Birth control in context: A case study of urban Egyptian women

Farida Ezzat

Follow this and additional works at: https://fount.aucegypt.edu/etds

Recommended Citation

APA Citation

MLA Citation

This Master's Thesis is brought to you for free and open access by the Student Research at AUC Knowledge Fountain. It has been accepted for inclusion in Theses and Dissertations by an authorized administrator of AUC Knowledge Fountain. For more information, please contact thesisadmin@aucegypt.edu.
The American University in Cairo
School of Global Affairs and Public Studies

BIRTH CONTROL IN CONTEXT:
A CASE STUDY OF URBAN EGYPTIAN WOMEN

A Thesis Submitted to
The Middle East Studies Center

in partial fulfillment of the requirements for the of Master of Arts

by Farida Ezzat

Under the supervision of Dr. Martina Rieker

April 2016
For Souraya and Moustafa
Acknowledgements

I would like to start by thanking Dr. Martina Rieker for her passion for teaching and her constant support and encouragement. Her humility, commitment, and integrity both within and beyond the classroom have certainly marked me. I would also like to thank my readers, Dr. Gamblin and Dr. Sholkamy, for their constructive feedback. A big thank you to Norhan who has helped me pull through with a smile during those unforgettable times. Thank you to Radwa for your tremendous help. And finally, thank you to my family for believing in me, to my husband for motivating me, and to Fadila for her endless support even when I did not deserve it.
Abstract

Contraceptive choices, as a reflection of agency, inform us about various ways individual women seek particular forms of empowerment, in light of socio-economic, affective, and gender-based constraints. Ultimately, this serves to challenge inflexible conceptualizations of the status of women by calling into question the claim that patriarchy is unequivocally coercive and that women are inescapably disempowered and providing new avenues from where we may begin to rethink female agency and empowerment.
# TABLE OF CONTENTS

## CHAPTER 1: INTRODUCTION

- Research Question ................................................................. 8
- Background and Context .......................................................... 10
- Literature Review ....................................................................... 12
- Conceptual Framework ............................................................ 18
- Methodology and Ethical Concerns ............................................ 23
- Chapter Outline ........................................................................ 27

## CHAPTER 2: TOPOGRAPHY .......................................................... 29

- Modern and Traditional: Families in Transition? ...................... 31
- Education and Work ................................................................. 35
- Views on Marriage and Childbearing ........................................ 40
- Conclusion ................................................................................ 47

## CHAPTER 3: BENDING BODIES .................................................... 48

- Unrequited Pleasure ................................................................. 51
- Health ..................................................................................... 54
- Violence ................................................................................... 59
- Exceptions ............................................................................... 62
- Conclusion .............................................................................. 64

## CHAPTER 4: RESISTANCE .......................................................... 67

- Blurred Boundaries ................................................................... 69
- Preclusion and Permission: Forging Networks of Trust ............. 74
  - Husbands ............................................................................... 74
  - Fellow Women ....................................................................... 76
- Conclusion ............................................................................... 81

## CHAPTER 5: CONCLUSION .......................................................... 82

## BIBLIOGRAPHY .......................................................................... 85
CHAPTER I
Introduction

In line with an enduring Orientalist and Eurocentric tradition, women of developing countries have often been reduced to normative clichés and congealed in unbefitting molds in academia and beyond (Abu Lughod 2009). For instance, international and local development agencies routinely refer to “Third World women” (Lindio-McGovern and Wallimann 2009), a conceptual group that has been contested as reductionist, misleading, and homogenizing (Mohanty 1984). The pervasiveness of such generalizations is such that attempts to debunk them has paradoxically been construed as an implicit acknowledgment of these narratives as dominant and nearly inescapable. A rationale that is reminiscent of Hardt and Negri’s Empire (2000) where we are confronted with an entity “that imposes procedures of continual contractualization […] ; a machine that creates a continuous call for authority” (14).

Nonetheless, it is necessary to dispel such misconceptions particularly since the latter impact policy, influence development agendas, and direct aid money (Bastow, Tinkler and Dunleavy 2014).

A domain where the impact of Eurocentric reasoning, and frequently contingent development policies (with some exceptions), has been visible is that of family planning. Lower-income Egyptian women, a considerably smaller albeit also diverse group which falls under the category of Third World women, is a case in point. Through various national campaigns and programs meant to empower dispossessed Egyptian women to overcome alleged patriarchal constraints and control their fertility and plan their families (Abdel Tawab and Roter 2002; Bier 2010), the
latter have become the object of obscure generalizations embodied in dichotomies of empowered versus disempowered, autonomous versus dependent etc.

It is necessary to rethink and question falsely comprehensive designations, as it is impossible (not to mention unwarranted and counterproductive) to delineate a single profile of millions of women. Seeing that “Third World women” have been spoken of and not with, it seems more expedient to engage directly with those very individuals who are disconnected from Western constructs and yet remain so central to the latter. Examining how individual subaltern women manage their fertility and plan their families in a multitude of ways provides contextualized and nuanced narratives that do away with imported and imposed platitudes. What I propose is an examination of the ways a small sample of Egypt’s urban lower-income women employ their agency, embodied in contraceptive choices, to pursue different understandings of empowerment.

**Research Question**

The primary aim of this academic exercise is to examine how some working-class women of Cairo routinely practice “everyday forms of resistance” (El Kholy 2002) through contraceptive choices while simultaneously performing seemingly conflicting “patriarchal bargains” (Kandiyoti 1988). In this light, contraceptive choices, as a reflection of agency, inform us about various ways individual women seek particular forms of empowerment, in light of socio-economic, affective, and gender-based constraints. Ultimately, I challenge inflexible conceptualizations of the status of women by calling into question the claim that patriarchy is unequivocally coercive and that women are inescapably disempowered and providing new avenues from where we may begin to rethink female agency and empowerment.
Before developing the research question further, it is necessary to address an important and valid critique of the numerous studies dealing with contraception. That is, the emphasis and attention given to women’s fertility has contributed to the near-confinement of female subjects to the reproductive sphere (Inhorn 2006), so much so that “mother” has become virtually inextricable from “woman”. My argument, however, is that studies exploring women’s fertility and contraceptive choices are reductionist only when they are divorced and uprooted from their larger contexts and when they are used to congeal women as either empowered or disempowered. What the present research project proposes is a more nuanced approach, one that considers the rationale behind women’s choices by taking socio-economic factors, among others, into consideration and sheds light on women’s resourcefulness.

Contraceptives are not merely tools meant to limit or space childbearing. When pinned against socio-economic, affective, and cultural backdrops, contraceptive choices become a lens through which we are able to truly appreciate intricate configurations that prompt individual women to make the choices they do. Rather than reducing women to their reproductive roles, examining fertility choices may therefore inform us on how the former plan their families, manage their bodies, and realize their agency. It may further inform us on how women find empowerment whilst accommodating the exigencies of their daily lives. Contraception, therefore, appears to be far more than a simple means to control women’s traditional gender roles in terms of childbearing: it is a means to navigate intimate relationships, cope with affective demands and pressures, respond to pragmatic economic concerns, and a means to obtain and negotiate power as well as acquire leverage in the household and perhaps beyond.
Background and Context

Since their official establishment in 1965, a main prerogative of Family Planning Programs (FPPs) in Egypt (Zohry 1997) has been to slow population growth by creating new social norms and fertility behaviors that are more in tune with visions of a smaller modern family (Hutchinson and Meekers 2012). Over the years, the intensification of family planning efforts was meant to “create an atmosphere that many would argue has been conducive to fertility decline” (Fargues 1997). At the time of their inception, then, Egypt’s FPPs were less concerned with women’s rights and more intent on achieving a particular political end. As such, these programs employed a didactic language, which they disseminated in a top-down fashion. This approach meant that international organizations such as the United Nations’ Population Fund (UNFPA) and the World Bank, rather than the women concerned, had a significant role in guiding the Egyptian state’s various campaigns to reduce total fertility rates. The United States Agency for International Development (USAID), for instance, has sponsored many such campaigns and programs, often at the expense of local grassroots organizations that had been working on providing knowledge and access to contraceptives for Egyptian women for years (Baron 2008).

The advent of 1994 Cairo International Conference on Population and Development (ICPD) (Landolt 2007), a pivotal event, relied on a different approach entirely by using a language that stressed reproductive, social, and economic rights for women (Ashford 2004; Nadakavukaren 2000). This sought to redress the supposed pronouncements of a patriarchal society in which women had internalized their subordinate status. Described as a “paradigm shift” (Natividad, Parket et al. 2014), and received as a much-awaited development, the large Cairo gathering set in motion a series of international conferences that also stressed greater rights for
women. Some of the goals discussed during the ICPD touched on the urgent need to reduce infant and maternal mortality, facilitate girls’ access to primary education, and women’s access to reproductive health services (Ashford 2004) – in a bid to adopt a more holistic approach to ‘empower’ women. However, while generally consenting to these common aims, important divergences also appeared among participants in years to follow. Namely, agreement on the language employed was not always universal. For instance, during the Commission on the Status of Women, which took place in New York in March 2013, the delegation of Egypt along with Iran, Nigeria, and others refused to acknowledge ‘intimate partner violence’ among other concepts (Girard 2014). Such crucial differences raise the issue of how different states may convene, discuss, and later be signatories of documents – that may translate into policy, that employ a language which remains ambiguous and problematic to say the least. Further, this begs the question of whether discussions centered on the status of women are effective when significant discrepancies reveal that the actors involved have different understandings of key concepts.

The position I adopt in this research project is one that does away with the typically dichotomous assumptions about the status of women in Egypt as inferred from their contraceptive use and fertility choices, as done by FPPs. Zero-sum questions about whether Egyptian women are empowered or to what extent may buttress preexisting presumptions or simply be fruitless and insubstantial. For this reason, I am primarily concerned with doing away with developmental jargon, and the generalizations it often rests on. Instead, I am interested in conveying how individual women, through personal fertility choices that may sometimes conflict with FPPs’ ideals, display their resourcefulness, spontaneity, and individuality – all valid means to be empowered, as they grapple with frequently uneasy circumstances. One
assumption I do acknowledge this research adopts is that all women seek empowerment, no matter the means or characteristics of the latter. Simply put, my general intuition before conducting my fieldwork, which is now confirmed, has been that even the most dispossessed women are invested in securing their interests and protecting their wellbeing. Nonetheless, it is what they perceive as rights, how they evaluate their wellbeing and approach their interests that is far less straightforward and worthy of closer examination. Since I propose an inductive approach, the following pages will reveal how individual women make choices and behave in ways that serve personal objectives. First, I provide a brief review of the relevant literature.

**Literature Review**

The abundance of literature on contraception in Egypt is unsurprising when considering a number of factors. First, Egypt is the most populated country in the region (Miller et al. 2009). Second, it is the first Arab country to launch a policy to curb its population growth (Govindasamy and Malhotra 1996). Further, it has a wealth of demographic and population data collected and compiled by the Central Agency for Public Mobilization and Statistics (CAPMAS) as well as the United States’ Agency for International Development’s (USAID) Demographic and Health Surveys (DHS), which facilitates research.

In describing the literature produced in the last three decades or so on contraception in Egypt, one can argue that most of the research is housed within the framework of two moments, or general directions symbolically separated by the 1994 ICPD. While this description is highly schematic, as we can hardly think of changes in academia and the field of development as a linear process, it is merely brought forth to bring attention to the pivotal role the ICPD played and the changes it incurred
on a policy level. Prior to 1994, most research was primarily concerned with curbing Total Fertility Rates (TFR) and slowing population growth (Awad and Zohry 2005). Post-1994, policymakers and researchers altered their position as “the Cairo conference enlarged the scope of policy discussions” to include “social development beyond family planning, especially the advancement of women” (Ashford 2004). Although exceptions to this framework do exist, it is with this general pattern in mind that I have organized the literature. I am, however, aware of an asymmetry in my presentation: while I gloss over the pre-1994 moment in the following paragraphs, I give priority to the aftermath of the ICPD as it is more relevant. This is because I am concerned with women’s empowerment, which was largely missing from pre-1994 conversations.

Throughout much the 20th century, hegemonic demographic theory was influenced by Malthus’s population narrative (McCan 2009) - which focused primarily on the dangers of overpopulation and the need to halt it. One crucial problem with this theory is its production of “an Orientalist imperial scale that calibrated racialized (heteronormative) masculinities to population patterns” (143) and pinned a mythical Europe as “the normative case against which the deviance of developing nations could be elaborated” (160). Based on this premise, developing countries were faced with the necessity of adjusting their fertility and mortality rates to follow the European model. The impact of Malthusian ideology on international literature is pronounced. Works such as ‘The Population Bomb’ (Brower and Ehrlich 1968), ‘Winning the Battle Against Overpopulation’ (Ravenholt 1976), ‘The Population Explosion’ (Ehrlich and Ehrlich 1990), ‘Ready, Willing, and Able: A Conceptualization of Transitions to New Behavioral Forms’ (Lestaeghe and Vanderhoeft 1997), and even more recent publications such as ‘Overpopulation and
Sustainability’ (Pimentel 2012) reflect an emphasis on curbing population growth. It is not surprising that such global trends have impacted the literature on – and reality of - the Egyptian context. Works such as ‘The Origins of Family Planning: Aziza Hussein, American Experts, and the Egyptian State’ (Baron 2008) and others (Landolt 2007) have highlighted how Egypt’s population policy was shaped, with foreign assistance, to focus on curbing population growth to achieve developmental goals.

The advent of the 1994 ICPD signaled the end of an era by showcasing the limitations of previous approaches. Instead, it was argued that development goals had to be achieved through more comprehensive means that went beyond providing contraceptives to restrain fertility rates. Indeed, although Stycos, Khalifa, Sayed and their co-authors (1982) conducted their study on contraception in Egypt over a decade before the occurrence of the 1994 ICPD, their work signaled a significant transition was about to take place. While they remained loyal to Malthusian theory, they were nonetheless aware of the importance of “community development” (370) as a contributing factor to control population growth. The ICPD endorsed this reasoning and developed it further. I elaborate in the coming paragraphs.

The Cairo ICPD formed a drastic transition from earlier conversations and debates (Natividad et al. 2014, 595). Indeed, the conference allowed for the adoption of an approach that acknowledged the agency of millions of women who went from being viewed as passive recipients of contraceptive know-how to individuals with reproductive and health rights. In other words, women made the transition from objects to subjects who possessed “bodily integrity and autonomy” (ibid. 596). This new perspective impacted the literature tremendously as women – and women’s status, became central to conversations about contraception.

Mason (1986) begins her work by discussing the slowly emerging propensity
to include “the status of women” in demographic studies as part and parcel of understanding fertility transitions (285). She presents this inclusion as a welcome improvement by contrasting it to previous trends of marginalizing the issue of women’s status altogether. She proceeds, however, to address and debunk the contention that women’s status is unvarying by asserting that the latter is multidimensional and elusive - a fact she attributes to gender inequality also being multidimensional, complex, and very much dependent on specific factors such as social location, women’s age etc. Mason’s work is particularly important because it crystallizes the necessity of understanding the social forces women contend with as the latter are “critical for their motives and choices, hence, for reproductive patterns” (298). Mason also paved the way for other scholars to center on the status of women: Kishor, Rastogi and Nguyen are but a few examples of authors whose work has a particular focus on women’s autonomy.

A year after the ICPD took place, Kishor published a study titled *Autonomy and Egyptian Women: Findings from the 1988 Egypt Demographic and Health Survey* (1995). In this paper, she defines Egyptian women’s autonomy as multidimensional and, accordingly, proceeds to assess it using three different indices: customary autonomy, non-customary autonomy, and realized autonomy. The first index is concerned with women’s views on their decision-making roles in issues pertaining to children; the non-customary index examines decision-making in family issues beyond children; the final index, or realized autonomy index, measures her actual autonomy in terms of “the weight given to her opinions within the household relative to those of her husband and her degree of freedom of movement” (xi). Ultimately, Kishor relies on the combination of indices to conclude that higher autonomy among women in all three indices enables “socially desirable demographic
outcomes”, namely, fewer children with wider gaps between births.

Rastogi and Nguyen (2005) reiterate the claim that women’s autonomy is multidimensional. However, the authors critique the construct of female autonomy altogether as it has been devised by Kishor and other scholars. They believe autonomy has been routinely examined through proxy indicators such as literacy and employment, both of which may have uncertain consequences on contraceptive and fertility outcomes. Instead they rely on a more comprehensive model. According to the latter, female autonomy includes four indices “authority in household decisions, mobility, [views about] gender roles, and financial autonomy” (6). The authors conclude that authority in household decisions, as a key component of female autonomy, is the most important index affecting contraceptive decisions positively.

Nawar, Lloyd, and Ibrahim (1994) define autonomy as “the ability to think and act independently of others to achieve one’s intentions” (15). Based on this understanding, they go on to claim that Egyptian women who maintain they have an important role in household decision-making are more likely to prefer fewer children. Further, women who say it is they who determine the number of children they will have, not their partners, are also more likely to have smaller families. In conclusion, they argue that better economic conditions and better education for women, increased participation in the labor force as well as increased urbanization are likely to foster greater independence for women and therefore contribute to a decline in fertility.

Despite some dissonance about what autonomy actually entails, there appears to be a general consensus in the literature about its notable impact on women’s fertility and contraceptive choices. While the relevance of women’s ability to make autonomous contraceptive, economic, and other choices may be obvious, it is puzzling why most conversations are restricted to this notion. While various scholars
debate the best indicators against which to define and assess autonomy, very few if any at all seem to transcend the latter by exploring other channels women navigate to realize their intentions.

Fortunately, Govindasamy and Malhotra (1996) address this critical gap. The authors rely on data from 1988 Egyptian Demographic and Health Survey to examine how gender inequality and women’s status impact family planning choices. Consistent with the aforementioned literature, the authors confirm that women’s status is indeed multidimensional. However, they join Rastogi and Nguyen (2005) in their critique of female autonomy as it has been devised thus far because of its reliance on proxy indicators of education and employment. Instead, the authors propose three direct indicators of female autonomy: mobility or freedom of movement, women’s perceptions of the importance of their contribution to household decisions in contrast with their husbands’, and finally control over household finances. What sets Govindasamy and Malhotra’s work apart from literature cited earlier and makes it particularly relevant for the scope of this research, is that their criticism of female autonomy is twofold. In addition to challenging proxy indicators, the authors contend that, in the case of Egypt, “autonomy may not be necessarily viewed as a social good, because interdependence rather than independence often results in support, status, and power” (330). This point is key as it is forms a starting point from where we may begin to dispel the preoccupation with autonomy as the ultimate answer to women’s alleged submission to patriarchy as we explore less palpable methods the former employ.

Kamran Ali’s Notes on Rethinking Masculinities: an Egyptian Case (1996) also calls into question the validity of women’s autonomy by pointing out that while many men do influence their wives’ contraceptive behavior (ranging from spacing of
births to methods used), many also do not deny their wives the freedom to choose for themselves. This is a compelling point as it dismantles both assumptions about patriarchy and Egyptian masculinity, while also calling into question the alleged oppressed status of women who have been typically depicted as desperately needing intervention and assistance from both international and national players to enjoy an equal status with their partners.

While the rise of women’s status to the fore of debates on demography and fertility patterns and outcomes is a positive step when considering their earlier marginalization, the pervasiveness of autonomy as a specific ideal women ought to aspire to is somewhat contradictory. If indeed women’s status is multidimensional, there must be other indicators that account for empowerment in untold instances where women are unwilling, uninterested, or unable to act autonomously. It is this gap in the literature that the present research seeks to fill. Rather than the nonviable notion of uncompromising autonomy, which disregards social norms and interpersonal relations within married couples, I wish to probe into disparate manifestations of agency that are made possible through fertility choices.

**Conceptual Framework**

The question presented in this research project hinges on the understanding of, respectively, agency (as means) and empowerment (as end). Because the latter is contingent on the former, we rely on contraceptive choices, as one particular manifestation of agency to fully appreciate how some urban lower-income Egyptian women seek empowerment. Both terms have been explored extensively in various academic disciplines ranging from development studies (Parpart, Staudt et al. 2002; Alkire 2005; Cornwall and Edwards 2014) subaltern studies (Bracke 2016), to gender
(Moser 1993; Shaver 2002) and postcolonial studies (Chaturvedi 2000; Mignolo 2005) with important overlaps but also substantial discrepancies. Below are the definitions that are most relevant to this research.

I was initially drawn to Amartya Sen’s (1985) conception of agency. According to the latter agency is “what a person is free to do and achieve in pursuit of whatever goals or values he or she regards as important” (206). While this broad definition initially seems inclusive, its adherence to the tendency of equating free choice with autonomy and independence (Mishra and Tripathi 2011) is problematic as it is alienating to individuals who may behave differently. Indeed, it implies that being an agent is contingent on being able to act freely and therefore dispossesses of agency individuals who may not behave autonomously for a number of reasons. This stance is in line with much of the literature examined above where autonomy has dominated discussions of women’s status and marginalized other ways of being.

Sen (2002) goes on to add in a later publication that agency is “the procedure of free decision by the person himself (no matter how successful the person is in getting what he would like to achieve)” (736). While the latter addendum introduces a nuance that was previously absent, this definition of agency remains nonetheless lacking because of its Eurocentric bias. The assumption that being free to decide, or even attempting to be, as the ultimate manifestation of agency precludes other approaches or behaviors and in Syed’s (2010) words “does not adequately take into account the diverse and complex nature of gender relations in various socio-political contexts” (283). This significant shortcoming begs the following questions: what of individuals who do not wish to decide autonomously? What of individuals who willingly concede their free choice to acquire other perceived advantages? Is this concession not also a choice and therefore a manifestation of agency? This is
particularly the case in contexts where collective decision-making is often held at a higher standard than individual choice for instance (Govindasamy and Malhotra 1996); or in societies where women may concede certain freedoms and rights to gain access to protection or respect (Kandiyoti 1988). Should those individuals be denied their agency simply because they do not fit in a particular definition of it? The ethical concern that appears here compels us to find a different, more inclusive, understanding of what it means to be an agent.

Naila Kabeer’s (1999) interpretation of agency provides a more sophisticated and flexible viewpoint that is more attuned to some of the realities and circumstances of Egyptian working class women. Kabeer departs from somewhat homogeneous academic propositions of agency as “decision-making” by presenting it also as “[taking] the form of bargaining and negotiation, deception and manipulation, subversion and resistance as well as more intangible, cognitive processes of reflection and analysis” (438). In light of the question posed in this research project, this approach is particularly valuable, as it does not deprive of agency those individuals who are not always able – or willing, to make decisions autonomously but nonetheless strive to find empowerment through other means. While I do not repudiate Sen’s definition entirely, I merely argue that it is only possible to adopt it when complimented with Kabeer’s contribution. In contexts where individuality is not socially valued, or where husbands’ authority over wives is recognized and widely accepted, numerous alternatives to free decision-making exist to achieve empowerment. By bringing to the fore such notions as bargaining, negotiation, manipulation, and resistance, Kabeer is more loyal to the understanding of agency as process, or series of processes, as opposed to Sen’s tendency to take the process for granted and reduce it to a particular, circumscribed, status.
We have discussed agency as process, or means to an end, with the latter being empowerment. I now turn to Ibrahim and Alkire’s (2007) review of over twenty-five definitions of empowerment across various disciplines where Oxaal and Baden’s (1997) proposition stands out:

Empowerment cannot be defined in terms of specific activities or end results because it involves a process whereby women can freely analyze, develop and voice their needs and interests, without them being pre-defined, or imposed from above, by planners or other social actors.

While this definition seems to agree with Sen’s agency as process centered on ‘freedom’, and therefore continues to make my earlier critique relevant, it nonetheless compensates for this weakness by presenting individuals as the authors of their own empowerment. Oxaal and Baden therefore ascribe to Kabeer’s line of thought in the sense that they dismiss the notion that empowerment is an externally conferred or bestowed status. Instead, they present it as an unspecific end; one that remains to be determined subjectively, and is therefore constantly reworked and reshaped. With this modification in mind, whereby empowerment is first and foremost what individual women wish to make of it, I adopt Oxaal and Baden’s definition. Agency, then, is a process fluctuating between free decision, negotiation, resistance, and/or compliance leading to the goal of empowerment whereby women are able to secure the interests they deem most important.

To better understand contraceptive choices as a manifestation of fluid and pliable agency, Kandiyoti’s “patriarchal bargain” (1988) and El-Kholy’s notion of “everyday forms of resistance” (2002) serve as frames of reference against which I examine how some women engage in processes of negotiation, accommodation, and resistance. While patriarchy is often theorized as an unvarying, universal ‘fact of life’, its materialization is replete with inconsistencies (Moghadam 2004). So are the
methods – or patriarchal bargains, women employ to “strategize within a set of concrete constraints” (Kandiyoti 1988; 275). Kandiyoti develops two “ideal-typical” forms of male hegemony: what she schematically refers to as sub-Saharan and classic patriarchy. While the first consists of women’s vocal protest and open resistance to perceived gender-based injustices, it is the second – which she defines geographically as existing in North Africa and the Muslim Middle East among other regions, I will be using here. What I retain from Kandiyoti’s argument is that women who live in societies defined as classical patriarchies may ‘buy into’ or internalize and accommodate a “structurally unfavorable” system to enhance their own life chances (280). Although their increasing economic independence undermines males’ authority (281), the fact remains that many women under classic patriarchy perpetuate normative arrangements as collision and conflict may be perceived as more detrimental than advantageous.

El Kholy’s (2002) work complements Kandiyoti’s by ‘gendering’ Scott’s (1985) work on informal resistance. While the latter studies peasants’ “everyday forms of resistance” to agrarian inequalities and is therefore primarily concerned with class, the former introduces gender to examine “a wide range of contestary actions of subordinate groups” (15). An example of everyday forms of resistance El Kholy gives is the ayma, or marriage inventory, which is meant to guarantee a bride’s right to her material belongings in case of divorce or passing of her spouse (110). Another coping mechanism used to challenge normative gender roles is spirit possession, which may be used by some women to be exempt from having sexual relations with their partners (186). As such, El Kholy’s interpretation of Scott places the emphasis on women’s “subtle, elusive, overlapping, and diffuse” responses to hegemonic male authority (25). It is within this theoretical framework, where resistance is neither necessarily
subversive nor confrontational, that I examine women’s contraceptive and fertility choices.

Methodology and Ethical Concerns

Although particularly drawn to doing ethnographic work, the limited scope (both in terms of time and resources) of this research project compelled me to opt for a more practicable alternative. Walcott’s (1999) pertinent distinction between “doing ethnography and borrowing (some) ethnographic techniques” is an accurate representation of what I initially aspired for and what I have realistically chosen to accomplish (44). This observation is not self-deprecating but rather the product of pragmatic acceptance of particular constraints. It allows me to be aware of some of the weaknesses in my research in order to overcome them in the future, but also to manage the expectations of my reader. I do not contend to provide an exhaustive, in-depth study of how some lower-income women of Cairo express their agency through their contraceptive choices. Rather, I merely propose an entry point from where to examine how some women navigate unequal gender relations to mitigate circumstances that may be prejudiced against them. I expand on the methods I have employed in the coming paragraph.

Because I have set out to examine at turns subtle and evasive or blatant and confrontational “everyday forms of resistance”, I needed a method – or set of methods, that could capture the mundane and the elusive. Further, because my research question revolves around how women respond to particular circumstances, I have not set out to prove or disprove a particular hypothesis. For this reason, I have opted for an inductive, emic, qualitative/interpretive approach (Whitehead 2005; Bhattacherjee 2012; Tracy 2013). In addition to being the most relevant method for
what I have set out to do, I am aware that this was also a political choice; one that is committed to debunking reductionist, ethnocentric theoretical generalizations and assumptions about lower-income Muslim Egyptian women in academia and beyond.

The respondents featured throughout the chapters of this research are seven lower-income\(^1\) women of Cairo. Although I did not particularly seek out women of a particular faith, all respondents happen to be Muslim. While this may be perceived as an intentional exclusion, I do not think of it as such since this work neither pretends to be representative of Egyptian women nor generalizable. Prior to the beginning of fieldwork, I knew four of the informants personally for a number of years\(^2\): three of them were housekeepers and the fourth a cook for immediate family members of mine. The three remaining women I was introduced to were respectively the sister of one the initial respondents, and two of her school friends. I resorted to this small-scale “snowballing” (Clark 2006) technique as opposed to approaching complete strangers because having common connections understandably facilitated the establishment of rapport and a certain level of trust between researcher and respondent.

My interactions with all seven informants ranged from participant observation, in-depth structured interviews and focus groups to informal conversations. While interactions with the four women I knew beforehand constantly shifted from in-person informal conversations to semi-structured interviews, communication with the three women I was acquainted with during my research took place in the form of informal conversations followed by semi-structured then structured interviews over the phone. I followed this linear progression as I established rapport and developed a certain familiarity with informants. While such an approach may sound counterintuitive, as professional relationships are more likely to develop into informal ones than the other

\(^1\) I use this designation interchangeably with ‘working-class’
\(^2\) Respectively twelve, three, and one year.
way around, I found beginning with formal methods to be alienating. Indeed, starting out with structured interviews made me feel unapproachable and perhaps even intimidating. A more spontaneous approach proved more advantageous.

Fieldwork took place over the course of five months during which I sat with each informant four to five times with the duration of each session typically lasting an hour. As for telephone interviews and conversations, each of the three respondents was called three to four times with the duration of every call lasting between thirty to forty-five minutes. Further, I conducted one focus group where three of the respondents I knew personally were present. The latter only lasted thirty minutes but proved valuable. While there were obvious drawbacks to interviewing respondents over the phone (Wolcott 1999; Shuy 2003), this was a compromise I decided to accept in order to gain access to narratives I otherwise could not obtain. Indeed the physical distance between respondents and myself was compensated for by what I interpret as their contentment with being heard but not seen. The fact that they were at home, undisturbed by a stranger’s physical presence seemed to permit a particular sense of comfort and ease. When I told one respondent at the outset of our conversation that her name would be changed in my transcripts to protect her privacy she laughed and said “I’m sitting at home, is anyone planning on coming to look for me here?” Conversely, when I asked one of the respondents if she could meet me to chat in person, she initially agreed to meet me in a public garden in Madinet Nasr where she met with her friends monthly but then told me she could not because she was unable to leave her children. I did not insist so as not to make her uncomfortable. This was one ethical concerned I faced. I discuss others below.

The usefulness of reflexivity is multifarious (Bourdieu and Wacquant 1992; Grenfell 2008). I found myself to be reflexive in two ways: the first sense of self-
awareness was caused by the anxiousness I felt about interviewing women who worked for my family. This ethical concern arose even prior to doing fieldwork as I worried about what informants would make of my relative power both as interviewer and employer (although indirectly). As I suspected, this unease only manifested itself with the respondents I did not previously know. While the women I knew spoke to me on first-name basis as they always had, the women I interviewed over the phone referred to me as “Madame Farida”, something they refused to change even as I asked them to “please just call me Farida.” One way I sought to manage this issue was by repeatedly stating both the boundaries of the interview and my own and by reiterating the interviewees’ right to withdraw at any point in time as a way of safeguarding informed consent. Further, I made a point of accommodating respondents as much as possible by rescheduling interviews whenever I sensed they were busy. Conveying the notion that I understood their time was valuable and being transparent about how uneasy I felt about potentially inconveniencing them yielded positive results in the sense that the women concerned felt in charge. They understood that I needed their help, which prompted them to occasionally steer the conversation by interrupting me, or even asking me questions themselves. Although I cannot claim that this approach remedied the issue of power entirely in terms of the substance shared by informants, it is the second cause of reflexivity I now turn to that served to mitigate our palpable asymmetry.

The second reason that prompted me to be reflexive was reactionary and somewhat unexpected particularly as it was shared by both in-person and telephone interviewees. While I was keenly aware that informants thought of me as privileged due to my level of education and my family’s prosperity (as demonstrated by their ability to employ housekeepers), they nonetheless ‘infantilized’ me. One example is
when two informants were telling me about the areas where they live and then proceeded to ask, repeatedly, if I knew where that was and then explaining in detail what constitutes a popular neighborhood. I suspect they felt the need to do so because they perceived me as a total outsider, if not perhaps a tourist who needed to be guided. Although I am reluctant to say informants were patronizing because of the negative connotation the term conveys, which I am persuaded is not representative of their intentions, what I mean to say is that some of them felt the need to be particularly illustrative when speaking to me. This attitude was far more pronounced when I mentioned I was recently married and pregnant: all three telephone interviewees adopted a more sisterly – if not motherly, stance towards me all the while continuing to address me as “Madame”. As experienced mothers and long-time wives, they took it upon themselves to give me advice and guidance as we talked about contraception, marriage and more. The divergence between informants and myself, manifested in terms of education and resources was noticeably tempered as they brought their own capital into the conversation. The knowledge they had and I lacked about marriage and childbearing among other things contributed to developing a sort of affinity whereby although both they and I knew we were different, it was obvious that I could stand to learn from their subjective experiences.

**Chapter Outlines**

This thesis is organized into three chapters. The first chapter introduces informants and provides readers with an overview of these women’s circumstances in order to ground their particular experiences in the following chapters.

In the second chapter, I introduce readers to the normative framework Kandiyoti refers to as “patriarchal bargain”. By considering interviewees’ views on
issues such as domestic violence and sexual relations with their partners it emerges that compromise is pervasive and generally internalized throughout different areas of informants’ lives. While the accommodating behavior where confrontation with and opposition to husbands seldom takes place may be understood as disempowerment, I argue instead that this is a deliberate concession interviewees make to fulfill particular objectives.

The third chapter introduces an exception to compliant behavior: contraceptive choices as manifestations of “everyday forms of resistance”. Although one interpretation of this behavior may be that women’s freedom in the contraceptive domain merely reflects adherence to traditional gender roles and thus reinforce the authority of patriarchy, a different reading is possible. Indeed, husbands’ attempts to intervene in the making of wives’ contraceptive choices unsettles the prominence of traditional gender roles, which appear to be constantly challenged if not entirely undermined in some cases. Further, the tendency to ‘perform’ contraception as resistance is shared by both women who engage in patriarchal bargains as well as women who openly reject their husbands’ authority altogether. In this sense, contraceptive choices transcend the scope of patriarchal bargains as they embody a will to press for the creation of pockets of defiance.

In the conclusion, I emphasize the need to move beyond mainstream theories on the status of women as exclusively quantifiable and objective. Chapters two and three have complemented one another by providing different if not opposite manifestations of agency as both compliance and resistance. From here on, presenting autonomy and independence as the hallmarks of female empowerment not only reveals disregard for specific contexts but also the exclusion of an array of agencies and empowerments that remain unnoticed and unacknowledged.
CHAPTER II

Topography

Throughout the fieldwork phase of this research, I spent many hours talking to seven lower-income women from Cairo: Rahma, Dina, Mona, Amani, Basma and sisters Salma and Reda. In contrast with classic ethnographies which have historically sought to capture geographically distant or exotic natives in remote fields (Van Maanen 2011), all seven informants and myself share the same mother tongue and live in the same city. Further, the ‘field’ in which I conducted research was either my parents’ home, my mother-in-law’s or my own. This was neither a coincidence nor a matter of convenience: all interviewees either worked for my parents, mother-in-law, or were approached over the phone (hence my presence in my own home). Although this may seem like a considerable advantage, it was also an impediment. As a “native among the natives” (Zaman 2008), the challenges I faced varied according to whether I was interviewing the four women I had known for years or the ones I had never previously spoken with. Conversations generally flowed smoothly with the women I knew as I interviewed them in familiar spaces we interacted in on daily basis. Furthermore, they knew me, my family, and were accustomed to navigating ‘our world’. Things were quite different with the women I interviewed over the phone. First and foremost, their inability to see and appraise me made for a few awkward minutes at the beginning of each phone call. The uneasiness was exacerbated as I naively struggled to neutralize class disparities by forcing a sense of understanding as some women discussed domestic violence, female genital cutting, and spoke extensively about economic restrictions. By trying to identify with these problems, I was fooling no one. The
sooner I unshackled myself from fears of being judged as oblivious or insensitive to their hardships, the more genuine I appeared. When I acknowledged that I did not necessarily fully understand circumstances I had never personally experienced, most interviewees gradually relaxed as they accepted my status of outsider and exerted what I believe to be an additional effort to explain things they knew were foreign to me.

While the numerous conversations we had allowed us to venture into intimate spaces I never expected would be made available to me, I cannot claim to capture these women’s life stories in a few pages. What I can claim, however, is that the interactions I entertained with a small number of low-income urban Egyptian women allowed me to gain some insight into their complex social realities. I call this introductory chapter “topography” because it is meant to act as a sort of map, organized along thematic lines, to help the reader navigate through the following chapters by embedding women’s accounts into their contexts. This chapter is not analytical as much as it a general introduction to interviewees’ lives. The decision to include/omit information shared by interviewees was no easy task. However, I believe I have remained as loyal as possible to the accounts I was trusted with and have included, as much as possible, these women’s experiences in their own words. The reader should note that all informants were given pseudonyms to protect and respect their anonymity.

Because this research project is informed and influenced by “ethnography as a way of seeing” (Walcott 1999), I am interested in providing a nuanced, qualitative reading of interviewees’ responses as a way of uncovering at least some of the inner workings of their subjectivities. The fact remains, however, that subjectivities are also influenced and shaped by objective material realities. For this reason, I begin with an
overview of significant parallels and similarities in terms of socio-economic circumstances, employment situation, and educational background among others shared by interviewees.

**Modern and Traditional: Families in Transition?**

All seven interviewees’ families are not originally from Cairo. This is consistent with the literature on Egypt’s significant contemporary rural-urban migration (Stewart, MacLachlan and Yin 2004; Abu Lughod 1971). Six of the seven interviewees were born in Cairo after their parents migrated from various towns of Upper Egypt over the last three to four decades. Dina is the only one whose family still lives in a village in the urban Gharbeya Governorate North of Cairo where she was born. While all seven women have lived in Cairo their entire lives, twenty-nine year old Dina left Gharbeya at the age of fourteen to work in Cairo and only returns home during holidays. The following paragraphs expand on life in the Capital.

Because she does not have a house in Cairo, Dina has been living with her husband, Wael, and their toddler Fatma at her employers’ home. When Dina’s employers moved to a house in New Cairo, fifteen minutes away from their previous flat in the Masr el Gedida, or Heliopolis, neighbourhood they needed additional help. Because Dina and her then fiancé were in a long distance relationship, Dina suggested her employers hire Wael as a gardener and caretaker. The family she has been working with for over ten years agreed and built a small room for the couple to stay in right outside the house. As the couple has been saving money to build a house back home, Dina said she far prefers life in Cairo, as opposed to Wael who is eager to return to Gharbeya. Dina’s main concerns about returning to her hometown are threefold and have to do with employment, health, and living arrangements.
The fact that she has no formal education and is illiterate has restricted Dina’s choices to domestic work. Because salaries in her profession are far higher in the city than in her village, she expressed concern over how the drop in terms of income would affect her small family. This is particularly daunting since Dina makes more money than Wael and is thus the primary breadwinner. In addition to the critical issue of how she would make ends meet in Gharbeya, Dina is also concerned about her daughter’s and her own health as both suffer from severe asthma. While mother and daughter have been accustomed to visiting qualified private physicians in Cairo, the same cannot be said about their experience in Gharbeya. An unsurprising fact given the highly centralized nature of the Egyptian state, which causes a sharp contrast in quality between services in Cairo and other governorates (Metwally 2014). Dina’s final and most important reason causing her to be reluctant to leave the city, is her apprehensiveness about living near her in laws – her mother-in-law more particularly, a woman she says is intrusive and invasive. The social expectation that Dina will take care of her mother-in-law in her old age is a de facto reality (Kandiyoti 1988; Ahmed, Abbas et al. 1993; Nandakumar et al. 1998), a staple of ‘traditional’ family values which causes heightened involvement of extended nuclear family members in each other’s lives. Undesirable involvement of mothers-in-law between married couples was an important topic that interviewees other than Dina also emphasized.

Basma’s parents migrated from Assiut, the Southern home of both Pope Shenouda III and Sayyid Qutb, to El Zaytoun in Cairo decades ago. After two incompatible engagements, Basma got married to Ahmed, who works in the tourism industry, at the age of twenty-nine and moved to El Salam neighborhood to live with him and his mother Samia. This “imperfect arrangement” lasted seven years until Samia passed away. It caused Basma much discomfort particularly during the first
year of marriage because she felt like Samia was overprotective of her son and felt threatened by her daughter-in-law:

Even though Samia was my mother’s cousin, I did not know her well before getting married...she had a temper. After her second divorce, her youngest son went on to live with his father and Ahmed, my husband and her eldest son, moved to Safaga for work...so she had no one. When we got married and Ahmed returned to Cairo, she worried I was going to take him away from her.

Twenty-eight year old Amani’s parents migrated from their touristic town in Upper Egypt to settle in Cairo years before she and her three siblings were born. When she was twenty-three Amani met Hani, a taxi driver. A few months later, the couple was married. They now live in El Haram with their three children: two daughters aged six and two, and a newborn son. Although Amani lives far away from her mother-in-law and only visits the latter twice a month or so, Hani’s mother occasionally intervenes in their lives. One such area where she believes she has a say is the circumcision of her eldest granddaughter. Ever since Amani’s daughter turned six, the child’s paternal grandmother has been pressuring her mother to circumcise her. Amani, however, refuses the idea:

People are now more aware that it is a harmful practice…unlike my sister and myself who’ve been subjected to circumcision, my first cousin who’s an engineer, never went through this experience. My mother-in-law keeps nagging we do it to my daughter but I won’t give in to her. I told my husband that.

Radwa is one more interviewee who explicitly discussed her refusal to accept her mother-in-law’s intervention in her life. The forty-six year old mother of four has been married to Kamal for nearly three decades. Although she is happily married, Radwa shared memories of more challenging times:
Years ago, my husband worked for a big company…when he lost important documents, his employers presented him with the ultimatum of either financially compensating the losses incurred or facing prosecution. I knew he was innocent. He is a good man who never gave me money that was not rightfully ours. So when he was in trouble, I knew I had to stand by him so we sold our apartment to pay the company.

While one option the couple had following the loss of their apartment was to move in with Kamal’s mother in El Qoba area, Radwa firmly rejected this option and struggled to find alternatives that would secure her children’s “dignity and comfort”.

The views shared above reveal a number of issues. One such issue is that the assumption whereby interviewees may observe and perpetuate ‘traditional’ family values their parents did in agrarian societies is significantly misplaced. Indeed, refusal to live with one’s mother-in-law and explicit rejection of the latter’s advice and opinions demonstrate a shift towards more ‘modern’ attitudes and views on family. Social and religious stipulations of respect, obedience, and caretaking of elders (Yount, El Afify and Sinunu 2008) seem to be challenged as the once all-powerful “patrilocally extended household” (Moghadam 2004; 141) contends with changing socio-economic, and political landscapes (Singerman 1995). In this sense, it is arguably more appropriate to connect ambivalent notions of ‘modern’ and ‘traditional’ with the material forces that produce them. Where women have better access to education, more independence both in terms of resources and mobility due to their employment outside the household, and marry later than their mothers (El Zanaty and Way 2008), it is unsurprising to see a shift in family dynamics and priorities. Likewise, the family is responsive to new economic pressures and challenges. That is not to argue for the demise of the influence and authority of kinship, but rather to demonstrate that the family, like all social structures, is far from impervious to external pressures.
Education and Work

According to statistics on Egyptian women’s literacy, less than 15% of women between the ages of twenty-five and fifty pursue schooling further than secondary education (El Zanaty 2008). Only two out of the seven interviewees in this work have completed higher education. Salma is the only one among her siblings (including her sister Radwa featured here) to have “barely managed to earn an accounting diploma”, as she puts it. Rahma earned a diploma in commerce. Basma also pursued higher education but dropped out of Cairo University in her third year shortly after she got married. She did so because she knew her mother-in-law, Samia, with whom she lived would use her absence to accuse her of evading her duties as wife. In spite of this sacrifice, Basma said she does not regret her decision to drop out of school, as she believes her marriage was worth the concession. Of all seven interviewees, Dina is the only one who has never been to school. The correlation between area of residence and education has been discussed in the Egyptian Demographic and Health Survey whereby urban women are more than twice as likely than their rural counterparts to be literate (ibid.).

In terms of employment, all interviewees have been working since their teenage years. While all seven women have considerable work experience, three were unemployed during the time of interviews: Radwa said she no longer needed work since her husband had taken on a second job, Mona who had to stay at home to care for her three young children, and Basma who had given birth to a girl six months earlier. While Radwa was not planning on returning to work because of her financially stable situation, both Mona and Basma intend to return to work once their children are a little older. When discussing the reasons why they started working to begin with, interviewees’ responses were unsurprisingly impacted by class-based
economic concerns. In contrast with middle-class women who may seek employment for “independence, freedom, self-actualization, equality, participation in society, and responsible enfranchisement” (Hatem 1988; 420), lower-income women expressed more tangible concerns.

Radwa has had several short-lived jobs as a teenager. She only started working as a housekeeper years after she got married to assist her husband. Likewise, Amani started working at the age of fifteen alongside her father as a cook for various high-income families in the city. Now forty-two years old, Basma worked in her youth in several places ranging from perfume factories to sports clubs near her parents’ home during school breaks before being hired at a public garden in a middle-class Cairo neighbourhood. Before getting married, Mona – now a stay at home mother, worked as a housekeeper in a high-income family’s home from approximately the age of fifteen to twenty-one. While Dina is a live-in housekeeper and receives a monthly salary, Amani, Salma, and Rahma divide the days of the week among several households and are paid on daily basis.

When discussing their views on work, some discrepancies were visible between interviewees’ opinions. The latter mainly revolved around the kind of work they were doing. Basma, for instance, said the following:

We used to live in Zaytoun, and there was a famous public garden near our house. My father never let us go alone because he worried about us. He worried so much that I never went out and didn’t know anything. This all changed when I started working and seeing how life is like. As soon as my daughter turned two, I bought her a small bike because I want her to play and move. My father gave us a better life than his, now I want my children to have a better life than mine.

Basma – who never worked as a housekeeper, views being employed as a positive
thing in the sense that it is as an opportunity to move beyond the sheltered existence her parents provided during her younger years. I interpret her reference to the bicycle as an indication of the importance of mobility as opposed to her previous inability to venture outside the house freely. Beyond the positive consequences of work Basma enjoys as an individual, she is also aware that her employment is a means to improve her family’s situation and particularly her children’s chances at a better life. Although Basma’s statement indicates unequivocal appreciation for being able to be formally employed, such an outlook was not universal among other interviewees who presented more nuanced opinions.

The literature on informal paid domestic work in Egypt is disconcertingly lacking. In the absence of substantial theorizing on this issue, it is difficult to make statements about this line of work. It remains, however, that significant similarities emerged throughout the interviews I conducted with the six domestic workers featured in this research. Namely, similarities about how these women perceive their work. I begin with Radwa, who was compelled to start working as a domestic worker when her husband faced important financial difficulties:

My sisters cried when I told them what I was going to do for a living. The thought of being maids had never even occurred to us…I worried about how people would look at me but I ended up working with a family who treated me with respect and kindness. I felt like my employer was my sister, she never made me feel inferior. She always said “please” and “thank you”…it’s funny how life works…Salma who was crying because she felt sorry for me ended up taking the same job when her husband also had work problems.

Mona shared similar feelings:

I was intimidated at first because of how housekeepers’ living conditions appear to be on television. But I realized that my employers were nothing like the ones I saw on tv. My work there was the most important phase of my life. I learned so many things during those years.
Salma whose sister Radwa said was crying when the latter told her about her new employment as a housekeeper said the following after she too decided to take on the same occupation:

Before, I had no say at home…my opinions were pretty much useless and ignored…but since I started making money, I have a say in what goes on. He [husband] is forced to listen to me, even if he doesn’t want to.

Views on paid domestic work seem ambivalent. Although apprehensive – if not fearful or ashamed, of the social consequences their seemingly stigmatized occupation would engender, Radwa, Mona, and Salma nonetheless choose to be pragmatic. Their appreciation of the positive outcomes work yields in terms of remuneration, mobility, and decision-making seems to trump concerns over prestige and status: problems that are irrelevant when contrasted with the austere economic circumstances they would otherwise face if they were no longer employed. The fact remains, however, that although views on domestic work contain positive elements, being employed is generally perceived as a last resort for many lower-income women of Egypt: a hopefully temporary recourse only sought when the husband is unwilling or unable to fulfill his family’s financial needs (Hoodfar 1988).

The reason why paid work outside the household may be frowned upon among lower-income Egyptian women has to do with ideal understandings of marriage as demonstrated by Salma:

Any woman who tells you she was unhappy at the beginning of her marriage is lying…especially a woman like me who was always uncomfortable because I was torn between my divorced parents’ homes…when a marriage is new it’s a good thing…you have a home and you have stability…you are the owner and homemaker.
Rahma shared a similar outlook:

I was not particularly attracted to my husband when he started showing interest in me…I had feelings for my ex-fiancé and had decided not to get married. But my mother kept nagging so I did not really think it through and decided that what mattered was to get married, it didn’t matter to whom.

Aside from affective factors that may prompt a woman to marry, the institution itself is valued because it is commonly perceived as a safe haven where protection and comfort are sought. Although women like Salma, Amani, and Rahma have been accustomed to work for years prior to getting married, there is a significant expectation that once she is married, the woman’s place is her home with her children and her husband’s is at work. The continuation of Rahma’s assertion is telling:

I am close to my children and don’t like it when they look at what other people have or are deprived of something. This is the reason why I held on to work and didn’t let go of it…I simply could have stopped working…my husband could have made my life easier and let me stay comfortably at home but of course, there’s none of that. He works but he claims his salary is meager and I barely know anything about how much he makes… and I stopped asking him anyway. He’s cheap. He always says: “I don’t have money, I don’t have money.”

This view demonstrates that while some aspects of work outside the woman’s own home are appreciated and valued, Rahma perceives work as a concession. While young newly married women may buy into an unfavorable patriarchal system to reap perceived benefits, it emerges that new economic realities continuously put a considerable strain on traditional gender roles, an arrangement that appears ever more elusive and flimsy:

There are no more men like the good old days. Now the women are expected to do everything and share the burden like the man if not more. I suppose the reason why I accept to endure the hardships in my marriage is for my
daughter. I want her to have a home and security. Also, the reason I am able to manage the difficulties we face as a couple is because I choose to focus on the positives. I tell myself that although Wael has many faults, I am not perfect either. Otherwise life would not go on.

Dina’s statement above shows that she wishes she and her husband had segregated roles (breadwinner for the man, homemaker for the woman) like the olden times. Whether this sentiment of nostalgia pertains to a reality that actually existed or not is irrelevant. What is more significant is Dina’s dissatisfaction with the additional responsibilities she is forced to take on to make ends meet. Aside from cultural beliefs buttressing such a worldview, Dina, Rahma and other women’s expectations to be taken care of by their husband has religious underpinnings. Indeed, in Islam, the money a woman acquires through work, inheritance, or otherwise is her own and she is in no way compelled or expected to share it with her spouse (Engineer 1992). The reality of material circumstances, however, challenges traditional gender roles and places considerable pressure on women to transcend their supposed ‘natural’ calling by routinely providing for their families in more ways than one. While most interviewees expressed frustration vis-à-vis this perceived expansions of duties that were not meant for them to begin with, all of them nonetheless continued to accommodate the exigencies of their often-difficult circumstances.

**Views on Marriage and Childbearing**

In the previous section, we have briefly glossed over some of the interviewees’ ideal views on marriage. In this section, we take a closer look at the circumstances in which interviewees met their husbands, got married, and planned their families.

Not unlike other societies, marriage in Egypt is an intricate social, religious, financial, legal, and even political institution. When a man and a woman sign the legal
contract binding them, this marks the culmination of an often-lengthy process of negotiations that typically abide by rigid norms and expectations (Amin 2006; El Kholy 2002). Due to the rising cost of marriage, deliberations about the dowry, or *mahr, shabka* (jewelry presented to the prospective wife), *‘ayma* or *Qaema* (list of items the wife brings into the marriage and signed by both parties) are meant to maximize men’s and women’s best interests and protect their assets. This is applicable in pragmatic marriages of convenience but also in relationships where partners are in love. Although Radwa is in love with her husband, it is apparent that, feelings aside, she was acutely concerned with his financial situation before marrying him:

The pharmaceutical company where my sister worked organized a trip for its employees, so I went with her. Kamal, my husband, was also accompanying a cousin of his who worked with my sister. He saw me during this trip and decided to come meet my father a few days later…when he proposed, he was twenty-three and I was fifteen…he had absolutely nothing. No job, flat, not even money for a wedding ring. Nothing… But soon after he proposed, Kamal got a job offer at a public water company and started making a decent living…He started thinking of me as his lucky charm. We got married three years later.

Although hesitant to marry Kamal at first because of his circumstances, Radwa’s decision to accept his offer to marry her was influenced by the improvement his new employment situation allowed. This fact is in no way concealed or disguised and is even recognized as a right shared and favored by men and women alike: marriage is meant to provide an improvement of one’s existing situation, if not the aspiration of upward social mobility. In contexts where such an ideal is not possible, involved parties attempt to at least secure their comfort and wellbeing as much as possible.

Despite considerable changes in family structure manifested in the modernization and nucleation of the family in Egypt as in elsewhere in the developing
world, kinship structures continue to be relevant (Al Haj 1995). While Dina married her mother’s young second cousin, Wael, to whom she was attracted, Rahma and Basma married their third cousins only because it was the expected and convenient thing to do. Although endogamous marriages are more common in rural areas than in cities, such arrangements continue to be valued for “the known and secured network” they provide (Sholkamy 2003), particularly when children are involved. Four out of the seven interviewees, however, met their husbands by coincidence, in a public space. Radwa met Kamal while on a trip with her sister. Amani met her taxi driver husband when she was going on an errand and hailed his car. Mona’s husband was her neighbor and started pursuing her after seeing her in their street. As for Salma, she and her husband met in the factory where they worked. It is difficult to argue whether endogamous or exogamous marriages are more prevalent. What we may argue, however, is that interviewees are free in terms of choosing their partners, even when the latter is a relative. Indeed, when they married someone they are related to, it is because interviewees were convinced this arrangement would benefit them, and no because they were in any way coerced to do so.

Cultural practices whereby women are encouraged and sometimes pressured if not coerced to marry young are now challenged by better education and higher employment rates for women but also material constraints (Amin and Al-Bassusi 2004; Osman and Shahd 2003). Radwa, the youngest bride among interviewees, got married at eighteen. She was, however, engaged for three years as she and her husband were saving to be able to afford the many demands of marriage. Basma is a different case: the now mother of three was married at twenty-nine to Ahmed, a surprisingly late age to be married for the first time among lower-income communities in Egypt. However, it is important to note that Basma was previously
engaged twice and attributes this delay in her previous “poor choices”, as she describes it. Previous engagements are not uncommon among interviewees: Salma, Rahma, and Mona were also engaged to other men before they got married. This occurrence is neither taboo nor infrequent. In fact, previous engagements are openly discussed among new couples. Before getting engaged for the second time to her present husband Hassan, a construction worker, Mona told the latter:

I have to tell you that I still have feelings for my ex-fiancé but I cannot and do not want to be with him…so you have to help me get over him and I will do my best to fall in love with you…I promise that I will tell you as soon as I am over him.

The significance of this testimony is twofold. First, it indicates that Mona did not shy away from sharing intimate details of her previous experience with her suitor. Thus, we can stipulate that, unlike divorce for instance, broken engagements do not damage or curb a woman’s chances to get married and are socially accepted and even present an opportunity for women to exercise their agency (Amin and Al-Bassusi 2004). Secondly, Mona’s straightforward remark to Hassan indicates that she understands romantic feelings to be crucial to marriage. Her desire to actively try to fall in love demonstrates her unwillingness to marry for marriage’s sake alone – unlike Rahma for instance whose main objective was being a mother.

Much like interviewees’ motives for work, marriage was often approached pragmatically. Even for those women who did marry out of love, feelings were not central to our conversations about what they valued most about married life. Aside from the financial security and stability mentioned earlier, childbearing was the central motive for marriage shared by all interviewees. Salma, not unlike Rahma who believes “having children is the whole point of marriage”, sought to get pregnant
immediately after getting married:

When I got my period two weeks after my wedding, my husband and I were both very upset… I know it sounds silly now but we wondered if there was something wrong… we wanted to have children immediately.

Mona said the following about being a mother:

The best thing about marriage is the kids… sometimes it’s also the worst… I do everything for them and in the end they said “baba” first before “mama”… the only thing my husband does for them is provide financially, that’s it. I do everything else… but the kids adore their father and his face lights up when he sees them after work.

The importance of bearing children early on in their married life is further demonstrated by the fact that not one of the seven interviewees started using any form of contraception until she had her first child. Indeed, for a newly married woman to delay pregnancy seems like an unfathomable idea to most women featured in this research as children are perceived to “give meaning and joy to life and marriage”, as Basma believes. In light of such beliefs, infertility is conversely perceived as a calamity as Mona states:

When a relative of mine found out she was pregnant, she didn’t want to tell her sister-in-law because she didn’t want to hurt her feelings as the two had gotten married around the same time… In our Egyptian society, we feel sorry for women who are unable to bear children. To the point where some women may delay sharing pregnancy news, or avoid taking their kids when visiting a sterile woman as a sort of favour or out of consideration for her feelings…

Beyond the emotional rewards of parenthood, Mona shared the cultural belief whereby having offspring is the main – if not the only, reason people toil and strive to improve their situation:

Another thing I’ve seen a lot is that when for example a couple who’s been
married for fifteen or sixteen years with no children does well financially, people do not understand the point of their success. People wonder what are they going to do with this money when they don’t have children as though this couple has no right to be successful because they have no kids… I know this couple that works day and night and people don’t understand why they are such hard workers when they don’t have to provide for anyone. But I guess these people work hard because otherwise their lives would be empty…after all children take up all of your time.

Although Mona expresses sympathy for couples that are unable to have children (the thought of unwillingness being unthinkable), she nonetheless reiterates the idea that without sons and daughters, a married couple’s life is vacant and unfulfilling.

The number of children each interviewee has ranges from one to four, depending on how long she has been married. In terms of ideal number of children, all interviewees said that two to three children was the perfect number in light of how expensive everything has gotten and how burdensome schooling, doctors, clothing, and even food prices are. The crucial wish and need to bear children is generally neither unregulated nor haphazard: with the exception of Basma who said she and her husband never explicitly discussed how many children they wanted, all interviewees seemed to have a specific family plan.

Dina lost her first son to Sudden Infant Death Syndrome and had a two-year-old daughter at the time of the interview. When discussing her plans to get pregnant in the future, she said that she wanted her pregnancies to be four years apart so that her daughter would be in preschool before she would give birth again. Rahma’s ideal is seven years between each pregnancy. In order to accomplish that, she alternated between oral contraceptives, injectables, vaccines, and the intrauterine device after her first delivery. The reason she opted for this particular spacing is due to affective and economic reasons. Rahma believes by the time her child reaches the age of seven,
she or he is already in school and in need of less attention from her as would a toddler. Further, the child would have received sufficient care and affection and would supposedly not feel jealous from a younger sibling. From a financial perspective, Rahma believes that the seven years are ample time to put the child in school, return to work and save enough money to bear another child. The outcome of Rahma’s family planning vision is win boys aged twenty-six, one daughter aged twenty-one and a fourteen year old son.

Not all interviewees were able to adhere to their ideal family plan as rigorously as Rahma did. Throughout interviews, unplanned pregnancies were a leitmotif. So much so that interviewees such as Salma and Radwa had undergone this experience more than once. The reasons, however, differed. Salma who has satisfied with her two daughters became pregnant unintentionally when she stopped taking the pill for three days, as she could not find it on the market. The second unwanted pregnancy occurred a few years later while using the intrauterine device – the likelihood of which is improbable yet not impossible (Thonneau, Rochebrochart et al. 2006). Radwa said her two unwanted pregnancies occurred, respectively, also while she was using the intrauterine device and immediately following the expiration of her injectable after five years of successful pregnancy prevention:

I attended a session at the public hospital given by the doctor on how the implant works…we were told that after the effect of the implant expires, it would take us at least a year to get pregnant again…I had had the implant for five years and as soon as the time was up, I found out I was pregnant ten days later…I guess the implant was a new thing and they wanted to experiment on us.

In both Salma’s and Radwa’s case, abortions were considered but ultimately rejected. Although unwanted pregnancies were a great source of stress on many fronts for
interviewees, they were nonetheless accepted as “God’s will”. It is difficult to say whether any of the seven interviewees actually sought to terminate a pregnancy or not. Possible secretiveness may be due to the fact that this practice is officially illegal in Egypt with minor exceptions (Lane, Madut Jok and El-Mouelhy 1998) and is frowned upon on religious grounds. Further, one possibility is that the importance of childbearing discussed earlier may make women who abort weary of unsympathetic if not condemnatory reactions to their choices.

In this section I have sought to present the marriage institution in Egypt as a microcosm where individuals contend with larger socio-economic and affective realities. I contend that the way interviewees approach, ‘inhabit’, and discuss their marriages reveals their expectations and aspirations but also the challenges and fears they face on daily basis.

**Conclusion**

The previous pages have provided vignettes introducing the seven interviewees: their family background, education, employment situation, as well as marital life and views on childbearing. The information provided in this exposé is the backdrop against which the two following chapters explore, firstly, the varied ways interviewees bargain with patriarchy (through their relationships with their partners) to navigate unfavourable circumstances while, secondly, creating spaces to assert their agencies through their contraceptive choices.
CHAPTER III

Bending Bodies

“Moreover, for women in Egypt and its Arab neighbours, having a husband is key: a woman’s social value is still tied to her status as a wife and mother, no matter how accomplished or professionally successful she might be [...] As they say in Egypt, “The shade of a man is better than the shade of a wall.”

Shereen el Feki, Sex and the Citadel: Intimate Life in a Changing Arab World (2013)

As dichotomous views on gender are constantly being challenged and “discursive limits of “sex”” are exhibited (Butler 1993), seemingly straightforward understandings of patriarchy as “male domination and female subordination” (Hunicutt 2009; 553) are becoming increasingly problematic. While the endless possibilities sexuality and identity hold are being explored, I continue to rely on the above definition of patriarchy to address inequality within heterosexual couples, while nonetheless being mindful of the need to adopt more inclusive analytical tools.

Although the term ‘patriarchy’ was never uttered during hours of interviews with seven different women, its definition and manifestations were frequently articulated and thoroughly investigated. A persistent theme that permeated conversations with interviewees was that of being constrained. The notion of being stifled by challenging economic circumstances, shackled by one’s own sexual life, or generally restricted by one’s partner or society at large for example was addressed explicitly. All interviewees seem to agree that the social structure wherein they live consistently favours men, their interests and wellbeing, over their own. Dina’s views are a case in point:

Life would be so much easier if I were a man…we women bear all the burden…if anything goes wrong with the children no one will blame the man. We’re expected to help bring in money, raise the children, take care of the
house, look pretty and not complain. And most men don’t even appreciate what we do...they underestimate us and brush off our hard work as ordinary. Even when we want to take care of ourselves and our appearance, we’re expected to do it for the man, not ourselves. I would have so much more freedom if I were a man.

When asked about the difference between men and women, Mona shared a similar outlook:

Women endure so much. If I leave my husband with the kids for a bit, he calls me a thousand times while I’m out. Maybe men can endure weariness at work, but they can’t put up with what goes on inside the house. I feel like the woman can have a job and take care of her home…the man can only handle work.

All interviewees acknowledge and unequivocally criticize the fact that women enjoy fewer rights and are encumbered with a disproportionate amount of responsibilities when contrasted with their husbands’. Despite the dissatisfaction and frustration they express, none of the interviewees (with the exception of Rahma) sought to alter their condition by openly resisting their partners or leaving them. The difficulties they face as unequal partners are generally attributed to “the selfish and irresponsible nature of men” and assumed to be natural and expected, as Dina puts it. Indeed, although often disgruntled, all interviewees have accepted and internalized their subaltern status and are well attuned to accommodating husbands and avoiding potentially detrimental confrontation. This process or coping mechanism whereby women navigate and manage various manifestations of gender inequality befalls under Kabeer’s conception of agency (1999). In contrast with quantifiable, polarized views of empowered versus dispossessed women encountered in the social science literature, Kabeer presses for an acknowledgment of all those instances where women resort to subtle methods to secure their interests beyond autonomous decision-making (438). Interviewees’ attitudes towards an unfavorable patriarchal order is consistent with Kandiyoti’s (1988) views whereby women internalize their subordination and engage
in routine compromise as a method to cope with classic patriarchy. In this sense, the patriarchal “bargain” is less a bargain and more of a concession, as “the term bargain commonly denotes a deal between more or less equal participants”, an issue Kandiyoti is well aware of and sheds light on (286). The author resolves the issue pertaining to the notion of bargaining in this context by stating that “women as a rule bargain from a weaker position” (ibid.). While this may further the argument whereby patriarchy is viewed as unambiguously oppressive and women are presented as defenseless objects of an inequitable system, a different contention is possible: rather than being victims of the system, interviewees’ acceptance of the status quo is understood, from Kandiyoti’s perspective, as a calculated behavior whereby women seek to safeguard their wellbeing in light of disadvantageous circumstances. Instead of seeking to dismantle the normative order to acquire more power, women employ their agency to engage in tradeoffs where compliance is offered in exchange for valued advantages. Some pragmatic examples are obtaining economic security, protecting one’s reputation and prestige, marrying to observe religious duties, evading social scrutiny and pressures children etc. In light of such priorities, it appears that empowerment is not necessarily understood as “redressing power inequality” (Lokshin & Ravallion 2005), or “challenging […] forms of oppression” (Oxfam 1995) but as fulfilling particular social, material, and affective needs even if this entails willingly adopting a subordinate status.

In this chapter, I present the female body as one pertinent locale where compliance takes place. By exploring interviewees’ sex lives, their health choices, and views on violence against women as case studies where patriarchal bargains are performed, we are informed about how individuals may exercise their agency and how (rather than whether) they seek empowerment. Although this chapter is largely
established on Kandiyoti’s “patriarchal bargain”, the fact remains that while this construct is useful as a theoretical tool, it is nonetheless essential to remember that it is one of many coping mechanisms women employ. While Kandiyoti establishes geographical boundaries between how women cope with classic patriarchy and how they behave under patriarchy in sub-Saharan Africa, I contend that the two are neither mutually exclusive nor entirely disconnected. While the first is more relevant to the case of Egypt, both behaviors are manifestations of the same desire to maximize one’s own life chances and may be at times used simultaneously.

**Unrequited Pleasure**

Sex is the first topic interviewees brought forth as the unequivocal area where they feel at a disadvantage. Rather than being a mutually pleasurable experience, most interviewees approach it as a chore, the ultimate marital duty they have to perform to please their husbands and avoid problems. Interviewees’ compromise in their intimate lives with their partners ranges from accommodating husbands’ refusal to use male contraceptives and the withdrawal method because they are supposedly disruptive and make intercourse less pleasurable (Ali 2002; Ortayli, Bulut et al, 2005), to enduring pain and an almost constant absence of desire. There is an obvious asymmetry between how pleasure is viewed by both parties: while men are entitled to enjoy intercourse, women are completely excluded from experiencing sexual gratification. In those instances where men do want their wives to enjoy intimate relations, it appears that this is primarily either related to the husband’s need to feel desired by his wife and/or rely on his wife as a source of validation of his virility and sexual prowess.
Although all seven interviewees were subjected to genital female mutilation, half of them did not ascribe their dissatisfying sex lives to the harmful, if not lethal, and illegal surgical procedure. Dina, a petite woman with a strong personality who does not shy away from speaking her mind, expressed concern about her husband’s remarks pertaining to her alleged sexual frigidity:

I’ve been talking to a lot of women I know about this and a lot of them say they have the same problem. I don’t know if it’s something we imagine or if it’s real. It’s not that it happens all the time but it does take place regularly… sometimes during the relation [sex], I feel nothing… I am cold. My body has rights over me, sometimes it does not want to be touched but it bothers my husband… Wael tells me I have no feelings… It makes him angry that I don’t enjoy it. I enjoy it [sex] when I haven’t seen my husband in a long time for instance. When I miss him. But when he wants it everyday, it’s just not so enjoyable.

In addition to refusing male contraceptives, Dina’s husband rarely accepts to rely on the withdrawal method. While Dina rarely experiences any pleasure herself, she is nonetheless considerate of Wael’s needs. Dina primarily blames herself for her frigidity and questions whether what she feels in terms of unresponsiveness to her husband is real or the outcome of her imagination, despite the fact that other women in her circle of trust, who had also been circumcised, share the same feelings. Interestingly, Dina’s views reveal that it is more her husband’s dissatisfaction with some aspects of their sex life that is a source of frustration than her own. In that sense, the husband’s experience of pleasure seems paramount to Dina who, although vexed, continues to place his physical needs above her own and often engages in sexual relations with him as a marital chore, not unlike washing his clothes or preparing his food. Although she does not consistently enjoy intercourse, she still wants the experience to be pleasurable for her spouse. It is only to a lesser degree that she is
upset by the fact that her partner does not understand her needs and confuses her lack of enthusiasm with disinterest in and indifference to him personally.

Although more aware of the dangers of FGM, Salma’s experience is no different from Dina’s:

We, my sisters and I, were all circumcised. It was one hell of a mistake. Let’s just say that when I am in bed with my husband, I am like a pillow next to him…I feel nothing.

Salma also faced the same issue as Dina in terms of accommodating her husband’s refusal to rely on male contraceptives by saying: “my husband is impatient, he refuses to use those things”. Basma also discusses her intimate relationship with her partner in negative terms and attributes her unpleasant sex life to genital cutting: a procedure she believes has harmed her particularly since her husband desires her more than she does him. Yet again, it is more due to her husband’s own feelings towards her that Basma is unhappy, and less because she is deprived from enjoying a mutually pleasurable relationship.

Like Dina and Basma, Mona is not pleased with the fact that her sexual behaviour does not satisfy her husband. She is aware that her performance being displeasing to her partner is a potential source of trouble for her and even blames herself for her “sexual shortcomings”. Mona’s remarks sum up the underlying concerns other interviewees experience towards sex:

You know, where we come from, this issue [sex] is either a principal source of marital trouble or a source of bliss

The significance of the above statement highlights the essence of the patriarchal bargain. Not that women ought to compromise their bodily integrity in exchange for rewards – the argument here is not for a licensed form of prostitution. Rather, this
statement demonstrates interviewees’ acceptance that husbands’ satisfaction, be it sexual or otherwise, takes precedence over their own and that a content husband makes for a happy, well cared for wife. Indeed a wife may seek to satisfy her husband as a form of deterrence stopping him from “looking outside”, as one interviewee said, and taking on another wife. Polygamy, which could significantly compromise a woman’s situation – not to mention her children’s as resources are divided between wives is one concern several interviewees expressed. Indeed, the view that men have the right to pursue other women in case their wives did not “make an effort to look pretty and be playful”, as Amani believes, seems ordinary and an unexceptional fact of life. Thus, if a man leaves his wife, or neglects her, the likelihood of her being blamed for one shortcoming or another is high. Whether because she is lazy, not ‘feminine’ enough, not attentive to her husband’s needs, or perhaps even a bad cook, women are always at the forefront of blame. It appears that whether a marriage is crumbling or doing well is largely based on the wife’s performance, which is evaluated based on how comforting, supportive, dutiful, and certainly docile and obedient she is. Indeed, interviewees are aware that the social structure to which most Egyptian women belong is organized in such a way that engaging in open resistance and dissidence to perceived gender-based injustices will likely lead backlash rather than support to considerable and is therefore avoided. Beyond sexual relations with husbands, women must also endure other forms of compromise. The following section explores interviewees’ views on women’s health needs.

Health

Amani, a mother of three who contributes financially to the household and has helped
her husband buy a taxi using her savings and involvement in gam’iyat does not feel like she enjoys the same rights as the latter when it comes to her health:

When the kids or my husband get sick, we go to a private doctor. But when it comes to us women we prefer the public clinic because it’s so much cheaper.

Amani pays approximately eight Egyptian Pounds, or less than one US Dollar, to get an intrauterine device placed at a state run facility. By contrast, visiting a private practitioner may cost anywhere between fifty to seventy Egyptian Pounds (or a little over two to nearly three and a half Dollars) for the consultation alone. Likewise, Basma commutes all the way to either Nozha, or the upper-class neighbourhood of Masr el Gedida (also known as Heliopolis) to visit family planning clinics. She does so because she feels like the latter are “cleaner” than the clinic near her home in El Salam, but more particularly because they are cheaper. When the children are sick, however, Basma takes them to private practices for better service and care. In sum, both Amani and Basma’s choices demonstrate that they are the ones who must compromise even within their own families. While they must commute to a distant clinic or rely on public as opposed to private facilities, their husbands and children are less prone to making the same choices. That economic deprivation falls upon women more than other members of the family is unsurprising. Other studies dealing with issues such as nutrition and obesity for instance demonstrate that low-income women are more vulnerable to health problems than their partners as the former consume cheaper foods that are micronutrient deficient (Asfaw 2007). While Basma and Mona were in no way coerced into selecting the cheaper option to save money, they have internalized the notion that their health is less important than that of other members of the family. Further, both interviewees explicitly shed light on women’s need to deny
or limit their own needs: while visiting the doctor is a right the husband and children exercise, women’s access to adequate health services is perceived as a burden than may drain the family financially.

When asked how she thinks women handle fatigue and illness, Mona asserted the following:

When I first got married, I used to run to the doctor whenever I was sick… I used to take painkillers and medication, stay in bed and rest. After I had my children, things became different. There is no such thing as staying in bed for me anymore. I need to resist, get up, and find any means to stand on my own two feet and keep going…I can’t give in to illness or fatigue. Men complain a lot when they’re tired, unlike us… You know, there’s this popular saying that goes like this: “your husband likes you healthy, and your neighbours like you generous”… which means your husband always wants you on your feet, never down or tired.

According to Mona, being ill is almost a luxury she cannot afford. She is aware that in case she is indisposed and is unable to carry her duties as mother and wife, her husband will not be supportive for long. That is not to paint a caricature demonizing husbands, but to emphasize husbands’ expectations of their wives. Basma also views herself, and women in general, as more resilient than men. She used sickness as an example to support her claim:

When a man is sick, his wife tries as much as possible to constantly be around him to provide him with care and attention… But as soon as she gets sick and tries to get some rest or sleep, he turns her off from being sick or fatigued and she ends up jumping out of bed… because the husband typically gets sick too and ends up laying next to her instead of taking care of her.

Dina maintained the same viewpoint as Mona and Basma and added reasons why she believes women choose to endure difficult circumstances:

I suppose there are men who are supportive of their wives when they get sick or feel tired but most men would just find someone, a relative or mother, to take care of her… in the majority of cases women bear it all, that is especially
true in rural areas, more than here in the city…I have seen that when I visit the village. I guess women are keener on keeping the boat afloat…we just want life to go on even if we are unhappy. Some women feel the need to endure in silence because they cannot emotionally bear, or financially afford, the title of “divorcee”. They may feel like returning to their fathers’ homes with children will make them a burden on their families.

Dina’s views are critical because they point to a significant issue: that in case of divorce, it is the wife who stands to lose. Despite a woman’s subordinate status within the couple (at least officially), Dina believes she is nonetheless better off than she would be if the marriage were to disintegrate. This echoes with the Egyptian proverb at the outset of the chapter whereby “the shadow of a man is better than the shadow of a tree”, which astutely captures the essence of patriarchy as experienced by millions of women: that the protection of a man – often even if he is sexually, emotionally, and physically abusive, is better than the anticipated perils a woman may experience when she becomes ‘husbandless’. Thus, interviewees agreed that divorce ought to be reserved to those extremes cases where the security/obedience trade-off is no longer advantageous.

Another area where women are expected to display endurance, according to Mona, relates to infertility:

Women who are unable to have children not only face external social pressures but also feel guilty to the point of asking the husband to take a second wife. If the woman really loves her husband and is at peace with herself she will ask her husband to remarry. I’ve seen it happen many times. She may even pick his new wife for him because she doesn’t want to deprive him of children. She does that because she doesn’t want to lose him. She may lose a part of him to the other woman but at least he is still also hers. And if it is the man who is unable to bear children, she just accepts it…like this woman I know who decided to adopt cats instead of being a mother because her husband is sterile. But I suppose this has to be out of love. Otherwise, if she doesn’t love him, this is her chance to get rid of him…But anyway, I hope no woman has to go through this…finding her own husband a second wife, I
mean. It is very hard…

The double standard is evident: a woman who is unable to bear children is expected to accommodate her husband’s wish by accepting his decision to take a second wife if he so chooses. The first wife may even suggest and pursue this option herself by finding her partner a bride. However, according to Mona, only a woman who is “at peace with herself” is able to make such a difficult decision. This implies that refusal to allow the husband to engage in polygyny may negatively affect the “barren” wife’s image presenting her as selfish and inconsiderate of her partner – not to mention exposes her to the risk of divorce. If it is the man who cannot bear children, the wife’s fate is portrayed in rather fatalistic terms because she cannot take another husband; privation of motherhood is therefore likely to be said woman’s only option. However unfair this scenario, it is mitigated by the awareness that compromise need not be obligatory. Indeed, the wife’s forbearance can be dictated by her own willingness to agree to concede some of her rights as wife. In this sense, endurance is not exclusively imposed from above or indoctrinated, it can be deliberately adopted to accommodate personal desires and needs: affective – if the wife is in love with her husband, economic – if she wants to continue enjoying financial security etc., social – if she refuses the status of divorinee.

Interviewees understand their healthy bodies are their most valued possession and celebrate their tenacity as a manifestation of power. Conversely, informants are also aware that illness and fatigue or inability to cope with so many responsibilities without support from the husband undermines their status and may even compromise their marital life. Adherence to norms of compromise, endurance, and forbearance therefore offers protection: this is what can be referred to as “an acceptable trade-off” (Seif el Dalwa 2000). Violation of these norms is potentially problematic and
threatening. Mona is acutely aware of this when she refers to the proverb about the husband wanting, even expecting, a healthy wife who is able to consistently watch, serve, care, manage, nurture etc. Dina also shares concerns about divorce, a possible consequence women may be subjected to if they do not accommodate their circumstances by tending to their numerous obligations. In other words, being aware of one’s rights and pursuing them are two entirely different endeavours that largely depend on one’s circumstances.

**Violence**

Violence against women may take many forms ranging from the physical to the emotional. It is generally defined as “assaultive and coercive behaviors that adults use against their intimate partners” (Holden 2003; 155). The following paragraphs begin with violence performed against women by fellow women to comply with patriarchal practices that seek to supposedly safeguard chastity and honor. We then turn to intimate partner violence (IPV).

As discussed in the previous chapter, Mona married out of love. As such, she looked forward to her wedding and spending her life with Hassan, her husband. Like many women, she anticipated her wedding night with excitement and a little apprehension because she did not know what to expect in terms of her first sexual encounter. While the couple’s first night together went smoothly to Mona’s relief, she was shocked not only by what happened next, but particularly by whom:

After the wedding night, my husband and I thought it was over…I had bled on the sheets so we thought that was it. But when my older sisters came to visit me the next morning, they weren’t happy. They said the blood was not enough and so they wanted to do it the traditional way, may God forgive them. They
called the woman to do it properly.

The woman Mona refers to is the *daya*, or midwife, who is called upon to insert a piece of cloth into the bride’s vagina after the wedding ceremony thus rupturing the hymen. Once this is complete, the *daya* proceeds to display the cloth for all to see as proof of the girl’s virginity and therefore validation of her innocence and virtue, and authentication of the family’s honour. This experience was particularly gruesome to Mona as she had previously experienced a similarly traumatic event in her childhood:

I was ten. My mother took me and my younger sister to visit the village where she was born. I remember how the *daya* looked. She carried a sort of straw basket on her head and it had scissors and razors inside…it’s not easy being a girl in a society like this one.

Mona’s sisters and mother, like many other women, are taught to internalize violence – whether manifested through FGM or post-wedding rituals, as part and parcel of their bodily experience. Despite interviewees’ knowledge of the negative effects of FGM, the procedure was still considered, if not performed, on their daughters:

I feel like by letting this happen to me my mother has harmed me…it has done more bad than good for me. I don’t think I would ever do this to my daughter. It wouldn’t help her or improve her life. Unless the doctor says she needs it. But otherwise I don’t think she should experience the same thing.

When discussing the circumstances of her experience with FGM, Dina seemed ambivalent about whether there was a correlation between her low libido and her experience with female genital cutting (FGM). She is nonetheless persuaded that FGM has harmed her as demonstrated in the previous passage.

During one of the focus groups, Salma, who had decried FGM as extremely harmful only a minute earlier proceeded to say that because of the pressure her mother placed on her, she intended to take her three daughters to the doctor to see if they needed to be excised. Although a relative improvement from earlier practices of
relying on midwives which often results in serious bleeding or infections possibly leading to death (Momoh 2005) the fact remains that Salma and other interviewees like Dina perpetuate the practices that have hurt them personally due to a firm belief that dissent will be more detrimental than beneficial to their daughters. Rather than breaking the cycle of violence, then, some interviewees sought to “play it safe” by conforming to tradition.

Women, of their own free will, subject other women to harmful practices in order to submit to social expectations of chastity and virtue to reap benefits of social acceptance and respect (Abdelshahid and Campbell 2015). This contributes to heightening women’s social status and increases their chances of favorable marriage arrangements. Thus although FGM, which is mainly sought to increase a woman’s chances to marry, damages her irreparably as a sexual being, it is often carried out regardless of the obvious contradictions it entails. This goes to show the entrenchment of customs that sustain and reify the potency of patriarchy as a system, which then generate the need to bargain with the powers that be.

Domestic violence may also adhere to the same logic. Although Dina disrespects men who engage in abuse and battery, she nonetheless believes violence is unnecessary as “the husband can punish his wife in other ways, without needing to lay a hand on her.” While vehemently rejecting the idea of being beaten by her husband, Dina admitted: “some women only behave well when they’re beaten.” Dina’s views support Kathryn Yount’s as the latter concludes in her study of IPV against women in Assiut that women usually blame other women for their “deviant behaviour” which warrants “the legitimate reprisals of their husband” (2010; 55). Further, Yount argues that abused women rarely seek to take action because this means incurring the risk of compromising their marriage and the financial security it provides in addition to
jeopardizing “the honor of the woman’s natal family” (55). In this sense, interviewees are compelled to engage in tradeoffs to enjoy security. Because for many divorce is not an option due to social and economic reasons as Dina argues:

If I get divorced I will be forced to go back to live with my parents because a divorced woman cannot live alone, not to mention the fact that I cannot afford to buy or rent a place on my own. So if I return to my parents’, how long will they support me and child for? A few months, maybe? But then they won’t be able to bear my burden anymore. They have other children to care for. They won’t be able to help me.

In addition to economic concerns, affective ones matter as well. Salma’s own experience as the child of divorced parents, which we have discussed in the previous chapter, leads her to bear occasional violence. Her husband, who joined one of the *gamiyyat* to repay his creditors, recently beat Salma after she reminded him that the deadline for payment was in a few days. His resort to “fabricating an excuse to start an argument” and subsequent violent behavior is not unprecedented. In spite of this, Salma refuses to leave her husband to protect her four children, “particularly the three girls”. Thus, despite being an exception – as the next section shows, by actually being able to financially support her children on her own, Salma refuses to file for divorce.

**Exceptions**

The case studies above have shown that most interviewees bear disadvantageous circumstances in their marriages to avoid what they perceive to be worse ones in case of divorce. Indeed, women abide by the rules of an unfavourable system because the latter is expected to make amends by bearing some form – typically material, of reparation. Two exceptions, however, stand out: Salma and Rahma. Both women are the primary breadwinners within their families and as such do not conform to the patriarchal bargain, as their husbands do not provide financially for them or their children. Because of this rupture in the unwritten contract between man and wife, being married is no longer an advantageous situation. Because of this rupture in the
unwritten contract between man and wife, being married is no longer an advantageous situation. In Salma’s case, her husband is even a source of shame as his mounting debts to various creditors, including her own extended family, have led her to wear the face veil or niqab, to be unrecognizable in the street. Salma’s refusal to get a divorce is due to her wish she to protect her children from the difficulties of belonging to “a broken family”. For this reason, she continues to be legally married to her husband while they lead separate lives. Salma expressed her rejection of the patriarchal bargain in the following words:

My husband used to boss me around when he used to care for us financially. Now he asks me for my opinion whenever he wants to do something. He knows my worth now that I make most of the money. I am stronger than him now…I think I broke him.

Salma said those words jokingly, with a large smile on her face. Even though her statement was meant to be amusing, it is nonetheless revealing in terms of the changing dynamics between husband and wife when the latter cedes to compromise her rights as she assumes financial responsibilities almost entirely on her own. Although Rahma’s financial situation is similar to Salma’s, she has done away with the latter’s affective concerns for her children. Because her increasing frustration with what she believes to be her husband’s inability and unwillingness to provide for the family, Rahma has recently filed for khul’ to divorce her husband unilaterally after relinquishing all her rights, such as alimony, in the process (Sonneveld 2012). Rahma’s situation illustrates a case where relinquishing rights in exchange for being cared and provided for is no longer an advantageous situation as her husband does not support the family financially.

Although Salma and Rahma are exceptions in this work, their experiences demonstrate that possibilities beyond the patriarchal bargain do exist. While Egyptian
society continues to bear palpable features of a patriarchal order, material realities are increasingly serving to challenge existing structures, as more women are able to be independent from their husbands (Moghadam 2004) and questioning the usefulness of absolute obedience to the husband. This erosion of the existing normative order, however, is not new and was acknowledged by Kandiyoti as she argued “material bases of classic patriarchy crumble under the impact of new market forces” (281). Although we cannot ascertain that a different economic reality for Egyptian families, which compels more women to join the workforce, will overturn the existing social system, we may however point to a considerable shift in lower-income, urban inter-couple dynamics.

**Conclusion**

For interviewees in this work, challenging the husband’s authority or rejecting it altogether may lead to divorce: a precarious and insecure situation for millions of women. The disintegration of a marriage may compel a woman to provide for her children if they are young (as alimony is typically meagre), but also be subjected to social scrutiny and critique as divorced women may be accused of immorality even if they observe a demure behaviour, in addition to facing unwelcome attention from men who may approach them. The reasons social disapproval and unwanted courting may occur is primarily due to the disquieting belief that a divorcée, as opposed to a virgin, has nothing to lose and is therefore more likely to be promiscuous. The damaging effects of divorce may even befall a woman’s daughter in the long run and limit her own chances of finding a proper suitor (Bernard-Maugiron and Dupret 2008). The above scenario is not unavoidable nor does it take place every time a woman divorces her husband or is divorced. Rather, these possibilities are all
concerns interviewees are aware of when the idea of divorce is mentioned. The notion of bargain makes all the more sense in light of such potent threats to women’s security and wellbeing.

The above testimonies show that endurance among women is not exceptional but rather as business as usual. Women are not only conscious of the necessity to cope with more pressures than their husbands but also accept this burden even though they are aware that it is unfair. While the language they use demonstrates the unease they experienced daily, they seem to find solace in the fact that they are needed and valued because of what they provide in terms of care and support, no matter how physically and affectively taxing. Furthermore, the themes presented in this chapter have demonstrated that responses to sickness and fatigue, double standards pertaining to infertility, and violence against women all serve to place value on endurance as an ideal most interviewees observe. Indeed, the injustices and detrimental situations in which women find themselves and the quasi-impunity enjoyed by men when engaging in wrongdoings vis-à-vis their wives are consolidated by an entire system of norms and values. Interviewees may endure unfavourable if not harmful circumstances because they have internalized their subordination as normative and have developed forbearance as the best alternative to get on with their lives. Particularly when they cannot financially or socially afford to disrupt the status quo by leaving their husbands or defying them openly.

What we may take from the above is what this entails for women’s agency and their empowerment: it appears that dichotomous notions of empowered versus disempowered, and agent versus object are increasingly inept to addressing the status of women as they contend to improve their circumstances. Indeed, despite dealing with considerable challenges and injustices, interviewees rarely presented themselves
as victims. Indeed, the patriarchal bargain, although founded on coercive forces, may also be approached as a strategic choice. Although the patriarchal bargain is one manifestation of agency, it remains one where the possibility of dissent is mostly limited. In light of such circumstances, women may creatively resort to “everyday forms of resistance” to straddle the ever-shifting grounds between obedience and dissent where they are able to carve out spaces of autonomy and independence whilst maintaining the appearance of a male-dominated household. Contraception is one compelling domain where “everyday forms of resistance” occurs as women take complete control over the very bodies whose rights are trampled on as this chapter has shown.
CHAPTER IV

Resistance

To operate within the matrix of power is not the same as to replicate uncritically relations of domination.


Kandiyoti’s (1988) description of women’s responses to two ideal-typical forms of patriarchy is a useful lens through which to examine women’s compliant behavior or open defiance as means to maximize their life chances. The compliant end of the spectrum has been helpful in analyzing urban, lower-income interviewees’ methods to avoid potentially detrimental situations and safeguard their wellbeing and interests. The fact remains, however, that such a framework is schematic and presents diverging coping strategies without taking into account other, less straightforward, alternatives. Indeed, beyond complete rejection of male hegemony and absolute submission to it, women may adopt different responses that rely on “covert, non-confrontational, and momentary” forms of resistance (El Kholy 2002; 25) to pressures within their intimate relationships with their partners. Such informal, individual, predominantly spontaneous tactics are the manifestation of agency as defined by Kabeer (1999) and which we have delineated in the first chapter. Agency as a fluid, ongoing process serves to inform us on ways of being empowered beyond unequivocal the “‘zero-sum’ game” (Kabeer 1999; 436) whereby women are subjected to binary depictions of defeat and victory.

El Kholy (2002) examines “everyday forms of resistance” as a means to reconcile dissent with cooperation and positive emotions and thus fills this void in the
literature (27; 28). Although women may resist husbands’ authority in particular instances, this does not rule out the fact that marital relationships may also operate on dynamics of solidarity and affection (25). Further, resistance in this context is rarely carried out in an attempt to subvert patriarchy in general. Rather, women’s efforts may target particular objectives while maintaining the normative order whose observance is expected to yield important benefits as they grow older and gain leverage as mothers-in-law (Kandiyoti 1988; Inhorn 1996; Lane and Meleis 1991). Thus, resistance, submission and accommodation, in addition to a variety of maneuvers in between (deception, manipulation, etc.) are not mutually exclusive and may exist in consonance.

Women’s contraceptive choices and family planning is one area where responses to husbands’ attempts to control women’s bodies take on a variety of “covert, subtle, and diffuse means” (El K holy 2002; 26). While contraception has been subjected to endless scrutiny and debate (Seif el Dawla 2000; Ali 2002; Bier 2008), this chapter differs from the bulk of literature on this topic by moving beyond contraceptive use as the ultimate marker of female empowerment. Instead, the following pages reveal how interviewees’ contraceptive choices may be a manifestation of discrete insubordination. This is particularly interesting as women who concede to coping with domestic and sexual violence and other infringements on their bodily rights draw the line at fertility choices. Thus, the latter is a domain where agency takes on a different form: from submission to deception, and possibly even open resistance in some cases.

The following paragraphs examine the limits of traditional gender roles to put forth the claim that women’s autonomy in the realm of contraception is neither undisputed nor taken for granted. Indeed, arguing for contraceptive choices as
defiance to male authority implies that, not only are husbands often involved in their wives’ fertility choices but may even pressure them to make particular decisions. We then turn to interviewees’ views on involving husbands in their contraceptive choices before considering how women thwart male involvement through various means. The creation of female networks of solidarity and support is one such coping mechanism.

**Blurred Boundaries**

The concept of men’s and women’s segregated roles whereby men are breadwinners and women bear responsibilities within the household (Mensch, El-Gibaly et al. 2003; Assaad, Nazir and Ramadan 2015; Nawar, Lloyd and Ibrahim 1994) continues to hold traction in lower-income, urban Egyptian society. Even among young generations, opinions and attitudes about gender continue to ascribe to traditional views (Amin and Al-Bassusi 2004). However, this resilience seems to be related to its perception as an ideal rather than a reality. Rahma, whose family situation was discussed in the second chapter, supports this viewpoint by complaining about her husband’s inability to provide for the family on his own. Because of her husband’s “failure”, as Rahma puts it, she is compelled to work outside her home. Indeed, changing political and economic landscapes have pushed millions of women in Egypt to seek employment beyond the household to support their families (World Bank 2013). The same circumstances currently apply to Dina, Amani, and Salma. That is, more than half of the interviewees. Yet, have also affected the three other interviewees at other moments of their lives. As such, women’s ‘traditional’ roles within the household (Lane and Meleis 1991) and men’s duties as providers (Ghannam 2013) are less conspicuous now than they may have been in the past.

Although some women may afford to maintain traditional gender roles, many others cannot. Radwa is the only interviewee whose financial situation allows her to comfortably enjoy being a housewife: “because my husband has two jobs and is very busy”, Radwa says with pride, “I decide everything that has to do with the house and kids.” Radwa’s case, however, is an exception. The only two other interviewees who are unemployed, Mona and Basma, are temporarily staying at home because they have given birth months ago; further, both are planning to return to work. What is more is that Radwa herself has experienced many years where she was obligated to work to participate in providing for her family. In this sense, economic pressures challenge the supposed unambiguous demarcation between separate duties for husbands and wives. As women take on traditionally ‘manly’ duties, men often also become involved in traditionally ‘feminine’ ones. This reality spills into other domains of life where husbands may routinely intervene in areas typically defined as exclusively belonging to women’s dominion. Contraception is one such example where husbands occasionally seek to influence if not pressure their wives to make particular choices. In the previous chapter, we have glossed over how several of the interviewees’ husbands refuse to use male contraceptives and thus passively compel their wives to manage the couple’s fertility. Below are other, more active, examples of men’s intrusion in issues wives typically claim as their own.

Since she began relying on contraceptives after the birth of her first child, Mona has experienced problems with the implant:

The first time I was injected with the implant, I had a lot of problems with my husband…they lasted for three years and I thought most women went through the same thing. Then, when I got the implant removed to have my second child, my marital life was very different…better. I felt like a different person and even my husband told me you’ve matured…My husband used to say I am cold…I don’t know if that’s true or not, but that is what he used to say. I had
no sexual appetite at all and did not know if it was from the implant or whether something was wrong with me...I just thought it was my nature. I only realized it was the implant after I went back to get it placed the second time around.

After giving birth to her second child and opting for the implant once again, Mona reports the same problems re-emerged:

It [sex] was repulsive to me and I had no urges whatsoever and did not get my period for seven months to the point where I went to see a doctor and told her about my problem. I told her that I had no desire and even during intercourse nothing helps and I just don’t know what to do…She gave me things newlyweds take, the creams and gels I used when I first got married. In spite of all of this, I do not want to give up the implant. My husband, day and night, keeps nagging me to use another method but I won’t sacrifice it to be honest (laughs) because it has other advantages…For instance, I am forgetful so if I use the pill and forget to take it, that will be a big problem for me. Also, I cannot cope with the idea of getting an intrauterine device placed because I don’t want anyone to examine me like that.

Mona’s husband’s intervention in her contraceptive choices is due to his dissatisfaction with her ‘performance’ during their intimate times together. Mona nonetheless refuses to “sacrifice” the implant in spite of her husband’s protests. While she is willing to consult a doctor to try and improve their sex life, she will not take the one step she believes will decisively alter the couple’s intimacy for the better. Her refusal to discontinue relying on the implant leaves her in a situation where she can only either accommodate what she believes to be her husband’s legitimate needs and thus improving their marital life, or doing what is convenient for her. This predicament is resolved when Mona reiterates her commitment to the implant. The equation is as follows: being a mother of three boys, Mona perceives an unwanted pregnancy as more problematic than a dissatisfied husband. Furthermore, she would sooner face her disgruntled husband than have a doctor examine her in order to place the intrauterine device – an experience she expects is jolting and traumatic. Mona
says she cannot so much as fathom the idea of having someone look at her and touch her “down there”, particularly after her experience with female genital mutilation and the traditional wedding ritual discussed in the previous chapter. Mona therefore accepts the negative consequences of her choice because they allow her the critical advantage of upholding what she believes are key priorities. Disregarding her husband’s protests and facing potentially taxing situations (such as him potentially marrying a second wife) comes as a reaction to him trying to infringe on her personal affairs by trying to influence her choice of contraceptive. Mona agrees that her husband has legitimate rights and tries to provide her partner with what he needs. However, her behaviour reflects her refusal to let his desires override her comfort and sense of bodily integrity in a realm that she lays claim to as her own.

Radwa’s husband leaves all responsibilities pertaining to the household to her.

Further, Radwa said this about his involvement in her personal decisions:

He knows I know better…the choice is mine. He’s too busy anyway…when I say I’m going to get the contraceptive shot every three months he barely even knows what it’s for…

There is, nevertheless, one major exception to Radwa’s husband’s lack of involvement in her fertility decisions. Namely, when Radwa became unintentionally pregnant with her fourth child while using the intrauterine device when her youngest was only seven months old. Radwa’s habitually loving and kind husband addressed her aggressively:

I was crying a lot because I did not want to get pregnant...my child was only a baby and I did not even want a fourth one. When my husband saw me crying, he said to me “don’t you even dare think of getting rid of it…if you get an abortion I will hurt you before God punishes you”…Of course I wasn’t planning on getting rid of the baby anyway. I was keeping it because I fear God, not my husband.
Husbands’ impact on abortion decisions can range from lack of support to more assertive involvement (Dudgeon and Inhorn 2004). In Radwa’s case, her habitually uninvolved husband took an unyielding stance to prevent any attempt to get rid of her pregnancy. Radwa accepted his intrusion and did not express any resentment or indignation at his violent threats. Her composed response to her husband’s menacing ultimatum shows that while he may intimidate her verbally, she is the ultimate decision-maker in this scenario. Because if she had indeed wanted to terminate the pregnancy like her husband worried, Radwa simply could have refrained from telling her partner about it in the first place.

Salma’s experience was the opposite of Radwa’s when becoming unintentionally pregnant also with her fourth child:

The nurse who had collected my blood sample called me to give me my results. She said, “I don’t know what to tell you…we typically say congratulations in cases like this, but with you, I don’t know what to say” because she knew I was hoping I wasn’t pregnant again. I was so devastated I could not stop crying. I did not see it coming at all. When my husband saw me like that he said to me: “I know a guy who works at a pharmacy, he can give me a vaccine for you to get rid of your pregnancy.” But I told him to forget it. I wasn’t going to anger God for something like that. I told him I wasn’t going to do it.

Mona and Salma both resisted their partners and defied their authority when the latter sought to dictate their wives’ decisions: Mona by ignoring her husband’s request and Salma by confronting him directly. These two examples are therefore instances of “everyday forms of resistance” in the sense that they do not disrupt the couples’ daily lives yet present an exception to the unwritten rules of the game. Although their behaviour defied the typical dictates of the patriarchal bargain according to which women are expected to comply, both Mona and Salma employed their agency to pursue particular objectives. These women’s choices are at odds with their ordinary
demeanour since they are accustomed to accommodating their husbands. Even Salma, as her fourth pregnancy occurred before her relationship with her partner became strained. Although Radwa did not defy her husband’s refusal of her getting an abortion, she did not obey him either because she had already made up her mind before his involvement. Indeed, Radwa is explicitly aware that she could have easily resorted to deception by getting an abortion without consulting her husband. It is not his stance that deterred her, but rather her own convictions. Thus, Radwa’s resistance does not take the form of action and has more to do with her conviction that, despite her husband’s threats, she is the ultimate decision maker in terms of seeking an abortion.

The experiences of Mona, Salma and Radwa illustrate various manifestations of agency where women resist their husbands, either openly or covertly, to exercise what they believe are their exclusive rights. Thus, manifestations of resistance are as diverse as the “diffuse nature of constraints on women” (El Kholy 2002; 25). Although traditional gender roles are increasingly blurred, the fact remains that interviewees manage to ward off husbands’ unwelcome involvement in particular areas of their lives. Thus, the seven women portrayed here reject compliance and are instead vocal about their refusal to allow their husbands to dictate or even influence their contraceptive choices.

**Preclusion and Permission: Forging Networks of Trust**

**a. Husbands**

The 1994 International Conference on Population and Development (ICPD) Programme of Action sought, among numerous other aims, to include men in women’s reproductive health by way of supporting the latter’s choices (Inhorn and
Dudgeon 2004). Interviewees’ views on this matter departed from the ICPD’s goals as all seven women maintain that men ought not to get involved in such issues at all. Reasons why interviewees refuse to let their husbands interfere in their fertility and contraceptive choices are manifold and often intertwined. While some are related to husbands’ “lack of knowledge about these matters”, as Mona says, others are a manifestation of wives’ resistance to their husbands’ financial shortcomings. Indeed, two interviewees, Rahma and Salma, believe that their husbands’ authority is contingent on their financial support of the household. Seeing that both women are primary breadwinners, they understand that their partners have leverage over them.

Rahma, who provides for her four children (which include twin young men aged twenty-six), scoffed at the idea of her husband intervening in her choice of contraceptives:

First of all, he is dumb so I know better than him…he doesn’t get to have an opinion about anything…It’s my life, am I going to keep having children forever? The four kids are a burden and I carry it all on my own…if he’s financially involved and responsible, he can give an opinion. Men don’t intervene in these matters because the majority of women work. If we stop working to get pregnant again, men know they will have to make do without our help. So instead of telling us what to do with our bodies, they just stay quiet.

Rahma’s stance is clear: her acceptance of her husband as an authority figure is conditional and stems from his ability to provide and share her burdens. Seeing however that she filed for khul’ precisely because her husband does not provide for the family, Rahma does not perceive his manhood as sufficient grounds to tell her what to do: to Rahma, being a man is earned, and not merely bestowed by nature. Additionally, Rahma believes that taking a man’s opinions about such matters may both harm the woman’s health and her child’s:
My sister-in-law listened to her husband when he asked her to remove the intrauterine device so she would get pregnant again less than two years after she had given birth to her first son. The new baby died when he was only four days old. And then she listened to her husband again and got pregnant a third time only a year after losing her baby. Thank God her baby survived but he is so thin and weak, very weak. Men don’t know or feel any of the exhaustion or worry or anything we women feel. It’s the woman who bears it all.

It is impossible to determine if the passing of one child in infancy and the poor health of his brother are related to the spacing between Rahma’s sister-in-law’s pregnancies. What is telling, nonetheless, is Rahma’s belief that her sister-in-law’s misfortune is due to the fact that she listened to her husband instead of waiting a longer period of time before conceiving. Although we may assume that the sister-in-law willingly became pregnant, Rahma is nonetheless placing the blame on the children’s father. This reifies the belief that fertility decisions ought to be made by women first and foremost with very little to no interference on behalf of men.

In the previous chapter, Dina’s statements about her intimate life with her husband, Wael, placed all the emphasis on the latter’s enjoyment. Interestingly, however, Dina’s tendency to prioritize Wael came to an abrupt end during our conversations about contraception. Dina’s choice to use the intrauterine device was entirely her own – and based on her doctor’s recommendations, and she did not seem to accept nor expect that her husband would even have an opinion on such a matter. She set the limits at respecting his refusal to use male contraceptives or opt for the withdrawal method. In this sense, her view of her body seems twofold: in a way, it belongs to her and she is entitled to shield it from her spouse’s intervention. In another way, she must comply with her husband’s desires and meet his sexual expectations.

The account shared by Radwa also shows the wife’s expectation that her husband has no say in her choice of contraceptives. Now forty-six years old, Radwa has relied
on the intrauterine device (IUD), oral contraceptives, injectables, and contraceptive vaccines. Throughout the years, she has deliberated with doctors and female friends on the best contraceptives to use. In none of those instances did her husband have any say in what method she should or should not rely on. Salma’s case is perhaps the most remarkable because she did not consult her spouse before choosing to undergo the socially frowned upon and drastic permanent tubal ligation after two unwanted pregnancies. Although she has mixed emotions about the decisions she made nearly ten years ago, the qualms Salma feels are unrelated to her husband and are more based on her unease at the idea of having “violated” her body and undermined her womanhood.

Albeit fewer than those who rejected husbands’ intervention in contraceptive choices, some interviewees also rejected the idea that their partners would dictate how many children the couple should have. Amani for instance said that while she had decided to only bear two children, her husband constantly told her that she should not make up her mind in such matters because “God doesn’t give children to those who say such things.” Amani’s husband hoped they would have more children and did not want his wife to control her fertility but she ignored his request and relied on the intrauterine device.

Interviewees’ unanimous rejection of their husbands’ involvement in their fertility choices was even extended to male physicians in some instances. Indeed, three out of the seven interviewees conceded that they trust their male doctors, they nonetheless set limits to their confidence in their doctors because they are, after all, male. One interviewee stated that no one knows her body better than herself and that, despite his expertise, the doctor is not exempt from making mistakes. Rahma also contended that “doctors, who are very well educated people, can still lack knowledge as intelligence
and awareness are not guaranteed by a diploma or certificate”. After suffering three miscarriages, Basma was frustrated and frightened because her doctor kept insisting that there was nothing wrong with her. When she went for a routine check-up and was told that her third consecutive pregnancy had terminated, she was told by her doctor to wait for the embryo to “fall off.” While she initially waited, she defied her doctor’s orders and went to a hospital during a visit to a neighbouring town where she was administered pills to accelerate the process of expelling the preterm foetus from her uterus. Following this incident, she decided to consult another doctor as she was unhappy with her previous physician’s performance.

Interviewees’ experiences and views presented in this section demonstrate that patriarchy is not necessarily synonymous with women being prevented from making independent choices. Further, they show that patriarchy is neither unshakable nor insuperable and that interviewees are very resourceful when it comes to moulding, bending, and exploiting boundaries to achieve their goals. Thus, although women’s agency takes the form of compliance in particular instances (such as the ones examined in the previous chapter), it may also rely on open defiance and deception to maximize women’s interests.

b. Fellow Women

A compelling manifestation of women’s covert defiance of men’s attempt to intervene in contraceptive decisions are the networks interviewees forge to seek advice and counsel beyond the reach of their husbands. The creation of informal support systems made of mothers, friends, sisters and trusted female acquaintances, I contend, is a potent demonstration of “the fragmented, less visible, and often isolated “moments” of defiance and resistance expressed by individuals” (El K holy 2002; 24).
Nearly every interview conducted throughout the fieldwork phase of this project was enmeshed and enriched by the experiences of women who were, in fact, not physically present. Most of the answers provided by interviewees constantly referred to the experiences of a sister, friend, or other female acquaintance. In that sense, we can argue that the knowledge women’s social capital provides is welcomed and warranted by them as at least partially reliable information (Bernardi and Klarner 2014). Most testimonies were permeated with comments such as “all the women I know say that the intrauterine device is…”, “my older sister told me the implant causes…” or “they [friends] say that vaccines contain hormones…” etc. This constant organic to-and-fro between one’s own experience and others’ shows the extent to which wives and mothers can contribute to shaping one another’s opinions and, ultimately, decisions about contraception. While not necessarily presented as an authority, social networks seem to have at least some sort of bearing on the women interviewed.

The relevance of Basma’s social networks was made clear when she was asked about her experience with the intrauterine device. Basma spontaneously compared her own experience to her sister’s when she mentioned that the latter, who relied on the same method, had experienced undesirable side effects in terms of severe back pain and bleeding. Further, Basma also introduced stories of members of her social networks when we addressed the question of traditional contraception:

A friend of mine has been relying on traditional methods for religious reasons, but after an unwanted pregnancy, she started using the IUD for a few years. But now she feels kind of guilty about it, because she feels like she’s not respectful of God’s will, and wants to go back to traditional methods.

Although she considered following her friend’s example, Basma said that what prevented her from doing the same was that she could not afford the risk of another
pregnancy as she was over forty-five and had endured three miscarriages. When asked about whether she had or would consider other methods aside from the intrauterine device she has been using for a year, one of the reasons Dina gave for refusing vaccines was because they made her sister-in-law gain weight and feel bloated. Further, when I asked Mona about her general assessment of the contraceptives she uses, Mona said that, once her first child was born, she decided to use vaccines “without consulting a doctor or anything because my older sister used them as well.”

Not all friends and acquaintances’ experiences were presented as a source of guidance, reassurance or advice. There were, in fact, a small number of instances where interviewees expressed disagreement with, if not explicit criticism of, choices made by members of their social network. For instance, Salma recounted and laughed at her previous employer’s decision to rely on “traditional methods” (avoiding sexual intercourse during ovulation), which led to an unwanted pregnancy. Additionally, Salma who has tried vaccines, oral contraceptives, and the IUD said that her sisters have been using methods that have not worked so well for her own body. Furthermore, when asked about whether she had ever considered relying on traditional methods, Radwa said that all the women she knows who had opted for this choice ended up pregnant.

Although female networks are not perfect structures, they are nonetheless a form of covert defiance, or “everyday form of resistance” to male hegemony in the sense that they fill a vacuum after the exclusion of husbands from contraceptive decision-making. Female networks also sometimes empower or inspire women to make decisions that conflict with their husbands’ wishes. Thus, while interviewees employ confrontational defiance to their husbands’ authority, they also engage in
more subtle methods to negotiate their status where they empower themselves by creating supportive entities where they may seek guidance and comfort.

**Conclusion**

The likelihood of aggressive, subversive resistance within the setting of the nuclear family is limited due to the destructive potential it holds (El K holy 2002; 24). Instead, interviewees rely on “everyday forms of resistance”, ranging from explicit refusal to accommodate the husband to passive disregard for his request, to secure their objectives while ordinary life runs its course. Through this approach, women are able to implicitly renegotiate their leverage whilst maintaining the status quo. By alienating their husbands from their decision making process and inviting different actors on whom to rely (namely female networks), interviewees challenge their subordinate status and discretely place limitations on their husbands’ authority without Nonetheless undermining the latter. This behaviour contrasts with previous methods of compliance and submission where women’s bodies endured constant male infringement. Tempting as it may be to refer to this reality as women behaving autonomously, we should approach such territory with caution. Indeed, while interviewees generally do decide autonomously on issues pertaining to their fertility, autonomy is not necessarily openly aspired to. In many cases, interviewees prefer the mantle of male hegemony to secure the interests provided by the patriarchal bargain.
CHAPTER V

Conclusion

As members of an interdependent world and active contributors to the local market (Nasr 2010), millions of lower-income urban Egyptian women face the effects of “colonialism, capitalism, authoritarianism, patriarchy and neoliberalism, affecting all women and men in the region” (Al-Ali 2014). Although taxing circumstances are far from exclusive to Egyptian women, economic deprivation manifested in worsening living conditions (Moghadam 2009) as a consequence of decisions made in distant global power centres are typically disproportionately endured by women (Doumato and Posusney 2003). On a national level, Egyptian women, much like their male counterparts, have contended with the pronouncements of a state that has routinely dismissed civil rights and freedoms under successive regimes (Reza 2007; Johansson-Nogues 2013; Hafez 2014). All these macro-forces have contributed to reifying a patriarchal system that is generally unfavourable to women.

Moving beyond the ‘public’ domain and into the ‘private’ one, which has been the focus of this thesis, women may be subjected to loss of control over their income, domestic violence (Yount and Li Li 2010), and other hindrances to their wellbeing in part due to their encounters with “hegemonic masculinity” (Ghannam 2013; 7). The purpose of delineating global, national, and intimate challenges many Egyptian women are confronted with is not to construct the profile of a victim, quite the opposite. Rather, it is meant to demonstrate that, despite stifling circumstances, it is possible to be an empowered woman who is able to employ her agency in a multitude of ways to strategize and acquire leverage within the couple and over her body and her family. Indeed, we have examined how interviewees avoid confrontation with patriarchy through compliance and submission in their sex lives, health needs, and
responses to violence. We have also seen how they perform resistance through covert and subtle actions, but also confrontational ones as demonstrated by their exclusion of husbands from their contraceptive decisions and reliance on female support networks. While they displayed great forbearance, compromise, and endurance in the face of hardships ranging from economic deprivation to physical abuse, interviewees also demonstrated power through their awareness and consciousness of the choices they make. As such, the urban Egyptian women interviewed in this work are distinct individuals who negotiate, resist, or accommodate the different situations they are in depending on what they believe is appropriate.

The viewpoint whereby female empowerment is an objective, quantifiable goal (Kabeer 1999) certainly has its merit when considering control over and access to material resources for instance. However, I argue that while we may agree on some of its characteristics, we cannot establish a definite blueprint or impose incisive notions of what it means to be empowered (Syed 2010). That is because empowerment is also a subjective and intimate matter, one that is constantly made and unmade depending not only on socio-economic realities, but also immaterial factors such as cultural norms and values, affective needs and pressures etc. There is not, then, one single road to empowerment. I contend that the latter can be achieved through resistance, manipulation, but also negotiation and compliance, or a combination of these methods. As patriarchy itself is increasingly elusive and difficult to define, so are women’s coping mechanisms with the latter.

Ultimately, by presenting the experiences of the seven interviewees featured in this work, I have not tried to engage in generalizations nor have I claimed to present a representative sample of Egyptian women. Rather, my principal aim has been to show that, although these women face undeniable transgressions over their rights, we
cannot so easily condemn them to being ‘disempowered.’ It is critical to acknowledge informants’ rejection of the status of victim, in spite of the hardships they face. Such an attitude challenges all those instances where they are undermined. As such, the compromise is not synonymous with inferiority, but a manifestation of creative agency whereby women are able to navigate and mitigate the strains that encumber them and thus protect their interests and enhance their prestige. Particularly in a context when interdependence is more valued and takes precedence over autonomy and where male hegemony is readily welcomed in exchange for support and protection.

While categories of ‘empowered’ and ‘disempowered’ may have been advantageous and useful once, they are no longer persuasive classifications, as individuals cannot be confined to such rigidly delineated structures. Indeed, throughout the chapters, we have seen how stereotypically “disempowered” lower-income women routinely take action to maximize their interests. Therefore, it is reductionist and simplistic to attempt to predict women’s behaviors based on their financial and educational status, among other objective indicators. While patterns and similarities may exist among informants who share similar circumstances, these conditions cannot be used to make blanket generalizations.
Works Cited


Amin, Sajeda. "Implications of Trade Liberalization for Working Women's Marriage: Case Studies of Bangladesh, Egypt and Vietnam." *Trading Women's Health and Rights?: Trade Liberalization and Reproductive Health in Developing*


