to varied answers and added to the complexity of analysis.

This study provides the following areas of information:
- The family members' understanding of body ownership and integrity.
- The influence of religious discourses and conservatism on bodily integrity, especially on young men and women.
- The necessity of creating open discussion in the family about sexuality.
- The necessity of providing sex education in schools.

Limitations

The team faced several risks, potentially exposing the research members to security investigation, as any discussion or work around sexuality is considered by the authorities to mean advocating for homosexuality or indecent sexual acts. This also led to continuous delays throughout the research process.

The respondents in the FGDs and the interviews were very cautious in their answers and the team needed to implement several facilitation techniques such as pairing discussions, drawings, writing diaries or telling stories to guarantee that the answers would provide a deep and clear picture of situations in families.

2. PROFILING EGYPT: SRHR, RELIGIOUS FUNDAMENTALISM AND CONSERVATISM

A Profile: Egypt	
Total Population (April 2017)	92908092
Population of Women (estimate of 2017)	45161675
Population of young people	15049000
Ethnic groupings	Arabs, Bedouins, Nubians
Religious groupings	Majority Sunni Muslims, Orthodox Christians
Official Language	Arabic
Type of government/Form of government	Democratic Republic
Poverty Headcount Ratio	25.2%
Population Growth Rate	2.3
Literacy among Females (2014)	25% of females
Maternal Mortality Ration (2013)	45 per 100,000 births
Total Fertility Rate	3.5 children per women in 2014
Contraception prevalence Rate	Urban (61.3) Rural (57.0)
Unmet need for family planning (2014)	12.6
Access to modern contraception	57.8

Sources: Central Agency for Public Mobilization and Statistics (CAPMAS Egypt), World Bank, UNFPA Egypt, UN- DESA

The following section provides an overview of Egypt, the existing policy framework, debates in literature on young women's and men's SRHR situation in Egypt, and discussion around the family and the position of different institutions and political factions on family. It then covers what is meant by bodily integrity and moves to discuss the usage of the term in available literature in Egypt.

Egypt, a country in North Africa, where Arabic is the widely used language, is a middle-income country with a population of approximately 91.5 million and a Gross Domestic Product of US\$ 330.8 billion (World Bank 2016).

Following the 2011 revolution, Egypt's then-President of 30 years, Hosni Mubarak, was deposed after massive street sit-ins and deadly clashes for 18 days. Following Mubarak's deposal, the country experienced a transitional stage that resulted in an economic downturn that hampered development efforts, with a particular impact on youth and women. The overall unemployment rate for 2012 was 12.6 per cent. Women were more affected than men, with an unemployment rate of 24.1 per cent, three times as high as that of men. One out of three young people (15–24 years) was also unemployed (UNFPA Egypt 2015)[4].

Egypt usually deals with SRHR within the context of population, not as a separate issue that has to be listed on the human rights agenda. This was obvious in the process of drafting the Constitution of 2013, its modification in 2014, and the implementation of different cycles of the 2002–2017 National Population Strategy (NPS). In the second implementation cycle of the NPS (2007–2012) reproductive health was tied to family planning with no further discussion on sexual rights of either men or women. The same trend took place in preparing the National Population Strategy as explained below (Hussein 2011).

In 2012, Egypt's population was estimated to be 83.7 million

with 62 per cent of the population below the age of 29. The high unemployment rate among youth has contributed to a delay in the of age marriage. Youth are also characterized by low civic engagement—only five per cent were part of organizations in 2009—and low participation in policy making (UNFPA Undated).

The Government held a National Population and Development Conference in November 2013 to analyse the factors behind that situation. The conference concluded with the establishment of an inter-ministerial group coordinated by the National Population Council and was tasked with developing a National Population Strategy (NPS) 2015–2030. The Prime Minister launched the National Population Strategy on November 6, 2014.

The strategy seeks to improve the quality of life of all Egyptians by focusing on four pillars: 1) strengthening access to family planning and reproductive health, 2) fostering youth and adolescents' health and civic engagement, 3) advancing women's economic empowerment, and 4) strengthening girls' education. Finally, the strategy sought to deploy the mass media and conduct awareness-raising campaigns to support all of the above. The NPS has a multi-sectoral approach to ensure integration of services and efforts, including government, private sector, public and private media institutions, volunteers and NGOs. A sub-strategy titled "National Strategy for Reproductive Health" was produced but took the same line of neglecting the inclusion of sexual rights, while focusing on women's reproductive health especially after marriage[5] (Ibid. Undated).

In this context where population strategies were prioritized over sexual rights, a Presidential decree was issued in March 2015 reshuffling the cabinet and establishing the Ministry of Population, which was charged with the task of working closely with different sectors to ensure proper coordination, monitoring and support for the successful implementation of the National Population Strategy

4 Over the period from 2000-2007, the female unemployment rate has been continuously higher than the male unemployment rate. In 2007, the female unemployment rate was 18.6% compared to 5.9% for males. (Research on the Economic Participation of Women in Egypt: http://www1.aucegypt.edu/src/wsite1/research/research_economicparticipation.htm)

5 For more details: Egypt National Reproductive Health Strategy 2015-2020 (in Arabic) http://bit.ly/2axtpyi

(Aswatmasriya 2015).

The language of SRHR has been rarely found within civil society and the work of women's NGOs . In the Egyptian Women's Charter of 2011 there is no mention of reproductive health or women's sexual rights[6].

"Family practices heavy control over the bodies of daughters and sons, including harmful practices such as virginity tests, early marriages and FGM/C for daughters. Some of these practices are justified religiously especially in the context of keeping the "honour" of the family or preserving the chastity of girls"

Young People's SRHR in Egypt

Egypt is a country where the percentage of youth is high[7] and is witnessing severe economic and social challenges following the revolution of January 2011. For example, The GDP growth since 2011 has been less than half the population growth rate. The rate of unemployment doubled from seven per cent to at least 14 per cent, which is quite high. Both national and foreign investments have fallen. Foreign debts have soared from US$33 billion before 2011 and are approaching US$50 billion in 2014. Foreign currency reserves plunged from US$33 billion to US$18 billion (Amin 2014).

Such circumstances affect the situation of young men and women. Nine per cent of youth of the age 15-29 years want to immigrate, compared to 18.4 per cent in 2009 (Roushdy and Sieverding 2014).
The subject of SRHR is highly neglected by the Egyptian government and when it does focus on SRHR, it does so without a holistic approach. The government often deals with each subject, such as Female Genital Mutilation and Cutting (FGM/C), child marriage, sex education and other issues separately and usually using a conservative approach that mixes religion and culture. As part of this, the government frequently seeks the opinion of Al Azhar (the country's highest religious institution), regardless of the country's international commitments in signing and ratifying international conventions.[8]

The conservative and restricted environment in families in Egypt could explain some decisions and actions taken by young men and women.

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7 The definition of youth varies; according to the UNFPA Egypt website it is the range of age between 15-24 years and this age range represents 60% from the population.
8 For example, Egypt ratified the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) on September 18, 1981. Egypt also ratified in 2001, the African Charter on the Rights and Welfare of the Child. Egypt is also a signatory to the Convention on the Rights of the Child, the International Covenant on Civil and Political Rights, the International Covenant on Economic, Social and Cultural Rights, the International Convention on the Elimination of All Forms of Racial Discrimination and the International Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment.

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6 The charter can be viewed here: http://www.unwomen.org/~/media/Headquarters/Media/Stories/en/charteregyptianwomenenpdf.pdf

The SYPE (Roushdy and Sieverding. 2014) report shows that schools do little to provide SRHR information and that the information available to youth outside of school is not necessarily accurate or helpful. SYPE found that less than 15 per cent of boys and five per cent of girls received information on puberty in school. Additionally, the most common reactions to menarche (the onset of a girl's period)—reported by 67 per cent of female respondents—were shock, tears, or fear. Three out of five female respondents identified their mothers as their main source of information about puberty, and less than 10 per cent of young men spoke to their relatives about puberty. More-educated, wealthier, and urban youth were more likely to talk to their parents, but schools seemed an equally weak source of information for young people across socioeconomic groups.

More than half of young men and one-fourth of young women relied mainly on friends for information. Less than five per cent of young men turned to religious figures for information. While girls are most comfortable talking to their mothers about puberty and other sexual and reproductive rights issues, the mothers may well be sources of misinformation, perpetuating misconceptions about sexuality and health. Television, by far the most popular leisure activity for Egyptian youth, may not necessarily provide accurate information or cover more sensitive SRHR topics. Young people spend an average of two hours per day watching television, with young women watching slightly more than their male counterparts (Wahba and Roudi-Fahimi 2012)

About half of the respondents to SYPE (51.3%) were shocked, cried, and/or were afraid at menarche. Nearly one-fifth (18.5%) of respondents were indifferent, and over one-fifth (21.5%) did not know what to do. When the respondents were disaggregated by education there were no major differences in reaction to menarche. The survey continued with a series of questions asking respondents their opinions regarding the appropriate age, if ever, to talk to adolescents about puberty. The largest percentage of respondents (37.9%) believed that this discussion should take place at the onset of menstruation/puberty. The second most common response, comprising 15.3 per cent of respondents, was that no one should talk to youth about

puberty; more young men than women gave this answer. Furthermore, 10.5 per cent of respondents believed that this conversation is best had at marriage. Finally, 10.7 per cent of the sample was unsure of the best age to discuss puberty (Roushdy and Sieverding 2014).

Youth who were involved in SYPE were also asked about their main source of information regarding puberty. The most commonly cited source of information was "friends, neighbours, and/or relatives" (41.1%), followed by "family" (26.5%). When disaggregated by gender, 41.1 per cent of female respondents indicated "family" compared to 12.5 per cent of male respondents. For male respondents, 51.4% reported "friends, neighbours, and/or relatives" were their main source of puberty information. A substantial percentage of the sample (13.7%) reported that their main source of information was films and cinema. When looking at information sources disaggregated by education, 15.6 per cent of those with university-level education reported their main source to be a school curriculum, by far the largest among all education categories (data not shown) (Ibid. 2014).

Overall, 59.1 per cent of youth who were involved in SYPE indicated that the amount of information they received about puberty was sufficient. Slightly fewer male than female respondents believed that the information they received was sufficient (56.9 % versus 61.4%, respectively). Generally, the older a respondent was, the more satisfied they were with the information they received. Younger respondents were more likely to say the information was insufficient (23.2% of 13–17-year-olds and 40.0% of 18–24-year olds) than their elder counterparts (14.9% of 30–35-year-olds) (Ibid. 2014).

Respondents to SYPE aged 13–35 who were cut circumcised indicated that doctors were the main providers of the procedure (43.8%) followed by dayas/circumcision practitioners (42.6%) and nurses (11.5%). Younger respondents (13–17), who live in urban governorates, who have a university degree and who belong to the highest wealth quintile were more likely to be cut by a doctor than other groups of young women. Nearly two-thirds (64.5%) of all female respondents aged 13–35 who were cut reported that the practice was performed at home or at another house. Home or another house was more common

in rural areas (69.5%) than urban (58.8%) and informal urban (52.3%) areas. When asked why they believed that FGM/C was important, the most commonly cited reason was "customs and traditions" (56.7%) followed by "religious reasons" (35.0%) and "to get married" (5.3%) (Ibid. 2014).

Respondents from urban and rural Upper Egypt were much more likely to respond "customs and traditions" (74.5% and 69.1%, respectively) than those from urban and rural Lower Egypt (41.0% and 41.1%, respectively). Among respondents in the higher wealth quintiles, "religious reasons" was most often cited (48.2%), whereas among those in the lowest, "customs and traditions" (67.3%) was the most cited (data not shown). When asked whether they intended to cut their daughters in the future, seven out of 10 SYPE respondents answered "yes". Fairly equal percentages of male (68.6%) and female (70.7%) respondents indicated that they intended to cut their daughters in the future (ibid. 2014).

All SYPE (2014) respondents aged 13–35, regardless of marital status, were asked if they knew of family planning methods that could delay or prevent pregnancy. Over half (61.5%) of the respondents indicated that they did. Over two-thirds (71.5%) of all female respondents knew of such methods, whereas slightly more than half of the male respondents reported "yes" (52.0%). Knowledge was highest among the oldest respondents (aged 30–35: 85.0%) and lowest among the youngest (aged 13–17: 34.8%) (ibid. 2014).

The most commonly identified contraceptive method among all SYPE respondents aged 13–35 was oral contraceptive pills (OCPs), which 57.1% of respondents knew of. Intrauterine devices (IUDs) were the second most identified contraceptive method, with 50.3% of the sample reporting that they know of IUDs, followed by injectables (42.7%), subdermal implants (10.4%) and condoms (9.3%).

Overall, female respondents had more knowledge of contraceptive methods, with the exception of male condoms, than their male counterparts. On sources of information about contraceptives, the most commonly cited source of was healthcare providers (33.2%), followed by radio and television (27.5%) (ibid. 2014).

The Family

The "Family System Theory" emerged from the General Systems Theory introduced by scholars who found it had many applications to families and other social systems. Any system is defined as a bound set of interrelated elements exhibiting coherent behaviour as a trait (Constantine 1986 in Winter 2001) as well as non-coherent behaviour. At the same time, families have external stimuli that are impacting them and the members within these units. These can include external contextual factors such as insecurity, economic conditions and social aspects as well as shifting membership as new people join the family or non-kin networks that impact the way in which individual family members behave within the family. Coherence cannot always be assumed within the family as these units do not always function in an organised manner and are influenced by members whose acts are dependent on situation, personal gains, group gains and may not necessarily act with the family in mind.

Another definition is an assemblage of objects related to each other by some regular interaction or interdependence. Families are considered systems because they are made up of interrelated elements or objectives, they exhibit coherent behaviours, they have regular interactions, and they are interdependent of one another (Morgaine, Undated).

When viewed as a system, the family can be defined as a complex structure comprised of an interdependent group of individuals who (1) have a shared sense of history; (2) experience some degree of emotional bonding; and (3) devise strategies for meeting the needs of individual family members and the group as a whole. Implicit in the use of the system metaphor to define the family is the premise that the family is structurally complex, is comprised of multiple subsystems, has common purposes and tasks that must be fulfilled, and devises strategies for the execution of these tasks.

Viewing the "family" as a system helps us define it by two central dimensions: its structure and its tasks. Structure includes both the family's composition and its organization. Composition refers to the family's membership, or simply,

the persons who make up the family. The family's structural organization refers to the unique set of rules governing the patterns of interaction found within the extended family system. Tasks refer primarily to the "business" of the family—its common and essential responsibilities. All families have tasks that they fulfil for society and family members alike.

A systems perspective—"Taking into account all of the behaviours of a system as a whole in the context of its environment"—focuses our attention on the structural and functional features of the family rather than on its particular composition (Bar-Yam 2011). Specifically, it encourages us to be aware of the organizational complexity of the family and the reciprocal and interdependent relationships that exist between the family and broader social systems. Furthermore, a systems perspective encourages us to attend to the wide array of tasks that the family and each of its subsystems must execute in order for the family to function. The family must devise strategies for executing these tasks. The family's choice of strategies is also at the heart of any judgment made regarding a family's influence. The family's structural organization and its unique strategies only become apparent in examining the family's patterns of interaction. That is, only by observing the family's unique rules and patterns of interaction do we gain insight into how the family is structured and how it goes about fulfilling its basic tasks.

Combing this understanding with the trends of religious fundamentalism and the conservative value system of the middle class in Egypt, actions from the society as forcing a certain dress code[9] enables us to understand the complexity of discussing self-owned bodies and accountability in the family. Both trends entitle the family as a "system" to "take decisions" on behalf of the "member" especially if this member is a young woman. These decisions are usually related to sexual and reproductive health rights claiming that the "elder in the family knows better".

9 For more discussion on this, refer to Sholkamy, H.2011. Creating Conservatism or Emancipating Subjects? On the Narrative of Islamic Observance in Egypt. IDS Bulletin Vol. 42, No. 1

The "Family" in Egypt

Historically, the family in Egypt was defined as a nuclear household—"married partners and children residing in a household". Over time, there is no doubt that there has been a shift in the social definition of the family, even if officially not recognised, as the family structure in Egypt has changed and includes families of single parents, biracial couples as well as blended families of biologically unrelated individuals living cooperatively, among others. In spite of this diversity of family forms found in contemporary society, families share common tasks that they must execute together, which also serve to develop patterns and dynamics of interaction. In Egypt, the single parent family prevails for reasons including divorce and migration of the father to work in another country.

Further, the structure and culture of the Egyptian family have gone through tremendous changes in the last three decades at least, with larger economic, social and demographic transformations affecting Egyptian society in addition to the rise in the percentage of educated women. These changes led to the shift from the extended traditional family, for example, to the relatively small nuclear families (Hopkins 2003 and Fouad 2015).
Some of these transformations concern dyadic relations in the family, such as the relations between father and daughter, brother and sister, or wife and husband, while others concern the structure within which these relations take place, such as family living arrangements, marriage patterns and the changing characteristics of marriage and parenthood in the 21st century. These shifts include, but are not limited to, an increasing number of female-headed households and a growing number of newlyweds who live with their parents for an extended period of time (Hopkins 2003), and the rising costs of marriage and increasing divorce rates (Olivia 2008). Yet, social and economic changes affecting the structure of the family in Egypt have not been met with a concomitant readjustment and modification of sexual behaviour and life among youth (El-Tawila 2000).

Such changes in the structure and culture of the family caused concern among many experts in different fields

such as education, media, development, and economics, who gathered in the period between 2012–2013 and issued "The Document of Empowering the Egyptian Family" that was supported by the National Population Council, a government-run agency devoted to social issues, especially those pertaining to the family[10]. The document was meant to shift the discourse around the subject. The drafting committee included experts in social development, psychology, media and religious clerics, and held meetings for two years (Fouad 2014).

The document identified a number of challenges to the family, including a shift in the patriarchal structure of the family due to economic changes, in which women have become income generators and the family is unable to play its role in providing care and protection. It also admitted that there is still a concentration of power and privilege in the hands of parents and precisely the father, as children are expected to practise obedience and loyalty. They are taught these values in the family and then in other institutions involved in the socialization process, such as schools and religious institutions. The document emphasized that the institution of marriage should be based on partnership (ibid. 2014).

In other efforts, the Family Empowerment Declaration adopted by Al-Azhar, NPC and civil society entities, created a sub group in the period between 2011 and 2012 in partnership with UN Women to produce a book in collaboration with Al-Azhar on the progressive interpretations of legislations related to women in Islam[11]. It is important to highlight two points about the draft document. First, it did not refer to new types of family emerging in Egypt, especially the single-parent headed family (either father or mother). Second, the document emphasised the rights of women but avoided any mention of sexual rights and focused basically on their reproductive health and rights.

Institutions and Political Fractions: The Position of the Family

Liberal and Leftist parties, human rights groups and women's rights groups in particular, emphasise the need to change the family laws in Egypt, while the Islamists (here meant the believers in applying Islamic rules in politics) usually believe that family matters are private matters that the state should not regulate unless it was guided by "Islamic Laws".

This usually implies that parents have control over matters related to the body of their children from an early age. During the period of 2012–2013, when the Muslim Brotherhood were highly represented in the parliament and the then-president, Mohamed Morsi, belonged to this political wing, different discussions were raised in parliament to change what was called "Family Laws", which included a set of laws banning FGM/C, regulating the marriage age to 18 years for both young men and women, in addition to divorce and custody laws. This reflected a general understanding by Islamists in Egypt in particular that the family belongs to the private sphere which should not be regulated by legislation of the state, or at least the laws should be compatible with the Muslim Shariah law; keeping the private sphere subject to masculine power (Fouad 2014).

Al-Azhar (the largest Islamic Institution in Egypt) issued a document in 2013 titled "Al-Azhar Document for Egyptian Women's Rights"[12] that stated in its introduction the need for a separation of women's issues from political conflicts. This was in reference to the political conflicts going on in Egypt between the Muslim Brotherhood, the ruling party and other political and social groups in 2012-2013. The Muslim Brotherhood was attempting to change the family laws and some gains made by women on issues related to marriage, divorce and child custody on the basis that the family should be built on authentic Egyptian values. The

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10 The document was also developed with the support of UNICEF; more details can be found in this link http://english.ahram.org.eg/NewsContent/1/64/67250/Egypt/Politics-/Population-council-unveils-media-strategy-for-empo.aspx
11 Available here http://www.npc.gov.eg/images/pdf/%D9%88%D8%AB%D9%8A%D9%82%D8%A9%20%D8%AA%D9%85%D9%83%D9%8A%D9%86%20%D8%A7%D9%84%D8%A7%D8%B3%D8%B1%D8%A9.pdf

12 Document available in Arabic on http://www.josoordev.info/mada/wp-content/uploads/2013/12/%D9%88%D8%AB%D9%8A%D9%82%D8%A9-%D8%A7%D9%84%D8%A3%D8%B2%D9%87%D8%B1-%D8%A8%D8%B9%D8%AF-%D8%A7%D9%84%D8%AA%D8%B9%D8%AF%D9%8A%D9%84-%D9%88%D9%88%D8%B6%D8%B9-%D8%A7%D9%84%D9%85%D9%84%D8%A7%D8%AD%D8%B8%D8%A7%D8%AA-17-%D9%85%D8%A7%D8%B1%D8%B3-2013.doc

other values that the document stated in the introduction included the belief in the equality of the soul, spirit and human dignity and partnership in maintaining responsibility for the universe and reconstruction/continuation of the planet, which it details as fundamental concepts in the relationship of men and women in Islam. The most controversial value stated in the introduction is that legislation related to women should be based on the value of no-harm to all societal members, primarily the children. Though the document was meant to cover the rights of women, in general it gives priority to her role in a specific family structure, neglecting the changes in women's role in the home and public sphere, and their sexual rights and autonomy. For example, the document emphasized the issue of hejab (the prescribed headscarf) as a dress code that is believed to protect women, raised in the context of protecting the body, ensuring her modesty, protecting her from the male gaze, and considered as a mechanism to protect women from different forms of sexual harassment.

In Egypt, with regards to Christianity, followers of the Orthodox Christian Church are expected to respect the discourse of the religious institution, which is in this case entitled, by virtue of a quasi-divine delegation, to interpret and explain sacred texts and the traditions of the forefathers. Having decided to follow the church, they mostly have to agree, without much debate, to what the church deems religiously permissible or impermissible. Monks ultimately have the upper hand in producing gender discourse (and otherwise) in church. At the same time, they are a subject of the discourse and the practices of the institution. Moreover, they can be the key subject of discourse production in their capacity as the tool of sustainability and the machine of re-production of "this discourse". Since one in every ten monks in Egypt becomes a bishop it could be confidently said that monks have the lion's share in producing gender discourse. The discourse and practices of the traditional Egyptian churches (Orthodox and Catholic) on gender issues are built on deepening gender discrimination. As such, they are a tool in the hands of the church to exercise its authority over followers. The authority essentially seeks to reformulate the consciousness of the followers of the church of their bodies as subjects of the dualities of sacred/profane, sex/chasity,

life/death and others (Ramez 2014).

Bodily Integrity

There are two ways to understand bodily integrity. The first is by using the definition of Nussbaum, which is to be secure against violent assault, including sexual assault and domestic violence, having opportunities for sexual satisfaction and for choice in matters of reproduction (Nussbaum 2000). This approach aims at providing a philosophical foundation for basic principles to be respected as the minimum required for human dignity. Bodily integrity is one of them.

The second approach comes from the human rights framework, which is focused on understanding bodily integrity as part of civil and political rights; specifically, the right to life, liberty and security of the person, including the right to not be subjected to torture. A feminist critique to this approach uses the term increasingly to name particular forms of invasive physical violations, including sexual violence and humiliation and interventions to control women's sexual and reproductive lives. This approach exposes wider social and cultural power dynamics and cultural mores that facilitate or hide such abuses (Reilly 2009). Demands for a gendered view of bodily integrity come from the feminist critique of the conservative tendency to naturalize reproduction, sexuality and the family (Correa 1994).

This study would like to affirm the feminist definition of "bodily integrity," that it is the inviolability of the physical body and emphasizes the importance of personal autonomy and the self-determination of human beings over their own bodies. It considers the violation of bodily integrity as an unethical infringement, intrusive and possibly criminal. Women are more often affected in violations of gender-based violence. These include sexual assault, unwanted pregnancy, domestic abuse, and limited access to contraception. Bodily integrity is a right deserved by all women (Minte 2013).

Within this concept, this study tackles two pillars: self-ownership and accountability.

Self-ownership (sovereignty of the individual) is the concept of property in one's own person, expressed as the moral or natural right of a person to have bodily integrity, and be the exclusive controller of his or her own body rather than this right being with the State or any other person (IPPF 2015).

In practice, and within many families in Egypt, sexual ownership has long been tied to the notion of virginity, meaning the honour of the family is preserved as long as their girls stay virgins until marriage. People think any discussion of virginity refers to females. The idea that women lose something, i.e. their virginity during their first experience of vaginal intercourse, is problematic. Firstly, vaginal intercourse is a severely limited description of female sexuality. In a more general sense, "losing something" implies that something is misplaced by force or accident, with the owner lacking control in both cases. The physical act that has defined a woman's loss of virginity is the breaking or tearing of her hymen. In reality, this can occur at any time between birth and death for a variety of reasons, and for some it never occurs regardless of sexual activity. This research seeks to expand the definition of virginity to both males and females, and discuss it within the understanding of body ownership of the individual, not his or her family.

Accountability is the state of being accountable, especially referring to an obligation or willingness to accept responsibility or to account for one's actions by taking personal responsibility and the willingness to both accept the importance of standards that society establishes for individual behaviour and to make strenuous personal efforts to live by those standards. However, personal responsibility also means that when individuals fail to meet expected standards, they do not look around for some factor outside themselves to blame. The demise of personal responsibility occurs when individuals blame their family, their peers, their economic circumstances, or their society for their own failure to meet standards.

The available work in Arabic on "Bodily Integrity" focuses on safety of the body, referring to either physical organs or a mental, and emotional state. Its usage focuses on the necessity of not harming the body with any violent physical action. The term has been used in the context of physical violations of the body due to torture processes especially in prisons in Egypt (Adly 2007 and El Borai 2008).

> **"The feminist definition of "bodily integrity" focusses on the inviolability of the physical body and emphasizes the importance of personal autonomy and the self-determination of human beings over their own bodies."**

Bodily Integrity in Egypt

The above-mentioned approach to bodily integrity in Arabic academic literature in Egypt has rarely engaged with questions as to who can make decisions about the body of a family member. There is a dearth of resources on the issue of bodily integrity in the context of religion. Instead, studies tend to focus on body safety, while never discussing the right to make decisions. Many issues in this literature remain questioned in the Egyptian context, such as the right to consensual sexual relations, the right to choose a certain dress code, or the right to be in public places. It is critical to note the term bodily integrity is never used in the context of discussing SRHR in Egypt[13].

Sexual rights include the right to sexual health, consensual sexual relationships, choice of one's partner, sexual education, to seek information related to sexuality, to be able to choose or not to choose to be sexually active and the right to bodily integrity (EIPR 2013).

It is also worth mentioning that sexual and reproductive health remains contested subjects in the Middle East and North Africa (MENA) region and, for a number of reasons, including conflict over the appropriate role of religion in social policy, exacerbated by the influence of extreme religious movements in some countries (DeJong et al. 2005).

The literature emphasizes that the wider context in which women are discriminated against is linked to their ability to exercise their reproductive and sexual rights. Perhaps most crucially, girls and women are often seen and portrayed in many countries in North Africa and the middle East as the bearers of family honour, which is closely linked to their "virtue" and virginity (Abdel-Halim 2001). Therefore, those women and girls also constitute a threat to the family honour. The pressure and constraints this places on girls and women and their mental health can arguably be demonstrated with reference to "honour killings" and suicides.

El Dawla states that the main causes of suicide among unmarried adolescent girls (aged 14–19) in Egypt and Iran are the loss of virginity and unplanned pregnancies (Douki et al. 2007). For example, female genital mutilation and cutting (FGM/C), which directly impacts women's reproductive, physical and mental health, is one of the most contentious issues relating to women's reproductive and sexual rights in many countries in Africa but is now exceeding the borders to others in Asia, North America and Europe due to the migration factor. FGM/C of any type has been internationally recognised as a harmful practice. It violates several human rights principles, norms and standards, including equality and non-discrimination on the basis of sex, the right to life (when the procedure results in death), and the right to be free from torture or cruel, inhumane or degrading treatment. Efforts to eradicate the practice of FGM/C in Egypt go back to the 1920s and were voiced by Egyptian physicians, religious leaders and intellectuals throughout the twentieth century. These efforts gained momentum during the 1970s and 1980s with a growing number of individuals and NGOs working towards addressing this issue. In 1994 these endeavours were harmonised in a concerted and effective manner with the establishment of the "Egyptian Task Force against FGM/C" (UNFPA 2010).

There are a number of conflicting positions among religious groups, including Al Azhar, on the issue of FGM/C. Advocates of FGM/C invoke religion to encourage the tradition, whilst most Islamic jurists state that it is optional (El Dawla, Abdel-Hadi and Abdel-Wahab, 1998). Opponents of the practice state that FGM/C is a tribal African custom, which pre-dates Islam and is not sanctioned by it (Zaidi et al. 2009).

However, there is a common belief in society that the practice is religiously mandated and is related to the notion that female sexuality is dangerous and must be contained. FGM/C is justified, even when recognized by mothers and family members as a harmful cultural practice, by commonly saying "to contain the sexuality and protect the marriage-ability" of female children in the context of societies where virtue and honour are presented as the most important female traits. Women's bodies are often conceived of as

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13 A report on monitoring data for SRHR published by the Egyptian Initiative for Personal Rights (EIPR), titled "Reclaiming and Redefining Rights in MENA countries" mentions bodily integrity once.

belonging to society and the family, and women are seen as the bearers and reproducers of culture and tradition. In Islam, the collective and the community are emphasized as the centre of moral authority and value (Obermeyer 1995, 371). As a result, "the control of women can come to symbolize the means to cure a whole range of society's political, economic and cultural problems" (Feldman and Clark 1996).

Fundamentalisms often seek to introduce measures to gain control over women's bodies—their dress, their sexuality and their reproductive capacities and choices (Berer and Sundari-Ravindran 1996). Their interpretations limit women's ownership of their own bodies and thus is an obvious barrier to women exercising their sexual and reproductive rights (Amado 2003). The rise of the conservative religious right and a resurgence of fundamentalisms then, and the gaining of political power by such groups, has limited and constrained discussion on sexual and reproductive rights.

Women's rights are often seen as an easy subject for making concessions to religious groups, such as in Egypt in 2005, when an initiative proposed by reformists in the government to legalize abortion in cases of rape, foetal impairment and risk to the physical health of the pregnant woman, was overturned after opposition from Islamists in the Shura Council[14] (Dejong et al. 2005).

Religion and cultural practices are not the only barriers to women exercising their reproductive and sexual rights; a highly pressing problem facing many women is severe poverty and its consequences. Women's access to services is affected by their educational level, marital status and economic resources, as well as an urban/rural divide in the availability of services (Hessini 2007). This also applies to access to knowledge and information; there is a lack of information about what services are available to them, particularly in rural areas where women may lack the resources, such as transport, to travel to a service provider. Not only has declining state provision of services in the

1990s led to worsening socio-economic conditions, it has also had the effect of stimulating the growth of faith-based organizations (FBOs), which developed to fill the gap left by the withdrawal of the state (Speake 2012).

Clearly, In Egypt, Islam as interpreted by different Muslim scholars, jurists, governments and politicians has a diverse effect on the understanding, support and exercise of women's sexuality, while the interpretation of the other main religion in Egypt, which is Christianity, is solely left to the church.

However, Muslim women in Egypt of certain economic and social classes exercise their own agency, choice and interpretations in relation to their reproductive and sexual rights. In making some of these decisions religion is not necessarily their most crucial point of reference, for instance when they make decisions relevant to and compatible with their own lives. The International Reproductive Rights Research Action Group (IRRRAG) spent four years conducting research on women's reproductive and sexual rights from 1992–1998. A team based in Egypt conducted interviews and focus groups in seven locations across the country, in both urban and rural areas. From their research they concluded that while religion and Islamic law may have an effect on the options which are available to the women, religious opinions had little bearing on how women made basic decisions about their everyday lives, including those relating to their reproductive rights (El Dawla, Abdel-Hadi and Abdel-Wahab 1998). Women interviewed often believed that Islam forbids the use of contraception, and yet they continued to use it. Arguably, this serves to highlight the reality that when it comes to women's decisions about fertility and childbearing, their own views of practical necessity supersede either religious belief or patriarchal tradition in guiding their choices, demonstrating that women might often be more pragmatic and less moralistic than current leaders or official theology (Hessini 2007). However, these findings are context specific and dependent on the extent of empowerment that women have in order to help them exercise this level of agency, including in relation to their reproductive rights.

14 The Shura Council is the upper house of the formerly bicameral Parliament of Egypt. Its name roughly translates into English as "the Consultative Council". The lower house of parliament is the House of Representatives. This council was abolished by the 2014 constitution.

3. UNDERSTANDING THE INTERLINKAGES

The main findings are elaborated in this section answering the two main questions of the study:

First: How do families use religious arguments, either Islamic or Christian, to justify control over the bodies of young men and women and affect their understanding of their SRHR?

Several questions were asked by the research team in addition to discussing open statements to list arguments used by the family (mainly parents and grandparents) to shape the relationship between the individual and their bodies and sexuality. Here, it is important to clarify that in Arabic what is referred to as "inappropriate" has a different connotation than "haram" (forbidden.) The first is usually understood in the context of what is accepted or not accepted by the society and prevailing culture while the other term is in relation to what is not accepted religiously.

As indicated by many young women, the two terms might be used interchangeably depending on the situation and how powerful the term "haram" is in certain situations, as in cases of deciding what to wear and the parts of the body to cover, such as hair and arms, for example. Most of participants in the focus group of young women confirmed that the term "inappropriate" is used extensively by their families, depending on the context. For example, families could disregard certain dress codes if there is a family event as a wedding allowing their daughters to unveil for example in order to look marriageable. In other instances, they would refuse the same behaviour if the wedding takes place outside big cities, as girls would be exposed to a wider group of men.

As for young men, many said that religious texts, especially hadith (the teachings of the Prophet), were widely used to control how a family individual deals with her/his body. For example, as explained in interviews with both men and women, the well-known hadith[15] stating "those

who act as women" was frequently used by parents and teachers in schools, to degrade any actions that deemed non-masculine, such as crying or laughing in a high voice. A female participant in the FGD said the same hadith was repeated by her parents when she wore clothes that they considered were for boys or played certain sports that society labelled as men's games. Another male interviewee mentioned masturbation, and how he asked many religious men about its practice, and they all said it is "haram", trying to give the justification that it affects health, specifically eye-sight. Young women and young men from the research agreed that when they grew up and read and explored more, they realized that "Haram" or "God says" are used by their families to control their knowledge about sexual desires and behaviours.

Young women explained that they did not have ownership over their bodies till a later age. They expressed that control came from many directions and was constant, which plays out through a number of individuals such as parents, teachers, immediate and extended relatives, community members, the police and more. Accordingly, these young women believed everyone has the right to dictate how they should behave without having reasons or explanation for adopting certain behaviours or attitudes:

 "I live in Cairo but my family originally lived in another city north of Cairo. Growing up I deliberately avoided family gatherings because my mother spoke all the time about my veiling, getting married earlier than my cousins, or getting my period. There were my mother's favourite subjects of discussion. This made me the subject of mockery of family members my age. While growing up, I never felt that my body belonged to me."

Female FDG respondent, living in Cairo, 25 years

In the same group, a young girl of her age commented that even cutting her hair short was a point of discussion between her elder and younger sisters. She felt her choice of playing sports or walking in a certain way would subject her to their endless questions about her sexual orientation.

 "They associate short hair with becoming a lesbian, which

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15 For English translation of Hadith: https://www.sunnah.com/urn/55220

is not acceptable for them."

<div align="right">Female FDG respondent, 25 years</div>

Many young men and women emphasised that at an early age it is the family, but gradually and as they grow older, the government also enters the picture and continues to control their bodies through laws, along with controls placed by the family. Participants noted that the government only controls but it does not provide services including accounting for service provision in a rights-based manner.

"I feel everyone including my elder brother and my colleagues at work control my life through every minor comment they make about my body."

<div align="right">Male respondent, 24 years</div>

Another young man said that his father prevented him from an operation to correct a problem with his eyesight because it was "haram", which he felt was a form of control over his body and his bodily decisions though he was in his twenties. This signifies the lack of consent in decision making with regards to wellbeing of the body when it relates to young people and the continuation of this control for young people who are considered adults in legal terms. This could signify that parents believe the nature of control over their children does not ease and religion is used to justify these controls in an ad hoc and abstract manner, based on convenience.

This is further illustrated with respect to self-ownership, when families emphasise parental ownership of the bodies of young men and women through different means, including using the concept of "haram", especially towards young women.

In this research, young men and women participants explained that they never thought of themselves as the owner of their own bodies. With young women, there were numerous responses that mothers guided their decisions about their bodies. This is especially the case for young women below 25 years, whose mothers, for example, usually decided on behalf of their daughters when to wear the veil covering their hair. A young respondent in the female FGD confirmed that her mother always wanted her to marry at an early age, as early as 19 years, regardless of what she herself wanted.

In the online survey, most of the answers from female respondents with respect to the question, "What are the comments you remember from your family about your body?" indicated that family members felt that keeping certain body parts uncovered would be sinful.

There was a widespread lack of a sense of ownership of their bodies among participants, meaning the feeling of owning the body was not common among participants or respondents.

"I feel everyone would punish me if I act independently or not according to social norms."

<div align="right">Male respondent, 24 years</div>

"I feel my body belongs to someone else, it is a gift and we should maintain it. But I am well-educated and well-off financially to know what is best for myself. Yet, the religious institution of the church and the priest has priority over the family or the individual because they are the representatives of God on earth."

<div align="right">Christian male respondent, 22 years</div>

"Women in my family, such as my mother and my aunts, where happy and celebrated when I first menstruated."

<div align="right">Female FGD respondent, 22 years</div>

There are also notions of parents not believing reasons provided by young people when they behave in ways or have aspirations that are counter to theirs. These are considered as grounds for investigating unacceptable behaviour.

"My family doesn't understand the reasons I do not want to get married, they think I had pre-marital sexual relationships so they applied virginity tests on me."

<div align="right">Female respondent, 23 years</div>

Many respondents confirmed that "the right to my body" requires that "I take good care of it", which meant healthy nutrition and sport practices.

Through the focus groups, in-depth interviews and the verification sessions, it became evident that the information received about the body and its changes and development

do not come from the immediate or extended family. For example a female participant said that her mother did not explain to her what was happening when she first menstruated at 13 years old. Being young and ashamed of the bleeding, she had to look up information about this online, in the middle of the night, fearing that her father or brother would catch her. She was told not to tell them she has her period. She felt that having a monthly menstruation is inappropriate and if she can't tell people about it then it must be something socially unacceptable or even "Haram".

Another participant said that in her family they were not happy when she had her first period and asked her to "hide" it. These young people did not receive any guidance or instructions about the effect of menstruation and the changes their bodies were going through. All young women in the same group confirmed that, for them this was the end of "playing with boys".

In the female FGDs, the issue of being molested by a family member was raised and many participants confirmed that the practice in all families was "do not tell but do not play with this uncle or relative", which led many of them to be further sexually assaulted. Yet, the strategy was always "never tell". They always ended up with feeling that "it was our fault".

Important information about body, sexual needs, pleasure and sexuality in general is rarely discussed, and is a way of controlling the sexualities of the family members, leaving them to receive information from unverified sources such as unverified online sources. Such control is justified usually by verses from holy books (Qur'an or Bible), situating the knowledge of these issues in this regard as a source of sins. However, most of the participants in the FGD and in the interviews could not recall those verses exactly. The conflicting views about what is religious (when it comes to issues as dress code for example,) create a lot of confusion. Some respondents in the surveys and participants in the FGDs wanted to satisfy everyone, including family, teachers and perhaps the whole society, resulting in a deep feeling of confusion, shame and frustration.

"How I perceive my body and how I deal with it comes from my family", was a sharp sentence by a participant of a focus group of young women when the question about what affected or shaped the perceptions of the body, was asked. The participant's statement was in reference to comments from her mother about gaining weight, losing weight, and the size of certain parts of her body.

Moreover, veiling and dress codes all came from the family for research participants, all of whom said that this is to adhere to societal norms and practices. A young woman stated that her family members always indicated that her body is seductive so she should cover it.

Continuous comments on body size, such as being very fat, very thin, tall or short, were some negative descriptions reported by participants, in addition to comments on facial features, such as the nose or mouth. All such comments affected the participant's perceptions about the body and relationships, especially marriage.
"I am short, this affects finding a female partner and also my opportunities to get married."

Male respondent, 21 years

The connection between body size and marriage opportunities for women was always the concern of mothers. Such maternal concerns pushed many young women who participated in the FGDs or replied to the online questionnaire to go through severe dietary programmes or to ignore the comments of "being fat" echoed all the time. Young men received similar comments, as indicted by a 22-year-old man who made the comment that he was fat and how this was "not good", affecting his perception about his body.

The issue of body-size for women, how they looked like "men", or how young men who dress in certain colours or in certain clothing items look like women was also raised. Parents always quoted the hadith "God will damn men who would dress like women or women who would dress like men." Parents always used these lines when suspecting the sexual orientations of their sons or daughters.

In conclusion, the religious discourse is usually mixed with what is socially accepted and both are used to control the body and restrict ownership over it, introducing limited information on sexuality. Religion is used in order to police young people and their behaviour, especially young women. Young people are also instilled with fear in order to control their behaviour and coerced into acting in a socially acceptable manner. Issues of consent appear to be given limited consideration in relation to decisions that affect young people and their bodies and these decisions are made by a number of actors including the state.

Second: How can young men and women within the family reclaim the ownership of their bodies and hold families accountable to any violations?

In general, the education system in Egypt rarely provides the opportunity or the space to discuss "What are rights? How do we claim them and how do we protect them?" Young men and women looking to learn about these issues instead seek workshops by organizations working in the field of human rights.

An important change occurs when young women and men join sessions and workshops conducted by human rights organizations. The discussion about rights, even if it does not tackle SHRH, opens a serious debate between young men and women about their sexual rights and health and how it affects their bodies and relationship with their families.
Rights education challenges not only the prevailing misconception but also the false explanation of religious texts and encourages participants to think about what they were told by family and by society in general.

Two out of 28 answers to the online survey and three out of 15 participants in the focus group, claimed that they have the ability to discuss sexual desires and behaviours with their families. A young man said that his mother is the only family member whom he can confide in. On the online survey, the respondents' comments varied between

differences in values and beliefs, that "sex" is haram, that families do not understand their life choices and sexual orientation or that the respondent would be embarrassed to discuss this with families. This result is not unusual taking into consideration the results from the latest Survey of Young People in Egypt (Roushdy and Sieverding 2014) that looked at the discussion of puberty by young men and women with parents. The results from SYPE reveal that just over one-third of the sample (34.2%) had talked with a parent about puberty. More than twice as many female respondents (47.5%) than male respondents (21.6%) had spoken with a family member about puberty. There were also substantial differences by education; 27.9 per cent of illiterate respondents indicated that they had spoken with a family member about puberty, compared to 40.7 per cent of those respondents who had a university education (Roushdy and Sieverding 2014).

The lack of discussion inside the family and the fear that the society "will know about me" was a common feedback from many participants in the focus group of women and the reflection meetings. Young women who used to openly discuss things said that their openness was used against them so they eventually stopped talking to their family members.

When FGD participants and interviewees were asked about the sources of information on the body and sexuality, most answered that it is from friends. However, with the wide usage of the Internet, many indicated they obtained information from searching online.

In the focus groups with young women and in the interviews with men respondents indicated that they do not practice sex or seek information about it till the time of marriage, though this was indicated by a small number of participants (two participants). When discussions arise with parents about sexual desires (if allowed) 60 per cent of the sample (online survey and FGDs participants both male and female) indicated being told by their parents or teachers that masturbation was "haram" and that God will punish those who practice it. No further explanation was given and they were always asked to divert their attention from their

sexual desires by playing sports (for boys) and by praying and reading Qur'an for girls so God will stop such feelings.

In the case of young men, the inability to be open would lead them to lead double lives, meaning that the person would share certain aspects of his life with his or her family while practising a different one with a different identity while with his friends for example or relatives he trusts. In this life he could be free from all family restrictions, avoid their control of his lives and have a space for himself to think and reflect on what he was told all his life about his body.

As articulated by one young man, *"I have two Facebook profiles, one for family and colleagues where I give them the image they want about me, and the other is for my friends who know about my sexual interests."*

Partaking sports, especially for young women, is always a way to challenge certain perspectives and young men, especially of Islamic belief, are encouraged to practice as prophet Mohamed encouraged parents to teach their children "swimming, shooting and horse riding." Sports practices, according to a female FGD participant, was her way to challenge how she treats her body. There was always a discussion in her family about how she cut her hair, when she would wear the veil in order to stop practising sports as her sisters saw it harmful to her body and different other discussions. For her it was a way to challenge "what is expected".

A young man stated that he has to control even how to wave his hands so he is not judged as feminine and can find a job. He explained that he might lose a potential job if he was perceived as acting feminine in the interview, and considered behaving "unacceptably". Such control, he assumed, he has to perform in order to be behaving acceptably as a "man", so he hides his hands in any job interviews to behave as expected of a young man.

When the participants were asked to give their opinions about how to change things, many emphasized the right of young men and women to privacy and that their lives should not be discussed openly and "fatwas" should not

be asked from religious men by their families on how they should pursue their daily lives, as some families do.

While other participants believed that nothing will be changed and the strategy of "Do not tell" should always be applied, many young men and women said they should pursue their sexual lives without telling their parents or family members. Their parents believe that they "own" their bodies and will not let their children explore anything. A young woman said *"I do not want to hurt them so it is better that they did not know about my sexual life, even if we live in the same house."* A participant in the female FGDs reflected, *"If they know the details of my life this might lead to verbal and physical violence so I better not to tell."*

An interesting finding of the research has been the hierarchy within the family, where older siblings practise an authority over their younger siblings and this is usually religiously justified as "respecting the elder". In some cases that reflect clear patriarchal impositions, male siblings practised severe control over their sisters, especially on how to dress and who to befriend.

"Religion and cultural practices are not the only barriers to women exercising their reproductive and sexual rights; a highly pressing problem facing many women is severe poverty and its consequences."

4.   CONCLUSIONS

The research looked at the integrity of the body within the family system in Egypt and specifically at how the body is controlled within such system using justifications drawn from religious texts.

From the field research the team could conclude that the family practices heavy control over the bodies of daughters and sons, including harmful practices such as virginity tests, early marriages and FGM/C for daughters. Some of these practices are justified religiously, especially in the context of keeping the "honour" of the family or preserving the chastity of girls. In cases of boys, practices include forcing them to play certain types of sports so the child will grow up to be a "man". Meanwhile, the family does not hold itself accountable for these harmful approaches, despite the negative effects on the physical and mental wellness of the sons and daughters.

The only measure that the participants agreed on to enforce accountability was seeking legal support. Unfortunately, it was admitted by many participants in the FGD and the interviews that they do not know of the existence of such laws or how to proceed. They also said that they would feel shame in reporting parents to law enforcement institutions.

To conclude, the research highlights the importance of challenging the traditional patriarchal family system that can manipulate religion and societal norms to justify control. Future and soon to be mothers and fathers should be educated to help their children lead a healthy life without enforcing fundamental discourses on them that could lead the children to adopt a double life, where they behave on the one hand according to known social and religious norms and on the other hand as freely as possible conforming with their sexual identities.

Moreover, sex education and awareness about existing laws and policies should be offered, starting in school, as the answers from participants in the data collection revealed that they do not know what laws affect their lives positively or negatively.

The young women and men interviewed failed to a large extent to identify the difference between that which is "haram" and that which is "socially acceptable", adding to their confusion when dealing with their bodies. Families do not afford space for discussion and do not provide any learning opportunities. It is usually one sided, giving orders to the other or guidelines on what to do or not to do when it comes to the body, such as telling the girls to hide when menstruating or preventing them from playing sports as it is "harmful" for them.

5. RECOMMENDATIONS

The following recommendations are based on the findings and analysis presented:

Recommendation to the Government

•In order for young men and women to practice healthy sexual lives, comprehensive sex education should be provided at an early age from reliable sources and preferably in schools. This curriculum should also contain information about existing laws and policies.
•It is important to raise the discussion in different education curricula within the suggested curriculum about "family formulation" and how it should support its young members by giving them space to claim ownership of their bodies.
•Family members, especially parents, should be held accountable, through legal but also societal mechanisms, for any bodily violations of their children. The government should provide such mechanisms to ensure healthy family relations.

Recommendations for Ikhtyar's future work

•Continue working and expanding the current advocacy work to mainstream the discussion about the effects of religious fundamentalisms on families and support SRHR advocates in their efforts by providing information and knowledge. This will help the advocacy efforts of different women's rights and gender equality groups complement each other and see that child marriage, FGM/C, sex education and many other issues and subjects are interlinked in the discussions.
•Work to open up discussions and provide different channels to discuss the negative effects of not providing knowledge on sex behaviours and sexuality. This can take different formats such as anonymous writings, art and storytelling performances.

Recommendations to Civil Society Organizations

•The research team recommends that the different CSOs in Egypt in the field of SRHR collect and analyse a wider spectrum of views and data to frame a strategy to confront the traditional understanding of "family" and its effect on the "independence" of the body of a family member.
•The strategy that will be developed by the CSOs should emphasize that the changes in the family structures should be considered and a rights-based framework should be a reference to this strategy.

6.   LIST OF REFERENCES

English References

Aboul Ela, Magda. 2012. Between Family and Market: The decline of professional employment among Egyptian female university graduates. MA Thesis. American University of Cairo. Egypt.

Abu-Odeh, L. 2004. "Modernizing the Muslim Family Law: The case of Egypt." The Scholarly Commons. Accessed June 20, 2016. http://scholarship.law.georgetown.edu/facpub/38/.

Amado, L. 2003. "Sexual and Bodily Rights as Human Rights in The Middle East and North Africa." Workshop Report. Istanbul, Turkey. Women for Women's Human Rights –New Ways.

Amin, G. 2014. "Two Revolutions and an Economy". AUC Business Review. Accessed June 20, 2016. http://schools.aucegypt.edu/Business/ABR/Pages/Two-Revolutions-and-An-Economy.aspx.

Anderson, S. A. and Sabatelli, R. M. 2011. Family Interaction: A Multigenerational Developmental Perspective. Pearson. Boston.

Aswat, Masriya. 2015. "Egypt appoints 8 new cabinet ministers, replaces Interior Minister." Aswat Masriya. 5 March 2015. Accessed 12 October 2016. http://en.aswatmasriya.com/news/details/10313

Bahgat, H. and Afifi, W. 2007. "Egypt – Sexuality Politics' in Egypt." Sex Politics: Reports from the Front Lines. pp 53-91. Accessed 12 October 2016. http://sxpolitics.org/frontlines/book/pdf/sexpolitics.pdf

Bar-Yam, Yaneer. 2011. Concepts: System Perspective. Accessed 22 November 2016. http://www.necsi.edu/guide/concepts/system_perspective.html

Berer, M., Sundari-Ravindran, T.K., 1996. "Fundamentalism, Women's Empowerment and Reproductive Rights" Reproductive Health Matters. Vol. 4 (8). London. UK.

Bourdieu, P. 1996. On the Family as a Realized Category. Theory, Culture and Society. SAGE. London, Thousand Oaks & New Delhi, Vol. 13(3):19-26.

Correa, S. and Reichmann, R. 1994, Population and reproductive rights: Feminist perspectives from the South. Zed Books. New Delhi.

DeJong, J., Jawad, R., Mortagy, I., Shepard, B. 2005. "The Sexual and Reproductive Health of Young People in the Arab Countries and Iran." Reproductive Health Matters. Vol.13 (25). London, UK.

Douki, S., Zineb, B., Nacef, F., and Halbreich, U. 2007. "Women's mental health in the Muslim world: Cultural, religious and social issues." Journal of Affective Disorders. Vol.102 (1). International Society for Affective Disorders/Elsevier.

EIPR. 2013. Reclaiming and Redefining Rights. Civil Liberties Program First edition. Egyptian Initiative for Personal Rights. September 2013. Accessed 12 September 2016. http://www.wluml.org/sites/wluml.org/files/report_-_reclaiming_and_redefining_rights.pdf

EIPR. 2013. "Sexuality Education in Egypt: A Needs Assessment for a Comprehensive Program for Youth."

El-Rifae, Y 2013. "Sexual assaults and women fighting for bodily integrity in Egypt." Middle East Monitor. Accessed 12 September 2016. http://www.mei.edu/content/women-fight-bodily-integrity-egypt.

El Dawla, S., Aida, Amal Abdel Hadi, Nadia Abdel Wahab. 1998. "Trade-offs and Strategic Accommodations in Egyptian Women's Reproductive Lives." In Negotiating Reproductive Rights. Women's Perspectives Across Countries and Cultures, edited by Rosalind P. Petchesky and Karen Judd, 69-107. London and New York: Zed Books.

El-Tawila, S. 2000. The School Environment in Egypt: A Situation Analysis of Public Preparatory Schools. Population Council. Cairo.

Erturk, Yakin 2009. 15 Years of the United Nations Special Rapporteur on Violence against Women, Its Causes and Consequences (1994–2009) – A Critical Review. Geneva: OHCHR. Accessed 12 September 2016. http://www2.ohchr.org/english/issues/women/rapporteur/docs/-15YearReviewofVAWMandate.pdf

Feldman, R., Clark, K. 1996. "Women, Religious Fundamentalism and Reproductive Rights." Reproductive Health Matters. Vol.4 (8). London, UK.

Fouad, V. 2015. "The Family as a Building Unit for either Political Authoritarianism or a Democratic Society." Gender Discourse. Edited by M Yousry. GIZ and NWRO, Cairo. 111-133.

Hopkins, N. 2003. "The New Arab Family." Cairo Papers in the Social Sciences, Vol. 24, no. 1-2, pp 62-79. American University in Cairo, Cairo.

Hoodfar, Homa. 1997. Between Marriage and the Market: Intimate Politics of Survival in Cairo. University of California Press. California.

Hussein, Sayed. 2011. Egypt's Population Policies and Organizational Framework. Social Research Centre (SRC) of the American University in Cairo (AUC) and United Nations Population Fund (UNFPA). Accessed 22 November 2016.

http://schools.aucegypt.edu/research/src/Documents/population_conf/Studies_new/Paper%20Hussein%20Egypt%20s%20Population%20Policies%20And%20Organizational%20Framework.pdf

Hessini, L. 2007. "Abortion and Islam: Policies and Practice in the Middle East and North Africa." Reproductive Health Matters. Vol.15 (29). London, UK.

Hessini, L., 2008. "Islam and Abortion: The Diversity of Discourses and Practices." IDS Bulletin. Vol.39 (3). Sussex, UK.

Hosseini, Ziba and Vanja Hamzi . 2010. "Control and Sexuality The Revival of Zina Laws in Muslim Contexts." Women Living Under Muslim Laws.

IPPF. 2012. "Sexual and Reproductive Health and Rights: Terminology Guide." International Planned Parenthood Federation (IPPF) South Asia Regional Office, December 2012. Accessed 23 November 2016. http://www.ippfsar.org/sites/ippfsaro/Resources_Publication/SRHR%20Terminology_Guide%20FINAL.pdf

Institute of Development Studies 2011. "Empowerment: A journey not a destination." Accessed 12 September 2016. https://www.ids.ac.uk/files/dmfile/SynthesisReport12DecR.pdf.

Joseph, S. 1999. "Intimate selving in Arab families: gender, self and identity." Syracuse, N. Y. Syracuse University Press.

Kalupner, S. 2008. "The human right of bodily integrity and the challenge of intercultural dialogue."

Mada for Media Development and National Council for Population. Undated. Egyptian Family Empowerment Declaration. Accessed 12 September 2016. http://www.npc.gov.eg/images/pdf/%D9%88%D8%AB%D9%8A%D9%82%D8%A9%20%D8%AA%D9%85%D9%83%D9%8A%D9%86%20%D8%A7%D9%84%D8%A7%D8%B3%D8%B1%D8%A9.pdf

Mensch, B., Ibrahim B., Lee, S. and El-Gibaly. 2000.

Socialization to Gender roles and Marriage among Egyptian Adolescents. Population Association of America, Los Angles, USA.

Metz, HC (ed.) 1990, Egypt: A Country Study, GPO for the Library of Congress, Washington. Accessed 12 September 2016. http://countrystudies.us/egypt/

Miller, RA 2007. The limits of bodily integrity; abortion, adultery and rape legislation in comparative perspective. Taylor & Francis Ltd, United Kingdom.

Minte, GA 2013. "Conservative Backlashes to Women's Bodily Integrity in Latin America; the Cases of Mexico and Chile." Western State Colorado University. Accessed 12 September 2016. https://www.uea.ac.uk/documents/425303/4065543/Minte,%20Gabriela+Alvarez.pdf/51b65f5d-c407-4687-a5a5-4eed2522cd22.

Morgaine, C. Undated. The family systems. Accessed 12 September 2016. http://web.pdx.edu/~cbcm/CFS410U/FamilySystemsTheory.pdf

Nussbaum, M. 2000. "Women's capabilities and social justice." Journal of Human Development Vol. 1, no. 2, pp 219-247. Accessed 12 September 2016. http://philosophy.uchicago.edu/faculty/files/nussbaum/Women's%20Capabilities%20and%20Social%20Justice.pdf.

Olivia, S. 2008. "Let's talk about sex, divorce in Egypt." CNN.

The Population Council. 2010. Survey of Young People in Egypt. Final Report. Population Council West Asia and North Africa. January 2011. Access 21 November 2016. http://www.popcouncil.org/uploads/pdfs/2010PGY_SYPEFinalReport.pdf

Roushdy R and Maia Sieverding. 2014. Panel Survey of young people in Egypt. Accessed 12 September 2016. http://egypt.unfpa.org/sites/arabstates/files/pub-pdf/6be3baf2-61e3-4de4-bc9b-221f5180cd18.pdf

Ramez, Y. 2014. "The Body as a subject of Religious Authority." Gender Discourse, edited by M Yousry, GIZ and NWRO, Cairo, pp 57-91.

EIPR. 2013. Reclaiming and Redefining Rights: Status of Sexual and Reproductive Health and Rights in the Middle East and North Africa. Egyptian Initiative for Personal Rights. Accessed 12 September 2016. http://eipr.org/sites/default/files/pressreleases/pdf/report_-_reclaiming_and_redefining_rights.pdf

Reilly, N. 2009. "Women's Human Rights." Polity. United Kingdom.

Singerman, Diane. 2008. Marriage and Divorce in Egypt: Financial Costs and Political Struggles in Le mariage en Moyen-Orient, edited by Barbara Drieskens. IFPOCHE, Institut Français du Proche Orient, Beirut.

Singerman, D. and Hoodfar, H. 1996. "Development, Change and Gender in Cairo: A View from the Household." Indiana University Press.

Speake, Beth. 2012. Islam and Women's Reproductive and Sexual Rights in the MENA Region. Accessed 12 September 2016. http://www.e-ir.info/2012/09/11/islam-and-womens-reproductive-and-sexual-rights-in-the-mena-region/

UNFPA. Undated. Population Matters: Egypt. Accessed 12 October 2016. http://egypt.unfpa.org/topics/population-matters

UNFPA 2010. "Female Genital Mutilation/ Cutting." Demographic Household Survey Brochures. Accessed 12 September 2016. http://egypt.unfpa.org/publications/female-genital-mutilation-cutting-demographic-household-survey-brochures#sthash.B4EnnjdX.dpuf

UNICEF 2010. The Dynamics of social change: Towards the abandonment of female genital mutilation/cutting in five African countries. Accessed 17 December 2016 https://www.unicef-irc.org/publications/pdf/fgm_insight_eng.pdf

Wahba, Mamdouh and Roudi-Fahimi Farzaneh. 2012.

"The need for reproductive health education in Egypt." Population Reference Bureau. Accessed 22 November 2016. http://www.prb.org/pdf12/reproductivehealth-education-egypt.pdf

Winter, C. 2001. Family Systems Theory. Accessed 17 December 2016 http://web.pdx.edu/~cbcm/CFS410U/FamilySystemsTheory.pdf.

World Bank. 2016. World Bank Open Data. Accessed 22 November 2016. http://data.worldbank.org/

Zaidi, S., Ramarjan, A., Qui, R., Raucher, M., Chadwick, R., Nossier, A. 2009. "Sexual rights and gender roles in a religious context." International Journal of Gynecology and Obstetrics. Vol.106.

Arabic References

Magda, Adly. 2007. The right to body safety. Cairo Centre for Human Rights. Egypt

Negad El Borai. Undated. The right to body safety between Sahria'a, Constitution, Law, Judiciary and International Conventions.

Essam Mohamed Ahmed. 2010. The general theory of body safety. Dar El Fikr El gamayee

د.عصام محمد أحمد، النظريه العامه في سلامه الجسد

7.   APPENDICES

Appendix I: Sample Profile:

	Type of tool	Sex	Age	Place of living	Income
1	Focus Group Discusions	Females only	20-29 years	Cairo	Each respondent has an independent source of income
2	Interviews	10 in-depth interviews with males	20-29 years	Cairo	Each respondent has an independent source of income
3	Interviews	5 in-depth inerviews with females	20-29 years	Cairo	Each respondent has an independent source of income
4	Online survey	28 respondents 55.5% female, 33.3% male	25 respondnts in the age range of 20-29 years	59% lives in Cairo, 18.5% in Giza	

Appendix II. Glossary:

Bodily integrity
is the inviolability of the physical body and emphasizes the importance of personal autonomy and the self-determination of human beings over their own bodies. It considers the violation of bodily integrity as an unethical infringement, intrusive, and possibly criminal.

Conservatism
is a political and social philosophy that promotes retaining traditional social institutions.

Culture
is a cumulative deposit of knowledge, experience, beliefs, values, attitudes, meanings, hierarchies, religion, notions of time, roles, spatial relations, concepts of the universe, and material objects and possessions acquired by a group of people in the course of generations through individual and group striving.

Religious Fundamentalism
Fundamentalism is the demand for a strict adherence to orthodox theological doctrines, usually understood as a reaction to modernist theology.

Sexual and Reproductive Health and Rights (SRHR)
The term "sexual and reproductive health and rights" (SRHR) was explored nearly 20 years ago at the Cairo International Conference on Population and Development (ICPD) and the 1995 Fourth World Conference on Women (FWCW) held in Beijing. Building on the World Health Organization's (WHO) definition of health, the Cairo Programme defines reproductive health as: "A state of complete physical, mental and social well-being and ... not merely the absence of disease or infirmity, in all matters relating to the reproductive system and to its functions and processes. Reproductive health therefore implies that people are able to have a satisfying and safe sex life and that they have the capability to reproduce and the freedom to decide if, when and how often to do so. Implicit in this last condition is the right of men and women to be informed and to have access to safe, effective, affordable and acceptable methods of family planning of their choice, as well as other methods of their choice for the regulation of fertility which are not against the law, and the right of access to appropriate health-care services that will enable women to go safely through pregnancy and childbirth and provide couples with the best chance of having a healthy infant (para 72)."

Appendix III: FGDs Guidelines

Questions were rephrased according to the context and they were:

1. Who owns the body within the family system?

2. What is the relationship between the concept of a body's integrity and the transfer of ownership of the body (?) within the family system?

3. Is ownership only triggered by religion; if not, what are the other triggers and how is religion used to help those triggers?

4. How does the ownership transfer?

5. Are there any responsibilities that come along with the transfer of body ownership?

6. In what way is the ownership of your body trusted to certain family members and according to what conditions?

7. What is the relationship between privilege (Money, Race, Power etc.) and transfer of ownership?

8. Is ownership considered a privilege or is it a burden?

9. Is the concept of protection related in anyway to body ownership?

10. Is there any relationship between violence and ownership? How is ownership related to domestic violence, harassment and abuse?

11. Is the ownership transferred from the family system to different individuals within public spaces?

12. How is ownership transferred in public spaces and according to what factors?

13. Does it affect the segmentation of public spaces by anyway?

14. Is there a relationship between body ownership and gender-based violence in public spaces? What are the relationships?

15. How do the government and the laws see body ownership?

ARROW is a regional and non-profit women's NGO based in Kuala Lumpur, Malaysia, and has consultative status with the Economic and Social Council of the United Nations. Since it was established in 1993, it has been working to advance women's health, affirmative sexuality and rights, and to empower women through information and knowledge, evidence generation, advocacy, capacity building, partnership building and organisational development.

Ikhtyar, meaning "Choice" in Arabic, specializes in building feminist knowledge through conducting research and studies in the field of gender and sexuality, holding studying seminars and reading groups, and creating online platforms for discussion and exchange. Our work focuses on stimulating critical thinking and creativity around varying topics related to gender studies through the creation of a knowledge hub that produces research and studies. Our work around SRHR seeks to understand the body and how it is frequently used as an arena of control by political, economic and social systems under many justifications, such as conservatism or religious fundamentalism.

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